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Emergency Plan of Action Dominican Republic: Zika Virus Outbreak

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation	MDRDO008; Glide no. EP-2015-000175-DOM
Date of issue: 23 February 2016	Date of disaster: 23 January 2016
Operation manager: Mariela Moronta, Regional Disaster Management Coordinator for the Caribbean	Point of Contact: Gustavo Lara Tapia, Director General, Dominican Red Cross (DRC)
Operation start date: 18 February 2016	Expected timeframe: 3 months
Overall Operation budget: 100,481 Swiss francs (CHF)	
Number of people affected: 32 people directly affected to date 10,000,000 people at risk (the entire population of the Dominican Republic)	Number of people to be assisted: 29,200
Presence of Host National Societies: The Dominican Red Cross has 1 headquarters, 137 branches nationwide, approximately 20,000 volunteers and approximately 221 staff members.	
Red Cross Red Crescent Movement partners actively involved in the Operation: International Federation of Red Cross and Red Crescent Societies (IFRC) and Spanish Red Cross	
Other partner organisations actively involved in the operation: National Prevention, Mitigation and Response Committee, National Emergency Operations Centre, Municipal Prevention, Mitigation and Response Committees, Ministry of Public Health, Ministry of Education, Ministry of Public Works, Ministry of Defence, Radio Club Dominicana, Metropolitan Transport Authority, Civil Defence, Fire Brigade, National Police, Specialized Tourism Security Corps (CESTUR for its acronym in Spanish), private companies (Autopistas del Nordeste y Boulevard Turístico del Atlántico).	

[<Click here for the DREF budget. Click here for the contact information>](#)

A. Situation Analysis

Description of the Disaster

On 23 January 2016, the Pan American Health Organization/World Health Organization (PAHO/WHO) reported the presence of the Zika virus in the Dominican Republic after 10 cases were confirmed, eight were contracted locally and two were imported from El Salvador. Affected people are from different locations across the country: the National District and the municipalities of Santo Domingo Norte, Jimaní Oeste near the Haitian border and the provinces of Independencia and the locality of Santa Cruz in Barahona province (southwest Dominican Republic). Eight of the 10 cases were identified in people aged 15 to 57, and the remaining two cases were identified in children under five years of age. The onset of symptoms was detected between 3 and 18 January 2016. Fevers and rash were reported in all of the cases, conjunctivitis was reported in eight of the ten cases, discomfort, headaches and arthralgias (joint pain) were reported in six of ten cases and myalgia was reported in five of ten cases.

Cases were confirmed by testing samples through reverse transcription polymerase chain reaction (RT-PCR) by the Centres for Disease Control (CDC).

Dominican health authorities intensified surveillance activities and the implementation of vector control measures, as well as educational activities for the Dominican population on the risks associated with the Zika virus, encouraging them to take precautions to avoid mosquito bites.

After confirming the circulation of the virus, the Dominican government issued Decree 7-16 on 23 January 2016, which instructed the Ministry of Health to coordinate actions to detect and confirm cases of dengue, chikungunya and Zika, address and implement a guidance strategy and to reduce the number of mosquito-breeding sites. The Ministry of Defence and specialized security forces were ordered to conduct any measures required by public health, government agencies were ordered to get actively involved and institutions were ordered to disseminate prevention information through virtual platforms, social networks and other mechanisms

During Epidemiological Week number 4, 32 new suspected cases of Zika were reported with autochthonous transmission proven, by locality the cases were reported in: National District (8) and municipalities of Jimaní (14), Santo Domingo Norte (3) and Santa Cruz de Barahona (7).

Health authorities are conducting intensified surveillance of febrile rash illness (*enfermedad febril exantémica* - EFE). Through this surveillance, 45 cases have been identified and investigated in other localities of the country, of which 38 met the criteria for laboratory diagnosis. Samples were sent to the laboratory of the Centre for Disease Prevention and Control (CDC) in the United States. In line with this strategy, the Ministry of Health continues to advance in strengthening the Dr. Defilló National Laboratory with assistance from PAHO and the CDC to enable the samples to eventually be processed in country.

