

# Destination Guide for Philippines



## Overview

### Destination Guide Content

## Destination Risk Levels

- + Medium Medical Risk for Philippines
- 🛡️ Medium Travel Risk for Philippines
- 🛡️ High Travel Risk for **South-west Mindanao, the Sulu Archipelago (Basilan, Sulu, Tawi-Tawi)**

**Sulu archipelago (Basilan, Sulu, Tawi-Tawi (BASULTA)): HIGH**

**South-western Mindanao (Lanao del Sur, Maguindanao (both BARMM), Lanao del Norte (except Iligan City), Cotabato, Sultan Kudarat, South Cotabato (except General Santos City), Sarangani and Davao Occidental provinces, as well as the Zamboanga peninsula): HIGH**

In rural areas of southern and western Mindanao, where Islamist militants – including the Abu Sayyaf Group and the Bangsamoro Islamic Freedom Fighters – are active, there is a high risk of opportunistic kidnapping and banditry. While travel to most areas of Mindanao remains possible, people should seek itinerary- and profile-specific advice before undertaking journeys to the island. Essential travel to south-western Mindanao – except for MEDIUM-risk General Santos (South Cotabato province) and Iligan (Lanao del Norte province) cities - should only be conducted in conjunction with local security support. People are also advised to avoid ostentatious displays of wealth, vary routines and choose a modest model of vehicle. Travel to Basilan and the Sulu archipelago should be avoided.

## Standing Travel Advice

- Travel to the Philippines can continue.
- Crimes pose a significant risk to workforce. Always exercise heightened caution and appropriate security measures in all areas. Accommodation and transport decisions should be made with

attention to the risks posed by crime.

- Confidence tricksters may target foreign nationals. Be wary of strangers and their motives, and do not accept food or drink from unidentified or recently met persons unless accompanied by a trusted local host.
- Opportunistic and narrowly targeted kidnap-for-ransom remains a threat. Although most victims are local nationals, foreign nationals are at risk due to their perceived wealth. Avoid ostentatious displays of wealth, be aware that kidnappers may pose as police officers or other persons of authority, and be particularly vigilant at roadblocks and during spot-checks. International assignees are advised to vary routines, choose a modest model of vehicle, and maintain vigilance for signs of surveillance.
- Criminals are commonly armed; if targeted, do not do anything to resist or antagonise your assailant.
- There is a credible, albeit mostly latent, risk of attack by either domestic or transnational terrorists. Government personnel and buildings, military personnel and facilities, public transport, houses of worship, and crowded shopping and entertainment venues are likely targets. Be alert to suspicious behaviour and report any suspect packages to the authorities.
- Avoid demonstrations and rallies as a general precaution. Clashes with the security forces, though uncommon, can quickly become extremely dangerous. Vacate the area immediately if a large crowd or concentration of the security forces begins to develop.
- Travel by bus, jeepney, ferry and rail is not suitable for business travellers. Use only a private vehicle and driver or taxis arranged through your hotel or local host. If attending meetings away from your hotel, pre-book return transport.
- Factor in the performance record of domestic airlines and consult travel agents regarding their suitability when making travel plans.
- The above advice is not exhaustive; seek itinerary-specific advice prior to travel in the Philippines.

#### *South-west Mindanao*

- Travel to south-western parts of the Mindanao island, including Marawi (BARMM), should be for essential purposes only. If journeys are essential, use a trusted local provider or host. This will assist in smoothing passage through heavy security and any potential road closures.
- Expect a significant security force presence in most urban centres and major highways in the region. Follow all official directives, including any curfews or restrictions on movement, and carry personal identification documents to ease passage through any checkpoints and spot-checks.

#### *Rest of Mindanao*

- Although travel to most of Mindanao is viable, seek itinerary- and profile-specific advice before travelling to the island. Ensure these journeys are supported by your organisation's security protocols and infrastructure.
- Avoid non-essential overland travel due to the risks posed by banditry, poor driving standards, road conditions, and the presence of militants who at times erect illegal roadblocks to extort money or as a part of their kidnap-for-ransom methods.
- When undertaking essential road travel, do not self-drive. Instead, use an experienced and trusted local driver and ensure your vehicle is in good condition. Travel between population centres during daytime only. Take precautions against carjacking and avoid high-risk areas.

- Trips to coastal resorts and islands in Mindanao should be arranged through reputable tour operators and include comprehensive itinerary and accommodation details. Business travellers should select accommodation based on a thorough research into and professional advice on security infrastructure, facilities, location and access to support. At a minimum, business travellers should select guest rooms that do not have direct access to the waterfront.

#### *Sulu archipelago (Basilan, Sulu, Tawi-Tawi (BASULTA))*

- Avoid all travel to the Sulu archipelago because of the risks posed by insurgency, terrorism and associated criminal activity.

## Active Alerts (4)

### ■ Advisory

11 November 2024 at 01:39

Exercise caution, monitor developments over coming days during passage of tropical depression

**Location:** Philippines

**Category:** Storm, Transport disruption

#### **Situation:**

Exercise caution, monitor developments **over the coming days** during the passage of a tropical depression, locally known as 'Ofel'. The Philippine Atmospheric, Geophysical and Astronomical Services Administration (PAGASA) forecasts the weather system moving in a west north-westward direction where it is due to enter the Philippine Area of Responsibility (PAR) on **12 November**. PAGASA expects the system to intensify into a typhoon before it makes landfall in central or northern Luzon island on **14 or 15 November**. Expect heavy rainfall, severe winds and storm surges across northern Luzon **over the coming days**. Flash flooding and landslides are possible in mountainous and low-lying areas.

#### **Advice:**

- Monitor the PAGASA [website](#) for the latest weather advisories and be prepared to adjust itineraries accordingly.
- **We do not hold information on specific flights or other modes of transport.** Contact the relevant transport provider directly to reconfirm bookings. In the event of cancellations, your travel agency will be able to assist with alternative arrangements.
- Reconfirm the feasibility of road journeys before setting out, especially if travelling in areas affected by landslides or floods. Allow additional time to make journeys.

- Heavy rain can trigger flash floods, particularly in low-lying areas. Do not attempt to cross flooded roads. If you come across one, turn around and seek an alternative route to your destination.
- Monitor our Philippines alerts for updates.

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■ Advisory

10 November 2024 at 20:27

Exercise caution, monitor developments during passage of Typhoon Nika

**Location:** Philippines

**Category:** Storm, Flood, Transport disruption

**Situation:**

Exercise caution and monitor developments **over the coming days** during the passage of Typhoon Nika (second highest on a five-tier scale). The Philippine Atmospheric, Geophysical and Astronomical Services Administration (PAGASA) forecasts that Nika will move west-north-westward, making landfall near the provinces of Isabela (Cagayan Valley region) and Aurora (Central Luzon region) on 11 November. It will then pass over central and northern parts of Luzon island overnight on 11-**12 November**. PAGASA expects the system to intensify **over the coming hours** prior to making landfall. Short-notice disruption to transport, including flights, is possible in affected areas.

**Advice:**

- Monitor the PAGASA [website](#) for up-to-date information on prevailing weather conditions and location-specific forecasts. Be prepared to adjust itineraries accordingly. Follow all official directives and guidelines.
- **We do not hold information on specific flights or other modes of transport.** Reconfirm flight, ferry, and other transport bookings with the relevant service provider. In the event of any cancellations, your travel agent will be able to assist with alternative arrangements.
- Storm surges and flash floods are likely in low-lying and coastal areas during and after the passage of storms. Reconfirm the feasibility of journeys before setting out and avoid surge-prone or flooded areas.
- Essential services such as electricity may be disrupted due to any infrastructural damage caused by the storm's passage. Charge all communications devices and, where feasible, keep extra batteries for backup.
- Monitor our Philippines alerts for updates.

**More Detail:**

PAGASA's heavy rainfall forecast in the coming days is listed below:

*11 November*

- Intense to torrential rain of at least eight inches (20cm) in Apayao, Ifugao, Kalinga, Mountain Province (all Cordillera Administrative region), Aurora (Central Luzon region), Cagayan, Isabela, Nueva Vizcaya and Quirino (all Cagayan Valley region) provinces.
- Heavy to intense rain of up to eight inches (20cm) in Abra, Benguet (both Cordillera Administrative region), Ilocos Norte, Ilocos Sur and La Union (all Ilocos region) provinces.
- Moderate to heavy rain of up to four inches (10cm) in Camarines Norte, Camarines Sur (both Bicol region), Quezon (Calabarzon region), Nueva Ecija, Tarlac (both Central Luzon) and Pangasinan (Ilocos) provinces.

### 12 November

- Heavy to intense rain in Ilocos Norte and Ilocos Sur provinces.
- Moderate to heavy rain in La Union and Pangasinan provinces.

Local sources report that classes have suspended through 11 November across several parts of the country.

Over 1,200 people were reportedly evacuated in Libon town (Albay province, Bicol) due to adverse weather conditions.

A Tropical Cyclone Wind Signal 4 (second highest on a five-tier scale) is in place for parts of Aurora, Isabela, Kalinga, Mountain Province, Ifugao, Abra and Ilocos Sur. A Tropical Cyclone Wind Signal 3 (middle) has been raised in across the rest of northern Luzon island. Tropical Cyclone Wind Signal 2 (second lowest) has been raised in across central Luzon island. A Tropical Cyclone Wind Signal 1 (lowest) has been raised across southern Luzon island, including Metro Manila.

In addition, rough sea conditions are forecast over the coming days, with the potential for flash flooding and landslides, particularly in mountainous and low-lying areas, as well as those previously impacted by heavy rains.

### ■ Notice

10 November 2024 at 00:32

Increased dengue activity, avoid mosquito bites

**Location:** Philippines

**Category:** Dengue fever

#### **Situation:**

A significant increase in dengue activity has been reported across the country. Dengue is a viral disease spread through mosquito bites and can cause a range of symptoms. Fever, headaches and a rash are common. Sometimes, dengue is severe and can have fatal complications. Those who are infants, pregnant or have had dengue before are most likely to get a severe infection. The main way to prevent dengue is by avoiding

mosquito bites. Dengue vaccines are approved in some countries. Discuss with your healthcare provider if they are recommended for your situation.

### **Advice:**

Prevent mosquito bites:

- Wear clothes that cover most of your body (long sleeves, long trousers and socks).
- Use an insect repellent with one of these active ingredients:
  - DEET
  - Picaridin
  - PMD
  - IR3535
- Check that windows are covered with screens or fly-wire.
- Use 'knock-down' insect spray to kill mosquitoes in your room.
- Choose air-conditioned accommodation if possible.
- Have a travel health consultation. Discuss your personal risk of dengue and ways to prevent it, including vaccination.

### **More Detail:**

An increase in dengue infections have been reported across the Philippines. Several fatalities have been reported. Dengue is a constant threat in the country and the risk is high, especially during the rainy season from July to October. This year, the infections are higher in comparison to the same time last year.

