

PRE-CRISIS INFORMATION MAPPING AND CONSULTATION

LARGE-SCALE TYPHOON



Community of Practice on Community Engagement



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“As long as we are living in a coastal area, fishing will always be the main source of livelihood for me and my family. There can never be a substitute for that unless we are going to move to the city proper. We are doing all the means to protect our fishing facilities as our lives depend on it.”

Member of the fisherfolk association from Barangay San Juan in Sipaway Island, San Carlos City, Negros Occidental

Executive summary

In support of the medium-to-large scale typhoon contingency plan developed by the Humanitarian Country Team-Inter Cluster Coordination Group (HCT-ICCG), an intensive pre-crisis information mapping and inclusive consultation was conducted in Northern Luzon and Visayas Region from July to November 2018. The conduct of this activity focuses on validating the preferred humanitarian aid of the affected population and at-risk communities in an event a typhoon similar or greater than typhoon Haiyan happens. Through the HCT's Community of Practice on Community Engagement (CoPCE), five (5) at-risk and vulnerable barangays (lowest form of government) were piloted in the provinces of Cagayan and Kalinga in Northern Luzon and coastal island village in Negros Occidental.

CoPCE members such as OCHA, UNICEF, Care, Christian Aid, Humanity & Inclusion (HI), NASSA/Caritas Philippines, with support from Cagayan Valley Disaster Response Centre (CVDRC), field volunteers and the local government in Cagayan, Kalinga and Negros Occidental facilitated the conduct of the pre-crisis activity. These include series of scoping mission and initial consultation with various stakeholders, capacity building workshop for local volunteers including the use of

the pre-crisis mapping consultation tool and kobo collect application¹, reviewing of key document like Barangay Disaster Risk Reduction and Management (BDRRM) plan as well as ongoing initiatives of the local government in line with enhancing its capacity to improve future humanitarian response actions.

The methodologies employed for the pre-crisis activity includes household survey (HS), key-informant interview (KII) and focus-group discussion (FGD). The process was combined quali-quantitative, with emphasis on the time-critical phases of humanitarian response: 72 hours, 1 week, 1 month and 3-6 months after the landfall. Selected areas and communities for this initiative have prior experience of being geographically isolated due to the catastrophic impacts of a strong typhoon, rain-induced landslides and massive flooding.

The success of the pre-crisis mapping and consultation for Manila 7.2 magnitude earthquake in 2017² paved the way to the conduct of more hazard specific pre-crisis mapping and consultation in other parts of the country. The same methodology,

¹ Pre-crisis information mapping and consultation kobotoolbox online link: <https://ee.humanitarianresponse.info/x/#0HhLdFhT>. Kobo collect is a free open-source tool for mobile data collection. It allows data collection in the field using mobile phones, tablets and computers.

² <https://reliefweb.int/report/philippines/manila-earthquake-pre-crisis-information-mapping-survey-and-consultation>

including the use of Washington Group of Questions (WGQs)³, was adapted for the pre-crisis in Northern Luzon and Visayas region but they varied on the scope, approaches and inclusion of other components related to:

- mapping and consulting communities living in geographically isolated and depressed areas (GIDAS);
- identifying common services on community engagement (aside from the lifesaving needs in the initial response);
- supporting localization of humanitarian response;
- linking pre-crisis information to early warning system, communication protocol and evacuation procedure;
- validating preferred aid with the pre-positioning of the Key Immediate Needs;
- contextualizing humanitarian quality standards and principles;
- complementing local capacities, resources and initiatives on overall community-based disaster risk reduction and management.

The conduct of the pre-crisis mapping and consultation stressed the importance of the operational accountability in preparedness. The emphasis is how can an enhanced community participation be established and sustained in the process to effectively address both the lifesaving and evolving needs of the affected communities from humanitarian response to early recovery.

Part of the pre-crisis mapping is identifying how to maximize available communication and community engagement common service platforms identified by the at-risk communities. These include existing traditional or local forms and other platforms such as face-to-face consultation, community assembly, FGD for the less vocal and visible members of the community, dialogue with barangay officials, relatives, friends and neighbours, influence of local leaders and presence of community-based organizations, print, radio, SMS and various social media platforms (Facebook, Twitter and Instagram).

³ WG of questions is a set of questions designed to identify people with disability. The questions ask whether people have difficulty performing basic activities such as walking, seeing, hearing, cognitive reasoning, self-care and communication. WG explicitly addresses only limitation in undertaking basic activities and is designed for analysis with other information that incorporate the bio-psychosocial model of disability.

What went well

- The entire process was inclusive with the engagement of the local government, community volunteers, the most vulnerable and disadvantaged groups such as women, children, persons with disabilities, elderly, indigenous people as well as those marginalized sectors like the Farmers and Fisher Folk's Association.
- The collaboration of CoPCE members and local partners proved to be strategic, with each organization offering expertise, resources and connection at the field level.
- Both the pre-crisis information mapping/consultation tool and kobo collect application are well appreciated by the field volunteers, facilitators and local government. Integrating the overall process or methodology in the disaster management and contingency plan is a priority for each at-risk barangay.
- The entire process was easy to implement and does not require huge amount of funding in mobilizing local volunteers and facilitators.
- The initiative was useful for it
 - happened months before typhoon Mangkhut and Yutu and there was substantial information that supported the rapid response assessment days after the landfall of typhoon in Northern Philippines⁴.
 - It complements existing or ongoing community-based preparedness and disaster risk reduction activities at the barangay level.
 - While there were considerable delays in the identification of areas, existing partnerships in the previous response and ongoing disaster preparedness activities with local partners including Civil Society Organizations (CSOs), local Non-government Organizations (NGOs), Social Action Centre (SAC) and local government have been very useful of pushing the agenda to pilot areas in the conduct of intensive pre-crisis mapping and consultation.

Challenges

- Capacitating community-based volunteers/facilitators takes some time. For pilot barangays, it would be effective to have some experienced

⁴ September to October 2018, typhoons Mangkhut and Yutu affected Northern part of the Philippines.

facilitators/enumerators that will help facilitate the pre-crisis activity. The process is intensive that requires skills in the conduct of interview, art of consultation and analysis of information or feedback being provided.

- Considering geographical locations, pre-crisis mapping and consultation requires enough community preparation and appreciation of the intensive process in each barangay. There were delays in the actual conduct and this also affected the consolidation of data.
- Not all barangays engaged in this initiative have a good working relationship with municipal and provincial government. Two barangays are more vulnerable compared to other areas as it lacks support from the provincial/municipal government.
- While the entire process of the pre-crisis mapping and consultation does not require huge amount of funding, the time invested in the conduct and mobilizing the at-risk community is a major issue in terms of the availability of the people to be interviewed and consulted.
- Replicating the conduct of pre-crisis mapping and consultation in other areas requires good partnership between the government and other local organizations to ensure the process is inclusive and participatory. Not all at-risk barangays enjoyed the same level of partnership and access to common service platforms on two-way communication with other humanitarian organizations.

Recommendations

- The pre-crisis information mapping and consultation should be replicated in other vulnerable areas of Northern Luzon and Visayas Region. This time, pilot barangays and local partners will be in the frontline to provide the necessary support to other at-risk areas. Other CoPCE members can backstop the local government in the mobilization of additional resources and capacities, but the priority will be on the local CSOs and NGOs.
- Pilot barangays are expected to integrate the pre-crisis results into its BDDRM plans as well as on its typhoon specific contingency plan. As part of response preparedness, pilot barangays are expected to operationally adopt the pre-crisis results into its humanitarian response actions 72 hours, 1 week, 1 month and 3-6 months after the typhoon landfall.

- Pre-crisis information mapping and consultation results should be integrated in the cluster-specific Key Immediate Needs (KINs) as part of overall response preparedness for Haiyan-type typhoon. The process is similar to the 7.2 magnitude earthquake's pre-crisis mapping and consultation final results being incorporated to the HCT's contingency plan for Manila earthquake. For this initiative, the emphasis is on how the large-scale typhoon pre-crisis mapping and consultation will be more useful operationally and how the humanitarian community will be able to make use of the data in overall humanitarian response programming.
- Humanitarian agencies with established partnerships with the local government and at-risk communities should utilize the pre-crisis mapping and consultation results as these support localization component in the emergency response. Emphasis should be given on supporting local capacities while augmenting and complementing local resources in the time-critical phases of the humanitarian response.
- The pre-crisis mapping team to be deployed to support local government and at-risk communities should be fluent in the local language and sensitive enough with the political dynamics, culture and other practices in the area.

Overview

Over the past decades, both Northern Luzon and Visayas Region have experienced devastating impacts of typhoons, heavy rains, flooding and landslides. Most of the identified at-risk urban and rural areas in the said region have their own share of tragedy in terms of casualties, displaced communities and damages to livelihood, properties and other major infrastructures. Residents and small-medium size businesses have been affected as well by the adverse impacts to local economy and suffered from arduous and slow progress in recovery and rehabilitation.

Northern Luzon remains to be the region in the Philippines with less presence of humanitarian agencies and also with less immediate capacities or resources to respond in case of an emergency. Some vulnerable and at-risk areas in the Northern part of Luzon are considered difficult to access by land and the said areas could be totally isolated for more than a week or even months.

In the same way, some island towns in the Visayas region are not only vulnerable due to climate change related impacts but are also considered as geographically isolated and depressed areas (GIDAS). While those GIDAS have experienced typhoon-related emergencies over the past years, similar to Northern Luzon, only a few humanitarian agencies have presence in the Visayas

region or at least directly provided support to the local government and displaced communities during response.

Strong typhoons that hit Northern Luzon

Typhoon	Year	Category	Damage Cost (USD Million)	Casualties
Parma (Pepeng)	2009	4	581	465
Koppu (Lando)	2015	4	313	58
Haima (Lawin)	2016	5	72.6	14
Mangkhut (Ompong)	2018	5	627	134

The case of Northern Luzon and Visayas region reinforces the need to conduct the pre-crisis information mapping and consultation.

As part of its 2018 Strategic National Action Plan (SNAP), the Humanitarian Country Team- Community of Practice on Community Engagement (HCT's CoPCE) conducted pre-crisis information mapping and consultation in Northern Luzon and Visayas region from July- November 2018 in support to the HCT's medium-to-large scale typhoon contingency plan.

