



# **COVID-19 Citizen Entitlements Map 2.0**

**What citizens are entitled to in the government's vaccination program**

G-Watch Philippines  
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## Table of Contents

|  |                   |
|--|-------------------|
| List of Acronyms .....   | <a href="#">3</a> |
| Introduction .....   | <a href="#">4</a> |
| I. Access to Information .....   | <a href="#">5</a> |
| II. Be Registered in the Masterlist of Vaccinees .....                                   | <a href="#">5</a> |
| III. For All Staff of the Vaccination Program .....                                      | <a href="#">5</a> |
| IV. Vaccine Prioritization .....   | <a href="#">6</a> |
| <i>For those belonging to priority group A1</i> .....                                    | <a href="#">6</a> |
| <i>For those belonging to groups with special precautions indicated in the EUA</i> ..... | <a href="#">6</a> |
| V. On the Day of Vaccination .....   | <a href="#">6</a> |
| <i>If an eligible recipient arrives as a walk-in</i> .....                               | <a href="#">7</a> |
| <i>Health Education</i> .....  | <a href="#">7</a> |
| <i>Pre-vaccination</i> .....   | <a href="#">7</a> |
| <i>During vaccination</i> .....  | <a href="#">7</a> |
| <i>Post-vaccination</i> .....  | <a href="#">7</a> |
| VI. In Getting the Second Dose of the Vaccine.....                                       | <a href="#">8</a> |
| VII. In Case of Adverse Effects .....  | <a href="#">8</a> |
| VIII. In case of Deaths .....  | <a href="#">8</a> |
| Annex 1: Vaccine Deployment .....  | <a href="#">9</a> |

## List of Acronyms

|          |  |
|----------|--|
| AEFI     | Adverse Events Following Immunization                                      |
| AFP      | Armed Forces of the Philippines  |
| BFP      | Bureau of Fire Protection  |
| BHERT    | Barangay Health Emergency Response Teams                                   |
| BJMP     | Bureau of Jail Management and Penology                                     |
| BuCor    | Bureau of Corrections  |
| CHD      | Center for Health Development  |
| CHO      | City Health Office   |
| CSC      | Civil Service Commission   |
| DepEd    | Department of Education  |
| DILG     | Department of the Interior and Local Government                            |
| DOH      | Department of Health   |
| DOLE     | Department of Labor and Employment   |
| DSWD     | Department of Social Welfare and Development                               |
| DTI      | Department of Trade and Industry   |
| ECQ      | Enhanced Community Quarantine  |
| EMA      | European Medicines Agency  |
| EUA      | Emergency Use Authorization  |
| FDA      | Food and Drug Administration   |
| GFI      | Government Financial Institutions  |
| GOCC     | Government-owned and Controlled Corporation                                |
| IATF-EID | Inter-Agency Task Force for the Management of Emerging Infectious Diseases |
| IEC      | Information, Education and Communication (materials)                       |
| LGU      | Local Government Unit  |
| NCDA     | National Council for Disability Affairs                                    |
| NCIP     | National Commission on Indigenous Peoples                                  |
| NITAG    | National Immunization Technical Advisory Group                             |
| PCG      | Philippine Coast Guard   |
| PCOO     | Presidential Communications Operations Office                              |
| PDL      | Persons Deprived of Liberty  |
| PDOHO    | Provincial DOH Office  |
| PHO      | Provincial Health Office   |
| PNP      | Philippine National Police   |
| PWD      | Persons With Disability  |
| RHU      | Rural Health Unit  |
| TRC      | Treatment Rehabilitation Centers   |
| TTMF     | Temporary Treatment and Monitoring Facilities                              |
| VIS      | Vaccine Information Statements   |
| VOC      | Vaccination Operation Center   |
| WHO      | World Health Organization  |

## Introduction

Defined as the binding obligation of the government to provide certain benefits to specific recipients who have met all legally established criteria, citizen entitlements are cornerstones of democratic governance. Governments have the mandate and responsibility to provide citizens their entitlements and rights. The duty of the government to deliver entitlements becomes even more necessary during periods of crisis, which worsens the condition of the poor and the vulnerable.