In addition to the detection of virus circulation, the Ministry of Health is encouraging all the components of the health sector in the Dominican Republic to implement systematic monitoring and weekly notifications of EFE episodes, with an aim to monitor the course of the epidemic.

Summary of current response

Overview of Host National Society

The Dominican Red Cross has been carrying out concrete actions to provide assistance to the affected population, together with the Ministry of Public Health, the Ministry of Education, the Prison System Directorate-General, and Dominican universities, through the deployment of 468 volunteers to support prevention efforts conducted by the Ministry of Health via national mobilization campaigns against Zika, dengue and chikungunya.

Dominican Red Cross volunteers are actively involved in the elimination of mosquito breeding sites, distribution of educational materials, larviciding, garbage removal and the cleaning of gutters. Volunteer efforts have contributed to a reduction in the risk of contracting Zika, dengue and chikungunya in 318 communities nationwide, including Santo Domingo, National District, San Pedro de Macorís, La Vega, San Cristóbal, Monsenor Nouel, San Francisco de Macorís, La Altagracia, Dajabón, Monte Plata, Nagua and Santiago.

Overview of Red Cross Red Crescent Movement in the Country

The IFRC has an office in the country to support Dominican Red Cross activities. It also has the support of a disaster management coordinator from the Pan American Disaster Response Unit (PADRU), who is providing technical support and guidance to the operation.

The Spanish Red Cross has an office through which it runs joint capacity building and community strengthening projects with the National Society.

The Canadian Red Cross Society is developing a second project with the Dominican Red Cross to build the National Society's first response capacity.

Movement Coordination

The Dominican Red Cross has a bi-national agreement with the Haiti Red Cross Society through a plan of action focused on three main lines:

1. Migration
2. Health
3. Risk Management

The IFRC and the International Committee of the Red Cross (ICRC) have supported both National Societies in the process to develop the bi-national plan of action, as well as the tools to respond to any event that could create a disaster and crisis situation.

Overview of actors in the country

After the first ten cases of Zika were detected in the country, several government entities have joined prevention efforts through the elimination of breeding grounds in order to address this disease, which PAHO has detected in 26 countries since May 2015.

Actions have been coordinated through municipal governments and institutions assigned by regions, as well as through the Dominican Federation of Municipalities (FEDOMU) and their mayors, to achieve a broader preventive scope and to reduce the reproduction of the mosquito that transmits the Zika, dengue and chikungunya viruses.

The Ministry of Defence has made more than two thousand military staff available to work on the elimination of mosquito breeding sites and fumigation as part of preventive measures, for which the entity has created an Epidemiological Disease Mitigation Unit to be at the disposal of the Ministry of Public Health.

Around 100 Army doctors have joined the National Fumigation, Orientation, and Elimination of *Aedes aegypti* Breeding Sites Day, with similar actions being conducted by members of the Dominican Republic Air Force (FARD).

Likewise, with the leadership of the Dr. Vinicio Calventi Hospital, the mayor of the municipality Los Alcarrizos and community organizations in that district held a Prevention Day that conducted 322 home visits, a distribution of 600 units of larvicide and a delivery of 450 informational brochures, 1,200 units of chlorine and parasite treatments.

FARD started its activities in the municipality of Santo Domingo Este, with 500 members divided into groups of 25. Fumigation efforts were conducted in the sectors of Los Mina, Los Cocos, Canta la Rana, La Barquita, Lavapiés and other sectors along the banks of the Ozama River. FARD deployed trucks equipped with two sprayers each to disinfect all places suspected of harbouring mosquitoes. The spraying included ravines, streets, alleys and garbage dumps; the Military and Police Commission from the Ministry of Public Works joined these efforts as well.

The Ministry of Education provided around 12,100 employees and administrative staff from its headquarters and regional and school districts across the country. The administrative staff conducted its efforts in streets, alleyways, courtyards and ravines in the sectors of Cristo Rey, María Auxiliadora, Ensanche Luperón, Capotillo, Villa Juana, Villa Consuelo, as well as in Villa Mella, Santo Domingo Norte and the banks of the Ozama River in the province of Santo Domingo.