### **What is dengue?**

Dengue is a virus. People can be infected if they are bitten by mosquitoes carrying the virus. These insects are common in urban areas and bite during the day. An infected pregnant person can spread dengue to a foetus during pregnancy or birth.

The symptoms of dengue can range from mild to severe. The disease is sometimes called 'break-bone' fever because of the muscle, bone and joint pain it can cause. Other symptoms are a high fever and a headache or pain behind the eyes. A rash often follows these symptoms. Dengue can be dangerous during pregnancy because it can cause pre-term birth, low birth weight and foetal distress.

Sometimes, people with dengue may develop a more serious version of the disease called 'severe dengue' (this form used to be called 'dengue haemorrhagic fever' or DHF). Infants, pregnant people and those who have previously had dengue are more likely to get severe dengue. Sometimes people with severe dengue die due to bleeding complications and shock.

There is no medicine to cure dengue. Treatments focus on keeping a person as comfortable as possible as their body recovers. This usually takes a week or two, but it can be longer. The main way to prevent the disease is to avoid mosquito bites. There are two types of dengue vaccines, which are available in some countries. Dengvaxia is generally only used in people with a proven previous dengue infection. It may increase the risk of severe dengue in those who have not previously had dengue. The Qdenga vaccine can be considered for people without a history of previous dengue infections.

## For more information:

- Download the Dengue Infographic [[PDF, 2mb](#)].
- See the International SOS Location Guide on the Philippines.
- Contact any International SOS Assistance Centre.

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### ■ Notice

14 February 2022 at 04:06

Maguindanao province: Fatal clash linked to clan rivalries highlights persistent violence in HIGH travel risk areas

**Location:** Philippines

**Category:** Violent crime, Shooting, Communal unrest

#### **Situation:**

Nine people were killed and three others injured on 12 February when gunmen opened fire on a convoy of vehicles in [Guindulungan municipality](#) (Maguindanao province, Bangsamoro Autonomous Region in Muslim Mindanao (BARMM)). The authorities have indicated that the incident was linked to a feud between rival clans, and that former members of the Moro Islamic Liberation Front (MILF) were among the casualties. Although no bystanders were injured in the incident, it nonetheless highlights the persistent risk posed by violence in HIGH travel risk areas of south-western Mindanao, where essential travel should be undertaken with robust local security support.

#### **Advice:**

- Travel to south-western Mindanao should be for essential purposes. Trips to the Sulu Archipelago, particularly Basilan and Sulu provinces, should be avoided. If undertaking essential movements to or within these areas, this should be done with local security support to ensure robust journey management plans and other precautions are in place. Ensure that these journeys are supported by your organisation's security protocols and infrastructure.
- Where possible, minimise time spent around likely targets of militant attacks, including those associated with the government and security forces, as well as key infrastructure like power and telecommunications installations. If you notice anything suspicious, leave the area and report it to the nearest authorities.
- In the event of encountering unrest, vacate the area immediately and, where possible to do so safely, move to a safe location such as your accommodation or office. Remain there until the situation stabilises.
- Comply with all security force directives. Carry reliable means of communication at all times and understand who to contact in the event of an emergency or incident.

- Monitor our Philippines alerts for updates.

**More Detail:**

Reports indicate that clan leader Peges Lentagi Mamasainged and eight others (including his sons) were killed in the ambush. They were attacked while travelling to a celebratory banquet in Datu Saudi Ampatuan town following the settlement of a clan dispute (known as a 'rido' in the local dialect). Mamasainged is a commander of the Bangsamoro Islamic Armed Forces (BIAF), a faction of the former Moro separatist group MILF.

Preliminary police investigations suggest that Mamasainged was targeted as part of a longstanding feud over territory between rival families. The police have identified the perpetrators as belonging to the rival Lintang clan and a search for clan leader Jordan Mama Lintang and his followers ongoing. This means that clashes between armed Lintang clan members and the security forces are likely in Maguindanao and its surrounding areas in the coming days.

The ambush occurred approximately 14 miles (22km) from the site of a foiled bomb attack against a power company in Datu Odin Sinsuat municipality (Maguindanao) on 10 February (*see separate alert*). While unrelated, the two incidents in the space of two days highlight the persistent risks associated with travel in south-western areas of Mindanao.

**Assessment:**

The incident on 12 February was reportedly the deadliest clan clash in Maguindanao since 2009, when 58 people, including 32 journalists, were killed when gunmen opened fire on a political campaign convoy in an incident linked to a conflict between the powerful Ampatuan and Mangudadatu clans.

Rido is deeply rooted in Mindanao's Muslim culture and can be linked to issues ranging from personal slights and questions of honour to political rivalries between clans. Feuds can also span generations. Violent incidents linked to rido are common in BARMM but often remain unreported. Such feuds can escalate into major clashes and are exacerbated by the proliferation of weapons in south-western Mindanao.

Although MILF is still the largest non-state armed group in Mindanao, it signed a peace deal with the government in 2014 and no longer has the intent to carry out attacks, as its leadership is engaged in the governance in BARMM. Some former MILF members are being integrated into the security services. However, the process of decommissioning former fighters and their weapons has been delayed by the pandemic, as well as technical issues.



Even prior to its peace agreement with the government, the MILF was not a homogenous organisation. Its field commanders had great latitude of operations and their forces were often organised along clan and tribal lines. This lack of cohesion was a major factor in the formation of breakaway factions such as the Bangsamoro Islamic Freedom Fighters (BIFF), which is composed of members that were dissatisfied with the peace agreement. It also plays a huge role in the persistence of clan feuds within the organisation, which will continue **in the coming months** despite mediation efforts. Related clashes pose serious incidental risks to bystanders and travellers.

# Destination Guide for Philippines



## Before You Travel

### Destination Guide Content

## Visa Requirements

### IMMIGRATION REQUIREMENTS AND PROCEDURES

#### British

Passport Required Yes

Visa Required No

Return Ticket Required Yes

#### Australian

Passport Required Yes

Visa Required No

Return Ticket Required Yes

#### Canadian

Passport Required Yes

Visa Required No

Return Ticket Required Yes

#### USA

Passport Required Yes

Visa Required No

Return Ticket Required Yes

## Visas

Nationals referred in the above chart and those mentioned in this [list](#) are allowed visa-free entry and stays for up to 30 days; business travellers intending to stay beyond this period must apply for an extension for up to six months at the Bureau of Immigration and Deportation, either at the main office at Magallanes Drive in the capital Manila or any of its provincial offices. Nationals of Brazil and Israel do not require a visa for stays less than 60 days. Holders of Hong Kong and Macao (both China SAR) passports can enter the Philippines without a visa for stays not exceeding 14 days. Macao-Portuguese passport holders and Hong Kong-British passport holders do not require visa for stays less than seven days. All remaining nationals should contact the nearest Philippines or consulate to check their visa requirements, processes, and fees. Chinese nationals who frequently travel to countries such as the US, Japan, Australia, Canada and the EU are allowed visa-free travel for stays of up to seven days. All business travellers must obtain transit visa prior to their journeys as this is not issued upon arrival. Certain nationals are required to apply for the [Emigration Clearance Certificate](#).

Indian nationals holding a valid Australia, Japan, Canada, Singapore, the US and UK (AJACSSUK) visa or permanent residence permit can enter the Philippines without a visa for stays up to 14 days, which can be extended for up to 21 days.

## Entry/Exit Requirements

### Entry/Exit requirements

Business travellers are required to have a passport valid for six months and an onward ticket. Those with an eTicket must carry a printed copy of the return ticket, or entry will be denied. Overstaying without proper authorisation can lead to fines and detention.

Inbound travellers are required to register on the Bureau of Quarantine (BOQ) [portal](#) to secure an electronic arrival (eArrival) card within 72 hours prior to departure for the Philippines. This replaces the One Health Pass required by the BOQ. Although this can be done on arrival, it may result in delays at the airport.

Import or export of local currency up to 50,000 Philippine pesos (PHP) per person is allowed. Any amount more than that requires authorisation from the Bangko Sentral ng Pilipinas (BSP). Foreign currencies and other monetary instruments such as travelers' checks, money orders and bonds in excess of USD10,000 or its equivalent need to be declared at the customs desk in the arrival and departure areas of all international airports and seaports, or can be downloaded via the [BSP website](#).

## Cultural Tips

### CULTURAL ISSUES AND ETIQUETTE

- There is little anti-foreign sentiment, despite the country's ambiguous attitude towards its colonial past and relations with the US and Europe. Nevertheless, nationalist sentiment remains, and business travellers should be careful to respect local sensitivities over their country's history and actions.
- There are some legal restrictions relevant to LGBTQ+ individuals, but these are not enforced or adhered to in the legal system. Societal attitudes towards the LGBTQ+ community are highly varied; violence is rare, but may be more likely in rural than in urban settings.

## Getting There

### METHOD OF ARRIVAL

#### By air

The main international airports are Ninoy Aquino International Airport (MNL) in Pasay City which serves the National Capital Region and the rest of Luzon, Mactan-Cebu International Airport ([CEB](#)), which serves Cebu City (Central Visaya region), Francisco Bangoy International Airport (DVO, also known as Davao International Airport) in Davao City (Davao region), Clark International Airport ([CRK](#)) in Angeles City (Central Luzon region) and Laoag International Airport (LAO, Ilocos region). Intermittent flight disruption due to rainfall can be expected throughout the rainy season, which usually lasts from June to November. Tropical storms, including typhoons, occasionally affect air travel between May and December.

Security procedures at airports are not efficient, but they are adequate. Search and checking procedures are both labour- and technology-intensive and it is advisable to reach the airport well ahead of the check-in time on international flights (particularly to the US). Theft and scams pose a routine risk to foreign nationals around the airport.

Airlines have variable security standards. You may wish to consult the European Commission's [website](#) for a list of airlines banned within the EU and the US Federal Aviation Administration's [website](#) for a database of aviation accidents and statistics.

## Getting Around

### BY AIR

Air travel is the safest form of transport for business travellers travelling between major cities and islands. There is a comprehensive domestic aviation network, ranging from jets servicing large urban areas to small piston-engine aircraft that can reach the most remote regions. The country's often rugged terrain and sometimes difficult weather-related flying conditions are hazards. However, scheduled services between major destinations remain within the bounds of internationally acceptable aviation safety standards. Security at domestic airports is variable – with a strong reliance on human rather than technical checks – and there have been occasional serious security incidents in the past.

Philippine Airlines (PAL) is the country's flag carrier and a key domestic operator. Charter flights are available.

### BY ROAD

Traffic drives on the right. Poor road skills and undisciplined drivers mean travel by main arterial roads is hazardous. Long-distance road travel should only be undertaken if no other transport options are available. Self-driving is not recommended and business travellers should engage reputable transport companies who use experienced drivers and reliable vehicles. Motorists need to have a valid driver's license in English and relevant documents when driving. The road system, particularly in major urban centres like Metro Manila, is congested, and road signage and lighting can be inadequate. Driving on routes away from national highways and paved roads can be dangerous, especially in the provinces at night, and should be avoided.

