

Philippines: After a year of lockdown: Government mishandles pandemic response

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MANILA - For weeks now, the Philippines is experiencing a surge in the number of daily COVID-19 cases. The government, however, is responding to the pandemic as if it were only yesterday - still clueless, still grappling, still militarist.

Since the pandemic broke last year, the likes of Josh San Pedro, a community health advocate and co-convenor of the Coalition of People's Right to Health, has long been calling on the Philippine government to abandon its militarist approach and implement the guidelines set by health experts, including the World Health Organization (WHO), on mass testing, isolation, and proper treatment to finally break the local transmission of the deadly virus.

But a year on, San Pedro said that none of these have been consistently implemented, finding government policies on the pandemic confusing and even conflicting.

"Is there public perception that we can fight COVID? Or are people still not believing that there is COVID? That is the best barometer on how the Philippine government fared on its response. Do the people know they need to be tested? Are they empowered?" the community doctor said.

Mass testing is still needed

San Pedro stressed the need for mass testing, even now that public discourse often centers on vaccines. As it stands, the country has a capacity of between 30,000 to 40,000 tests daily, though this significantly decreased during the Christmas season. Still, the daily testing capacity remains way behind the government's daily target of 50,000 last year.

With at least two variants in the Philippines now, which health experts said are more transmissible, mass testing and surveillance of its local mutations should be real-time. As of now, the government solely relies on the Philippine Genome Center, a research facility in the University of the Philippines, which can provide results in a week's time.

[IBON Foundation also noted that budgets for the National Reference Laboratories \(NRL\) and Health Information Technology \(HIT\) had been cut.](#) In the 2021 budget, the NRL and HIT decreased from \$6.7 million to \$6 million, and \$24.8 million to \$2 million, respectively. These are public health agencies vital in detecting, testing, databasing and reporting coronavirus cases and other emerging diseases.

Testing remains to be out of reach for many Filipinos, with at least 38 provinces still without testing centers. Most of the testing centers are in Metro Manila and in other big cities.

Contact tracing, isolation

While much of the blame has been put on the “pasaway” narrative, the government has admitted that contact tracing remains the weakest point in the pandemic response. The country has yet to automate contact tracing, with a surveillance app not yet in place amid privacy issues.

WHO said last month that digital tools for contact tracing can only be effective when “integrated into an existing public health system that includes health services personnel, testing services, and manual contact tracing infrastructure.”

San Pedro, however, said that the Philippines can only identify an average of 1:7 contacts per COVID-19 patient, far from its 1:30-35 target. As it stands, contact tracing is left in the hands of the local government, particularly among village health workers, leaving the country with 1 contact tracer per 800,000 population.

It does not help that the government budget for disease surveillance has been further decreased, he added.

Under the Duterte administration, the budget of the Epidemiology and Disaster Surveillance program of the health department has been decreased from \$5.4 million in 2019 to \$2.4 million in 2020. The budget was further decreased this year and will only receive \$2.3 million.

Isolating positive patients also proved to be challenging, with the government going back and forth on its policy on home quarantine.

“Many are afraid. A 14-day quarantine, for workers, meant no pay nor livelihood. The government should also focus on making it an enabling environment and to provide paid quarantine leaves as in other countries,” San Pedro said.

Vaccine brouhaha

The Philippines is still very much behind in both the number of doses of vaccines inoculated, and the percentage of population vaccinated, based on data from the Johns Hopkins University’s Coronavirus Resource Center.

So far, the vaccines that Filipino health workers are receiving are donations of Sinovac from China and Aztrazeneca from the WHO’s Covax facility. There is still no roll out of vaccines among the vulnerable, the economic frontliners, and indigent communities amid the increasing number of daily positive cases.

Clear prioritization of who will receive the vaccines first and the logistical needs should be also be prepared. Enough health workers should be deployed.

San Pedro, however, said that the people should not put all of their hopes on a vaccine. This, he added, will not put an end to the pandemic. He said that it all boils down to the government’s will to implement sound policies.

With the same approach that is being implemented now, he sees a rather gloomy scenario in the coming months. The only silver lining for him is that this remains an opportunity for the people to fight for a better normal.

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