All groups mobilised in the campaign, which included men and women, visited homes and delivered informational brochures, larvicide and granular chlorine to residents.

Needs analysis, beneficiary selection and risk assessment and scenario planning

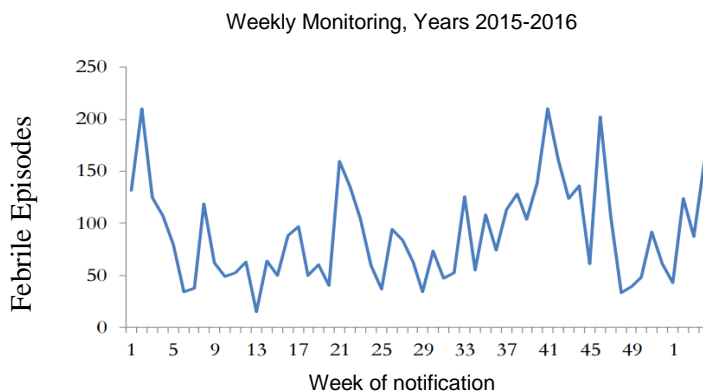
Since May 2015, the Zika virus has been detected in 26 countries and territories in the Americas (some affected territories belong to European nations), which means that the entire Americas region is at risk and it will reach all of the countries where the *Aedes aegypti* mosquito is present.

Even though there is only ecological evidence of the connection between Zika virus outbreaks and increases in cases of microcephaly and other neurological and autoimmune complications at the moment, the possible causal nature of this connection cannot be dismissed. Given this situation and considering the continued spread of the Zika virus in the region of the Americas, PAHO and WHO have reinforced recommendations regarding surveillance of the Zika virus, including the monitoring of neurological syndromes and congenital anomalies published in the 1 December 2015 issue of Epidemiological Alert. Further guidance is being provided for surveillance of neurological syndromes and refreshers on the clinical management of Guillain-Barre Syndrome.

Health

PAHO/WHO have issued a worldwide Epidemiological Alert and made recommendations regarding surveillance of the Zika virus, aimed mostly at neurological syndromes and congenital anomalies (microcephaly, Guillain-Barre Syndrome) and linking them to the outbreak of the Zika virus in the Americas.

The first Zika cases in the Dominican Republic were detected on 23 January 2016, in addition to the incidence of dengue in the country. The Ministry of Health is identifying cases through the monitoring of episodes of febrile rash illness:



In view of the imminent arrival of the Zika virus to the Dominican Republic, the Ministry of Health has asked women of reproductive age to avoid becoming pregnant this year, and for pregnant women to take the necessary precautions to prevent infection with the Zika virus, as well as encouraging the population to go to their nearest health care centre if they are experiencing symptoms from the virus and not to self-medicate.

Water and Sanitation

In the Dominican Republic, *Aedes aegypti* is the most common vector and the one with which humans most come into contact given that these insects prefer living indoors and colonizing artificial breeding sites of various kinds. Initial research and entomological surveys conducted annually by the Ministry of Health have determined that 55-gallon drums are the most common water storage means and the main breeding site inside and around homes. They have also determined that sanitation and hygiene conditions in the country are among the main causes leading to the proliferation of the mosquito.

Vulnerability criteria and beneficiary selection

The action plan is intended to provide assistance to communities at greater risk according to the following vulnerability criteria:

- Age group.
- Pregnant women
- School-aged population
- Communities with high level of overcrowding and poor hygiene practices.
- Communities with difficulties in terms of the proper disposal of solid waste, which can become mosquito breeding grounds.
- Population in the prison system.

Risk Assessment

Given the sanitary conditions in the Dominican Republic, the entire population was considered at risk of contracting the disease once the cases were confirmed due to the rapid proliferation of mosquitoes and the country's ideal conditions for fostering it. It is common to see containers with stagnant water in Dominican household gardens (pots, bottles), which later become breeding sites for mosquitoes. The on-and-off nature of the water supply forces residents to store water to meet their needs in containers, which are left uncovered and with no protection or treatment to prevent mosquitoes from breeding there. The outdoor accumulation of trash and debris is a common practice in Dominican communities. The lack of maintenance on drains with stagnant water is one of the main problems affecting the country, which make it ideal for the spread of mosquitoes.