Car hire companies such as [Avis](#), [ECLPI](#) and [Hertz](#) have offices in Manila and in other major cities. Business travellers intending to self-drive can do so for a period of 90 days from the date of arrival using their nationally issued driver's license, provided it is in English. Otherwise, the document must be accompanied by an official English translation from the local embassy of the issuing country or an international driving permit. Business travellers who are self-driving should also be familiar with local road and driving conditions. Metro Manila and other main cities are likely to experience delays during key dates, particularly around Holy Week, the Christmas Season, and New Year's Eve celebrations due to increased traffic congestion. Overland travel may be affected by heavy rainfall during the rainy season (June-November), when flooding may render roads impassable, resulting in lengthy diversions and delays.

While travel to Mindanao remains possible, business travellers should defer non-essential overland journeys to the island's south-west – in particular, Cotabato, Lanao del Norte, Lanao del Sur, Maguindanao, Sultan Kudarat and Zamboanga Sibugay provinces, as well as Zamboanga City – due to the risk of exposure to militant and criminal activities. If essential, journeys should be conducted during daytime and with security support. Car theft and carjacking do occur, but this risk is reduced with the help of a local driver who is able to interpret the signals that often precede an incident and avoid high-risk areas.

## **BY TAXI**

Taxis, which are available in cities, are the safest form of transport. However, it is advisable to ensure that the meter is utilised or the fare established before beginning your journey. Even if the meter is utilised, many taxi drivers request additional payment if travelling during periods of high traffic and relatively longer distances in major cities (for example, between Central/Old Manila and Makati City).

Business travellers should use taxis arranged through hotels or cars hired with a driver, preferably from the hotel on the recommendation of a local business contact. They should avoid hailing taxis on the street, outside places of entertainment late at night. Some taxis are known to have been stolen specifically to commit assaults and robberies. Sharing taxis is also inadvisable. While ride hailing apps have safety features that usually make such services more secure than hailing taxis on the street, the risk of criminal incidents and assault remains.

## **BY TRAIN**

Rail travel is unsuitable for business travellers.

## **BY OTHER MEANS**

### **By ferry**

The extensive inter-island ferry network is unsuitable for business travellers due to poor safety standards, overcrowding and inclement sea conditions.

### **By bus**

Buses and jeepneys (public transport trucks) are unsuitable for business travel as they are unsafe, slow and uncomfortable. A significant proportion of the latter do not have mandatory liability or accident insurance cover. They are also sometimes the target of armed robbery.

## **Business Women**

### **BUSINESSWOMEN**

There are no specific risks for female travellers or businesswomen.

Women are advised to follow sensible precautions such as:

- Say no politely to invitations that would take you beyond your personal comfort levels, even if faced by amicable pressure to behave otherwise.
- Plan your itineraries bearing in mind risks incurred by women in various modes of transport available in your location. Prioritise security in your choice of transport.
- Avoid travelling alone after dark.

## **Working Week**

### **WORKING WEEK**

- Office hours: 08.00/09.00-17.00/18.00 Monday to Friday; and 09.00-12.00 on Saturdays for some offices.
- Banking hours: 09.00-16.30 Monday to Friday (some banks, especially those located in malls, have extended banking hours and operate on Saturdays).
- Government and business establishments are closed for lunch from 12.00-13.00.

## **Language & Money**

## **LANGUAGE**

Filipino (also known as Tagalog) and English are official languages; there are also several regional dialects. All Filipinos are partly educated in English, and many, particularly in business circles, speak it fluently.

## **MONEY**

The official currency is the Philippine peso (PHP). Most establishments accept major credit cards such as Visa, Diners Club, MasterCard and American Express. Credit card fraud is common and business travellers should keep a close eye on their cards and insist that vendors return carbon copies of receipts or have their cards swiped in front of them. ATMs are available in Metro Manila and other major cities. Care should be taken when withdrawing money from ATMs due to reports of card skimming devices being installed by criminals.

Currency can be changed at licensed exchange counters and banks; counters often offer more favourable exchange rates. It is advisable to change only as many pesos as required because it can be hard to exchange them outside the country. In addition, business travellers should ask for some small denomination notes for tipping. Changing money on the street should be avoided as it is illegal, and scams are widespread.

Business travellers should take sufficient funds in local currency if they plan to travel outside major cities. There may not be ATMs or currency exchange facilities at the intended destination and credit cards may not be accepted at establishments.

## **Tipping**

### **TIPPING**

It is common practice to tip 10% of the bill, though tipping is optional on bills that already have a 10% service charge.

## **Geography & Weather**

### **GEOGRAPHY**



The Republic of the Philippines is an island nation located within the Malay Archipelago in South-east Asia. It is surrounded by the South China Sea to the west, the Philippine Sea to the east and the Celebes Sea to the south-west. The archipelago consists of approximately 7,640 islands, of which only about 2,000 are inhabited. The country has three main **island groups**: Luzon in the north, the Visayas in the centre and Mindanao in the south. The Philippines covers a total land area of 11,583 sq miles (300,000 sq km). The terrain is predominantly mountainous with large areas covered by rain forest. Around 20% of the land is suitable for agriculture. The Philippines is administratively divided into 81 provinces and 143 chartered cities. Provinces are further subdivided into component cities/municipalities and villages or wards (locally known as barangays). The provinces are grouped into regions to coordinate planning and organise national government services across multiple local government units (LGUs).

There are 17 regions, including the National Capital Region (NCR) – this encompasses Metro Manila – the Cordillera Autonomous Region (CAR) and the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM). The CAR in northern Luzon is comprised of the provinces of Abra, Apayao, Benguet (including Baguio City), Ifugao, Kalinga and Mountain. BARMM is composed of the five predominantly Muslim provinces of Basilan (except Isabela City), Lanao del Sur, Maguindanao, Sulu and Tawi-Tawi as well as Cotabato City (which serves as the regional centre) and the cities of Lamitan and Marawi.

## **CLIMATE**

### **Climate overview**

- The rainy season lasts from June to November.
- The wettest areas are the exposed Pacific coast and the Cordillera region.
- It is hot and humid between March and May, and cool and dry from December to February.
- The climate is characterised by relatively high temperatures, high humidity and abundant rainfall. It is tropical and maritime.

### **Cyclonic activity**

- Typhoons occur an average of 20 times per year and are most common between June and November.
- Serious typhoons in the capital Manila are rare.

- During the typhoon season, western and central areas are most affected.
- Storm surges pose a major risk to coastal areas, including Metro Manila.
- Monitor the website of the [Philippine Atmospheric, Geophysical and Astronomical Services Administration](#) for information on typhoons.

## Flooding

- The monsoon season runs from November to April in the north-east and from May to October in the south-west
- Heavy rain during the monsoon season can lead to flooding, even in urban areas such as Metro Manila. The highest rainfall occurs in Baguio City (Cordillera Administrative region), Eastern Samar province and Eastern Surigao (Surigao del Norte) while southern Cotabato receives the least amount of rainfall.
- Associated mudflows can destroy populated lowland areas.
- Extensive deforestation has been responsible for annual heavy flooding and landslides in several areas.
- Monitor the website of the [Philippine Atmospheric, Geophysical and Astronomical Services Administration](#) for flood alerts.

## Earthquakes

- The country is located in a seismically active region.
- High-magnitude earthquakes occur periodically and can prompt tsunami alerts, as well as cause infrastructural damage and disruption to overland travel.
- The earthquake threat to Metro Manila is high, as the West Valley Fault runs through it.
- Reports indicate that an earthquake with a magnitude of 7.0 or greater would be highly destructive to Metro Manila.
- Monitor the website of the [Philippine Institute of Volcanology and Seismology](#) for alerts on earthquakes and tsunamis.

## Volcanoes

- There are several active volcanoes.
- The most active are Taal volcano (Luzon region), Mount Bulusan, the popular tourist destination Mount Mayon (both Bicol region), and Mount Pinatubo (Central Luzon region).
- Taal volcano erupted in January 2020, killing 39 people and disrupting flights in Metro Manila and road travel across multiple provinces.

- Increased volcanic activity at Mount Mayon and Mount Bulusan has been reported intermittently in recent years.
- Monitor the website of the [Philippine Institute of Volcanology and Seismology](#) for alerts on volcanic eruptions and advisories on designated danger zones.

## International Dialing & Power

### DIALLING CODES

Country Code 63

IDD Prefix (International Direct Dialling) 00

NDD Prefix (National Direct Dialling) 0

### COMMUNICATIONS

Use of mobile telephones is widespread, as is mobile coverage. PLDT Inc., Digitel Telecommunications Philippines, Globe Telecom and Smart Communications are the major telephone network providers. International connections are good and there are few problems with internet access for email or faxes. However, speed may vary. There are no restrictions on the use of satellite phones. Signal strength is more variable in the provinces.

The new Subscriber Identity Module (SIM) Registration Act (Republic Act 11934) came into effect on 28 October 2022. This requires new and existing users of local mobile phone services to register their SIM cards with their local service provider beginning on 27 December 2022. Foreign nationals and business travellers should verify all documentary requirements for procuring local SIM cards prior to travel. Foreign nationals visiting the country for less than 30 days buying SIM cards locally must provide their full name, passport number, address in the Philippines and a return ticket in the SIM registration form.

Meanwhile, foreign nationals staying for longer periods for either work or study will also be required to submit a copy of their Alien Certificate of Registration Identification Card (ACRI-Card) from the Philippine Bureau of Immigration and their Alien Employment Permit (if applicable) from the Department of Labor and Employment or school registration ID for students. Failure to register within 180 days of the law coming into effect will result in service non-activation or deactivation and other penalties. The new legislation does not affect internationally purchased SIM cards on roaming. Short-range radio service (SRRS) is the only license-free radio legally allowed. Others using Very High Frequency (VHF) and/or Ultra-High Frequency (UHF) channels require licensing by the National Telecommunications Commission (NTC). The postal system tends to be slow and unreliable, and theft by postal workers is a concern. International courier organisations are represented in Manila.

## **ELECTRICITY**

These are the most common plug types used:

## **Calendar**

### **Holidays & Security Dates**

#### **2024**

##### **27 Nov** Bonifacio Day

This holiday commemorates Andres Bonifacio, the leader of the Philippine Revolution, which fought for independence from Spain. If holiday falls on a Saturday or Sunday, the holiday is observed on the following Monday.

##### **08 Dec** Feast of the Immaculate Conception of Mary

##### **25 Dec** Christmas Day

In some countries, if this holiday falls on a Saturday or Sunday, a public holiday is declared for the following Monday.