The contingency plan developed by the HCT focuses on a worst case typhoon scenario similar or greater than super typhoon Haiyan, which had a maximum sustained winds of more than 220

kilometres per hour and a 48-hour rainfall of more than 150 millimetres. As part of the contingency plan’s operation assumptions, it is expected that a super typhoon will cause widespread colossal damages to infrastructure, properties, livelihood and agriculture. Prolonged displacement, possible casualties and disrupted communication or power lines are also expected within three to six months after the landfall.

Part of the planning assumption is that government protocols for response actions and request for international assistance are in place. It is expected that the National Disaster Risk Reduction Management Council (NDRRMC) will declare state of national calamity and will accept or request for international assistance. The international assistance coming from the HCT and other non-government organizations is expected to boost the speed, volume and quality of lifesaving assistance as well as provision for the affected population’s evolving needs at a time when national and local partners may be overwhelmed. This underscored the humanitarian community’s role of ensuring the quality of assistance provided primarily by promoting humanitarian principles and international standards, applying best practices, advocating for inclusive and diverse partnership and complementing or augmenting existing capacities

or resources of both national and local government.

Strong typhoons that hit Visayas Region

Typhoon	Year	Category	Damage Cost (USD Million)	Casualties
Ike (Nitang)	1984	4	78	3,000
Thelma (Uring)	1991	3	1.9	8,000
Fengshen (Frank)	2008	3	400	1,371
Haiyan (Yolanda)	2013	5	4,550	6,000+

The conduct of the pre-crisis information mapping and consultation will further inform the typhoon contingency planning process and validate the projections of the key immediate needs (KIN) of the affected populations before a super typhoon strikes. Considered as an inclusive approach in the process of pre-positioning minimum resources of humanitarian agencies for future response actions, this initiative is sensitive to the principle of augmenting and complementing the overall capacities of the national and local government from regional, provincial, municipal up to the barangay level.

It is not only imperative for the voices or the preferences of both the at-risk and affected communities to be reflected in the future humanitarian response programming but these should also be the driving force in pre-positioning, at the minimum, the overall humanitarian response actions.

Around the time the pre-crisis information mapping and consultation was conducted during third to last quarter of 2018, two successive typhoons, Mangkhut and Yutu, hit Northern Philippines affecting areas of Benguet, Cagayan, Isabela and Kalinga. Initial findings in the mapping consultation validated most of the preferred needs of the at-risk communities in the first 72 hours to one month after the landfall.

Objectives

The initiative seeks to:

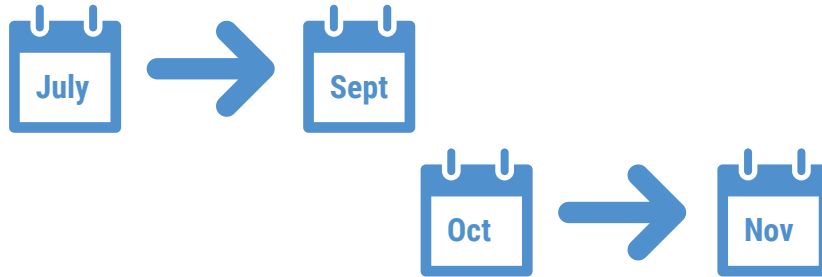
- conduct intensive inter-agency mapping survey and community consultation in the upland areas in Northern Luzon and coastal areas in Visayas region;
- validate information and concerns from the affected population or at-risk communities;
- augment and complement existing or ongoing similar activities of the local government and the community;
- review existing documents of local

governments as part of the mapping exercise related to capacities, resources and experience responding to a humanitarian response;

- come up with a comprehensive report that will further inform the HCT's typhoon contingency plan.

Timeline

Northern Luzon: Cagayan and Kalinga



Visayas Region: Negros Occidental

Activities

Scoping mission and initial consultation with the local government, communities, and other partners



Orientation workshop on the use of the pre-crisis information mapping and consultation and kobo tools

Tasking of the volunteers/facilitators for each approaches: Household Survey (HS), Focus Group Discussion (FGD), and Key Informant Interviews (KII)



Actual mapping and consultation in selected barangays

Review of key documents from the local government



Consolidation, validation, and analysis of data

Agencies involved



CoPCE members:

OCHA, UNICEF, Christian Aid (CA)
Care Philippines, NASSA/Caritas Philippines,
Humanity & Inclusion (HI)

Local organization partners:

Cagayan Valley Disaster Response Centre (CVDRC),
Social Action Centre (SAC)-San Carlos City



Local government/other agencies:

PDRRMO-Kalinga, CDRRMO-San Carlos City,
MDRRMO-Sto.Nino, MSWDO-Pinukpuk,
Municipal Governments of Sto. Nino (Tuguegarao),
Pinukpuk (Kalinga) and City Government of
San Carlos (Negros Occidental) Barangays Abariongan,
Apatan, Balagan, Ermita and San Juan.

Target areas



Northern Luzon

1. Province of Cagayan,
Municipality of Sto. Nino,
Barangays Abariongan and
Balagan
2. Province of Kalinga,
Municipality of Pinukpuk,
Barangay Apatan



Visayas

Province of
Negros Occidental,
Sipaway Island,
San Carlos City
Barangays
Ermita and San Juan

Methodology

This initiative:

• employs the quali-quantitative approach through household survey (HS), key-informant interview (KII) and focus-group discussion (FGD):

-for FGD, the focus is on children, women (pregnant women and lactating mothers), elderly, persons with disabilities, indigenous people, farmers’ association, fisher folk’s association and those living in geographically isolated and depressed areas

-for HS, the focus is both on the most and least affected local residents

-for KII, the focus is on local officials, specifically the Disaster Risk Reduction Management Office (DRRMO) officers, Barangay Disaster Risk Reduction Management Committee (BDRRMC) members, Municipal Social Welfare and Development Office (MSWDO) focal point, community-based groups or people’s organizations and other local networks;

•consult at-risk or affected communities on their priority humanitarian aid following these phases of humanitarian response:

- after 72 hours,

- 1 week,
- 1 month and
- 3-6 months;

• use the pre-crisis information mapping and consultation and kobo application in the consultation with the local communities as well as in the consolidation and analysis of data;

• incorporate the WGQs to highlight other inclusion issues and concerns.

Pre-crisis mapping and consultation tool





"Before it's good to know the limitation of your resources before an emergency happens, but right now it feels right and even better to know that you can access other means for humanitarian support before and after the disaster."

Jocelyn Ramos, Barangay Captain of Balagan, Sto. Niño, Cagayan

Analysis and findings:

Key informant interviews

Part of the inclusive process is consulting 50 BDRRMC members through Key-Informant Interview (KII). The KII was conducted to identify BDRRMC's role of providing lifesaving support at the critical phase of the humanitarian response. Specifically, the KII is crucial in analyzing:

- how reliable the BDRRMC's DRRM capacities and local available resources in responding to the lifesaving needs of the at-risk communities?
- how accessible will be the support coming from the government and other agencies in an event it needs additional assistance or once the level of response is scaled up?
- How does BDRRMC and local residents work with other community-based organizations or groups? And lastly,
- What are the status of basic facilities at the barangay prior to the response?

Cagayan and Kalinga

Feedback provided by the local officials of Cagayan and Kalinga reflects their experience from the devastation brought by typhoon Haima in 2016 and the recent typhoons that hit Northern Luzon in 2018 — typhoons Mangkhut and Yutu. The said three strong typhoons damaged heavily the livelihoods and agricultural properties of local residents that are mostly dependent on farming and fishing. Those typhoons affected as well shelter and other properties including farming and fishing equipment. Thousands of farmers and hundreds of fisher folks struggled

to recover from the 2016 typhoon. In the same way, the local government is still in the process of reconstructing and rehabilitating affected infrastructures and properties by typhoons Mangkhut and Yutu in 2018.

Barangays Abariongan and Balagan in the Municipality of Sto. Nino in Cagayan and Apatan are identified as GIDAS in an event of a medium-to-large-scale typhoon emergency. Apatan, a highland barangay, is vulnerable to landslide while Abariongan and Balagan, both located in the riverside of Cagayan Valley, are highly prone to flooding and landslide. Even without typhoon, the three barangays experienced short-term isolation due to usual flooding and rain-induced landslide, especially during rainy season.

Based from previous typhoon experience, the BDRRMC members interviewed in Cagayan and Kalinga have the capacity to provide the initial humanitarian support to the affected communities, 72-hours after the emergency. Most of them are candid of indicating that their at-risk locations will definitely need support from both the government and other humanitarian agencies in the succeeding days, weeks and months after the landfall of a Haiyan-type typhoon.

Support from the provincial and municipal government are accessible, however it needs to be maximized and as much as possible it must adhere to the humanitarian principles of providing lifesaving support to the affected communities. Some BDRRMC members shared that the support provided by the government have the tendency to be politicized in terms of prioritizing areas to be given aid and the type of support to be provided to the displaced communities. While some UN agencies, international non-government organizations, local CSOs, faith-based organizations (FBOs) Red Cross local chapters have provided humanitarian intervention in the past emergencies, there are less presence of well-resourced aid and development organizations in the area. The level of support that the local government can access is highly dependent on the national/provincial level, church parishes as well as other FBOs and CSOs locally based in Northern Luzon.

Most BDRRMC members interviewed raise concerns as regards the poor status of their barangay operation centres, medical facilities, evacuation centres as well as poor road conditions and overall landslide and flood mitigation measures. Another strong typhoon that may hit the Northern Philippines would definitely destroy most properties and infrastructures.

From the KII, it is definite that improving the BDRRM plans of each barangay would require inclusive integration of the pre-crisis mapping and consultation. The process of engaging the most vulnerable and disadvantageous groups is the critical transformational disaster management leadership governance that the BDRRMC members needed based from previous typhoon experiences. Transformational in the sense, for future response actions, most BDRRMC members expect that the pre-crisis mapping and consultation results will help facilitate the effective and quality interventions on both the lifesaving and evolving needs of the at-risk communities in an event of a major disaster.