Corollary, it is crucial in periods of disaster – when the demand is highest at a quicker pace and there is a heavier toll in governance – that citizens know their rights and entitlements. Not only that this equips them in claim-making, it also enables them to more proactively demand for a responsive and accountable disaster governance.

It is in this light that Government Watch (G-Watch) has initiated the COVID-19 Citizen Entitlement Monitoring (C-CEM) at the onset of the pandemic. The anchor of the C-CEM initiative is a Citizen Entitlement Map released in April 2020.<sup>1</sup> The first Citizen Entitlement Map listed what citizens are entitled to from different levels of the government: the barangays, municipality/ city and regional/ national governments. We specified entitlements that are specific to certain sectors, such as farmers, fisherfolks, senior citizens, etc. Several other tools spawned from the CE Map focusing on health and social amelioration program monitoring that has been the priority agenda of G-Watch in COVID-19 response.<sup>2</sup>

As the government's COVID-19 response hits its second year, the focus has geared towards vaccination efforts. In its nationwide awareness-raising campaign, G-Watch asserts that it is the right of every citizen to receive safe and effective vaccines. G-Watch calls for vaccine accountability to ensure the efficient and responsive implementation of the government's vaccination program.<sup>3</sup> This is particularly crucial given the myriad of corruption allegations hounding the government's vaccine procurement and the huge amount of loans being poured into it.

Reviewing the current and new policies and guidelines that governs the government's COVID-19 vaccination, the main document being the Department of Health's (DoH) National Deployment and Vaccination Plan for COVID-19 Vaccines,<sup>4</sup> G-Watch has once again mapped the entitlements of citizens under the government's vaccination program.

Our COVID-19 Citizen Entitlement Map 2.0 (C-CEM 2.0) lists the key citizen entitlements in the vaccination program of the government and the responsible agencies for each entitlement. A space is also provided for those who intend to use the map as a tool. Further details on who are the priority vaccine recipients have been provided too.

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<sup>1</sup> See <https://www.g-watch.org/news-release/guide-citizen-entitlements-during-covid-19-crisis>

<sup>2</sup> See <https://www.g-watch.org/resources/vertical-integration-research/g-watch-independent-validation-social-amelioration-program>; <https://www.g-watch.org/resources/governance-reform-studies/g-watch-report-citizen-entitlements-under-covid-19-social>; <https://www.g-watch.org/think-piece/citizen-health-entitlements-covid-19-pandemic>

<sup>3</sup> See <https://www.g-watch.org/resources/vertical-integration-research/citizens-demanding-vaccine-accountability-highlights-g-watch>

<sup>4</sup> Access a copy here [https://drive.google.com/file/d/17Grijb66bXLsGlo-hrMw45TBpJT1BQPE\\_/view?usp=sharing](https://drive.google.com/file/d/17Grijb66bXLsGlo-hrMw45TBpJT1BQPE_/view?usp=sharing)