##### **30 Dec** Rizal Day

This holiday commemorates the execution of Jose Rizal a leader of the Philippine revolution (1896-1898).

#### **2025**

##### **01 Jan** New Year's Day

In many countries, if this holiday falls on a Saturday or Sunday, a public holiday is declared for the following Monday.

**23 Jan** First Philippine Republic Day

Special working holiday to commemorate the declaration of the First Philippine Republic in 1899.

**09 Apr** Day of Valour

Commemorates the fall of Bataan, the last bastion of Philippine-US forces, during the Second World War.

**12 Jun** Independence Day

The Philippines gained its independence from Spain on this day in 1898.

**24 Jun** Manila Day

Manila only.

**19 Aug** Quezon Day

Quezon City only.

**21 Aug** Ninoy Aquino Day

The non-working holiday was introduced in 2004 to commemorate the life and achievements of Senator Benigno 'Ninoy' Aquino, Jr., an influential and inspirational Filipino political figure who fought for independence and a free democracy.

**23 Aug** Death anniversary of Benigno Ninoy Aquino Jr

The authorities will implement heightened security arrangements for the day, which is marked with rallies and commemorative events. Significant traffic disruption should be expected in Metro Manila.

**01 Nov** All Saints Day

**02 Nov** All Souls Day

# Destination Guide for Philippines



## Medical

### Destination Guide Content

## Medical Care

### Variable

#### Standard of Health Care

Private hospitals in Manila offer an international standard of medical care. Many doctors and nurses have had overseas training. Most advanced medical techniques are available, and quality and infection control standards are high. Most doctors speak good English, some speak Fookien, and fewer still Mandarin.

Large public hospitals in Manila offer a variable standard of care. Regional referral centres tend to be well equipped and have a similar standard of infection control as private hospitals. Smaller public hospitals in Manila offer a somewhat lower standard of care as they tend to be less well equipped and may have a lower standard of infection control than private facilities. Some private hospitals in other cities including Cebu, and Davao also offer a high standard of care.

In rural areas, both private and public hospitals have a lower standard of care, and infection control standards may be lower. For example, gloves, which should be single use only, may be used multiple times. Further, doctors and nurses may not be adequately trained to handle emergency, cardiac, neonatal, or intensive care cases.

Serious medical cases may require medical evacuation to Manila.

#### EMERGENCY NUMBERS

Fire service 911

Police 911

Contact International SOS for help with your medical situation. [Contact us](#)

Hospitals & Clinics

### **Asian Hospital and Medical Center**

Category: Hospital

Address: 2205 Civic Drive, Manila

Phone: [63 287719000](tel:63287719000)

Emails: [info@asianhospital.com](mailto:info@asianhospital.com),  
[customercare@asianhospital.com](mailto:customercare@asianhospital.com)

### **Cebu Doctors' University Hospital**

Category: Hospital

Address: Cebu Doctors' University Hospital Osmena Boulevard, Cebu City, Cebu

Phones: [63 322537511](tel:63322537511),  
[63 322537512](tel:63322537512)

Email: [info@cebudocgroup.com](mailto:info@cebudocgroup.com)

### **Chong Hua Hospital**

Category: Hospital

Address: Don Mariano Cui Street, Cebu City, Cebu

Phone: [63 322558000](tel:63322558000)

Email: [chhc\\_hmo@chonghua.com.ph](mailto:chhc_hmo@chonghua.com.ph)

### **Davao Doctors Hospital**

Category: Hospital

Address: 118 E. Quirino Avenue, Davao, Davao Del Sur

Phone: [63 822228000](tel:63822228000)

Email: [info@ddh.com.ph](mailto:info@ddh.com.ph)

### **Makati Medical Center**

Category: published

Address: 2 Amorsolo street, Corner Dela Rosa Street, Makati City, Metro Manila

Phone: [63 288888999](tel:63288888999)

Emails: [medical.concierge@makatimed.net.ph](mailto:medical.concierge@makatimed.net.ph),  
[mmc@makatimed.net.ph](mailto:mmc@makatimed.net.ph)

### **Perpetual Succour Hospital of Cebu, Inc.**

Category: Hospital

Address: Gorordo Avenue, Cebu City, Cebu

Phones: [63 322338620](tel:63322338620),  
[63 322338621](tel:63322338621),  
[63 322338639](tel:63322338639)

Email: [pshcares@perpetualsuccourcebu.com](mailto:pshcares@perpetualsuccourcebu.com)

### **St. Luke's Medical Center - Global City**

Category: Hospital

Address: Rizal Drive corner 32nd Street. and 5th Ave., Taguig, Metro Manila

Phone: [63 287897700](tel:63287897700)

Emails: [medtravel@stlukes.com.ph](mailto:medtravel@stlukes.com.ph),  
[info.bgc@stlukes.com.ph](mailto:info.bgc@stlukes.com.ph),  
[corpbusinessctr@stlukes.com.ph](mailto:corpbusinessctr@stlukes.com.ph)

### **St. Luke's Medical Center-Quezon City**

Category: Hospital

Address: St. Luke's Medical Center 279 E Rodriguez Sr. Ave, Quezon

Phone: [63 287230101](tel:63287230101)

Email: [customer.qc@stlukes.com.ph](mailto:customer.qc@stlukes.com.ph)

### **The Medical City**

Category: published

Address: Ortigas Avenue, Manila, Metro Manila

Phones: [63 289887000](tel:63289887000),  
[63 289881000](tel:63289881000)

Emails: [tmc-ips@themedicalcity.com](mailto:tmc-ips@themedicalcity.com),  
[mail@themedicalcity.com](mailto:mail@themedicalcity.com)

## **Vaccinations**

### **Cholera**

Vaccination should be considered for some travellers and relief workers who are likely to encounter unsanitary conditions, or will have limited access to safe water.



## Hepatitis A

Recommended for all travellers and international assignees, especially groups at higher risk including:

- long-term and frequent visitors.
- adventurous travellers who travel to more remote locations or stay in areas with poor sanitation.
- gay, bisexual, and other men who have sex with men (see [US CDC](#)).
- people who use illicit drugs.
- those with liver disease.

## Hepatitis B

Recommended for most travellers and international assignees, especially:

- For long-term or frequent visitors, and health-care workers.
- For adventurous travellers who travel to more remote locations.
- If possibility of new sexual partner, needle sharing, acupuncture, dental work, body piercing or tattooing during visit.

Many travel health professionals recommend hepatitis B vaccination for all travelers, regardless of destination.

## Japanese encephalitis

Vaccine is recommended for people who will participate in 'higher risk' activities while in an area where Japanese encephalitis risk exists.

You are engaging in a 'higher risk' activity if you:

- Travel during the peak Japanese encephalitis season (consult the "Health Threats" section of the International SOS country guides to see specific season details for this country).
- Spend a significant amount of time outdoors, particularly in the evening and night-time, in areas outside of cities. (ex. camping, trekking, biking, fishing, hunting, farming).
- Stay in accommodation that will likely have mosquitoes indoors, ex. lacking air conditioning, window screens, and bed nets.
- Spend a month or more in a risk area during transmission season.

Japanese encephalitis vaccine is not available in many of the risk countries. Have the complete vaccine series before departure.

### **Meningitis - meningococcal**

Usually not recommended for business travellers or tourists.

Proof of vaccination for meningococcal meningitis is required for travellers departing to Saudi Arabia for Hajj. See the vaccination requirement in the Saudi Arabia location guide.

### **Polio**

**Travellers arriving from or going to high-risk countries:** Proof of polio vaccination is *required*. Vaccination should be recorded on the International Certificate of Vaccination or Prophylaxis (ICVP).

*(The above-mentioned recommendations/requirements are as stated by the World Health Organization or the Ministry of Health. However national authorities may differ in how they implement these recommendations. Consult your travel health practitioner for individualised vaccination recommendation 6-8 weeks before your trip and check with the embassy or consulate of your destination if proof of vaccination is required in your itinerary.)*

### **Rabies**

Consider for certain travellers, especially:

- For international assignees and long-term visitors.
- For children who tend to play with animals and may not admit to being bitten or scratched.
- If you are travelling to a location where quality medical care may not be available immediately after being bitten/scratched by an animal.  
(Unvaccinated people need immunoglobulin within 24 hours of an animal injury, and this medication is scarce in some countries. If you are pre-vaccinated, you do not need this immunoglobulin after an injury.)
- If contact with dogs, monkeys or other potentially rabies-carrying animals is likely.  
Jogging increases your risk of dog bite.

## Typhoid fever

Recommended for all travellers and international assignees.

## Routine Vaccinations

### Influenza

#### Influenza occurs in:

- Temperate southern hemisphere: April to September.
- Temperate northern hemisphere: November to March.
- Tropics: year-round.

**Annual vaccination is recommended. Vaccination is especially important for people at higher risk of severe disease.** People who are at higher risk for severe disease include:

- People over the age of 65.
- People with underlying health conditions.
- Pregnant women.

### Measles-Mumps-Rubella

Vaccinations against measles, mumps and rubella are routine in childhood, and are usually available as a combined vaccine "MMR". See routine childhood vaccination schedules: [Australia](#), [Canada](#), [Europe](#), [USA](#), [UK](#)  
All adults should ensure they are immune to these diseases before they travel abroad. If unsure of your immunity, consult your health professional. You may need to be vaccinated.

### Polio

Vaccination against polio is routine in childhood in many countries. See routine childhood vaccination schedules: [Australia](#), [Canada](#), [Europe](#), [USA](#), [UK](#)  
All adults should ensure they are immune to the disease before they travel abroad. If unsure of your immunity, consult your health professional. You may need a *primary vaccination* or a *booster*. Booster recommendations vary by country.

## **Tetanus-Diphtheria-Pertussis**

Vaccinations against tetanus, diphtheria and pertussis are routine in childhood.

See routine childhood vaccination schedules: [Australia](#), [Canada](#), [Europe](#), [USA](#), [UK](#)

All adults should ensure they are immune to these diseases before they travel abroad. If unsure of your immunity, consult your health professional. You may need a *primary vaccination* or *booster*. Booster recommendations vary by country.

## **Varicella**

Varicella (chickenpox) vaccinations are included in the routine childhood immunization schedule of some countries. See routine childhood vaccination schedules: [Australia](#), [Canada](#), [Europe](#), [USA](#), [UK](#)

All adults should ensure they are immune to varicella before they travel abroad. If unsure of your immunity, consult your health professional.

## **Malaria**

### **Risk in some areas**

Malaria is transmitted by mosquitoes that usually bite from dusk to dawn. Symptoms can develop as early as seven days or as late as several months after exposure. Early malaria symptoms are flu-like and can include fever, sweats/chills, head and body aches, and generally feeling tired and unwell. People also sometimes feel nauseous and vomit or have diarrhoea. Untreated, malaria can cause serious complications like anaemia, seizures, mental confusion, kidney failure and coma. It can be fatal. Follow the ABCDEs to minimise malarial risk:

**A:** Awareness - Be **Aware** of the risk, the symptoms and malaria prevention.

**B:** Bite Prevention - Avoid being **Bitten** by mosquitoes, especially between dusk and dawn.

**C:** Chemoprophylaxis - If prescribed for you, use **Chemoprophylaxis** (antimalarial medication) to prevent infection and if infected reduce the risk of severe malaria.

