



3,670,739
Cases



3,551,687
Recoveries



57,610
Deaths



64,660,228
(64.4%)¹
Fully
Vaccinated

Please see the Philippines Department of Health (DOH) Daily [Case Bulletins](#) and [COVID-19 Tracker](#) for further information.

Summary of the epidemiological situation in Philippines²

Key numbers

4,128 cases (7-13 Mar 2022)	58 deaths (7-13 Mar 2022)	20% ICU occupancy	3,598 ICU beds for COVID-19 cases	156,544 tests (7-13 Mar 2022)	3.1% Positivity Rate (7-13 Mar 2022)
Not available HCW active cases	1,035 Hospitals admitting COVID-19 patients	30,619 Total hospital beds for COVID-19 patients	17% COVID-19 hospital beds occupied	Not available COVID-19 TTMF	

COVID-19 cases

As of 13 March, a total of 3,670,739 COVID-19 cases and 57,610 (1.6%) COVID-19 related deaths had been recorded since the beginning of the COVID-19 pandemic. There was a sudden and sharp increase in cases in late December 2021, but after peaking in early January, a decreasing trend has been continuing in the number of cases reported per day (Figure 1). There were 4,128 new cases (3.7 cases per 100,000 population³) reported in week 10 (7-13 March 2022), that is 35% lower than the previous week (28 February – 6 March 2022: 6,362 new cases, 5.8 cases per 100,000 population³). For week 10, NCR, Region IV-A: CALABARZON, and Region VI: Western Visayas recorded the highest case counts at 1,215, 572, and 423 respectively.

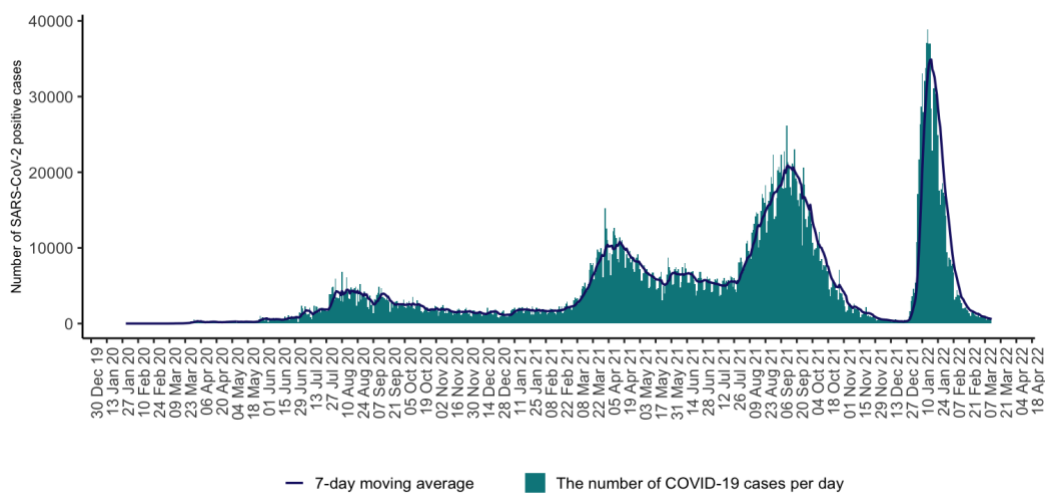


Figure 1. Daily reported COVID-19 cases in the Philippines (30 January 2020 –13 March 2022)

¹ Percent of total eligible population (5 years and older)
² Weekly case counts were obtained from [FASSTER COVID-19 PROJECT](#)
³ National population size used (n=110,278,979, Epidemiology Bureau of the Department of Health, 2022)



Healthcare utilization

Following the continuous decreases in COVID-19 cases over the past few weeks, COVID-19 hospital bed and ICU bed utilization has also declined in Philippines since 30 January, and it is currently maintained at stable levels (Figure 2). In week 10, the daily number (7-day average) of COVID-19 dedicated ICU beds occupied was 712, compared to 846 in the previous week. Utilization of COVID-19 dedicated mechanical ventilators (7-day average) also showed a declining trend: 308 ventilators in week 10, compared to 346 ventilators in week 9.