## Citizen Entitlements in Philippine COVID-19 Vaccination

| Citizen Entitlements   | Responsible Agency/ies | Monitoring Tool |    |       |
|--|------------------------|-----------------|----|-------|
|  |                        | YES             | NO | Notes |
| <b>I. Access to information</b>  |                        |                 |    |       |
| 1. Receive accurate, clear, concise, and up-to-date information about each vaccine products, and the vaccination program in a manner that is comprehensible to the person about the nature, purpose, benefits and risks of vaccination   | PCOO / DOH / LGU       |                 |    |       |
| 2. Receive information (online and on vaccination sites) that is written in plain language, including all major dialects and English   | PCOO / DOH / LGU       |                 |    |       |
| 3. Receive the following information (through IEC materials, including posters, social media releases, patient information leaflets) about the COVID-19 Vaccine  | PCOO / DOH / LGU       |                 |    |       |
| 3.1 Approval process related to the vaccine's market authorization, including testing and limitations of testing   |                        |                 |    |       |
| 3.2 Licensing  |                        |                 |    |       |
| 3.3 Any new component or technology that has not been licensed or used previously  |                        |                 |    |       |
| 3.4 Post-marketing analysis by the relevant regulatory agencies  |                        |                 |    |       |
| 3.5 Potential and known side effects and adverse reactions including that described in the regulated package leaflet (issued by EMA)   |                        |                 |    |       |
| 3.6 How and where to report side effects –a phone number will be included  |                        |                 |    |       |
| 3.7 How to alleviate possible symptoms arising   |                        |                 |    |       |
| <b>II. Be registered in the masterlist of vaccinees</b>  |                        |                 |    |       |
| 4. Participate in the masterlisting by LGU (through online or offline means, depending on the LGU)   | LGU                    |                 |    |       |
| 5. Be assigned in the appropriate priority group ( <i>see annex 1 for detailed description for each group</i> )  | LGU                    |                 |    |       |
| A1: Frontline workers in health facilities both national and local, private and public, health professionals and non-professionals like students, nursing aides, janitors, barangay health workers, etc.<br>A2: Senior citizens aged 60 years old and above<br>A3: Persons with comorbidities not otherwise included in the preceding categories<br>A4: Frontline personnel in essential sectors including uniformed personnel and those in working sectors identified by the IATF-EID as essential during ECQ<br>A5: Indigent population not otherwise included in the preceding categories<br>B1: Teachers, Social Workers |                        |                 |    |       |

|  |   |  |  |  |
|--|---|--|--|--|
| B2: Other Government Workers<br>B3: Other essential workers<br>B4: Socio-demographic groups at significantly higher risk other than senior citizens and indigenous people<br>B5: Overseas Filipino Workers<br>B6: Other Remaining Workforce<br>C: Rest of the Filipino population not otherwise included in the above groups                                     |   |  |  |  |
| 6. Receive a vaccination date and time schedule, and an immunization card with a QR code prior to the vaccination  | LGU   |  |  |  |
| <b>III. For all staff of the vaccination program</b>   |   |  |  |  |
| 7. Receive training (online and/or in person, if needed) relevant to their role in the team and service  | DOH in coordination with local health offices |  |  |  |
| 8. Receive training kit/package containing different presentation slide decks, instructional job aids, training materials & updates about the program shall be provided  |   |  |  |  |
| 9. Receive post-training supporting supervision or coaching/mentoring sessions from DOH Core Trainers  |   |  |  |  |
| <b>IV. Vaccine Prioritization</b>  |   |  |  |  |
| 10. All frontline healthcare workers will be vaccinated first before proceeding to the next priority group   | DOH / LGU                                     |  |  |  |
| 11. Prioritization for workers in health facilities shall be according to:<br>- selected health facilities, public or private, such as COVID-19-designated hospitals<br>- those with relatively higher number of admissions past two months<br>- all LGU hospitals; and<br>- risk-based categories for healthcare workers that may be determined.                |   |  |  |  |
| <i>For those belonging to priority group A1:</i><br><br>11. Have the autonomy to decide to be vaccinated with the SINOVAC vaccine and to exercise informed choice. Such offering of the opportunity for vaccination with SINOVAC is without prejudice to their immediate eligibility to receive the other vaccine brands which may be available at a later date. |   |  |  |  |
| <i>For those belonging to groups with special precautions indicated in the EUA:</i><br><br>12. Have the right to accept, choose, and refuse vaccines without prejudice to their immediate eligibility for the next available vaccine   |   |  |  |  |
| <b>V. On the day of vaccination</b>  |   |  |  |  |
| 13. Vaccinees may be provided transportation to the  | LGU   |  |  |  |