Negros Occidental

In 2013, super typhoon Haiyan hit some areas in Negros Occidental including Sipaway Island. Although not badly affected as compared to Tacloban, affected residents of Barangays Ermita and San Juan shared that if similar typhoon directly hit the Island, then accessing immediate needs will be difficult. Ermita and San Juan are two barangays within Sipaway Island identified not only as highly vulnerable to climate-related hazards but considered as GIDAS as well.

The KII to the BDRRMC officials stressed the strong partnership between SAC and the local government from provincial down to the barangay level. While the capacity for humanitarian response is low, both barangays invested a lot in the community-based DRR initiatives; most BDRRMC members have undergone series of disaster management training.

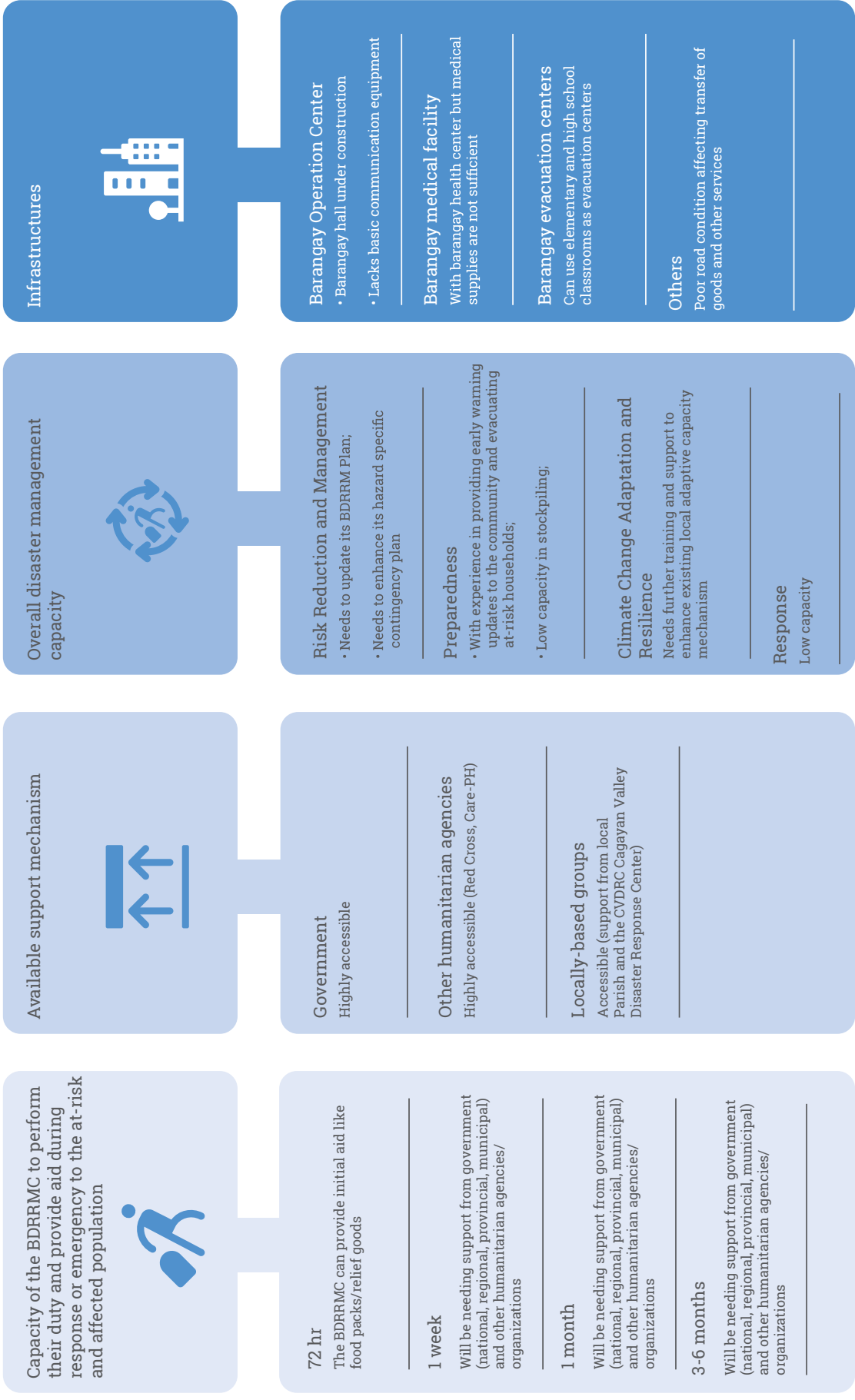
The BDRRMC plans of the two island barangays are updated but need to integrate the barangay specific preferred humanitarian aid as part of the overall pre-positioning measures. While the BDRRMC has the capacity to provide lifesaving needs of the affected communities from 72 hours to 1 week after the landfall of the typhoon, the most likely impact of Haiyan type typhoon would certainly overwhelm the capacities and resources of the local government. Support from other humanitarian agencies are welcome and needed for immediate recovery. Both barangays have low capacity in stockpiling, pre-positioning of emergency items and still need to improve overall evacuation procedure. Direct support and partnership with various humanitarian agencies and other non-government organizations is something that local government, CSOs, SAC, FBOs would like to explore as part of enhancing their capacity to respond to future typhoon response.

The operations centre in both barangays are functioning but medical facilities are not sufficient. The same goes with the barangay evacuation centres, which are all accessible, but may need retrofitting and further improvement to sustain strong winds, heavy rains and possible impacts of storm surge.

Aside from previous typhoon experience, various training and capacity building initiatives attended by the BDRRMC members enabled the local government to come up with its own early warning system, communication protocol and evacuation procedure. In terms of inclusion, it needs to reflect the level of participation expected from persons with disabilities, elderly, children, women, less visible or less vocal members of the community and the people's organization engagement. In terms of access to aid, aside from the provincial and the city government, the SAC and the Red Cross local chapters are expected by the BDRRMC to provide any humanitarian support from 1 month up to 3 months after the typhoon landfall.

Overall capacities and resources

Barangay Abariongan, Sto. Nino, Cagayan



Barangay Balagan, Sto. Nino, Cagayan

Capacity of the BDRRMC to perform their duty and provide aid during response or emergency to the at-risk and affected population



72 hr

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

1 week

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

1 month

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

3-6 months

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

Available support mechanism



Government

Accessible (but provincial and municipal politics can affect the humanitarian response)

Other humanitarian agencies

Highly accessible (Red Cross, Care-PH)

Locally-based groups

Highly accessible (support from local Parish and the CVDRC Cagayan Valley Disaster Response Center)

Overall disaster management capacity



Risk Reduction and Management

• No Barangay/Disaster Reduction and Management Plan
• No Barangay hazard specific contingency plan

Preparedness

• Barangay officials lack training specifically on early warning system, communication protocol and evacuation procedure
• Low capacity in stockpiling

Climate Change Adaptation and Resilience

Needs further training and support to enhance existing local adaptive capacity mechanism

Response

Low capacity

Infrastructures



Barangay Operation Center

• Barangay hall is not yet completed;
• Lacks basic communication equipment

Barangay medical facility

No barangay health center, and medical supplies are not sufficient

Barangay evacuation centers

No designated evacuation centre, except for one elementary school

Others

Poor road condition affecting transfer of goods and other services

Barangay Apatan, Pinukpuk, Kalinga

Capacity of the BDRRMC to perform their duty and provide aid during response or emergency to the at-risk and affected population



72 hr

The BDRRMC can provide initial aid like food packs/relief goods

1 week

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

1 month

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

3-6 months

Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/ organizations

Available support mechanism



Government
Highly accessible

Other humanitarian agencies
Highly accessible (Christian Aid, Humanitarian Inclusion)

Locally-based groups
Accessible (support from the Social Action Centre and CODE-NGO networks)

Overall disaster management capacity



Risk Reduction and Management

- Needs to update its BDRRMC Plan;
- Additional training on Disaster Management for BDRRMC members (including hazard and risk mapping)

Preparedness

- With experience in providing early warning updates to the community and evacuating at-risk households;
- Low capacity in stockpiling;

Climate Change Adaptation and Resilience

Needs further training and support to enhance existing local adaptive capacity mechanism

Response

The BDRRMC can provide lifesaving support from 72 hours to 1 week

Infrastructures



Barangay Operation Center

The structure is fine but it might be affected or damaged in case a Haiyan-type typhoon hit the area

Barangay medical facility

The structure is fine but medical supplies are not sufficient

Barangay evacuation centers

Elementary and national high school, community college can be used as evacuation centers

Others

- There are a couple of big houses that can accommodate displaced persons;
- Local Parish church can also serve as an evacuation centre;
- Poor road condition affecting transfer of goods and other services

Barangay Ermita (Sipaway), San Carlos City, Negros Occidental

Capacity of the BDRRMC to perform their duty and provide aid during response or emergency to the at-risk and affected population




72 hr
The BDRRMC can provide initial aid like food packs/relief goods

1 week
The BDRRMC, with support from provincial and municipal government, can provide food packs and other lifesaving support to the affected population

1 month
Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/organizations

3-6 months
Will be needing support from government (national, regional, provincial, municipal) and other humanitarian agencies/organizations

Available support mechanism



Government
Highly accessible

Other humanitarian agencies
Accessible (needs to be further explored in an event of a Haiyan type super typhoon)

Locally-based groups
Highly accessible (due to strong partnership with the Social Action Centre of San Carlos City)

Overall disaster management capacity



Risk Reduction and Management

- Needs additional training on hazard/risk mapping;
- Need to update Barangay contingency plan (hazard specific)

Preparedness

- With experience in providing early warning updates to the community and evacuating at-risk households;
- Low capacity in stockpiling

Climate Change Adaptation and Resilience

- Needs additional support to enhance adaptive capacity and local resilience considering Sipaway Island is highly vulnerable to climate-related hazards

Response

- The BDRRMC can provide lifesaving support from 72 hours to 1 week

Infrastructures



Barangay Operation Center
The structure is fine but it might be affected or damaged in case a Haiyan-type typhoon hits Sipaway island