As dengue and Zika are water related vector-borne diseases associated with climate and precipitation, this enables actions to be focused on communities that have experienced recent rainfall. Even though the Dominican rainy season usually runs from June to November, variations in the typical weather pattern are expected due the effects of the El Niño phenomenon.

Another potential risk is that vulnerable volunteers and staff will contract the virus during their vector control and awareness-raising actions in affected communities; consequently, they will be provided personal protective equipment, which will include suitable clothing and supplies to provide services to beneficiary communities.

The Dominican Republic is a country where violence is on the rise; as a result, all personnel working on the project must adhere to safety standards established by the Dominican Red Cross in order to reduce the possibility of security incidents occurring between National Society personnel and beneficiaries.

B. Operational strategy and plan

Overall objective

Interrupting the chain of transmission of the disease caused by the Zika virus in the 10 affected municipalities through response actions that effectively and efficiently control the vector, through community awareness and prevention activities, vector control and coordination with local authorities and other agencies in the field.

Proposed strategy

Based on its contingency plan and through its network of branches across the country, the Dominican Red Cross intends to support national response efforts to reduce the chain of transmission of the Zika virus in the Dominican Republic. It proposes community-based work on prevention those affected by the disease; additionally, the Dominican Red Cross believes it is necessary to define strategies that allow a comprehensive approach that is community-based, multi-sectoral, and interdisciplinary to address the risk of an outbreak of vector-borne diseases in the country. The most important would be coordination between the DRC and the various entities providing support to the current health situation in the Dominican Republic in order to enhance the impact of the Red Cross's actions and ensure the proper implementation of the prevention actions conducted by Red Cross branches across the country.

The following are included within the operations plan for 15,00 families in 10 provinces in the Dominican Republic, 6 prisons, 20 schools, and 10 DRC provincial branches via an intervention that integrates:

- Strengthening of the National Epidemiological Surveillance Network established by the Dominican Ministry of Health to identify dengue and Zika virus cases.
- Building the capacity of DRC branches and community networks to implement properly prevention, promotion and epidemiological surveillance activities.
- Building the capacity for and strengthening of orientation activities regarding prevention of the spread of Zika in schools and prisons.
- Promoting strategic partnerships with the public and private sectors.
- Conducting orientation activities at the community level to prevent the spread of Zika, with an emphasis on pregnant women.
- Conducting cleaning campaigns in communities, schools, prisons and Dominican Red Cross branches.

Operational support services

Human Resources

In order to assist with this emergency situation, the management of the operation and coordination and logistics at the national level will fall to Dominican Red Cross Health leadership. At the local level and as a way of increasing intervention capacity, Red Cross branches will be providing support near the border and in the rest of the country.

The National Society will appoint a DREF funds coordinator, who will be responsible and accountable for the implementation of all actions proposed in the operational plan, with support from the local IFRC office as part of the assistance and technical support provided by the IFRC.

The operation will provide support through safety and visibility equipment for volunteers in the field (repellent, caps, Polo shirts and identification bibs).

Logistics and supply chain

While initial actions were decided in coordination and jointly with local authorities, the proposed humanitarian aid and supplies to be delivered during the operation will be purchased in each of the cities, thus following Sphere Manual standards and current National Society financial/administrative procedures. Fuel and maintenance costs for the deployed National Society vehicles will be borne by the operation.

Information Technology (IT)

Mobile and fixed telephony will continue to be used to maintain direct communication with provinces/branches, as well as the very high frequency (VHF) radio system, which will support a large part of the activities in the field and monitoring of the emergency. The National Society's Communications Department will contribute through the proper dissemination of humanitarian actions by various Movement components, keeping the public informed of the situation, as well as encouraging donations, documenting beneficiary testimonials and disseminating prevention and informational materials designed specifically for the operation.