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| vaccination post/site, if needed  |  |  |  |
| 14. Vaccinees may be fetched from assigned pick-up points through previously arranged transport mechanisms  |  |  |  |
| <i>If an eligible recipient arrives as a walk-in:</i>   |  |  |  |
| 15. Be scheduled and provided with an immunization card with a QR code immediately, and advised accordingly since no walk-ins are allowed to be administered vaccine  |  |  |  |
| <i>Health Education</i>   |  |  |  |
| 16. Receive a specific checklist for each type of vaccine at the vaccination area   |  |  |  |
| 17. Receive information about the COVID-19 Vaccine - what it is, how it protects, administration, and possible side effects   |  |  |  |
| 18. Receive educational materials (pamphlets with FAQs) at suitable reading levels to the vaccinee and available in vaccinee's local language   |  |  |  |
| 19. Receive instructions on post-vaccination care   |  |  |  |
| 20. Have the opportunity to ask questions and to discuss any fears that they may have around vaccination  |  |  |  |
| 21. Receive Vaccine Information Statements (VIS) or Emergency Use Authorization (EUA) forms, if required  |  |  |  |
| 22. Receive a copy of their signed informed consent   |  |  |  |
| <i>Pre-vaccination</i>  |  |  |  |
| 23. Be able to undergo screening (history taking, physical examination) before vaccine administration   |  |  |  |
| <i>During vaccination</i>   |  |  |  |
| 24. Administered vaccine that is issued EUA by the FDA  |  |  |  |
| <i>Post-vaccination</i>   |  |  |  |
| 25. Have vital signs monitored every 15 minutes for 30 minutes to one hour post-vaccination   |  |  |  |
| 26. Receive information on possible adverse reactions during the observation period, as well as information on existing procedures and protocols in identifying and reporting AEFIs, especially serious cases |  |  |  |
| 27. Be able to report signs and symptoms of adverse reactions to the vaccine by:  |  |  |  |
| a) calling the VOC Call Center  |  |  |  |
| b) filing a report to FDA through the pharmacovigilance system or directly to the vaccine manufacturer  |  |  |  |
| c) reporting online (a system, similar to the of COVIDKaya, shall be set up)  |  |  |  |
| 28. Receive routine follow-up from the Surveillance Officer   |  |  |  |
| 29. Following vaccination, the Surveillance Officer shall follow-up the vaccinee, and rematch him/her with his/her pre-existing conditions  |  |  |  |
|   |  |  |  |

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| <b>VI. In getting the 2<sup>nd</sup> dose of the vaccine</b>   |           |  |  |  |
| 30. Receive schedule for 2 <sup>nd</sup> dose  | LGU       |  |  |  |
| 31. Have a choice to receive the 2nd dose from another facility provided that the 2nd dose is the same brand as the 1st dose   |           |  |  |  |
| <b>VII. In case of adverse effects</b>   |           |  |  |  |
| 32. Receive the appropriate healthcare and financial support to vaccine recipients who experience Adverse Events Following Immunization (AEFI).  | DOH / LGU |  |  |  |
| 33. Assisted by, and receive first-aid/medical attention from the AEFI composite team in the vaccination site  |           |  |  |  |
| 34. Be referred to a hospital/health facility, if needed   |           |  |  |  |
| 35. LGU shall shoulder the transportation expenses of the AEFI cases requiring transfer to higher health facility  |           |  |  |  |
| 36. LGU shall be responsible for the expenses covered during management and treatment of AEFI cases in primary and secondary health care facilities under their management   |           |  |  |  |
| 37. In case of emergency, suspected AEFI cases attended in non-government health facilities shall first be stabilized and then transferred to the nearest appropriate government health facility with capability of managing AEFI cases.   |           |  |  |  |
| 38. AEFI cases managed and treated in DOH Hospitals shall be free of charge  |           |  |  |  |
| 39. For case management, costing estimates were calculated for minor and serious AEFI cases with the projections for minor AEFI at 2% and serious at 0.16 per 100,000 doses (based on the National serious AEFI rates as per WHO and DOH assessment in 2013). Scenario-based analyses were calculated based on the % population of vaccinees at 20%, 60%, and 70%. |           |  |  |  |
| <b>VIII. In case of deaths</b>   |           |  |  |  |
| 40. Have cause of death investigated   | DOH       |  |  |  |

**Sources:**

The Philippine National Deployment and Vaccination Plan for COVID-19 Vaccines (Interim Plan)  
<https://doh.gov.ph/sites/default/files/basic-page/The%20Philippine%20National%20COVID-19%20Vaccination%20Deployment%20Plan.pdf>