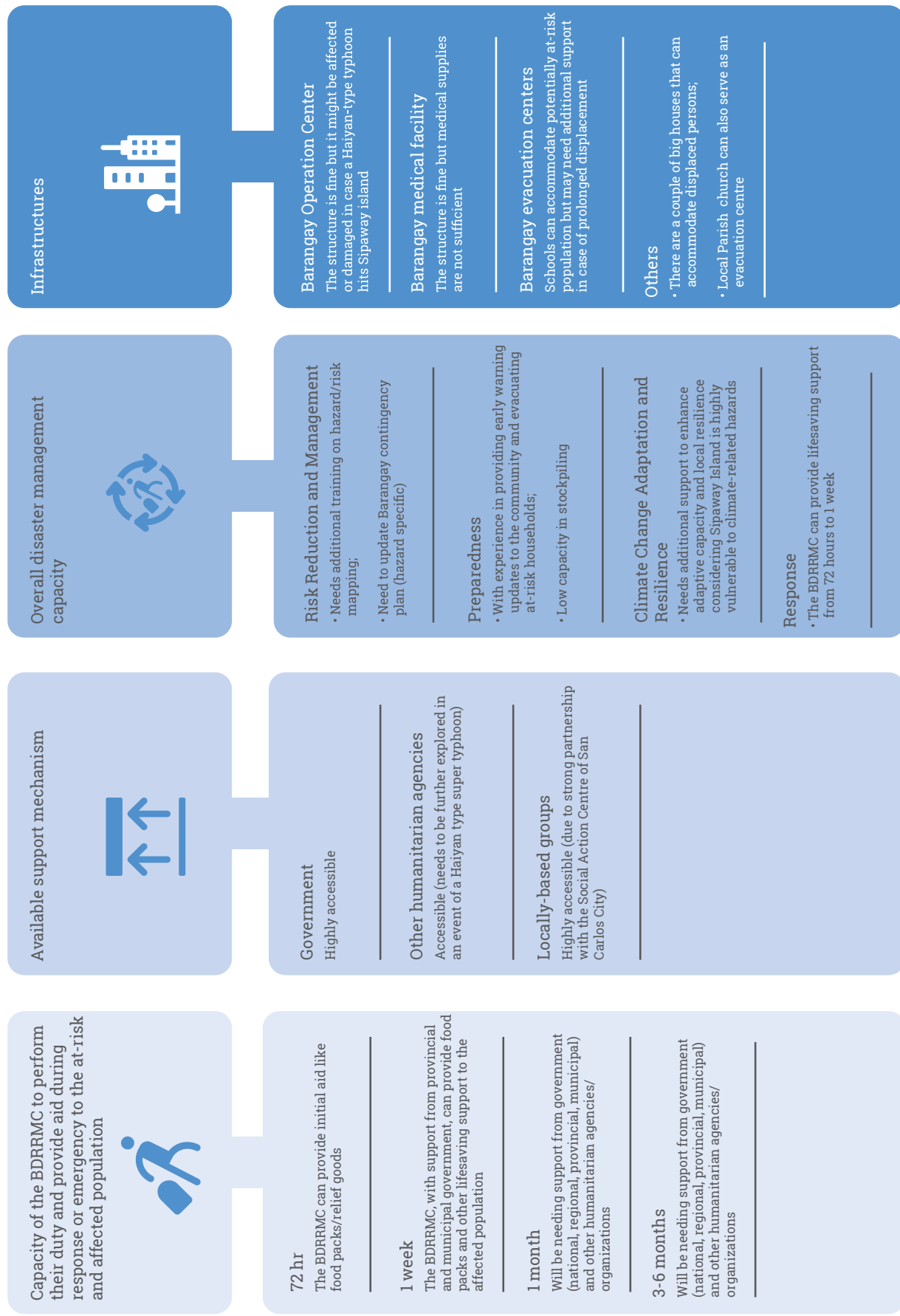
Barangay medical facility
The structure is fine but medical supplies are not sufficient

Barangay evacuation centers
Schools can accommodate potentially at-risk population but may need additional support in case of prolonged displacement

Others

- There are a couple of big houses that can accommodate displaced persons;
- Local Parish church can also serve as an evacuation centre

Barangay San Juan (Sipaway), San Carlos City, Negros Occidental





"We usually rely on ourselves to survive and cope up with the effects of typhoon. This has been our collective practice here. It's not that we don't need any support outside our community because any form of aid from government and other agencies are always welcome. It's simply because most of us here do not expect a lot and really endeavor to rely on our own and our close relatives".

Pregnant woman from Barangay San Juan in Sipaway Island, San Carlos City, Negros Occidental

Guide icons on information needs, preferred communication channels and accountability mechanisms

Information needs after the disaster



About aid provided by government



How to access other available communication channels



About aid provided by other organizations



Information about possible return to place of origin



Access to agencies providing aid (government or other organizations)



Information about missing relatives



Information about relocation



Information on how to communicate with loved ones living outside the area



Schedule and venue of aid distribution

Sources of information after the disaster



Friends, neighbors, and family



Community group



Government official



AM/FM radio



Community leader



TV (national/local)



Military official



SMS



Religious leader



Newspaper (national/local)



Aid worker

Preferred channels of consultation



Face-to-face consultation



Face-to-face consultation



General barangay assembly



General barangay assembly



Through community leader or government official



Through community leader or government official



Through SMS



Through SMS



Through aid worker



Through aid worker























































Through feedback box/complain desk



Through feedback box/complain desk

Preferred channels for feedback on aid received

Guide details on aid priorities and preferences

 food	 basic commodities	 condiments	 food packs	 hot meals		
 cash	 food	 transportation fare	 water	 Others		
 health	 ambulance	 birthing facility	 hospital	 health facility	 medical supplies	
 livelihood	 alternative livelihood	 food/cash for work	 new source of income			
 nutrition	 breastfeeding area	 health center	 medicine	 mobile clinic	 safe space for infants	
 properties	 appliances	 documents	 farm land/area	 handy items	 first aid kit	 sari-sari store
 protection	 medical, psycho social	 protection mechanism	 safe space	 safety & security patrol		
 sanitation	 hygiene kits	 sanitary facilities				
 shelter	 bamboo	 iron sheet	 nipa hut	 tarpaulin		
 water	 borehole	 pipe	 storage	 stream/river	 well	

Analysis and findings:

Household survey

On aid priorities and preferences

A total of 700 households, which is a mixed of the most and least vulnerable residents, were interviewed and consulted in the five pilot barangays in Cagayan, Kalinga and Negros Occidental. Again, previous experience with the aftermath of a strong typhoon has helped identify the priorities of the at-risk communities in stressing the specific aid they need in the various phases of the response. In terms of overall ranking from 72 hours up to 3-6 months of humanitarian phase, the following are the preferred aid priorities of the five pilot barangays: food, water, health, shelter, livelihood, cash, sanitation, properties, nutrition and protection.

To break it down, within 72 hours, the preferred priority aids are: food, water, health, sanitation, shelter, nutrition, cash, properties, livelihood and protection; within 1 week: food, health, water, shelter, sanitation, livelihood, nutrition, properties, cash and protection; within 1 month: shelter, food, livelihood, health, cash, properties, water, nutrition, sanitation and protection; and lastly, within 3-6 months: livelihood, cash, food, shelter, properties, health, water, nutrition, sanitation & protection.

In Cagayan (Barangay Abariongan and Balagan, Sto. Nino), the overall preferred aids are: shelter, food, health, livelihood, cash, properties, nutrition, water, sanitation and protection. To break it down, within 72 hours: food, water, health, shelter, sanitation, cash, nutrition, properties, livelihood and protection; within 1 week: shelter, health, food, properties, water, nutrition, livelihood, sanitation, cash and protection; within 1 month: shelter, livelihood, cash, health, properties, nutrition, food, protection, water and sanitation; and lastly, within 3-6 months: livelihood, cash, shelter, nutrition, health, properties, protection, food, water and sanitation.

In Kalinga (Barangay Apatan, Pinukpuk), the overall preferred aids are: food, water, shelter, health, livelihood, sanitation, properties, nutrition, cash and protection. To break it down, within 72 hours: food, water, sanitation, health, nutrition, properties, shelter, livelihood, cash and protection; within 1 week: food, water, shelter, health, sanitation, nutrition, livelihood, properties, cash and protection; within 1 month: shelter, food, health, livelihood, properties, cash, water, sanitation, nutrition and protection; and lastly, within 3-6 months: cash, food, livelihood, properties, shelter, protection, water, sanitation, health and nutrition.

In Negros Occidental (Barangay Ermita and San Juan, Sipaway Island in San Carlos City), the overall preferred aids are: food, water, health, cash, sanitation, livelihood, shelter, properties, nutrition and protection. To break it down, within 72 hours: food, water, health, cash, sanitation, livelihood, shelter, protection, properties and nutrition; within 1 week: food, water, health, sanitation, cash, livelihood, shelter, nutrition, protection & properties; within 1 month: food, water, shelter, health, cash, sanitation, livelihood, properties, nutrition and protection; and lastly, within 3-6 months: food, cash, livelihood, water, health, sanitation, shelter, properties, nutrition and protection.

It is expected by most households that their preferred humanitarian aids will somehow evolve depending on their current situation while displaced, their temporary stay inside the evacuation center and on their experience residing in other safer areas while waiting to be relocated. It is also expected that they will be provided other humanitarian support including new shelter assistance and be given alternative livelihood opportunities or access to cash assistance.

Within 72 hours to 1 week, food packs or relief goods are widely accepted but from

1 week to 3-6 months, most households expect that both government and other humanitarian agencies will provide hot meals, additional condiments and other basic commodities.

For water, while bottled water (part of the expected food relief package) is welcome, most residents prefer for the government and other agencies to immediately provide storage/collection container for mass usage, repair any damages (including proper treatment) to their existing main sources of water such as open well, piped water system and restore bore hole/hand pump.

For health, services needed include medical supplies, availability of mobile health center (inclusion of birthing facility) and assurance that the barangay health facility will be operational in case not totally damaged.

Households interviewed and consulted consider the likely scenario that most of them will stay in the evacuation center or any identified temporary relocation for a period of time. For shelter, while emergency or temporary shelter unit are welcome (based from previous typhoon experience), most households prefer to be provided with housing materials like iron

sheet and also if possible, housing made of bamboo materials considering it is a durable and resilient tested type of wood.