Communications

The National Society has a Communications Department which will be covering project actions and providing information to the media regarding the emergency situation and Red Cross actions through the following:

Internal Communications

- Operation bulletins and reports (print and digital).
- Preparation of dissemination materials (brochures, flyers, posters etc.)

External Communications

- Press conferences.
- Press visits to the field.
- Promotional press tours.
- Publication of press releases.
- Beneficiary stories
- Video of the operation.
- Preparation of dissemination materials (brochures, flyers, posters, etc.)
- A campaign over social networks.

Part of the operation's goal is to increase documentation and dissemination of information about humanitarian impact actions by the National Society for the preparation of information and key messages aligned with guidelines defined by the IFRC and jointly with partners from local and international humanitarian sector partners.

The NS will ensure adequate management of operational communications at the internal level, disseminate information to affected communities and facilitate feedback from beneficiaries.

The Communications Department will maintain a close relationship and exchange of information with the IFRC's Communications Department to disseminate actions by the Red Cross Movement through virtual, written and audio-visual media.

The IFRC Communications Department is preparing a communication campaign to support chikungunya, dengue and Zika prevention actions.

Strategic actions by the Communications Department have focused on the following:

Internal Communications

Thematic Axes:

- Zika: general information and how to talk about it
- Operational communications
- National Society and IFRC activities (before, during and after the appeal)

Target Audience	Channel
National Society (Management and administrative staff)	- Electronic bulletin (Intranet)
Volunteers	- Polymedia or tutorial videos - Brochures - Preparation of informational murals or boards
National Society, cooperating	- Videos: Stories of affected

agencies, volunteers	populations, actions conducted and follow-up
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External Communications

Thematic Axes:

- Zika: general information (awareness-raising)
- Community-based prevention
- National Society and IFRC activities

Target Audience	Channel
Press and society	Social networks
Press	Microsite or Press room devoted exclusively to appeal issues
Press, government, and aid agencies	Press conferences, releases, and bulletins
General public	Radio and TV spots
Communities	Brochures, posters
Society in general	Media tour: arranging for interviews over traditional mass media
Press and general public	Videos: Stories of affected populations, actions conducted and follow-up

Planning, monitoring, evaluation and reporting (PMER)

Monitoring mechanisms will be established for the entire implementation period, and will be based on the tracking of proposed activities and indicators and the use of tools defined and/or adapted for reporting, as well as field visits and interviews with critical actors of the operation.

The following tools will be part of monitoring:

- Monthly review of implementation against the plan of action and work based on the monthly implementation reports
- Visits by the national project coordinator to neighbourhoods and districts with each branch's technician. These visits will include meetings and interviews with branch teams, key actors, and community beneficiaries.
- Field monitoring mission reports
- Narrative reports of the operation.

Work and coordination within the community and with local authorities will take place from the branch, allowing for direct and efficient communications. Moreover, for logistical, financial and administrative purposes, the branch will establish a liaison with headquarters.

At the end of the project's implementation, a final evaluation will be conducted in order to assess the extent of objective and impact fulfilment, highlighting lessons learned and involving partner institution actors, DRC volunteers and staff, and beneficiary communities, among others.

Administration and Finance

The Dominican Red Cross has specific procedures for conducting procurement and accountability processes in emergency situations, which ensure transparency in the management of the funds allocated to the implementation of humanitarian aid actions. DRC project administration, finance, procurement, and auditing offices will provide their support to the operation, as well as to budget tracking, purchasing, expense reporting, audits and financial reporting.

The IFRC, through its disaster response coordinator and Finance Department, will provide the necessary operational support for the review, validation of budgets, bank transfers and technical assistance to National Societies on expense justification procedures, including the review and validation of invoices.

Proper financial resource use will be according to conditions established in the memorandum of understanding between the National Society and the IFRC. Funds management will be according to National Society regulations and DREF guidelines.