NITAG Resolution 2, Series of 2021. <https://doh.gov.ph/sites/default/files/health-update/NITAG-RESO2.pdf>  
 NITAG Resolution 5, Series of 2021. [https://pcoo.gov.ph/wp-content/uploads/2021/03/NITAG-COVID-19-Vaccines\\_Resolution-No.-5.pdf](https://pcoo.gov.ph/wp-content/uploads/2021/03/NITAG-COVID-19-Vaccines_Resolution-No.-5.pdf)

*On AEFI Surveillance*

DOH Admin Order 2016-0025 - <https://dmas.doh.gov.ph:8083/Rest/GetFile?id=337095>  
 DOH Admin Order 2016-0006 - <https://dmas.doh.gov.ph:8083/Rest/GetFile?id=337073>



## Annex 1: Vaccine Deployment

### Determining Vaccine Recipients

| Priorities   | Population Group   | Definition of Terms  |
|--|--|--|
| <p>Priority Eligible Group A - <i>Persons with co-morbidities are being taken into consideration as part of Priority Eligible Group A depending on the latest development and scientific evidence. This is being discussed by the NITAG.</i></p> |  |  |
| 1  | Frontline Health Workers   | All health-workers from the PRIVATE and PUBLIC sector currently on ACTIVE practice/service, whether they are permanent, contractual, job-order and/or outsourced employees or staff:   |
|  | a. Public and private health facilities [hospitals, medical centers, laboratories, infirmaries, Treatment Rehabilitation Centers (TRCs) and Temporary Treatment and Monitoring Facilities (TTMFs)] | <ul style="list-style-type: none"> <li>● All those are working in medical centers, hospitals, clinics, laboratories, Treatment Rehabilitation Centers (TRCs) and Temporary Treatment and Monitoring Facilities (TTMFs). If the vaccine supply is limited, priority shall be given to hospitals and medical centers directly catering to COVID-19 patients, including suspects, probable and confirmed COVID-19 cases.</li> <li>● Specifically, all those who are assigned in the triage areas, out-patient departments, emergency rooms, wards, intensive care units, operating rooms, delivery rooms, laboratory, radiologic and pathology areas, rehabilitation units, among others.</li> <li>● Medical and allied health students who are serving as clerks or interns in hospitals</li> <li>● Those who are assigned as part of the disinfection or decontamination teams, medical social workers, admin personnel, and security guards of the above-mentioned facilities.</li> </ul>  |
|  | b. Public health workers (all RHU/CHO personnel, PHO, PDOHO, CHD, and CO) and LGU contact tracers  | <p>All workers in the public health sector:</p> <ul style="list-style-type: none"> <li>● ALL employees in the public primary care facilities (Rural Health Units, City Health Offices whether LGU-hired or DOH-hired/deployed)</li> <li>● ALL health workers employed/deployed/detailed in Provincial Health Offices, Center for Health Development and DOH Central Offices, including FDA and Bureau of Quarantine</li> <li>● ALL health workers employed/deployed/detailed in DOH-attached agencies such as PhilHealth, Philippine National AIDS Council, Philippine Institute of Traditional Alternative Health Care, Dangerous Drugs Board, and National Nutrition Council.</li> <li>● LGU-deployed/designated/hired contact tracers [those with appropriate documents stating deployment/designation of government employees as contact tracers either through an Executive Order, resolution and/or ordinance]</li> <li>● <b>Note:</b> If the vaccine supply is limited, among workers in public health, priority shall be given to those who are</li> </ul> |