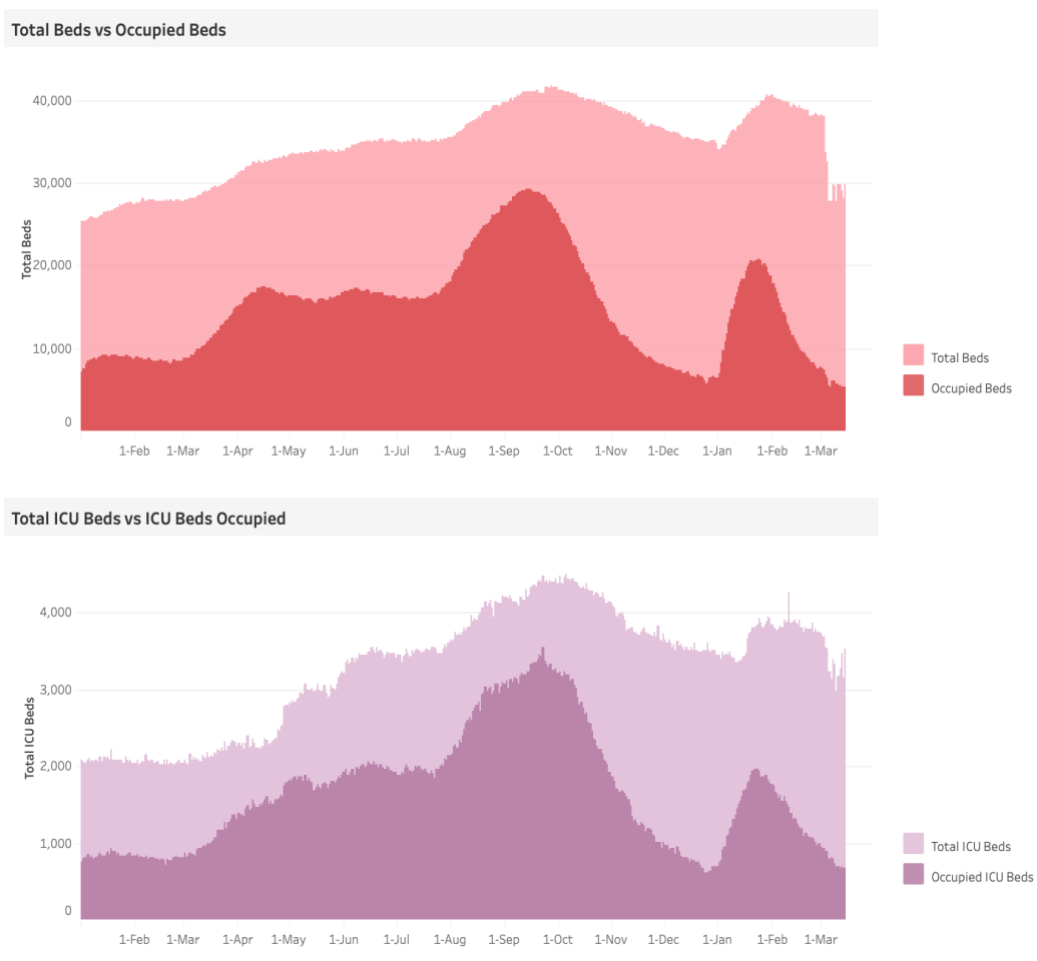


Figure 2. Total bed and ICU bed distribution over time stratified by occupancy (as of 14 March)



COVID-19 deaths

Since the beginning of the COVID-19 pandemic, 57,610 COVID-19 deaths were reported in Philippines as of 13 March 2022 with the highest number of over 300 deaths recorded in September 2021 (Figure 3). The deaths increased during the surge in January, but after peaking in mid-January, a declining trend has been observed.

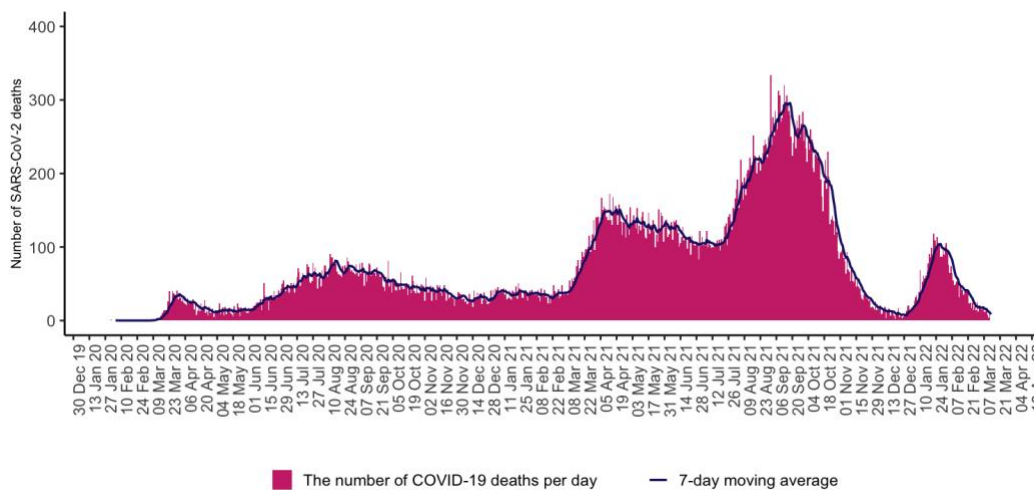


Figure 3. Daily number of COVID-19 deaths in the Philippines by date of death since 2020 (as of 13 March 2022)