The National Society's own procedures will be applied to the justification of expenses, and they will be done on formats established by the IFRC. As per DREF procedures, the operation will not cover permanent structural costs, only expenses incurred during the 3-month operation

C. DETAILED OPERATIONAL PLAN

Health and Care

Needs analysis: Now that the Zika virus is in circulation in territories in the Americas, PAHO has recommended its member countries to monitor and notify any increase in neurological syndromes and congenital anomalies due to their possible link to the Zika virus. Zika virus surveillance should be developed from existing surveillance for dengue fever and chikungunya, taking into account the differences in clinical presentation. Depending on the epidemiological situation of the country, surveillance should be aimed at detecting the introduction of the Zika virus in a particular area, tracking the spread of the Zika virus once it has been introduced or monitoring the disease once it has become established; these actions are necessary to ensure coverage of the existing health service needs in the Dominican Republic and to respond appropriately to a potential increase in demand for services to treat neurological syndromes through the distribution of information for prevention and dispelling of myths and stigmas attached to Zika, thus developing an effective vector control strategy and good communication with the population and a corresponding reduction in the presence of the *Aedes aegypti* mosquito.

Population to be assisted: In order to contribute to the health of the affected population, the Dominican Red Cross will provide support to 1,500 families, 6 prisons, 20 schools and 10 provincial branches of the Dominican Red Cross through prevention and health promotion in the 10 provinces of the Dominican Republic (Santo Domingo, Monte Plata, Peravia, San José de Ocoa, Monseñor Nouel, San Pedro de Macorís, La Romana, Azua, San Cristóbal y el Distrito Nacional)

Quantity	Description	Members	Details	Sub total
1500	Families	5	Members	7,500
20	Schools	300	School community	6,000
6	Prisons	14,200 (*)	Inmates and staff	14,200
10	Branches	150	Volunteers	1,500
			Overall Total	29,200

*: Detailed beneficiaries in prisons

Inmates and permanent staff	Prisons
8,500	La Victoria
700	Azua
750	El Seibo
1,500	La Vega
750	San Juan
2,000	Najayo
14,200	Total

Note: Estimated quantities

OBJECTIVES		INDICATORS											
Outcome 1: The risk of contracting the Zika virus is reduced through information and awareness-raising regarding prevention measures in 1,500 families (7,500 people), 6 prisons (approximately 14,200 people), 20 schools (approximately 6,000 people), and 10 branches (1,500 people) of the Dominican Red Cross during the 3-month operation.		No. of people treated by the Red Cross, which reduces the spread of the disease. No. of dengue cases registered											
Output 1.1: At least 1,500 families have information on prevention and early detection of signs and symptoms of the Zika virus.		1,500 health promoters and volunteers trained in Zika prevention 1,500 families who received home visits											
Output 1.2: 20 schools are provided information on Zika prevention		6,000 students who received information Staff of 6 schools (teachers, janitors, doormen, security staff) who received information											
Output 1.3: 6 prison centres receive information on prevention and early detection of signs and symptoms of the Zika virus.		Authorities of 6 prisons who receiving information. 14,200 inmates who receive information											
Output 1.3: Contribute to epidemiological surveillance actions in communities		29,200 people informed directly and indirectly 20 public activities conducted											
Output 1.4: Contribute Zika prevention activities aimed at pregnant women		No. of pregnant women informed directly and indirectly No. of public activities conducted											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
2 community-based health and first aid (CBHFA) and participatory hygiene and sanitation transformation (PHAST) workshops for volunteers and health promoters to prevent Zika													
Door-to-door visits to provide information on prevention and early identification of cases													
Formation of community health groups for community epidemiological surveillance with the Ministry of Health													
Zika prevention lectures in schools													
Workshop for school staff on prevention and early identification of cases													
Workshops for prison staff on prevention and early identification of cases													
Talks delivered to prison inmates on prevention and early identification of cases													

Water, sanitation and hygiene promotion

Needs analysis: Taking into account that basic sanitation conditions are conducive to the proliferation of the dengue and Zika vector in the Dominican Republic, it is necessary to strengthen the environmental sanitation component within the National Integrated Management for the Prevention and Control of Dengue and Zika Virus strategy, providing the basis for adequate preparedness against these diseases. One of the main identified needs is integrated vector management (IVM), with an effective