With the anticipation of a Haiyan type of typhoon, most households consider any form of food or cash for work/livelihood opportunities coming from the government and other humanitarian agencies. Based from experience, one of the always hardest hits after a typhoon is the livelihood of the most at-risk and affected residents. In most cases, it takes years before most of them can recover from damages and other losses. Aside from cash assistance, any alternative form of work opportunities is also welcome, especially to at-risk farmers and fisher folks.

In terms of cash provision, aside from buying food, water and shelter materials, most households would use it for other purposes like transportation fare (from evacuation center or temporary relocation site to home residence) and for buying equipment/materials for farming and fishing.

The feedback shared by most households stressed the importance of local government prioritizing the fixing of public toilets inside identified permanent

evacuation centers and in most schools considered as temporary relocation sites. For hygiene and sanitation, improving sanitary facilities inside schools or any other evacuation centers is as crucial as having access to hygiene kits.

Losing important documents and having most of their properties damaged or destroyed are among the likely scenarios being anticipated by most households. For this reason, as part of family preparedness, most of them are securing important documents among other valuables that they need to bring as part of an evacuation procedure. Granting some of their valuables are destroyed or lost after the landfall, aside from documents, most households are concerned about their farm land/area, basic appliances, other handy items, sari-sari store and livestock (most common is the pig pen).

Just like on health, for nutrition services, most households need medical services for children, women (especially pregnant and lactating mothers), elderly and persons with disabilities. In every evacuation center or temporary relocation site, households expect safe space for infants, breastfeeding area and mobile clinic for any nutrition-specific consultation.

Lastly for protection, majority prefer that the following are available, functioning and accessible inside the evacuation centre or temporary relocation site: law and order, safe spaces, safety and security patrol, medical/psychosocial services, common feedback platform services, help desk on gender-based violence/PSEA and separation from family/relatives.

On information needs, preferred communication channels and accountability mechanisms

Although the vulnerability to hazard and level of capacity dealing with the impacts of typhoon vary from one barangay to another, results indicate significant similarities across all pilot areas in terms of the overall information needs, preferred communication channels and accountability mechanisms of the at-risk population.

Feedback provided reflects the experience of 700 local residents directly affected by strong typhoons. These include challenges on being displaced, staying with family at the evacuation center and limited access to information and lifesaving aid.

Majority of the households interviewed in the five pilot barangays consider the overall humanitarian support or aid provided by the government (from national down to local level) as their primary

information need from 72 hours up to 3-6 months after a large-scale typhoon. This was followed by any information on aid provided by other humanitarian organizations; while the third overall priority of the most respondents is how to access the type of aid provided by both the government and other humanitarian agencies.

Other at-risk households also identified the following information needs:

- how to communicate with loved ones living outside the area,
- possible return to place of origin
- missing relatives
- schedule/venue of aid distribution,
- relocation and
- access to other communication channels

After a destructive typhoon, majority of the at-risk households consider family, friends and neighbors as their primary source of information. This is followed by:

- having access to AM/FM radio (with batteries for household use, if local station still operational),
- local newspaper (if locally still operational and printing capacities are not completely destroyed),
- TV (if communication and power lines are not completely damaged),
- government official (from national

down to provincial, municipal and barangay level),

- community leader (through BDRRMC or any council of elders in the village)
- religious leader
- community group

Others expect that private sector including mobile companies will provide the necessary information via SMS blast for updates on any response undertaking. There were few that consider military official as a source of information.

Consistently, the preferred communication channels for two-way dialogue and community consultation that most households expect from both government agencies and other humanitarian organizations from 72 hours up to 3-6 months are:

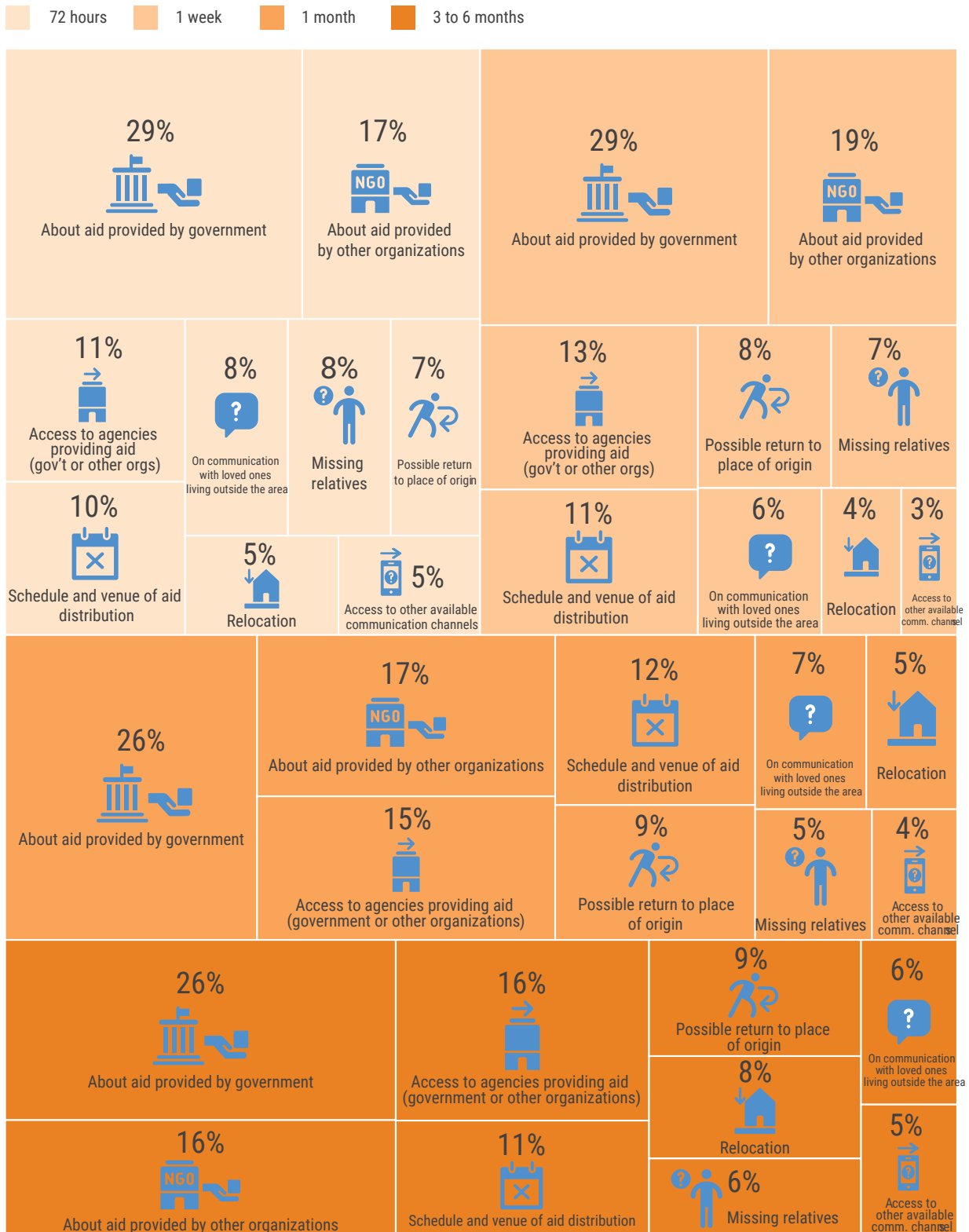
- face-to-face consultation,
- general barangay assembly,
- community leaders and government officials
- mobile phones (via free SMS, calls and battery charging station services provided by mobile telcos)

In terms of closing-the-feedback-loop, most households expect both the government and other humanitarian agencies to be aware of their preferred accountability mechanisms in providing feedback on aid received, which is via:

- face-to-face consultation,
- general barangay assembly and community leader
- government official and aid workers
- SMS
- feedback box