Laboratory: testing rates, positivity rates and genomic surveillance

The testing rate (number of tests per 1,000 population) has decreased in the Philippines to 1.5 tests per 1,000 population for week 10 (previously at 1.6 tests per 1,000 population). A lower 7-day positivity rate (number of individuals that tested positive/number of individuals tested) was reported for week 10 at 3.1% (4,878/156,544), compared to week 9 at 4.1% (6,914/167,227). Omicron has become the predominant Variant of Concern (VOC) since the end of January with over 90% dominance in the recently sequenced samples.

Vaccination

As of 14 March 2022, 64% of the target population (5 years and older) were fully vaccinated. Among healthcare workers, who are at increased risk of exposure to SARS-CoV-2, the coverage is high over 93%, with 47% already received a booster dose. Currently, there is particular focus to increase coverage of vulnerable populations; elderly population (A2 priority group), persons with comorbidities (A3) and poor population (A5). Their respective vaccination coverage in Philippines is over 70%, 92%, and 69% (Figure 4). However, it is important to note that there is variation in vaccination coverage between regions, for example, coverage of the A2 population is below 50% in region 7 and BARMM, and below 60% in region 11 and 12 (Table 1). Vaccination coverage of the A5 group is below 50% in 8 regions (Table 2).

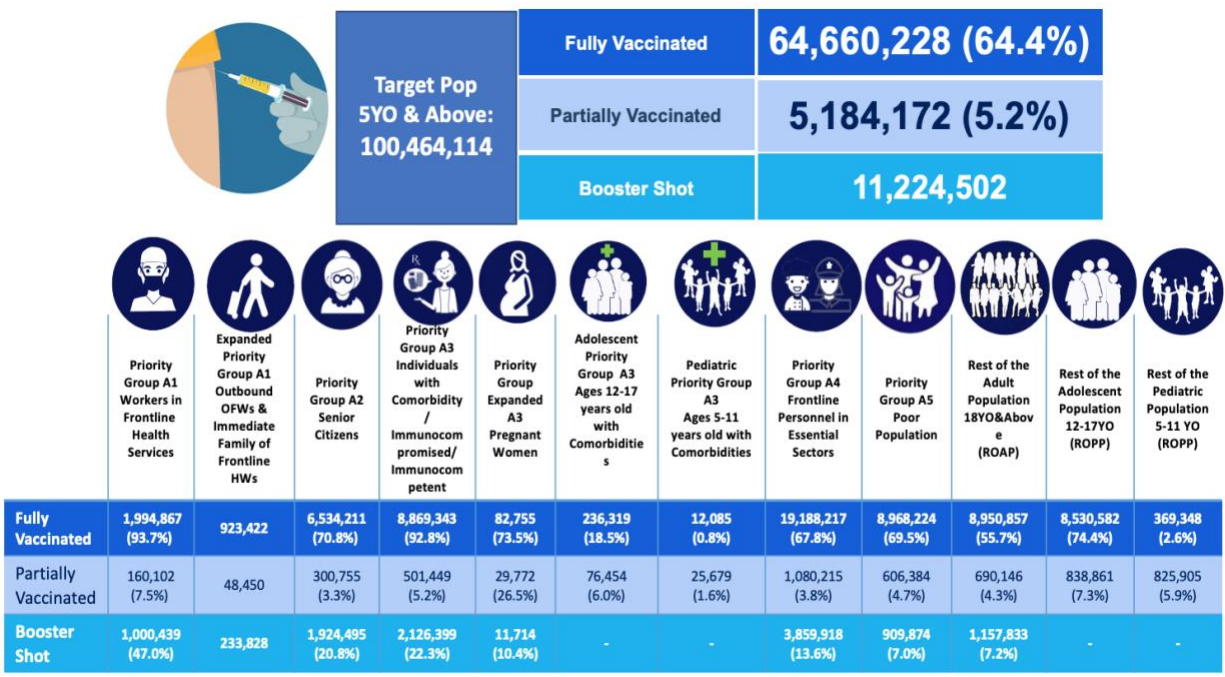


Figure 4. Overview of COVID-19 vaccination status of Philippines' population as of 14 March 2022