**D:** Diagnosis - Immediately seek **Diagnosis** and treatment if a fever develops one week or more after being in a malarial area (up to one year after departure).

**E:** Emergency - Carry an **Emergency** Standby Treatment (EST) kit if available and recommended (this is the kit which contains malaria treatment).

Malaria is present in Palawan. The rest of the country, including Manila, has been declared malaria-free; the risk of importation of cases and subsequent transmission still exists.

Prevention:

- mosquito bite avoidance
- medication: consult your travel health doctor for an individual recommendation. Some authorities recommend preventive medication if visiting the risk areas



## Yellow Fever

### Proof of yellow fever vaccination is required for specified travellers to enter

A yellow fever vaccination certificate is **required** for entry for anyone  $\geq 9$  months of age arriving from a [country with a risk of yellow fever transmission](#), including people who were in transit for more than 12 hours in an airport located in a risk country.

*(Discuss vaccination with your travel health professional well in advance of your trip. The certificate becomes valid 10 days after vaccination and is valid for the life of the traveller. Note that vaccination requirements may change at any time; check with the relevant embassy or consulate for your destination. Occasionally border authorities request a valid vaccination certificate although it may not be required under the official policy.)*

Yellow fever is caused by a virus spread through mosquito bites. The symptoms range from a mild flu-like illness to a severe haemorrhagic fever with organ failure. It is prevented through vaccination and preventing mosquito bites.

Vaccination provides life-long protection. It is only available through designated yellow fever vaccination clinics. They will issue a signed and stamped International Certificate of Vaccination or Prophylaxis (ICVP) which becomes valid 10 days after the vaccination, and is valid for the lifetime of the person vaccinated.

Many countries require proof of vaccination for entry. If proof is not available, authorities may deny entry, mandate vaccination or may monitor your health. Some countries require proof of vaccination when departing. Always check the relevant location guide, or ask the consulate or embassy for the requirements, several weeks prior to your trip.

[View Yellow Fever Infographic Poster PDF](#)

## **The Disease**

Yellow fever is a potential fatal viral disease which is spread through mosquito bites. It is one of the 'viral haemorrhagic fevers'. It occurs in some countries of Africa and South America. There is no specific treatment available, hence prevention through vaccination and preventing mosquito bites is critical. Many countries require travellers to show proof of vaccination in order to enter.

## **Transmission**

The virus is carried by certain mosquito species (*Aedes* and *Haemogogus*), which tend to live around houses, or in jungles, or both environments. People (and monkeys) are infected through mosquito bites. When the virus moves into urban areas, large outbreaks can occur in humans if a large proportion of the population has not been vaccinated and is not immune.

## **Symptoms**

Some people never develop symptoms after being infected. For those who do become ill, the first signs usually appear three to six days after the mosquito bite. These are often a sudden headache and fever, and "flu-like" symptoms that can include fatigue, muscle pain, back pain and sometimes nausea and vomiting. Most people recover in about four days. However within 24 hours after appearing to improve, about 15% progress to a serious toxic form of the disease. High fever, abdominal pain, vomiting, and jaundice, which turns the skin and eyes yellow (hence the name "yellow fever") can occur. The illness can progress to haemorrhagic (bleeding) symptoms and organ failure. Between 20%-50% of people who have a severe case of yellow fever die from the disease.

## **Diagnosis**

The diagnosis is made through highly specialised laboratory testing of blood and tissue samples.

## **Treatment**

There is no specific treatment for yellow fever. Patients are managed with supportive therapy. In severe cases hospitalisation and intensive care is required.

## **Prevention**

Prevention is through preventing mosquito bites, and vaccination.

### **Prevent mosquito bites:**

- When outdoors, wear clothing that covers most of your body (long sleeves, long pants, socks and covered shoes).
- Consider treating clothing with an insecticide. These are available as both soaks and sprays, and usually last through several washings.

Always follow the manufacturer's instructions.

- Use an effective insect repellent that contains DEET, Picaridin, PMD, or IR3535. In general, the higher the concentration of the active ingredient in a product, the longer it lasts and hence the more effective it is. Reapply after swimming or excessive sweating.
- Stay away from mosquito breeding areas, such as stagnant water.
- Avoid using perfumes and wash off sweat as both attract mosquitoes.
- Consider using a bed net impregnated with insecticides.
- Ensure windows are covered with fly-wire. Use "knock-down" insect spray to kill mosquitoes in your room.
- Choose air-conditioned, well-screened accommodation, if possible.

**Vaccination:** An effective vaccine is available, which contains live but weakened virus. Vaccination provides protection to most people within about 10 days, and this climbs to almost everyone by 30 days. A single vaccination provides life-long immunity in most people. There are precautions and contraindications to vaccination, and not everyone can receive the vaccine. Yellow fever vaccination is only available through designated yellow fever vaccination clinics. They will issue a signed and stamped International Certificate of Vaccination or Prophylaxis (ICVP) which becomes valid 10 days after the vaccination, and is valid for the lifetime of the person vaccinated.

#### **Proof of Vaccination for Entry / Exit requirements**

Many countries require proof of vaccination in order to enter – these are places where yellow fever exists, but also places that do not have yellow fever but have mosquitoes which are capable of being infected. If proof is not available, authorities may deny entry, mandate vaccination or may monitor your health. Some countries require proof of vaccination when departing. Requirements are specific for each country, and can vary depending on where the trip originated. Always check the relevant location guide, or ask the consulate or embassy for the requirements, several weeks prior to your trip. If vaccination is required for entry/ exit purposes but is medically contraindicated or not recommended, the doctor will complete the "Medical Contraindications to Vaccination" section of the ICVP. In addition they can issue a medical waiver letter. The waiver should be written on letterhead stationery, signed and stamped by the doctor, clearly stating the reason the vaccination was not administered. Generally waivers are given for a specific trip and subsequent waivers need to be issued for further trips.



## **Risk to Travellers**

The risk of acquiring yellow fever is higher in Africa than in South America, but the risk varies greatly according to location and season. In West Africa, peak transmission is late in the rainy season and early in the dry season (July-October). Transmission is highest during the rainy season (January-March) in Brazil. However, people can get the disease any time of year.

[CDC Yellow fever information](#)

[CDC Yellow fever vaccine](#)

## **Health Threats**

### **Leptospirosis**

Leptospirosis is a bacterial disease that infects animals and, less commonly, humans. Animals can excrete the bacteria in their urine, contaminating water and soil. People can get the disease via contact with that soil or water.

Left untreated, the disease can cause kidney, liver, heart and respiratory problems as well as meningitis (inflammation of the membrane around the brain and spinal cord). Leptospirosis is sometimes fatal. It can be treated with antibiotic medications.

To prevent leptospirosis, think about water safety when swimming, bathing, boating or wading. Avoid water that might be contaminated with animal urine. If you're unsure if water is contaminated, and you cannot avoid contact with it, wear protective clothing and footwear.

Leptospirosis is commonly reported across Philippines including the National Capital Region Manila. Cases frequently peak after periods of heavy rainfall.

### **Rabies**

Rabies is a viral disease contracted when bitten or scratched by an infected (rabid) animal, often a dog. Once it enters the body, the virus travels along nerves and causes paralysis. As it reaches important organs like the spinal cord and the brain, it causes coma and death.

In countries where rabies is present in animals or bats, ALL animal / bat bites, scratches and licks to broken skin must be treated seriously. Rabies vaccination is very effective in preventing rabies, even after a bite/scratch by a rabid animal.

## **Rabies vaccination**

Pre-exposure vaccination is often recommended for expatriates and long-term visitors to destinations where rabies is present. It's especially recommended if quality medical care may not be available after being bitten or scratched by an animal. Pre-exposure treatment can be especially useful for children, since they may not tell their parents that they have been bitten/scratched.

Pre-exposure vaccination makes it easier to treat a bite or scratch. That's important because some types of rabies treatment can be in short supply in many countries, even in cities.

### **If bitten, scratched or licked (on broken skin) by an animal:**

- Immediately cleanse the wound with soap and water and a povidone-iodine solution if available.
- Seek medical advice from a qualified source or your assistance company.
- Notify local health authorities immediately. You may need *post-exposure vaccination*, even if you have had pre-exposure vaccination. (THIS CAN BE LIFE SAVING.)

Travelers have a low risk of contracting rabies in urban areas. The risk is higher in rural areas.

## **Chikungunya**

People can get chikungunya if they are bitten by a mosquito carrying the virus. About four to seven days later, the infected person develops a sudden fever and severe joint pain. Pain is especially common in the knees, ankles, small joints (especially in hands and feet) and any previously injured area. Other common symptoms are a rash and headache.

There is no specific cure for the disease. Recovery takes several weeks.

The best way to prevent chikungunya is to prevent mosquito bites. Wear long sleeves and long pants and use insect repellents to prevent mosquito bites. A vaccine named IXCHIQ is approved in the United States and Canada for people 18 years and older at increased risk of infection.

Chikungunya is consistently present throughout the country with most cases reported from the central and southern areas.

## **Dengue fever**

Dengue, or "break-bone" fever, is a viral disease of the tropics and sub-tropics. It is transmitted by the *Aedes aegypti* and *Aedes albopictus* mosquitoes that bite during the daytime and are found in and around human habitation. Transmission from mother to child is possible during pregnancy or birth. Symptoms include high fever, severe headaches, joint and muscle pain, nausea and vomiting. A rash often follows. The acute illness can last up to ten days, but complete recovery can take two to four weeks.

Occasionally, a potentially fatal form of dengue called severe dengue (previously known as dengue hemorrhagic fever or DHF) occurs. Severe dengue is more likely in infants and pregnant people, as well as for people who have been infected in the past and are infected again with a different strain of dengue. When a pregnant person is infected there is a risk of pre-term birth, low birth weight and foetal distress. About 2 to 3 out of 100 severe dengue cases are likely to be fatal.

Prevention is through avoiding mosquito bites. There are two commercially available dengue vaccines approved in a few countries. Dengvaxia is generally only used in people with previous dengue infection while Qdenga can be considered for people without a history of dengue infection.

Dengue fever risk is high, especially during the rainy season which extends from July to October.

## **Filariasis**

Filariasis is a parasitic disease, also sometimes called "elephantiasis". It is caused by microscopic, thread-like worms that are spread via mosquito bites. Larvae enter the skin when a person is bitten, then travel to the lymph nodes, where they develop into adult worms. The adult worms reproduce (creating microfilaria) then migrate further in the tissues and circulate in the blood causing a variety of symptoms.