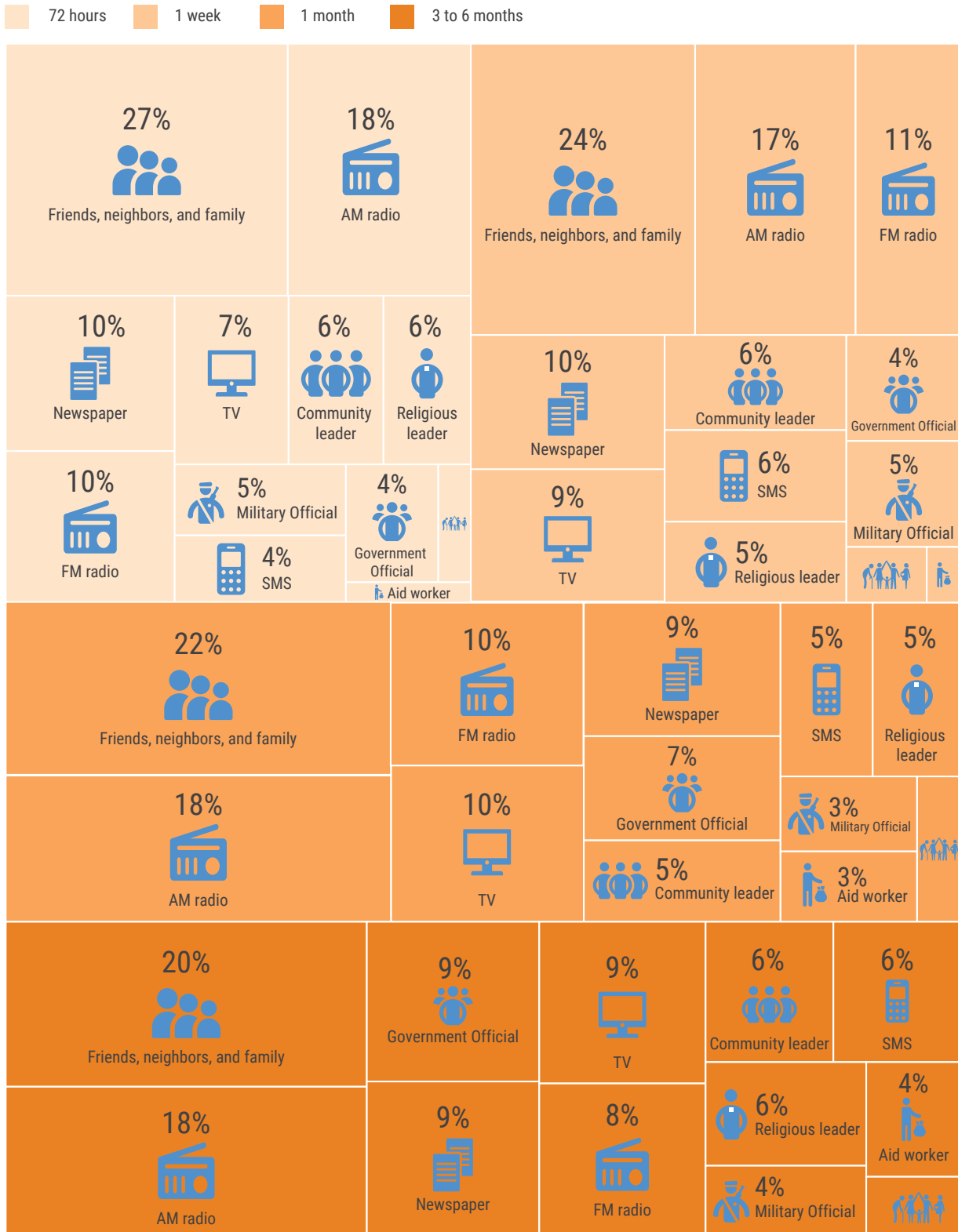
Information needs after the disaster

Pilot areas in the provinces of Cagayan, Kalinga and Negros Occidental



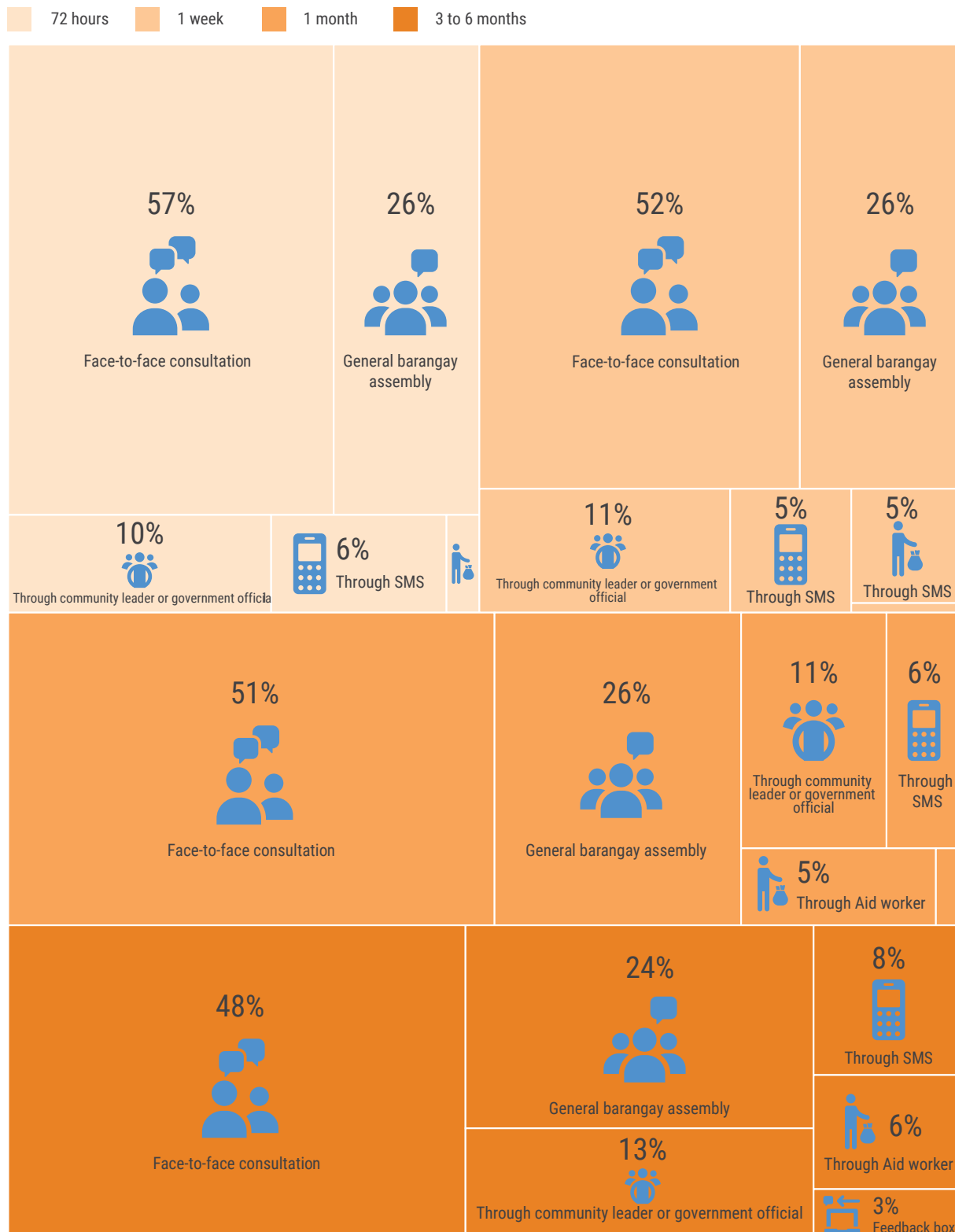
Sources of information after the disaster

Pilot areas in the provinces of Cagayan, Kalinga and Negros Occidental



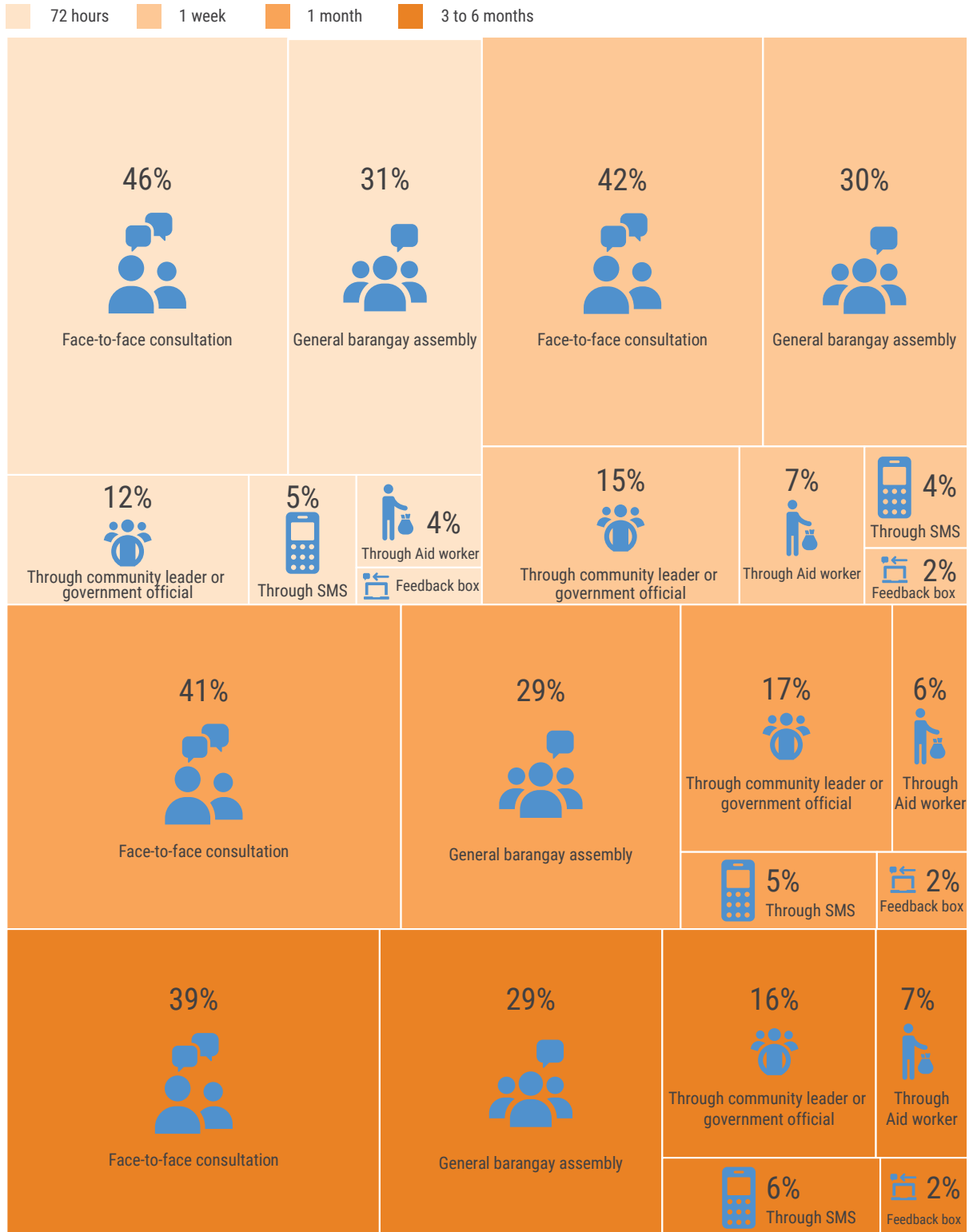
Preferred channels for needs consultation

Pilot areas in the provinces of Cagayan, Kalinga and Negros Occidental



Preferred channels for feedback on the aid received

Pilot areas in the provinces of Cagayan, Kalinga and Negros Occidental



Aid priorities and preferences

Pilot areas in the provinces of Cagayan, Kalinga and Negros Occidental

OVERALL	16%	11%	11%	11%	10%	10%	9%	8%	8%	7%
										
	food	water	health	shelter	livelihood	cash	sanitation	properties	nutrition	protection
72 Hours	24%	10%	15%	9%	8%	7%	7%	7%	6%	6%
										
	food	water	health	sanitation	shelter	nutrition	cash	properties	livelihood	protection
1 Week	16%	12%	12%	11%	10%	9%	8%	8%	7%	6%
										
	food	health	water	shelter	sanitation	livelihood	nutrition	properties	cash	protection
1 Month	13%	13%	11%	11%	11%	9%	9%	8%	8%	7%
										
	shelter	food	livelihood	health	cash	properties	water	nutrition	sanitation	protection
3-6 Months	14%	13%	12%	10%	9%	9%	9%	8%	8%	8%
										
	livelihood	cash	food	shelter	properties	health	water	nutrition	sanitation	protection