OBJECTIVES	INDICATORS												
Beneficiary satisfaction survey													

Contact Information

For further information specifically related to this operation please contact:

In the Dominican Red Cross:

- Arq. Gustavo Lara, General Director for the Dominican Red Cross, email: gustavo.lara@cruzroja.org.do

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In Geneva

- Christine South, operations quality assurance senior officer; +41 22 730 45 29; christine.south@ifrc.org

For Resource Mobilization and Pledges:

- Alejandra Van Hensbergen, senior relationship management officer; email: alejandra.vanhensbergen@ifrc.org

For In-Kind donations and Mobilization table:

- Douglas Baquero, Head of Zone Office Logistics Unit - Global Logistics Service; email: douglas.baquero@ifrc.org

For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

- Priscila Gonzalez; planning, monitoring and reporting coordinator ; email: priscila.gonzalez@ifrc.org

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Annex:

Below is a description of the different types of cleaning kits:

Community cleaning kits (1 kit per community)

20 gallons of chlorine
4 rakes
1 15-metre hose
2 flashlights
2 pairs of batteries
10 garden-sized bags (dozens)
4 brooms
4 10-litre plastic buckets
4 sponges
4 pairs of rubber gloves
2 wheelbarrows
2 shovels

School cleaning kits (1 kit per school)

10 gallons of chlorine
4 rakes
1 15-metre hose
2 trash bins
4 garden-sized bags (dozens)
4 brooms
4 10-litre plastic buckets
4 sponges
4 pairs of rubber gloves
1 wheelbarrow
4 shovels

Prison cleaning kits

5 gallons of chlorine
4 rakes
2 15-metre hoses
5 trash bins
10 garden-sized bags (dozens)
4 brooms

- 4 10-litre plastic buckets
- 4 sponges
- 4 pairs of rubber gloves
- 1 wheelbarrow
- 4 shovels

Red Cross branch cleaning kits (1 per branch)

- 10 gallons of chlorine
- 1 rake
- 1 15-metre hose
- 1 flashlight
- 1 pair of batteries
- 2 garden-sized bags (dozens)
- 1 broom
- 1 10-litre plastic bucket
- 2 sponges
- 2 pairs of rubber gloves
- 1 wheelbarrow

Household mosquito protection kits:

- 1 silicone gun
- 1 stick of silicone
- Mosquito netting
- Wood staplers

DREF OPERATION

MDRDO008 - Dominican Republic Zika Virus

Budget Group	DREF Grant Budget CHF
Shelter - Relief	0
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction - Materials	0
Clothing & Textiles	8,250
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	28,206
Medical & First Aid	0
Teaching Materials	7,076
Ustensils & Tools	1,966
Other Supplies & Services	0
Cash Disbursements	0
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	45,498
Land & Buildings	0
Vehicles	0
Computer & Telecom Equipment	0
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
Total LAND, VEHICLES AND EQUIPMENT	0
Storage, Warehousing	0
Distribution & Monitoring	1,250
Transport & Vehicle Costs	5,307
Logistics Services	3,135
Total LOGISTICS, TRANSPORT AND STORAGE	9,692
International Staff	0
National Staff	0
National Society Staff	13,857
Volunteers	6,047
Other Staff Benefits	3,440
Total PERSONNEL	23,344
Consultants	0
Professional Fees	0
Total CONSULTANTS & PROFESSIONAL FEES	0
Workshops & Training	4,423
Total WORKSHOP & TRAINING	4,423
Travel	590
Information & Public Relations	7,764
Office Costs	1,120
Communications	1,474
Financial Charges	442
Other General Expenses	0
Shared Office and Services Costs	0
Total GENERAL EXPENDITURES	11,391
Partner National Societies	
Other Partners (NGOs, UN, other)	
Total TRANSFER TO PARTNERS	
Programme and Services Support Revocery	6,133
Total INDIRECT COSTS	6,133
TOTAL BUDGET	100,481