

# DREF operation final report



International Federation  
of Red Cross and Red Crescent Societies

## Brazil: Dengue Outbreak

DREF operation n° MDRBR003  
GLIDE n° EP-2008-000042-BRA  
27 November 2008

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

**Summary:** CHF 55,000 (USD 52,381 or EUR 34,375) has been allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the national society in delivering immediate assistance to some 10,000 beneficiaries.

At the end of March 2008, the state of Rio de Janeiro in Brazil started to experience a dengue outbreak. Over 162,701 dengue cases were reported. The Brazilian Red Cross (BRC) with the support of the International Federation sensitized approximately 1,500,000 people (directly and indirectly) through a preventive community health education campaign.



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Brazilian Red Cross volunteers preparing for the dengue awareness campaign.  
Source: Brazilian Red Cross

## The situation

Since March 2008, the state of Rio de Janeiro was affected by a dengue and hemorrhagic fever outbreak. According to the last report published by the Health and Civil Defense Secretary in the state of Rio de Janeiro, some 162,701 cases of dengue were reported and 123 confirmed deaths. The municipalities with the highest number of cases were Rio de Janeiro (87,589), Nova Iguaçu (10,865) and Angra dos Reis (10,591). 42 percent of the reported deaths were children between the ages of 0 and 15 years old; 45 of the deaths were caused by hemorrhagic dengue. These numbers are twice as high as last year.

Dengue is considered to be one of the main health problems in the world and can be caused by any one of four types of dengue virus. The dengue types one, two and three were found in Brazil. The type four dengue was identified in Costa Rica.

Field hospitals were set up by the military and a crisis committee was formed by the Secretariat of Health Surveillance. The Ministry of Health established a crisis committee to address the dengue epidemic in the city of Rio at the beginning of the outbreak.



Children in schools receiving brochures on dengue prevention information. Source: Brazilian Red Cross

## Coordination and partnerships

Since the beginning of the outbreak the Ministry of Health established a crisis committee to address dengue in the municipality of Rio. The Secretariat of Health Surveillance (Ministério da Saúde – MS) worked closely with the Rio de Janeiro BRC branch to implement the required control measures and identify priority areas for intervention. The government gave the Civil Defence Service permission to enter homes suspected to be vectors of dengue in order to inspect for potential mosquito breeding grounds. Federal authorities deployed military personnel to set up field hospitals to deal with the epidemic as well.

The Ministry mobilized 100 health professionals to the federal hospitals of Rio de Janeiro to support patient management activities, including clinical case management and laboratory diagnosis. Vector control activities were implemented throughout the state of Rio de Janeiro and especially in the municipality of Rio de Janeiro. The fire department, military, and health inspectors from the National Health Foundation (Fundação Nacional de Saúde - FUNASA/MS) assisted in these activities.

At the time of the emergency the Pan American Disaster Response Unit (PADRU) in Panama, the Regional Representation for the Andean Region - South America in Lima, and the Federation Country Office in Brazil provided support to the National Society. A Regional Intervention Team (RIT) member specialized in Public Health in Emergencies (PHE) was deployed to support the National Society by carrying out a communication, community education and mobilization campaign for dengue prevention and awareness.

## Red Cross and Red Crescent action

Based on a request from the Brazilian Red Cross, the International Federation granted a DREF allocation to support the plan of action elaborated by the BRC. This plan of action included an educational campaign against dengue with the main objective to reach 10,000 people directly and three million people indirectly. The campaign included community talks, elaboration of visibility and educational material with key messages and information on how to fight dengue and house visits. The campaign was focused in the areas of Manguinhos, Complexo do Alemão, Jacarepaguá and Campo Grande. A total of 32 volunteers were trained to carry out the campaign.

The Brazilian Red Cross coordinated activities with the Rio de Janeiro branch, and arranged the mobilization of personnel to the affected areas. In addition, the BRC branch in Rio de Janeiro maintained constant communication with the local health centres to coordinate activities.

## Progress towards objectives

### Emergency Health

**Objective: Health risks due to exposure to dengue virus are reduced through the provision of preventive and community-level health education to 10,000 beneficiaries in Rio de Janeiro for three months.**

#### Activities planned:

- Implement a health promotion campaign within the affected population targeting 10,000 people in Rio de Janeiro;
- train 40 community-based volunteers on health promotion via hours of training;
- carry out data assessment in the most affected communities;
- coordinate with public officials and other social agencies;
- create and publish educational material;
- display educational materials in public locations;
- deliver 40 two-hour workshops covering basic knowledge regarding dengue prevention, transmission, and medical care;
- conduct 200 home visits;
- broadcast four Radio and one TV programs.

#### Impact:

The BRC plan of action prepared to implement an education campaign in communities in the state of Rio de Janeiro, including Manguinhos, Mare and Complexo do Alemão. Due to increased violence in these areas and the heightened military activities, the BRC decided not to expose their volunteers. Therefore, the plan of action was changed to no longer include the area of Mare. The BRC formed alliances with the Municipal Health Secretary (Secretaria Municipal de Saúde) in Rio de Janeiro to conduct educational talks and house visits. The BRC hung posters in high circulation public areas, such as metro stations, urban trains, boat stations, hospitals, schools, supermarkets, etc. The BRC also distributed brochures, reaching approximately 1.5 million people with information on how to prevent and treat the disease.