Cumulative Coverage Rate % (A2)							
REGION	Projected Pop (Priority Group A2)	Fully Vaccinated	%	Partially Vaccinated	%	Booster Shot	%
2	342,018	298,871	87.4%	11,533	3.4%	79,485	23.2%
NCR	1,222,154	1,030,445	84.3%	24,032	2.0%	512,435	41.9%
CAR	143,040	119,041	83.2%	6,097	4.3%	44,542	31.1%
1	530,907	434,344	81.8%	19,915	3.8%	129,310	24.4%
4A	1,348,666	1,027,371	76.2%	56,200	4.2%	335,095	24.8%
CARAGA	219,338	165,180	75.3%	(2,637)	-1.2%	23,868	10.9%
3	1,126,636	821,236	72.9%	37,794	3.4%	307,766	27.3%
5	494,357	354,042	71.6%	14,708	3.0%	62,887	12.7%
6	778,402	545,796	70.1%	1,872	0.2%	108,496	13.9%
9	289,442	197,953	68.4%	8,978	3.1%	33,085	11.4%
10	406,917	271,486	66.7%	16,562	4.1%	54,344	13.4%
Mimaropa	249,124	159,549	64.0%	10,246	4.1%	32,280	13.0%
8	412,565	262,528	63.6%	16,876	4.1%	40,122	9.7%
11	431,064	255,808	59.3%	31,228	7.2%	51,865	12.0%
12	342,690	195,307	57.0%	12,129	3.5%	35,117	10.2%
7	716,936	331,402	46.2%	22,716	3.2%	67,075	9.4%
BARMM	180,050	63,852	35.5%	12,506	6.9%	6,723	3.7%
PHIL	9,234,308	6,534,211	70.8%	300,755	3.3%	1,924,495	20.8%

Table 1. Overview of vaccination of A2 population per region in Philippines (14 March 2022)



Cumulative Coverage Rate % (A5)							
REGION	Projected Priority Group A5	Fully Vaccinated	%	Partially Vaccinated	%	Booster Shot	%
NCR	663,588	2,130,506	321.1%	76,229	11.5%	418,957	63.1%
4A	955,143	1,204,269	126.1%	48,841	5.1%	155,476	16.3%
6	967,299	929,582	96.1%	(84,456)	-8.7%	68,839	7.1%
CAR	179,565	146,775	81.7%	7,419	4.1%	12,564	7.0%
2	315,918	226,602	71.7%	24,166	7.6%	12,733	4.0%
3	882,423	623,236	70.6%	57,064	6.5%	85,559	9.7%
1	618,150	402,202	65.1%	37,337	6.0%	29,471	4.8%
11	771,534	418,920	54.3%	38,663	5.0%	20,599	2.7%
7	854,691	460,899	53.9%	47,042	5.5%	23,684	2.8%
9	896,151	435,417	48.6%	38,333	4.3%	18,831	2.1%
5	1,111,587	440,487	39.6%	56,444	5.1%	12,298	1.1%
8	839,772	327,615	39.0%	47,818	5.7%	10,566	1.3%
10	798,837	298,342	37.3%	30,773	3.9%	13,037	1.6%
CARAGA	566,586	209,020	36.9%	29,185	5.2%	7,563	1.3%
Mimaropa	583,026	198,048	34.0%	18,407	3.2%	8,749	1.5%
12	743,511	232,889	31.3%	32,547	4.4%	4,141	0.6%
BARMM	1,163,412	283,415	24.4%	100,572	8.6%	6,807	0.6%
PHIL	12,911,193	8,968,224	69.5%	606,384	4.7%	909,874	7.0%

Table 2. Overview of vaccination of A5 population per region in Philippines (14 March 2022)

Strategic approach to COVID-19 Prevention, Detection and Control

Risk Communication and Community Engagement

WCO published social media tiles on Post COVID-19 Condition or “Long COVID.” The materials were published in Filipino, translated from [Q&A web content](#) published by WHO headquarters.

Ano ang post COVID-19 condition?

Ang post COVID-19 condition, kilala bilang “long COVID,” ay ang grupo ng long-term symptoms na nararanasan ng isang tao matapos nitong magkaroon ng COVID-19.

Habang karamihan sa mga nagkaroon ng COVID-19 ay nakaka-recover agad, ang iba ay nagkakaroon ng iba’t ibang mid- at long-term effects gaya ng pagkapagod, kawalan ng hininga, at cognitive dysfunction (gaya ng confusion, pagkamakalimutin, o kawalan ng mental focus at clarity).

Ano ang depinisyon ng post COVID-19 condition?

Ang post COVID-19 condition ay sakit na nangyayari sa mga may history ng probable o kumpirmadong impeksyon dulot ng SARS-CoV-2.

