

## E2 Maria Carinnes Alejandria

I have never seen Anna that upset about something that I have said in six years of working together in an urban poor area in Manila. We have always been partners in establishing health and education projects for the most vulnerable members of their community.

I remember the first project that we partnered with. It was about building water wells that could help in maintaining a source in their area that has chronic water supply issues. From that first engagement, we had multiple health intervention projects. That is why it came as a surprise when she categorically said no when I asked her to help me convince members of the community to be vaccinated against COVID 19.

In June 2021, mobility restrictions in the country were at an all time high. It has been a year since the country was placed in a strict lockdown. Police forces were dispatched to monitor the borders of every village. Violators of the quarantine and curfew policies were either fined or jailed. I have been meaning to visit her and the community, but I was also confined in my own side of the city, which is a total opposite of the flooded, trash filled congregated village where physical distancing, washing of hands and other minimum health protocols seem to be such an outlandish requirement from the government.

That community that is mostly consisted of ambulant vendors and informal workers was hard hit by the government policies on mobility because their livelihood activities, which were dependent on their capacity to move around in the city, were drastically reduced to zero.

Food insecurity worsened as even non-government organizations like mine precluded from entering the area. The main context that could solve the mobility crisis was vaccination. So I called Anna when their category was already qualified to get the vaccine so that she could start informing the other community members the details of registering for it.

I thought we were on the same page of understanding why it was necessary for them to be vaccinated. Actually, for everyone to be vaccinated. But I was surprised to hear her

say, 'we won't be getting the vaccine, not until we see others get it first'. I asked her for the reason behind our decision and what she said after was ripe with a history of disposability as a marginalized member of the society. One word and I knew that the challenge to get the vaccinated just got harder. One word that has been haunting the country's vaccination program: Dengvaxia. Perhaps one of the most controversial medical issues that has hit the Philippines. Bringing the discussion to the level of Senate investigations was the supposed death of children who receive dengvaxia to combat dengue, which is an endemic vector borne disease that affected 51 people just in 2021.

Although Dengvaxia secured approval for usage in other countries like the US and parts of Europe, its administration in the Philippines was revoked despite not yet having conclusive evidence that could link the alleged deaths. Far worse is the public response to this issue, which is characterized by vaccine hesitancy for nearly all vaccination programs of the government.

I understood where Anna and the members of the community were coming from. Her most poignant statement to me was the government might experiment on us again with this new COVID vaccine, as they did with us in the Vaxia. It was clear this information was threatening my community partners.

Knowing that health interventions must be culturally relevant, that people will be more receptive to facts on health if you align it with their cultural views, I discussed with Anna on their aspirations for wellbeing during this pandemic. It's centered on food security that is dependent on their mobility, which is being restricted by having an unvaccinated status. She also mentioned the fear of bringing home to their children the disease. After having far more discussion on this, apparently this were enough to convince her and much later on some members of the community to get vaccinated despite the hesitancy, drawing from their experiences with government programs. Although some still opted to wait it out to see if adverse effects are as manageable as promised.