Initial symptoms include skin redness and swollen lymph nodes in the arms and legs. Headache, weakness, muscles pain, coughing, wheezing and fever are also common.

People who are repeatedly bitten by mosquitoes over several months or years are at risk. Thus, short-term travellers are at low risk. Nevertheless, all travellers should prevent insect bites.

Filariasis was first identified in the Philippines more than a century ago and the presence of this parasitic infection has been reported in more than 40 provinces of the country. The disease is also known as elephantiasis or “tibak” in the vernacular with a high prevalence in Marinduque and Sulu. An increased risk is seen during the heavy monsoon months of November to January.

In 2011, the World Health Organization (WHO) announced that nine provinces have successfully eliminated lymphatic filariasis: Agusan del Sur, Biliran, Bukidnon, Compostela Valley, Cotabato, Dinagat Island, Romblon, Sorsogon and Southern Leyte.

### **Japanese encephalitis**

Japanese encephalitis is serious viral illness, spread by mosquitoes. It occurs in most of Asia as well as some parts of the Western Pacific, mostly in rural agricultural areas. Although many people won't have any symptoms, it can cause encephalitis (inflammation of the brain) with permanent brain damage, or be fatal. Prevention is through preventing mosquito bites. In addition, vaccination is recommended for travellers at higher risk.

Japanese encephalitis is prevalent on all islands in the country, with transmission occurring year-round. The transmission typically reaches its peak between July and October. A larger number of cases are detected in the northern regions, specifically Cagayan Valley, Ilocos, Cordillera Administrative Region (CAR), and Central Luzon.

### **Scrub typhus**

The bacterial disease scrub typhus is also known as tropical typhus or "chigger fever". Humans become infected when bitten by disease-carrying mites. A lump develops at the bite site. It ulcerates and forms an eschar (like a cigarette burn). Glands near the bite swell. Sudden onset symptoms progress, including high fever, headaches and sore muscles. About a third of those infected develop a rash.

Complications, such as pneumonia and nervous system impairment, can occur. Treatment with timely appropriate antibiotics will cure the disease. Untreated, mortality can be as high as 30 percent. No vaccine is available. Prevent infection by avoiding mite habitats (such as rodent infested areas, recently cleared forests clearings and rice paddies) and by preventing mite bites.

## **Zika virus**

Zika fever is a viral disease, mostly transmitted to people by mosquito bites, but also from one person to another through sexual contact. Symptoms can be mild and include fever, rash, muscle and joint pains, red eyes (conjunctivitis). However, infection during pregnancy can cause severe complications, including miscarriage and permanent birth defects (congenital Zika syndrome). No specific treatment or vaccine is available. Prevent infection through mosquito bite avoidance. Prevent sexual transmission through condom use or abstinence.

Zika may be present in some areas. The first Zika case was reported in 2012. Sporadic cases have been identified in travellers from the Philippines.

## **Tuberculosis (TB)**

Tuberculosis (TB) is a serious bacterial disease. The bacteria can be coughed or sneezed into the air by an infected person. Most people who contract TB have had prolonged, close, exposure to an infected person. Family members, close friends and healthcare workers are most at risk. People with compromised immune systems, babies and children, those travelling to or living in countries with high TB rates, smokers and those who consume alcohol or other substances and those residing in group accommodation (such as prisons or nursing homes) are also at higher risk.

Active TB causes a variety of symptoms that are sometimes vague, but often include prolonged cough, chest pain, weakness, lack of appetite, weight loss, fever, chills, night sweats, tiredness, and lack of energy. Latent (inactive) TB causes no symptoms.

Tuberculosis is diagnosed by evaluating a patient's risk factors for exposure to TB, clinical symptoms, chest X-rays, CT scan, tuberculin skin testing and examination of sputum or secretions which may contain the bacteria.

Most strains of TB can be treated with antimicrobial drugs. Up to four different types of medicines may be used together to treat a patient. If left untreated, active TB can be life-threatening. Some forms of TB have become resistant to drugs (MDR TB), and some forms are extensively resistant to drugs (XDR TB). These forms are hard to treat.

A vaccine, Bacillus Calmette-Guerin (BCG) is available. It protects children against severe TB. Some authorities recommend vaccinating children up to 16 years old or for travellers who may live or travel for three months or more to places with higher rates of TB infection or with the risk of multi-drug resistant TB. It must be discussed on an individual basis with your own health care provider.

Avoid enclosed or crowded environments where there are known TB patients, such as hospitals and prisons, whenever possible. People who must enter such places, such as health care workers, should wear specially fitted personal respiratory protective masks (such as the N-95 mask). Other ways to prevent the spread of TB include early identification, isolation and treatment of active cases, spreading awareness of symptoms to ensure people seek medical care early and ensuring that people on treatment take their medication and complete the entire course.

The World Health Organization (WHO) has designated the Philippines a "high burden country" for tuberculosis. The country falls in the "severely endemic" incidence category for tuberculosis with an estimated 643 cases per 100,000 population in 2023. WHO has also designated the Philippines a "high burden country" for multidrug-resistant or rifampicin-resistant tuberculosis (MDR/RR-TB). BCG vaccination is given at birth and is included in the country's immunisation schedule.

International assignees or frequent travellers should consider consulting their doctor as TB screening may be offered.

## **Altitude**

Altitude illness is a potentially fatal condition that can affect people who normally live at a low altitude and travel to higher altitudes. It can occur from elevations of 1,500 meters onwards but is more common at elevations above 2,500 meters (8,000 feet).

People most at risk are those who have experienced altitude illness before, people who have heart or lung problems and people under the age of 50. There are three different types of altitude illness: Acute Mountain Sickness (AMS), High Altitude Cerebral Edema (HACE) and High Altitude Pulmonary Edema (HAPE). AMS is the most common and mild form of altitude illness. HACE and HAPE are more severe. HACE is a medical emergency and if not treated and managed quickly, can result in coma and death. Management of altitude illnesses involves immediate descent and oxygen treatment. Most people who are affected, even those who develop HACE or HAPE, recover completely if moved to a lower elevation. There are medicines that can be administered by trained medical professionals.

Anyone travelling to high altitudes, especially higher than 2,500 meters, should be aware of and recognise the symptoms of altitude illness. See your travel health professional before departure, for individual advice on preventive measures, especially if you have ever suffered altitude sickness in the past, or if you have an underlying medical condition.

The Philippines islands are mostly low-lying but their volcanic origin results in a series of sharp peaks throughout the country, many over 2,500m (8,202ft) above sea level. The highest point, Mount Apo on Mindanao, is 2,954m (9,692ft).

## **Volcano**

There are several types of volcanic eruptions and some pose a major threat to health. One such eruption is volcanic ash fall. Ash is made of fine particles of rock and minerals and is gritty and abrasive. It can carry for many kilometres through the air. Approaching ash clouds resemble ordinary weather clouds, and are sometimes accompanied by lightning or thunder. They bring a sulfur smell into the air.

When the ash finally falls, it settles in a dust-like covering. The "dust", however, is hard and abrasive. It does not dissolve in water, and it conducts electricity. It becomes more conductive when wet. Heavy ash falls can cause roofs to collapse and can lead to high levels of respirable ash in the air people breathe.

Most commonly, people get a runny nose and sore throat, sometimes with a dry cough. Because the ash is gritty, it can cause skin and eye irritation. People should minimize exposure to ash, those with chronic bronchitis, emphysema, asthma and other respiratory conditions should be especially vigilant since their symptoms can worsen.

Volcanoes are distributed throughout the country, across the many islands. The following have a history of recent eruption: Bulusan, Kanlaon, Mayon, and Taal. The [Philippines Institute of Vulcanology and Seismology](#) (PHIVOLCS) monitors activity and publishes [bulletins](#). [Hazard maps](#) are also published by PHIVOLCS.

## **Cholera**

Cholera is a diarrhoeal disease. People get sick when they consume food or water that has been contaminated by the faeces of an infected person. The most common symptom is severe watery diarrhoea, often called "rice-water" stools. Vomiting is also common.

Most cholera infections are relatively mild. People recover on their own by keeping well-hydrated. About 1 in 10 of all infected people will suffer severe illness, which can cause life-threatening dehydration. These cases are treated with oral and/or intravenous fluid replacement and antibiotics.

Most travellers have a low risk of cholera, as following food and water precautions is usually sufficient to prevent the disease.

Healthcare and relief workers who travel to areas of cholera outbreaks and have limited access to safe water are at higher risk. They should consider vaccination against cholera.

Cholera outbreaks are reported sporadically. The source is usually contaminated water supply.

## **Hepatitis A**

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water and is common in areas with poor sanitation. Person-to-person spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity. People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease.

Not everyone gets symptoms. If symptoms do occur, they begin two to four weeks or more after infection and can last for weeks or months. Symptoms include fever, fatigue, loss of appetite, diarrhoea, nausea/vomiting, abdominal pain/discomfort, jaundice (yellow colour of the skin and eyes), dark urine, clay-coloured stool, joint pain and itching. Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However, for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy.

Prevention is through vaccination, attention to hygiene, and access to safe food and water.

## **Travellers diarrhoea**

Travellers' diarrhoea is the most common travel-related illness. It usually occurs within the first week away from home. It is spread through contaminated food and water.



Prevention is through choosing safe food and water, and paying attention to hygiene. Select food that is thoroughly cooked while fresh and served hot. Avoid undercooked or raw meat, fish or shellfish. Avoid salad and raw vegetables unless you can wash them with clean (treated) water and you peel them yourself.

Unless you are certain that the tap water is drinkable - choose bottled water and beverages, avoid ice.

Travelers staying outside of first class hotels and tourist resorts are at high risk for travelers' diarrhea and other intestinal illnesses.

### **Typhoid fever**

Typhoid fever is a serious infection caused by *Salmonella typhi* bacteria. People are infected through ingesting contaminated food or water. Choosing safe food and water and vaccination reduces the risk of developing the disease.

Symptoms usually begin one to three weeks after exposure. Although typhoid fever is often called a diarrhoeal disease, some patients do not have diarrhoea. Persistent, high fever is typical. Other early symptoms are flu-like: body aches and pains, weakness, loss of appetite and a continuous dull headache. A rash with pink spots may appear on the chest and abdomen of some patients. In severe cases, perforation of the bowel can cause severe bleeding or infection in the abdomen, which can be fatal.

Typhoid is treated with antibiotics. However there is a growing problem of antibiotic resistance. "Extensively drug-resistant" (XDR) typhoid is present in some locations and does not respond to many of the antibiotics which are usually used against typhoid, making preventive measures even more important.

### **HIV, Hepatitis B and C, and STIs**

HIV/AIDS, hepatitis B, and hepatitis C are spread by contact with bodily fluids (especially blood and semen).

- unprotected sex,
- needle sharing during IV drug use, or
- unsafe blood or medical/dental instruments.