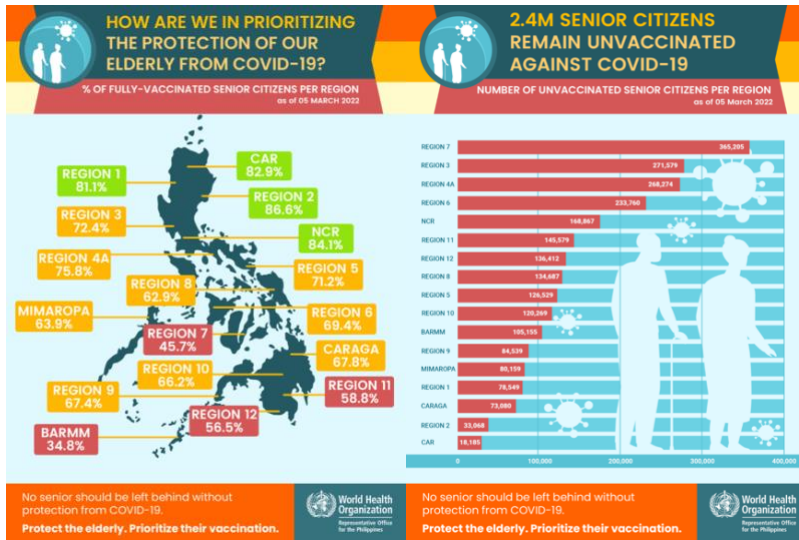
Kadalasang nangyayari ito sa loob ng tatlong buwan simula noong unang nagkasakit ng COVID-19, at may sintomas na tumatagal hanggang dalawang buwan at hindi malipalwanag ng alternatibong diagnosis.

Anu-ano ang mga karaniwang sintomas ng long COVID?

- Pagkapagod
- Kapos o hirap sa paghinga
- Problema sa memorya, concentration, o pagtulog
- Tuloy-tuloy na pag-ubo
- Pananakit ng dibdib
- Hirap sa pananalita
- Pananakit ng kalamnan
- Pagkawala ng pang-amoy o pang-lasa
- Depression o anxiety
- Lagnat



WCO published social media infographics on protecting the elderly and prioritizing their vaccination in time for the *Bayanihan, Bakunahan 4* focusing on the senior citizens.

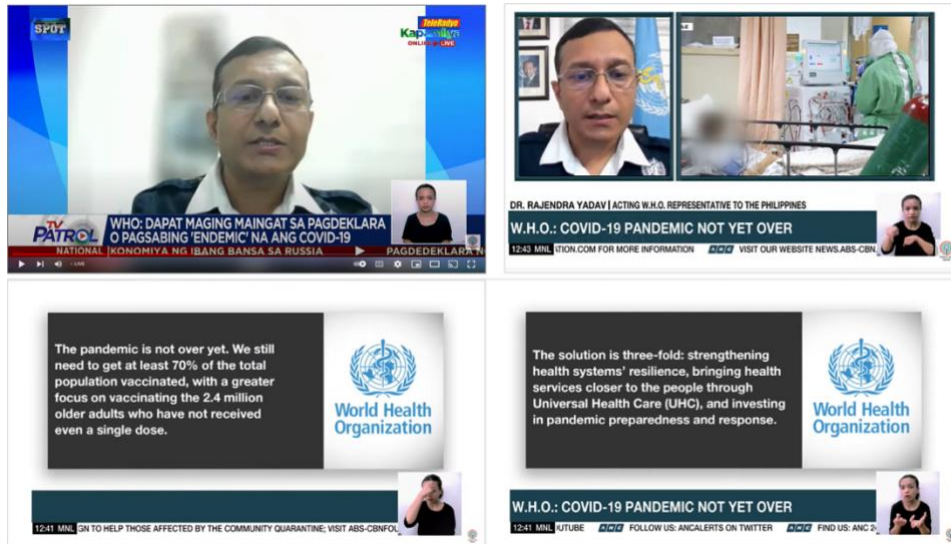


An op-ed by Dr Rajendra Yadav, Acting WHO Representative to the Philippines, and Dr Sangjun Moon, COVID-19 Incident Manager, "[Is the pandemic ending soon?](#)" was featured in [The Philippine Star](#) on 13 March 2022.





On 11 March 2022, Dr Rajendra Yadav was interviewed on [ABS-CBN Teleradyo](#) and [ANC Dateline Philippines](#) on WHO’s assessment of the Philippines’ COVID-19 situation and what needs to be done to manage COVID-19 in this phase of the pandemic. He was also quoted in the [news article](#) by ABS-CBN.



Operations Support Logistics

WCO analyzed the oxygen consumption and shortage reports for 28 February to 2 March and drafted parameters to be used in the oxygen capacity assessment and prioritization. WCO also prepared and finalized Transfer of Title (TOTs) for supplies dispatched to Caraga Center for Health Development (CHD) and Eastern Visayan CHD for Typhoon Odette Operations.