Cagayan (Barangays Abariongan and Balagan)







OVERALL	15%	14%	13%	13%	10%	8%	8%	8%	6%	4%
										
	shelter	ood	health	livelihood	cash	properties	nutrition	water	sanitation	protection
72 Hours	27%	17%	15%	10%	9%	7%	7%	5%	2%	2%
										
	food	water	health	shelter	sanitation	cash	nutrition	properties	livelihood	protection
1 Week	17%	16%	15%	11%	9%	9%	9%	8%	4%	3%
										
	shelter	health	food	properties	water	nutrition	livelihood	sanitation	cash	protection
1 Month	19%	17%	14%	12%	9%	8%	7%	5%	4%	3%
										
	shelter	livelihood	cash	health	properties	nutrition	food	protection	water	sanitation
3-6 Months	24%	19%	12%	10%	9%	8%	8%	6%	2%	2%
										
	livelihood	cash	shelter	nutrition	health	properties	protection	food	water	sanitation

Aid priorities and preferences

Kalinga (Barangay Apatan)

OVERALL	15%	11%	10%	10%	10%	10%	9%	9%	9%	8%
										
	food	water	shelter	health	livelihood	sanitation	properties	nutrition	cash	protection
72 Hours	26%	15%	10%	9%	8%	7%	7%	6%	6%	6%
										
	food	water	sanitation	health	nutrition	properties	shelter	livelihood	cash	protection
1 Week	14%	12%	11%	11%	10%	10%	9%	8%	7%	7%
										
	food	water	shelter	health	sanitation	nutrition	livelihood	properties	cash	protection
1 Month	12%	11%	11%	11%	10%	10%	9%	9%	9%	8%
										
	shelter	food	health	livelihood	properties	cash	water	sanitation	nutrition	protection
3-6 Months	12%	11%	11%	11%	10%	10%	9%	9%	9%	9%
										
	cash	food	livelihood	properties	shelter	protection	water	sanitation	health	nutrition

Negros Occidental (Barangays Ermita and San Juan)

OVERALL	18%	13%	10%	10%	10%	9%	9%	8%	7%	7%
										
	food	water	health	cash	sanitation	livelihood	shelter	properties	nutrition	protection
72 Hours	22%	14%	9%	8%	8%	8%	8%	8%	7%	7%
										
	food	water	health	cash	sanitation	livelihood	shelter	protection	properties	nutrition
1 Week	19%	13%	12%	12%	9%	8%	8%	7%	6%	6%
										
	food	water	health	sanitation	cash	livelihood	shelter	nutrition	protection	properties
1 Month	16%	11%	11%	10%	10%	10%	9%	8%	7%	7%
										
	food	water	shelter	health	cash	sanitation	livelihood	properties	nutrition	protection
3-6 Months	6%	19%	24%	2%	9%	2%	12%	8%	10%	8%
										
	food	cash	livelihood	water	health	sanitation	shelter	properties	nutrition	protection



"I am not saying that other forms of aid are not important or needed, but as the main provider for my family, livelihood and access to cash assistance are crucial for our recovery. I cannot secure my family's future and simply move on with our lives just by relying on the short-term aid being provided to us."

Fernando Corpuz, farmer from Barangay Balagan, Sto. Niño, Cagayan

Analysis and findings:

Focus group discussion

Engaging the most vulnerable, disadvantaged, less vocal and less visible members of the community is an indispensable part of the conduct of the intensive pre-crisis mapping and consultation. Around 250 respondents were interviewed and consulted in the series of focus group discussion (FGD) in the five pilot barangays. Considering their previous typhoon experience, the information shared by women, children, elderly, persons with disabilities, farmers and fisher folk associations reflect a widely diverse and highly localized information on the preferred humanitarian needs prior to any emergency response.

For every phase, each vulnerable sector has their own lifesaving needs in the first 72 hours up to 1 month and priority aid support or evolving needs from 3-6 months.

While the preferred humanitarian support as well as access to information and preferred channel for two-way dialogue varies from one area to another within 72 hours, 1 week and from 1 month up to 3-6 months, the results clearly indicate that vulnerable groups are not only aware of their specific needs and concerns; most of them feel more empowered as long as they are appropriately consulted by the government and other humanitarian agencies prior to the actual response.

For elderly, across pilot barangays, the following are the identified priorities per humanitarian phase: within 72 hours: food, health/nutrition, water/sanitation/health or WASH, shelter and properties; within 1 week: food, health/nutrition, WASH, shelter, properties and protection; within 1 month: health and nutrition, food, WASH, shelter, cash and properties; and within 3-6 months: shelter, protection, health, food, WASH, cash, livelihood and properties.

For persons with disabilities, within 72 hours: food, health/nutrition, WASH, protection, properties and shelter; within 1 week: food, WASH, health/nutrition, shelter, protection, properties and cash; within 1 month: food, livelihood, protection, cash, WASH, health/nutrition, shelter and properties; within 3-6 months: food, cash/livelihood, health/nutrition/protection, WASH and shelter/properties.

Although elderlies and persons with disabilities have the same needs and rights to basic services with the majority of households in various phases of the humanitarian response, FGD respondents consulted said that it is how aids are being provided that sets the difference. It also poses the question: are there any pre-agreed inclusive platforms at the provincial down to municipal and barangay levels to ensure the delivery or distribution of aid reaches elderlies and persons with disabilities? Aside from distance, timing

is also a crucial consideration according to the FGD participants since even if aid is available or accessible, the presence of a guardian, close relatives and other people who will assist or guide them is important as well.

Considering previous typhoon experience, dealing with the elderlies and persons with disabilities requires integration of the “twin track approach” in the delivery of humanitarian services. Twin track approach is basically the process of ensuring that targeted vulnerable group-specific aid response needed meaningful and inclusive participation of elderlies and persons with disabilities in the actual response up to the early recovery. This approach ensures the specific needs (for example, assistive devices such as wheelchairs, use of cane, etc.) are met while basic needs (from WASH to cash) are made accessible to all.

By using the WGQs in the FGD with women, farmers, elderlies and children, there is a high prevalence of physical, hearing and visual disabilities as well as difficulty in remembering things among the elderly.

For children, the preferred aids within 72 hours: food, WASH, health/nutrition, properties and shelter; within 1 week: food, WASH, health/nutrition, cash, livelihood, shelter and properties; within

1 month: food, cash, livelihood, shelter, protection, properties, WASH, health/nutrition; within 3-6 months: food, cash, health/nutrition, WASH, shelter, livelihood and properties. Some children interviewed considered cash and livelihood as preferred aid since they join their parents to help them in farming and in fishing.

For women, within 72 hours: food/cash, protection, WASH/health/nutrition, shelter and properties; within 1 week: food/cash/livelihood, protection, shelter, WASH/health/nutrition and properties; within 1 month: food/cash/livelihood, WASH/health/nutrition, shelter/protection and properties; within 3-6 months: food, livelihood, cash, shelter/protection/properties and WASH/health/nutrition.

In the series of FGD and consultations, most vulnerable sectors stress that the priority in terms of information needs is the inclusive access to aid provided by both the government and other humanitarian agencies. Inclusive in the sense that all respondents expect government and other humanitarian workers to be more sensitive and aware of the type of aid it provides in the process of distribution. It is expected that prior to any type of humanitarian intervention, agencies are already aware of the preferred aid by the vulnerable sectors.

With the exception of children who prefer

social media, use of SMS/calls and TV as communication channels, other vulnerable sector such as elderly, farmers, fisher folk and persons with disabilities prefer the use of radio (with batteries), barangay official/community leaders, face-to-face consultation and barangay general assembly. For women, majority would like to avail and maximize all communication channels available.

For accountability and closing the feedback loop, across vulnerable sectors interviewed and consulted, the following are identified as priorities:

- Inclusive and accessible feedback platform inside the evacuation centre,
- House-to-house consultation by both government and other humanitarian organizations to local residence hosting displaced persons,
- Direct community consultation by both government and other humanitarian organizations inside the evacuation centre,
- Inclusive platform to engage children, elderly, farmers, fisher folk, persons with disabilities and women.

Most of the FGD respondents in Sto. Nino, Cagayan (Abariongan and Balagan), Pinukpuk, Kalinga (Apatan) and Sipaway Island in San Carlos City, Negros Occidental (Fatima and San Juan) considered the process as encouraging and complemented the other community

pre-disaster management initiatives. This is in terms of:

- knowing their rights on inclusive access to humanitarian support, apart from simply knowing other organizations providing aid services;
- ensuring that regardless of sex, age, social status and vulnerability, they have access to the information they need to make informed choices prior to any humanitarian response;
- use of WGQs in the two-way consultation process;
- importance of their feedback and complaints after receiving aid support;
- ensuring that their voices are heard by responding agencies and that humanitarian organizations (be it local, national or international) are accountable to respond to those issues or concerns;
- highlighting the crucial role that each plays to improve community-based early warning system, communication protocol and effective evacuation procedure;
- the positive impact their specific engagement can provide if they are directly involved in improving the overall community-based disaster management of their respective barangays;
- being aware that while preferences for lifesaving and evolving needs in the pre-crisis mapping such as on food, WASH, health and nutrition are all equally important for them across time-critical of the humanitarian phase, each must be sensitive to the needs of: 1.) women (pregnant and lactating), 2.) elderly (65 to 85 years

of age), 3.) persons with disabilities (those with difficulty in hearing, seeing, walking, cognitive reasoning and the physically impaired) and children (9 to 17 years of age); and

- If cash will be provided, most women (single parents and head of the family), farmers, fisher folks, elderly (those who are still working) and persons with disabilities (working) suggested to also provide livelihood opportunities (emergency or alternative) and prioritize shelter assistance and relocation projects.

In Cagayan and Kalinga, the focus is also on how majority of respondents that belong to indigenous tribes are consulted with emphasis on kinship system, local culture, social traditions and unique practices in disaster management. For Negros Occidental, it is crucial to maximize the effective working system of the local government, church and the at-risk communities in preparedness and actual response.

In Abariongan and Balagan (Sto. Nino, Cagayan), CVDRC and other local CSOs are expected by the local government and the vulnerable groups to immediately provide support and directly work with the at-risk community and affected population across the time-critical phase of humanitarian response. The same goes with Apatan (Pinukpuk, Kalinga), aside from local Red Cross chapters, CSOs and local NGOs are expected by the vulnerable groups to provide the necessary support.