Genital herpes (HSV), genital warts (HPV), gonorrhoea, chlamydia, syphilis and most other sexually transmitted diseases are spread by genital contact.

Prevention:

- In many countries, hepatitis B is now a routine childhood immunisation and need not be repeated. All non-immune travellers should consider vaccination.
- Always use new condoms (preferably brought from your home country).
- IV drug users should not share needles.
- Avoid having tattoos or piercings done.
- In healthcare settings, make sure that needles and syringes are sterile and not shared between patients.
- Call International SOS or your corporate medical department if you are hospitalised.
- Be aware of your risk when assisting anyone with an injury. Protect yourself from contact with bodily fluids.
- Seek medical attention within 24 hours if you accidentally come into contact with someone else's bodily fluids.

### **Schistosomiasis**

Schistosomiasis, also known as bilharzia, is a disease caused by parasitic worms that live in freshwater lakes, rivers and rice paddies. It can penetrate the skin of persons who are wading, swimming, bathing or washing in contaminated water. There is no vaccine.

To prevent infection:

- Avoid swimming or wading in fresh water in countries where schistosomiasis occurs.
- Using soap during bathing *reduces* the risk of infection, as does a vigorous rubdown with a towel immediately after contact with contaminated water. Do *not* rely on these methods to prevent schistosomiasis.
- Heat bath water for five minutes at 50°C (122°F).
- Water held in a storage tank for at least 48 hours should be safe.

The first reported case of Schistosomiasis in the Philippines was in 1906. A large outbreak occurred in 1944-1945 in American and Australian soldiers. Thousands of cases are reported each year, mostly from Bohol, Lake Naujan, coastal Mindanao, Samar and Southeastern Luzon. *Schistosoma Japonicum* is the predominant form of schistosomiasis in the country.

## **Food & Water**

**Drink bottled water. Care with food.**

## Food Risk

Wash or sanitise your hands before eating. Always choose fresh food that has been thoroughly cooked and is served hot, since heat destroys most contaminating bacteria. Meat and fish should be "well done".

Check expiry dates of food products; it is advisable not to buy food which is about to expire. Storage conditions can be substandard even in big shops.

Avoid raw foods, shellfish, pre-peeled fruit and salad. Fruit that you wash and peel yourself is safe to eat. Avoid street vendors and market food because the standard of hygiene may be low and food may not be fresh.

Although food in larger international hotels is usually safe, follow the basic rules discussed above. In any location, busier restaurants may be safer as they are more likely to serve freshly cooked food.

## Water and Beverages

Tap water is unsafe to drink. Drink boiled or bottled water, or carbonated beverages, provided that the seal is intact. Look for bubbles when you open a carbonated beverage - bubbles are evidence that the product has been processed. Bottles are sometimes refilled with tap water and resold, and these products are not safe to drink.

Avoid ice because it can be made from unsafe water. Do not rinse your mouth or toothbrush with tap water, and do not open your mouth in the shower. Do not purchase unsealed drinks or ice cream made by street vendors. These may contain untreated tap water and the equipment used may not have been properly cleaned. Coffee and tea made from boiling water are safe to drink, as are beer and wine. It is best to use ultra heat treated (UHT) or canned milk that has been pasteurised.

# Destination Guide for Philippines



## Security

### Destination Guide Content

## Personal Security

### STANDING TRAVEL ADVICE

- Travel to the Philippines can continue.
- Crimes pose a significant risk to workforce. Always exercise heightened caution and appropriate security measures in all areas. Accommodation and transport decisions should be made with attention to the risks posed by crime.
- Confidence tricksters may target foreign nationals. Be wary of strangers and their motives, and do not accept food or drink from unidentified or recently met persons unless accompanied by a trusted local host.
- Opportunistic and narrowly targeted kidnap-for-ransom remains a threat. Although most victims are local nationals, foreign nationals are at risk due to their perceived wealth. Avoid ostentatious displays of wealth, be aware that kidnappers may pose as police officers or other persons of authority, and be particularly vigilant at roadblocks and during spot-checks. International assignees are advised to vary routines, choose a modest model of vehicle, and maintain vigilance for signs of surveillance.
- Criminals are commonly armed; if targeted, do not do anything to resist or antagonise your assailant.
- There is a credible, albeit mostly latent, risk of attack by either domestic or transnational terrorists. Government personnel and buildings, military personnel and facilities, public transport, houses of worship, and crowded shopping and entertainment venues are likely targets. Be alert to suspicious behaviour and report any suspect packages to the authorities.
- Avoid demonstrations and rallies as a general precaution. Clashes with the security forces, though uncommon, can quickly become extremely dangerous. Vacate the area immediately if a large crowd or concentration of the security forces begins to develop.
- Travel by bus, jeepney, ferry and rail is not suitable for business travellers. Use only a private vehicle and driver or taxis arranged through your hotel or local host. If attending meetings away from your hotel, pre-book return transport.

- Factor in the performance record of domestic airlines and consult travel agents regarding their suitability when making travel plans.
- The above advice is not exhaustive; seek itinerary-specific advice prior to travel in the Philippines.

#### *South-west Mindanao*

- Travel to south-western parts of the Mindanao island, including Marawi (BARMM), should be for essential purposes only. If journeys are essential, use a trusted local provider or host. This will assist in smoothing passage through heavy security and any potential road closures.
- Expect a significant security force presence in most urban centres and major highways in the region. Follow all official directives, including any curfews or restrictions on movement, and carry personal identification documents to ease passage through any checkpoints and spot-checks.

#### *Rest of Mindanao*

- Although travel to most of Mindanao is viable, seek itinerary- and profile-specific advice before travelling to the island. Ensure these journeys are supported by your organisation's security protocols and infrastructure.
- Avoid non-essential overland travel due to the risks posed by banditry, poor driving standards, road conditions, and the presence of militants who at times erect illegal roadblocks to extort money or as a part of their kidnap-for-ransom methods.
- When undertaking essential road travel, do not self-drive. Instead, use an experienced and trusted local driver and ensure your vehicle is in good condition. Travel between population centres during daytime only. Take precautions against carjacking and avoid high-risk areas.
- Trips to coastal resorts and islands in Mindanao should be arranged through reputable tour operators and include comprehensive itinerary and accommodation details. Business travellers should select accommodation based on a thorough research into and professional advice on security infrastructure, facilities, location and access to support. At a minimum, business travellers should select guest rooms that do not have direct access to the waterfront.

#### *Sulu archipelago (Basilan, Sulu, Tawi-Tawi (BASULTA))*

- Avoid all travel to the Sulu archipelago because of the risks posed by insurgency, terrorism and associated criminal activity.

## **Crime**

### **Occurs in many areas, sometimes violent**

#### **CRIME**

Crime poses the main day-to-day risk to in-country workforce and business travellers.

Petty and opportunistic crimes such as pickpocketing and purse-snatching are common in entertainment and public areas in all major cities. Car theft and carjacking happen nationwide. Opportunistic crime tends to increase around festivals and holidays. Business travellers should carry minimal cash and credit cards, and refrain from overt displays of wealth.

Violent crime is a significant problem, compounded by high levels of illicit small-arms ownership. There have been incidents in which Chinese, Korean and Japanese nationals have been targeted in violent crime by business rivals. Exchanges of gunfire between the security forces and criminals occur occasionally, even in areas frequented by foreign nationals such as high-end urban areas and provincial resort towns. Most such incidents tend to take place in residential areas beyond the central business districts of major cities. Instances of violent crime involving explosive devices and firearms have also taken place in major cities, posing significant incidental risks to bystanders.

Additionally, foreign nationals have been involved in verbal altercations with local nationals, which have escalated into acts of violence, including murder. Confrontations should be avoided given that even seemingly trivial issues could lead to serious violence. As a standard practice, in-country workforce should be aware of the potential for credit-card fraud when making purchases or withdrawing cash. They should exercise prudence when extracting money from ATMs and check if any suspicious devices are attached to the machine or placed over the card slot. Additionally, business travellers visiting entertainment venues should remain vigilant to confidence tricksters, including strangers offering drinks or confectionary. There have been reports of food and drink spiking followed by robbery.

There has been a noticeable increase in cybercrime and telephone fraud in recent years. The authorities and private financial institutions frequently advise caution against cybercriminals. Despite legislation like the Subscriber Identity Module (SIM) Card Registration Law and the Cybercrime Prevention Act being enacted, cybercrime and phone fraud persists. Business travellers should be wary of suspicious emails, phone calls and text messages and avoid clicking on links or responding to calls or text messages requesting for personal financial information like PINs and passwords.

Banditry-related violence is a significant security concern in insurgency-affected areas, especially rural parts of southern and western Mindanao island and the Sulu archipelago, where it is often difficult to distinguish between militant and criminal gangs. These groups are also known to target business interests, such as mining projects, for extortion purposes. Dispute-related violence (locally known as 'rido') also occurs in these areas and is usually driven by personal grievances, business disputes, clan rivalry and/or political ambition.

## **Terrorism**

### **Moderate indirect risk to foreign nationals**

#### **TERRORISM**

Despite enactment of anti-terrorism legislation and additional security measures that have helped reduce terrorism's threat in recent years, there is a persistent risk of attacks

by militant groups. The authorities have introduced several measures such as Proclamation 55 (imposed in 2016 after the Davao City bombing), which provides for checkpoint, curfews and other public security measures. The Anti-Terrorism Act of 2020 (ATA2020) also came into effect in July 2020. ATA2020 provides a legal foundation for stronger measures to counter and penalise terrorism. The law provides for warrantless arrests as well as extended detention and surveillance of terror suspects.

The main local militant groups are the Sulu-based extremist Islamist Abu Sayyaf Group (ASG), the Dawlah Islamiyah (DI) and its factions like the Maute Group (DI-MG), Bangsamoro Islamic Freedom Fighters (BIFF), Ansar al-Khalifa Philippines (AKP) and associated factions, as well as the leftist rebel New People's Army (NPA), which is the armed wing of the Communist Party of the Philippines (CPP). Although the Moro Islamic Liberation Front (MILF) is still the largest non-state armed group in Mindanao, it renounced its intention to carry out attacks following a 2014 peace deal with the government. Its leadership is engaged in the governance of BARMM, and several of its members are being integrated into the security services.

#### *Islamist militancy*

Several groups – such as the DI, BIFF and ASG – espouse extremist Islamist objectives and reportedly pledged allegiance to the jihadist Islamic State (IS) militant group in 2014.

Founded in 1991, the ASG's established aim is to seek an independent Muslim state in southern Philippines. However, its current operations – including occasional kidnaps-for-ransom attacks – appear largely driven by criminal objectives. In May 2017, its members alongside DI-MG and IS attacked and seized control of Marawi City (BARMM).