Partner Coordination

Updates from UNICEF

Support to the COVID-19 vaccination roll-out

COVID-19 Vaccine Delivery Support (CDS)

The Philippines is one of the recipients of COVID-19 Vaccine Delivery Support (CDS) funding from GAVI, which is managed by UNICEF. The CDS funding aims to address the government’s need for operational funding to support the rapid rollout and scale-up of COVID-19 vaccination. CDS has supported the ongoing priority activities of the Philippine Government that are crucial to the vaccination in 10 priority regions, namely IV-A, IV-B, V, VI, VII, VIII, IX, XI, XII and the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM). UNICEF worked with the Department of Health (DOH) and the World Health Organization (WHO) in planning and implementing the project. UNICEF also worked with implementing partners, Relief International and the Health Organization of Mindanao, in the implementation in the 10 priority regions.



The grant supported systems strengthening of the vaccination workforce through the recruitment of additional health workers and social mobilizers, and operational costs of the vaccine outreach with a focus on the urban poor and geographically isolated communities. Subsequently, this increased the number of mobile vaccination posts, bringing the vaccine services closer to the target population. The funds were also used to provide technical assistance to the National Vaccination Operations Center and field-level implementation in the 10 priority regions through monitoring and supervision activities.

Between September 2021 and February 2022, the CDS funds contributed to achieving the following program activities and inputs:

RESULTS	<ul style="list-style-type: none"> • 32.2 million individuals have been fully vaccinated in the priority groups – health workers, the elderly, people with co-morbidities, social workers and the remaining population of the nine supported regions, achieving 89.5% of the target.
	<ul style="list-style-type: none"> • Hiring of 700 additional vaccinators and 1,756 volunteers, conduct of 12,812 vaccination outreach sessions, provision of mobilization funds to 1,788 vaccination teams, and 448 on-site monitoring and post-implementation meetings in the regions.
	<ul style="list-style-type: none"> • 415 health facilities were provided support on cold chain logistics and vaccine management.
	<ul style="list-style-type: none"> • In BARMM, 184,061 of the 225,000 priority population (82%) have been fully vaccinated in the provinces of Basilan, Sulu, Tawi-Tawi, Maguindanao and Lanao del Sur, and the cities of Lamitan and Marawi.
	<ul style="list-style-type: none"> • Supported DOH regional health offices and provincial health teams in monitoring activities.

Improved access and increased vaccination coverage. Additional vaccination teams were deployed in geographically isolated areas, urban poor communities, areas with security risks and communities with indigenous people. Outreaches including the hiring of vehicles and boats were supported especially in areas that are perennially unreachable even with routine vaccination services.

Improved vaccination reporting. The deployment of volunteer data managers/encoders addressed issues on data management, especially coverage reporting. As a result, backlogs on reporting and transmittal of data to the central command system were lessened. The timeliness of reporting has contributed to immediate actions and recalibration of strategies when needed.



A team from Center for Health Development (CHD) Region IV-A conducts monitoring activities to ensure the quality delivery of vaccination activities in Antipolo, Rizal. © Relief International/2022/Z. Alano



National COVID-19 Wall-to-Wall Inventory

The Department of Health's Supply Chain Management Service Office along with the WHO, UNICEF, the Office of the Presidential Adviser on the Peace Process (OPAPP) and the National Vaccine Operation Center (NVOC) commenced the National COVID-19 Wall-to-Wall (W2W) Count in February 2022. The W2W Count aims to (1) ensure integrity of the COVID-19 vaccines, ancillaries, vaccine refrigerators, transport boxes and vaccine carriers in all identified storage facilities nationwide; (2) reconcile the supply records and provide explanation on recorded variances at all administrative levels; (3) determine lessons learned from the activity that can be adopted; and (4) anticipate future logistical needs of the COVID-19 vaccination program.

The ongoing W2W count covers all cold and dry storage facilities for COVID-19 commodities nationwide, including third party storage facilities. The W2W Count also covers all government-procured, donated and privately purchased COVID-19 vaccines, ancillaries and cold chain equipment – at the regional, provincial and city/municipal levels. Along with the National W2W Team, the UNICEF consultants deployed in the different regions are providing technical assistance in the preparatory activities and actual count.

To date, **28 storage facilities** located in **4** regional health offices, **8** provincial health offices, **12** city health offices and **4** rural health units were provided support on the W2W Count. The National W2W Count is expected to be completed in all regions by the first week of April 2022.