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|  |  | providing direct health services.  |
|  | c. Barangay Health Workers including Barangay Health Emergency Response Teams (BHERTs) | <ul style="list-style-type: none"> <li>● ALL Barangay Health Workers in active service</li> <li>● ALL active members of BHERTs (based on appropriate documents stating designation either through an LGU EO, resolution and/or ordinance)</li> </ul>   |
|  | d. Other NGAs (DSWD, DepEd, DILG, BJMP and Bureau of Corrections)                      | <ul style="list-style-type: none"> <li>● DSWD, and its regional and local counterparts <ul style="list-style-type: none"> <li>- All employees manning close-setting facilities and long-term care facilities, e.g., orphanage, home for the aged, women's crisis centers.</li> <li>- Social workers providing social amelioration, and social services in the communities</li> </ul> </li> <li>● DepEd - health and nutrition personnel</li> <li>● DILG - those hired by DILG as contact tracers (active service)</li> <li>● BJMP (under DILG) - All employees and health workers assigned in direct contact with Persons Deprived of Liberty (PDLs) such as jail officers, wardens, and/or guards</li> <li>● BuCor (under DOJ) - All employees and health workers assigned in direct contact with Persons Deprived of Liberty (PDLs) such as jail officers, wardens, and/or guards</li> </ul> |
| 2  | Indigent Senior Citizens   | ALL indigent senior citizens registered and as determined by DSWD  |
| 3  | Remaining Senior Citizens  | ALL senior citizens (not categorized as indigent) registered and as determined by DSWD   |
| 4  | Remaining Indigent Population  | ALL indigent population as determined by DSWD  |
| 5  | Uniformed Personnel  | All enlisted uniformed personnel in active services under the AFP, PNP, PCG, BFP, Citizen Armed Force Geographical Unit, BuCor (remaining personnel), BJMP (remaining personnel)   |
| <i>Priority Eligible Group B - may change as these categories will still undergo review of the NITAG and final approval of the COVID-19 Vaccine Cluster and the IATF-EID</i> |  |  |
| 6  | Teachers and school workers  | ALL teachers and school workers, whether permanent, job-order, contractual, or out-sourced in all educational levels, from primary, secondary, tertiary, and vocational educational institutions, both private and public  |
| 7  | All government workers (national and local government)                                 | ALL government workers, whether permanent, job-order, contractual, or out-sourced, in national government agencies, GOCCs, government financial institutions (GFIs), local government units, among others.   |
| 8  | Essential workers  | <ul style="list-style-type: none"> <li>● All workers providing basic services during this time of pandemic and essential to the growth of the economy as determined by DTI and DOLE</li> <li>● These workers may come from the following sectors: agriculture, forestry and fisheries; transportation; construction; food industries; manufacturing of essential goods; tourism; essential retail; water-refilling stations; laundry services; logistics service providers; delivery and courier services; water supply and sanitation services; telecommunication services; energy and power companies; gasoline stations, among others</li> </ul>  |
| 9  | Socio-demographic groups at significant higher risk other than                         | <ul style="list-style-type: none"> <li>● All PDLs as determined by BJMP and BuCor</li> <li>● All PWDs as determined by DSWD and National Council</li> </ul>  |

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|  | <p>senior citizens and indigent populations [e.g. Persons Deprived of Liberty (PDLs), Persons with Disabilities (PWDs), Indigenous Peoples, Filipinos living in high-density areas)</p> <p>Eligible students</p> | <p>for Disability Affairs (NCDA) and LGUs</p> <ul style="list-style-type: none"> <li>● All IPs as determined by the NCIP, This may include: the Lumads of Mindanao, the Peoples of the Cordillera, and scattered tribal peoples of the hinterlands of Central and Southern Luzon, Visayas, Mindoro, and Palawan</li> <li>● All Filipinos living in high density areas as determined by LGUs (as documented in the LGU's Comprehensive Land Use Plan) such as in slumps and temporary shelters, among others; including those who are homeless and living in temporary shelters and homes</li> <li>● All students in primary, secondary, and tertiary, and vocational educational institutions. However, vaccination of students below 18 y.o. will depend on the recommendations of WHO and NITAG, with the concurrence of the COVID-19 Vaccine Cluster.</li> </ul> |
| 10   | Overseas Filipino Workers  | Filipino migrant workers who reside in another country for a limited period of employment that were not yet vaccinated  |
| 11   | Other remaining workforce  | All remaining Filipino workforce as determined by the DOLE, DTI, and CSC  |
| <i>Priority Eligible Group C - may change as these categories will still undergo review of the NITAG and final approval of the COVID-19 Vaccine Cluster and the IATF-EID</i> |  |   |
| 12   | Remaining Filipino Citizens  | All Filipino Citizens that were not mentioned in priority A and B   |