Government control was only restored five months later in October. The battle severely damaged the city and displaced more than 360,000 local inhabitants. More recently, IS claimed responsibility for an explosion on 3 December 2023 during a Catholic mass inside Mindanao State University's gymnasium in Marawi City. Four people were killed and more than 40 others injured in the attack.

Martial law was implemented on Mindanao from May 2017 to December 2019 due to the conflict in Marawi. The initial declaration of Martial Law in May 2017 was in place for 60 days, though it was then extended three times amid concerns over the persistent threat from Islamist militant factions and the NPA. Martial law accorded the Armed Forces of the Philippines (AFP) increased powers in Mindanao, such as the ability to carry out warrantless arrests and erect roadblocks and checkpoints. Under martial law, the AFP also partnered with the police to successfully secure key cities and trade zones, particularly in the Zamboanga Peninsula region, central parts of Mindanao island, Davao region and the Sulu archipelago.

The BIFF was founded in 2010 after splitting from MILF by rejecting the peace deal that established BARMM. The group's established aim is to set up a fully independent Islamic state. In recent years, the group and its associated factions have continued to attack government and MILF forces, as well as civilian targets. The group has been known to carry out attacks with small arms and explosive devices, including vehicle and suicide attacks, in its strongholds in southern Mindanao. Clashes between BIFF-affiliated fighters and the security forces are common in central-western parts of Mindanao. DI and its associated factions, like the DI-MG, emerged from the most radical faction of BIFF.

Post-conflict analysis has revealed that both foreign and other local militant groups – particularly IS and IS-aligned local insurgent groups – facilitated the infiltration of Marawi City. Foreign-based transnational terrorist groups continue to view Mindanao as an area where a caliphate could be re-established, following the fall of the IS caliphate in the Middle East. At least one foreign-based militant group, Jemaah Islamiyah (JI), reportedly continues to have a presence in the southern Philippines.

Opportunistic attacks by small cells affiliated to Mindanao-based militant groups or individual Islamist extremist sympathisers pose a credible threat. Such incidents are more likely to occur in militant strongholds in coastal or rural areas of southern and western Mindanao, namely Cotabato, Lanao del Norte, Lanao del Sur, Maguindanao, Sultan Kudarat provinces and the Zamboanga Peninsula region. Despite the security forces' ability to disrupt complex attack plots, Mindanao-based militants continue to exhibit the intent and latent capability to target Metro Manila and other urban and tourist centres.

#### *Leftist militancy*

The NPA was founded in 1969 as the armed wing of the Communist Party of the Philippines (CPP). Both the CPP and NPA are designated as terrorist organisations by the authorities. The group is known to collect a 'revolutionary tax' in insurgency affected areas. Although the group operates nationwide, its presence has diminished due to persistent counter-insurgency operations and declining local support. NPA-related violence continues to be reported in Agusan del Sur, Surigao del Norte, Surigao del Sur provinces (all Caraga region), Cagayan Valley and Bicol regions (both Luzon), Davao del Sur and Davao de Oro provinces (both Davao region), Leyte, Samar, Northern Samar and Western Samar provinces (all Eastern Visayas region), Negros Occidental province (Eastern Visayas region) and Bukidnon and Misamis Oriental provinces (both Northern Mindanao region). In rural areas, the NPA remains capable of conducting hit-and-run attacks and ambushes, and occasionally engages in clashes with the security forces. It is also known to carry out raids against plantations, mining compounds and factories that refuse to meet extortion demands. These tend to involve acts of arson and vandalism of equipment and pose risks to workforce.

Following the 16 December 2022 demise of Communist Party of the Philippines (CPP) leader Jose Maria Sison, the party called on the NPA to stage tactical offensives to demonstrate its continued relevance. Despite an established hierarchy, the CPP-NPA faces a leadership crisis due to the recent deaths of its key leaders and the capture or surrender of numerous members. In the absence of a leader of Sison's stature, the vacuum will further weaken the insurgent movement, especially amid robust counter-insurgency operations by the security forces with the view of ending the rebellion before the end of the current administration.

## **Kidnapping**

### **KIDNAPPING**

Despite the decreased instances of kidnappings due to more robust law enforcement operations against kidnappers, incidents can still occur anywhere in the Philippines. The situation is more acute in high-risk areas of Mindanao due to the presence of militants



and crime groups. Most recent instances of kidnappings and illegal detention involve people associated with the overseas gambling industry. There have also been recent instances of foreign nationals being lured to the country with spurious job offers, vacation packages and other similar ruses by criminal groups and held for ransom. Ethnic Chinese Filipino nationals remain the prime targets for abduction due to their perceived wealth.

However, some groups – such as the ASG – have also previously targeted foreign nationals for kidnap due to their perceived affluence. Mobile workforce or those who have married into Filipino families are at greater risk than business travellers, who are generally in the country for shorter periods. Nevertheless, victims have included those travelling for tourism, journalism or business purposes and NGO-related activities. Groups such as the ASG have married radical Islamist ideology with a long history of organised crime and are involved in kidnapping both local and foreign nationals. They are usually willing to release captives in exchange for significant ransom payments. Islamist militant groups retain the intent to carry out kidnap-for-ransom operations outside their traditional areas of operation in the Sulu archipelago and rural areas of south-west Mindanao. In Mindanao, kidnappings targeting foreign nationals remain a concern in the Sulu archipelago, the Zamboanga Peninsula and BARMM. Some kidnap-for-ransom groups can transport victims from one location to another across the country, which can hinder official mitigation efforts.

Kidnapping for ransom – largely linked to criminal activity – also occurs in Metro Manila and other locations. A significant number of these incidents are express kidnappings, in which criminals in stolen vehicles force victims to withdraw relatively small sums of cash from multiple ATMs throughout the city. Victims are usually released after several hours. Additionally, many instances of kidnapping for ransom are related to overseas gambling operations (the so-called Philippines Overseas Gaming Operations (POGO)). In June 2024, four police officers in Metro Manila were arrested for kidnapping four foreign nationals including one Malaysian and three Chinese nationals. In October 2023, six Chinese and three Filipino nationals were kidnapped from a residence in southern Metro Manila.

## Social Unrest

### **SOCIAL UNREST**

Protests and strikes are common in many urban areas, including Metro Manila, and major urban centres in the Visayas and Mindanao. Rallies are generally non-violent, if noisy, and can disrupt traffic and other essential services. Agricultural groups, transport unions and workers in other sectors stage demonstrations and strikes over the rising prices of essential commodities and to express opposition to government policies. Left-leaning groups have also frequently staged protests over the country's close relationship with the US, while other cause-oriented groups demonstrate when there are issues with other countries. Such demonstrations are normally concentrated around diplomatic missions and involve small- to moderately sized crowds that may engage in minor acts of vandalism. Scuffles with the police can occur and often result in arrests.

The largest gatherings are usually seen on 1 May in Metro Manila and other urban centres to mark International Labour Day. Such gatherings are usually well attended; business travellers should avoid large gatherings as a precaution.

Diplomatic tensions between the Philippines and China over disputed areas in the South China Sea (the Philippine claimed areas are locally called the West Philippine Sea) have sometimes prompted protests by nationalist groups outside the Chinese diplomatic mission in Makati City (Metro Manila). However, such demonstrations remain small and isolated and do not present an increased threat to people of Chinese descent.

In March 2024, the country experienced one of its strongest protests against China following a water cannon assault by the Chinese coast guard. The incident resulted in injuries to Filipino navy crew members and significant damage to their boat in the disputed South China Sea. Violence occasionally occurs during elections and other political events in certain areas of the country, particularly in northern and southern Luzon and Mindanao.

Violence related to attempts by election candidates to secure votes had been known to occur prior to the voting. Unrest may also break out following elections, especially during celebratory gatherings by supporters of the winning parties and protests by losing party activists as results emerge, and if allegations of electoral fraud arise. Security incidents at rallies in insurgency-affected areas of Mindanao, where extremist and militant groups operate, could be prompted by disputes and political tensions involving rival armed groups. Participation in demonstrations or any local political activity by foreign nationals can result in arrest and deportation.

## Conflict

### CONFLICT

Several locations in the South China Sea (including the eastern parts designated as the West Philippine Sea by the Philippine government) continue to be a source of bilateral tensions with China. The Philippines continues to lay claim to Scarborough Shoal, located near rich fishing grounds, despite claims by China. The Philippines is also among six Asian countries that claim the Spratly Islands in the South China Sea – the others are Brunei, China, Malaysia, Vietnam and Taiwan (China). Representatives of the Philippines, China and other claimant countries signed in September 2003 a declaration of peace to promote the development of resources in the disputed islands.

Bilateral issues related to the South China Sea have led to numerous diplomatic rows. For example, the Philippine Department of Foreign Affairs made a formal diplomatic protest following the release on 27 March 2022 of a report into a near-miss incident involving Philippine Coast Guard (PCG) and Chinese Coast Guard (CCG) vessels in the disputed Scarborough Shoal. On 6 February 2023, another encounter between the two coast guards occurred near the Philippine occupied Second Thomas Shoal (locally called Ayungin Shoal). This incident escalated into a diplomatic row after reports of the CCG using a laser against a PCG vessel. This was followed by another incident on 5 August, in which the CCG used water cannon against Philippine government-chartered vessels resupplying troops on the shoal. Since only one of the two vessels managed to evade the CCG blockade, another resupply mission was mounted and successfully completed on 22 August despite Chinese attempts to block it.

In March 2024, the Philippines expressed a strong diplomatic protest to China over the actions of the CCG in the South China Sea. In June 2024, Chinese coastguard vessels reportedly rammed and damaged Philippine navy boats to prevent them from delivering supplies to troops on the Second Thomas Shoal. Incidents have heightened bilateral tensions anew, resulting in another diplomatic row and small-scale protests near the Chinese consulate in Makati City.

The Spratly Islands issue has also resulted in several minor military skirmishes, diplomatic protests and the detention of fishermen. Although South China Sea issues are not likely to lead to a wider military conflict in the medium term, the area remains a flashpoint issue due to the potential for periodic politicisation, low intensity conflict, military accidents and miscalculation.

#### *Mindanao*

The MILF broke away from the Moro National Liberation Front (MNLF) in the late 1970s to continue fighting for autonomy for Filipino Muslims. In the past, the group has used violence, including attacks against both civilians and the security forces. Since February 2019, MILF leaders have been leading the BARMM transitional government. The incorporation of former armed rebel leaders into the formal local governance structure within the BARMM has been a key factor underpinning the successful transition away from conflict with the central authorities. Nevertheless, there remains a risk of internal conflict within the BARMM between powerful political clans and the MILF, representing the new authority. Inter-clan tensions continue to occasionally trigger retaliatory violence mainly in rural areas, particularly in Mindanao. Such incidents, which usually have localised impact, can involve the destruction of property and displacement of local households, as part of clan attempts to address various perceived affronts. These inter-clan feuds (also known locally as 'rido') are long-term issues that can oblige the involvement of succeeding generations and potentially last decades.