Left: W2W Count at the Vaccine Room of the Provincial Health Office of La Union where Ultra-low Temperature Freezers (ULF) are located. The National W2W Team validates the actual count of an opened carton of Pfizer vaccines, Right: Representatives from DOH-Supply Chain Management Service (SCMS) and UNICEF act as inventory checkers during the W2W Count at the DOH-CHD Central Visayas where the regional walk-in cold room is located. © UNICEF/2022/M.L. Agripa

Cold Chain Equipment Procurement and Delivery

Due to the Philippine Government's expansion of COVID-19 vaccination coverage, it is critical to strengthen the existing cold chain capacity to increase storage for COVID-19 and routine vaccines in the country. Donors (Government of Japan, Australian DFAT, COVAX) through UNICEF have granted the Philippines cold chain equipment and material so help address gaps in the storage capacity at all levels of the country's health system.



These cold chain equipment and materials consist of vaccine ice-lined/solar refrigerators and freezers, walk-in cold rooms equipped with generators, ultra-low freezers, PPE for walk-in cold rooms (WIC) and walk-in freezer rooms (WIF), set of spare parts, and temperature monitoring devices. Priority recipients for solar refrigerators are rural health units and barangay health stations located in geographically isolated and disadvantaged communities.

To date, the following cold chain equipment/materials were already distributed or will be installed soon.

<p>38 Walk-in Cold Rooms</p>	<ul style="list-style-type: none"> Allocated to 14 DOH regional hubs/storage facilities, 22 provinces, and 2 cities; currently, 29 WIC units already arrived in the Philippines awaiting Customs release; 7 sites are ready for installation; additional sites will be ready for installation in the coming months of March (7 sites), April (10 sites) and May (9 sites)
<p>90 Ice-lined Refrigerators/Freezers</p>	<ul style="list-style-type: none"> 45 units of TCW 4000 ice-lined refrigerator and 45 units of TCW 3000 icepack freezers were installed and operational at recipient health facilities
<p>75 Solar Refrigerators/Freezers</p>	<ul style="list-style-type: none"> 37 units of TCW 3043 SDD were installed and operational; remaining 8 units will be completed in March 2022 (7 rural health units [RHUs] in Region II and 1 RHU in Region IV-A) 24 units of TCW 2034 already received by recipients; ongoing delivery of 6 units to Maguindanao (2 RHUs) and Tawi-Tawi (4 RHUs)
<p>4,200 Temperature monitoring devices</p>	<ul style="list-style-type: none"> 2,600 units were distributed and installed at regional, provincial, city and municipal storage facilities; additional 1,600 units will be distributed soon
<p>80 PPE for WIC/WIF</p>	<ul style="list-style-type: none"> 60 sets of PPE were distributed to recipients; 20 more sets to be distributed soon



UNICEF discussing the remaining works for the cold room counterpart with the provincial engineer and architect at the Provincial Health Office in Lanao del Sur. © UNICEF/2022/A. Taulani



Risk communication and community engagement (RCCE)

UNICEF, through its implementing partner Relief International, continues to support risk communication and community engagement for COVID-19 prevention and vaccination in select local governments in Regions VI (Iloilo and Guimaras), IV-A (Laguna and Quezon), and NCR (Paranaque and Navotas). Through the technical support, 14 local governments have continued to update their demand generation plans; 4,476 health workers and volunteers were trained on COVID-19 RCCE; 6,128 local officials, 2,367 local leaders, and 124 community-based groups have been engaged to support the COVID-19 campaign; and 5.4 million people, including eligible populations, were reached with COVID-19 messages through various channels. The technical support is now focused on reaching unvaccinated individuals through house-to-house vaccine promotion activities and facilitating continued dialogues with LGU partners to address practical barriers to COVID-19 vaccination and support pediatric vaccination.



UNICEF and Relief International support house-to-house profiling and vaccine promotion among eligible 5- to 11-year-olds. ©Relief International/2022



A social mobilizer from Relief International supports community-based approaches to reach the remaining unvaccinated individuals in Sariaya, Quezon. ©Relief International/2022



Relief International works closely with barangay health workers to conduct house-to-house masterlisting and vaccine promotion in Navotas City. ©Relief International/2022



The partnership of UNICEF and Relief International has also expanded to support 20 municipalities in Region IX (Zamboanga Peninsula). Apart from closely working with municipal health offices on promoting COVID-19 vaccination in hard-to-reach areas, UNICEF and Relief International have also started engaging other partners, such as the Boy Scouts of the Philippines, to strengthen vaccine promotion and community engagement activities.