In addition, community talks were given in the area of Paula Ramos, two plays were presented in the main railway station (Central do Brasil) educating children between the ages of six and eight years old. During these presentations, 2,000 brochures were distributed through the BRC stand installed in the station. Another seven community talks were given in the school Técnica Silva e Souza in Jacarepaguá, reaching 157 people. During the talks, brochures and visibility materials were distributed and further distributions were made in hospitals, schools, health centres and other public places.

A workshop was held in the school of Manguinhos reaching approximately 80 elementary school students, teachers and parents. On 14 June a stand on dengue prevention was set up next to a BRC vaccination clinic, reaching 164 persons directly and approximately 500 more indirectly.

#### Challenges:

The violence encountered in the communities in Rio de Janeiro where the BRC wanted to implement their Plan of Action (PoA), forced the BRC to make adjustments in selecting other communities to execute the activities planned. The lack of trained volunteers for this type of operation slowed down the activities planned; nevertheless they were carried out successfully.

## Conclusion

#### Lessons learned:

- The Brazilian Red Cross provided assistance to 2,000 people directly and approximately 1.5 million people indirectly with community talks and distribution of health education material on dengue in the areas of Manguinhos, Complexo do Alemão, Campo Grande and Jacarepaguá in the municipality of Rio de Janeiro.
- The BRC local branch in Rio de Janeiro and the headquarters achieved better integration during this operation.

- Although there were an increased number of volunteers, some lacked experience; however, thanks to the knowledge gathered in this operation they will be better prepared for future emergencies.
- The communities affected by the dengue virus are more aware on how to prevent and treat the illness thanks to the laborious campaign designed by the BRC.
- The BRC local branches' capacity was strengthened since they learned how to handle difficult situations such as the increased violence in the area. The BRC also learned how to have alternate plans of action in order to be better prepared when difficulties arise.

## How we work

*All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

### For further information specifically related to this operation please contact:

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**International Federation of Red Cross and Red Crescent Societies**

MDRBR003 - Brasil Dengue Outbreak

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/1-2009/3
Budget Timeframe	2008/4-2008/7
Appeal	MDRBR003
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	55,000					55,000
<b>B. Opening Balance</b>	0					0
<b>Income</b>						
<u>Other Income</u>						
<i>Voluntary Income</i>	35,344					35,344
<b>C5. Other Income</b>	35,344					35,344
<b>C. Total Income = SUM(C1..C5)</b>	35,344					35,344
<b>D. Total Funding = B + C</b>	35,344					35,344
<b>Appeal Coverage</b>	64%					64%

**II. Balance of Funds**

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	0					0
<b>C. Income</b>	35,344					35,344
<b>E. Expenditure</b>	-35,344					-35,344
<b>F. Closing Balance = (B + C + E)</b>	0					0

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### III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
<b>BUDGET (C)</b>		<b>55,000</b>					<b>55,000</b>	
<b>Supplies</b>								
Teaching Materials	7,000						7,000	
<b>Total Supplies</b>	<b>7,000</b>						<b>7,000</b>	
<b>Transport &amp; Storage</b>								
Storage		5				5	-5	
Transport & Vehicle Costs	4,000	135				135	3,865	
<b>Total Transport &amp; Storage</b>	<b>4,000</b>	<b>140</b>				<b>140</b>	<b>3,860</b>	
<b>Personnel</b>								
International Staff	650	2,250				2,250	-1,600	
Regionally Deployed Staff	3,000	5,987				5,987	-2,987	
National Staff		3,254				3,254	-3,254	
National Society Staff	14,200	5,802				5,802	8,398	
<b>Total Personnel</b>	<b>17,850</b>	<b>17,293</b>				<b>17,293</b>	<b>557</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	1,950	125				125	1,825	
<b>Total Workshops &amp; Training</b>	<b>1,950</b>	<b>125</b>				<b>125</b>	<b>1,825</b>	
<b>General Expenditure</b>								
Travel	9,000	4,984				4,984	4,016	
Information & Public Relation	10,555	8,032				8,032	2,523	
Office Costs	470	1,256				1,256	-786	
Communications	600						600	
Financial Charges		1,217				1,217	-1,217	
<b>Total General Expenditure</b>	<b>20,625</b>	<b>15,489</b>				<b>15,489</b>	<b>5,136</b>	
<b>Programme Support</b>								
Program Support	3,575	2,297				2,297	1,278	
<b>Total Programme Support</b>	<b>3,575</b>	<b>2,297</b>				<b>2,297</b>	<b>1,278</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>55,000</b>	<b>35,344</b>				<b>35,344</b>	<b>19,656</b>	
<b>VARIANCE (C - D)</b>		<b>19,656</b>				<b>19,656</b>		