UNICEF also continues to work with the Human Development and Empowerment Services Inc. (HDES) in supporting seven local government partners in Region IX on demand generation for COVID-19 vaccination and routine immunization. Through the support, 501 health workers and other frontline workers have been trained on effectively communicating COVID-19 vaccination, and 1,202 local officials and 2,010 local leaders have been engaged to support COVID-19 and routine vaccination. The support, which focuses on reaching vulnerable and marginalized individuals, has also reached 35,545 COVID-19 vaccine-eligible individuals and parents and caregivers of children under 2 years old with messages on COVID-19 and routine immunization through house-to-house health education sessions.



A social mobilizer from HDES leads the training of barangay health workers in Leon Postigo, Zamboanga del Norte on effectively communicating with communities on COVID-19. ©HDES/2022

Through its partnerships with Relief International and HDES, UNICEF has also been providing technical assistance to supported areas in NCR, Region IV-A, Region VI and Region IX in the conduct of the 4th National Vaccination Days.

UNICEF, together with the DOH-Health Promotion Bureau and the WHO, has started updating *Usapang Bakuna*, the communication guide for community health workers and other frontline workers on COVID-19 vaccination. The updated guide is based on the new local policies and guidelines on COVID-19 vaccination and includes key messages on new COVID-19 variants, new guidance on prioritization, booster shots and pediatric vaccination.

As part of World Obesity Day, UNICEF stated that children with unhealthy diets are prone to various diseases, including COVID-19. Read the articles here:

<https://businessmirror.com.ph/2022/03/06/27m-filipinos-are-overweight-obese/>

<https://businessmirror.com.ph/2022/03/04/doh-and-development-partners-call-for-a-whole-of-society-approach-to-reduce-obesity-in-the-philippines/>



Updates from USAID

USAID/Philippines Mission Director Ryan Washburn handed over PhP5M worth of COVID-19 supplies and equipment to the Cagayan de Oro City Government to bolster the current initiative to address the pandemic.

The assistance also covers the J.R Borja Hospital, a 100-bed capacity facility managed by the Cagayan de Oro City government. Its Women’s Reproductive Health Clinic, which USAID helped establish in 2013, pioneered the effort to improve access and provide comprehensive family planning counseling and services to couples, women, and adolescents.

The city hospital plays a vital role as a referral and training facility for family planning services of the city and the neighboring provinces of Northern Mindanao, Lanao del Sur, and Marawi City by being part of the Health Care Provider Network -- local health referral systems for the integrated, coordinated, and efficient provision of health care to specific covered populations.



USAID Mission Director Ryan Washburn turn-over the COVID-19 equipment and supplies to the J.R Borja General Hospital. Inset Cagayan de Oro Mayor Oscar Moreno, City Health Officer Dr. William Bernardo and J.R Borja Chief of Hospital Dr. Ramon Moreno. (Photo: Alexis Baldia/RTI)

Through the USAID’s Medicines, Technologies and Pharmaceutical Services (MTaPS), the Logistics Management Information System (eLMIS) has been partially configured including the requirements for the COVID-19 vaccines, being part of the overall health commodities. MTaPS together with technology company Bileeta organized a pre-user acceptance test (UAT) presentation with the DOH Procurement and Supply Management (PSCMT) to show the configured system, and to validate if all processes have been captured and incorporated in the system. As a next step, MTaPS will collate all feedback and comments gathered from the DOH business process owners, and Bileeta will do appropriate inclusion in the systems’ configuration. Thereafter, MTaPS will assess and plan the next step/s for training for UAT. Moving on to the next step/s will also be dependent on the people and infrastructure readiness from DOH, regions, and local government units. MTaPS is currently discussing with DOH and partners how to address the anticipated challenges. The eLMIS will be rolled out in a phased manner, initially to 171 sites consisting of central, regional and cities and municipalities. The phase 1 roll out will include COVID-19 vaccines, as part of the overall health commodities that will be managed by eLMIS for a more efficient handling and distribution of all health commodities across the country. This is also coordinated with the Department of Information and Communication Technology which implements the Vaccine Information Management System (VIMS).



A central warehouse visit with SCMS

USAID’s Meeting Targets and Maintaining Epidemic Control (EpiC) COVID-19 Project managed by FHI 360 procured and delivered additional ventilator consumables and supplies to its 46 priority hospitals that provide COVID-19 care and management.

In Metro Manila, USAID/EpiC visited three hospitals, namely Rizal Medical Center, Philippine Children’s Medical Center, and Lung Center of the Philippines to meet with the respective hospital management, supply office staff, and doctors and nurses in the pulmonology department and handed over oxygen regulators, adult and pediatric breathing circuits, and oxygen filters. These donated supplies are crucial to continuing COVID-19 response at the facility level.



Left: USAID/EpiC team delivering breathing circuits at the Lung Center of the Philippines, **Right:** USAID/EpiC team delivering breathing circuits at the Rizal Medical Center