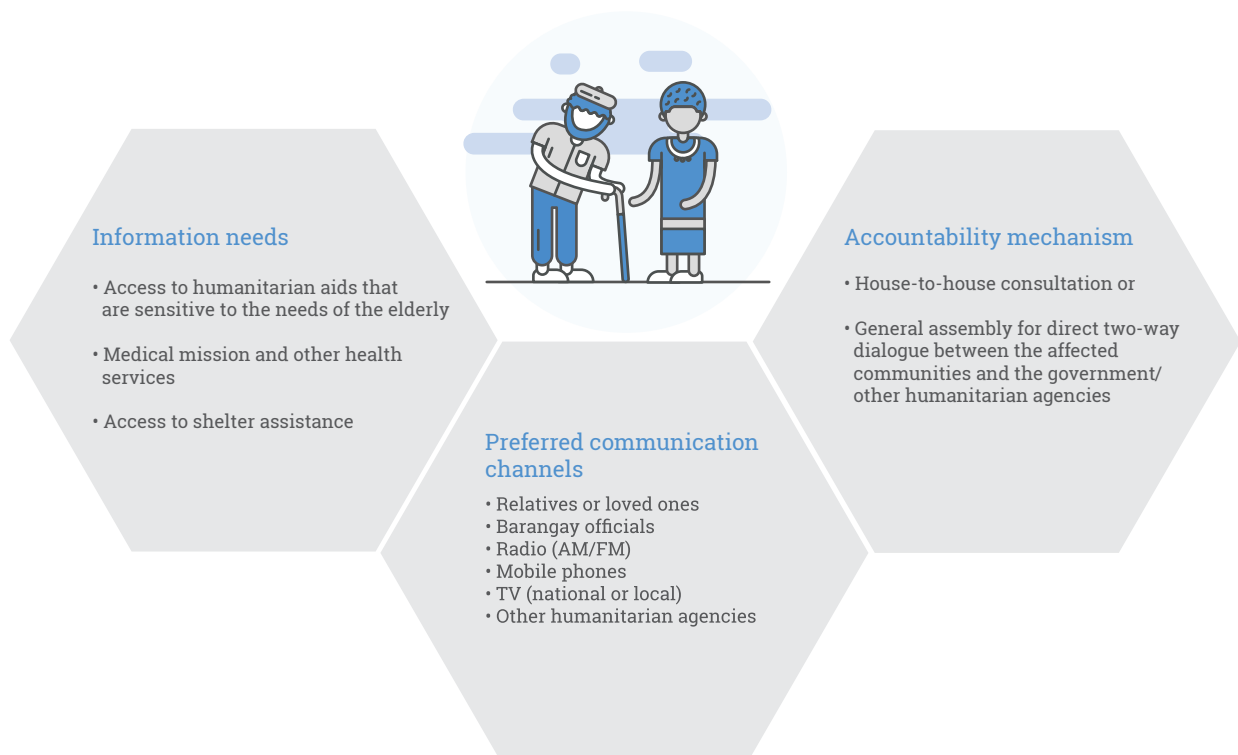
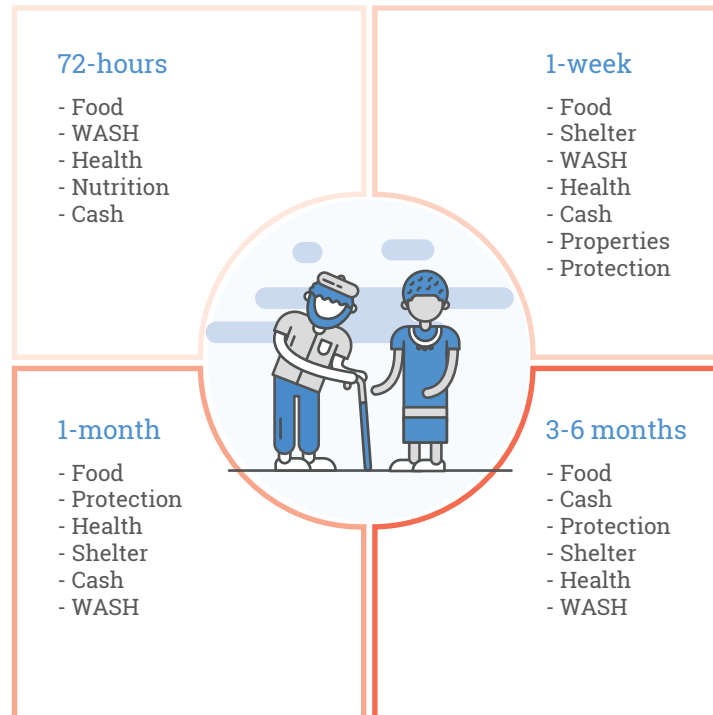
Most affected areas by strong typhoons in 2016 (Haima) and 2018 (Mangkhot and Yutu) in Cagayan and Kailnga were also recipients of humanitarian aid supplemented by some UN agencies, INGOs, private sector, local NGOs and CSOs to support local government-led response.

For Negros Occidental pilot areas, Fatima and San Juan (Sipaway Island in San Carlos City), another highlight of the community consultation is the established partnership of the church, through its Social Action Centre (SAC), with the local government and the at-risk communities residing in the island barangays, aside from their strong community-based disaster risk reduction management. The SAC in San Carlos is not only an active partner of the local government and highly supportive of the vulnerable groups but is well connected as well with other humanitarian agencies, both international and local.

Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

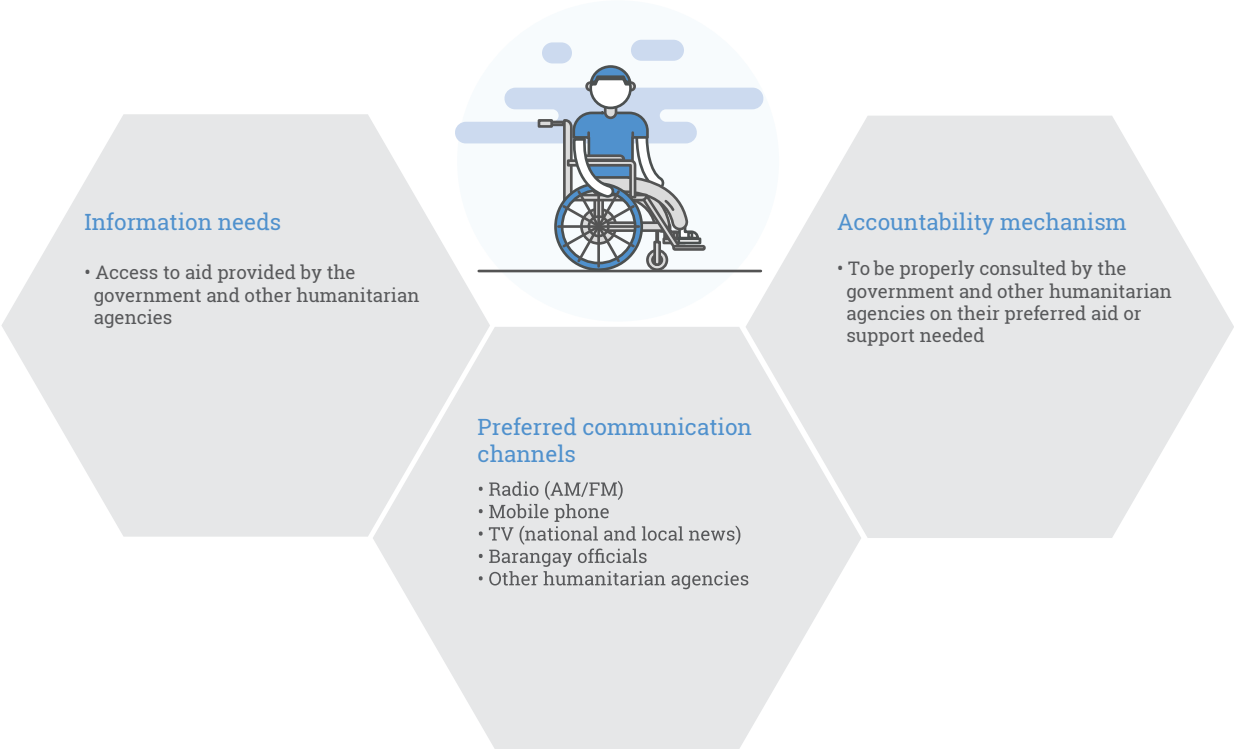
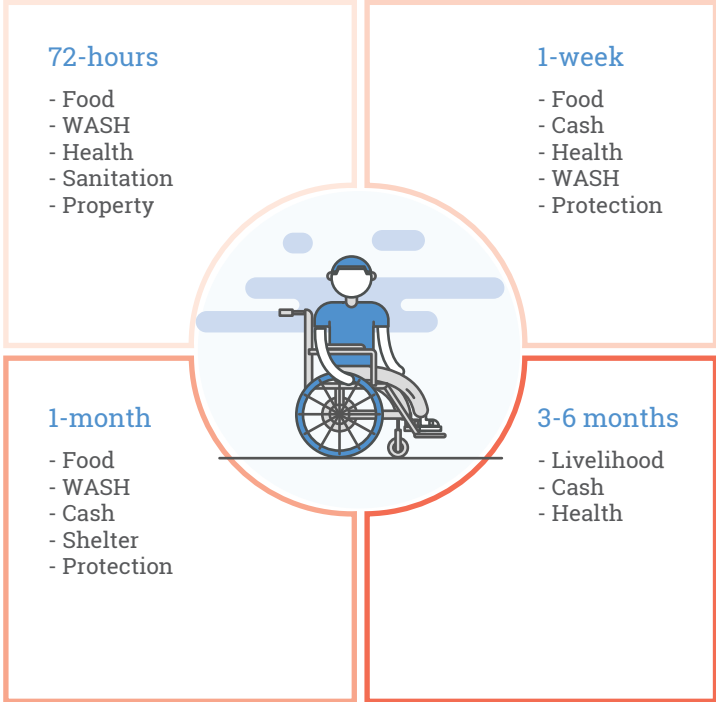
Elderly



Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

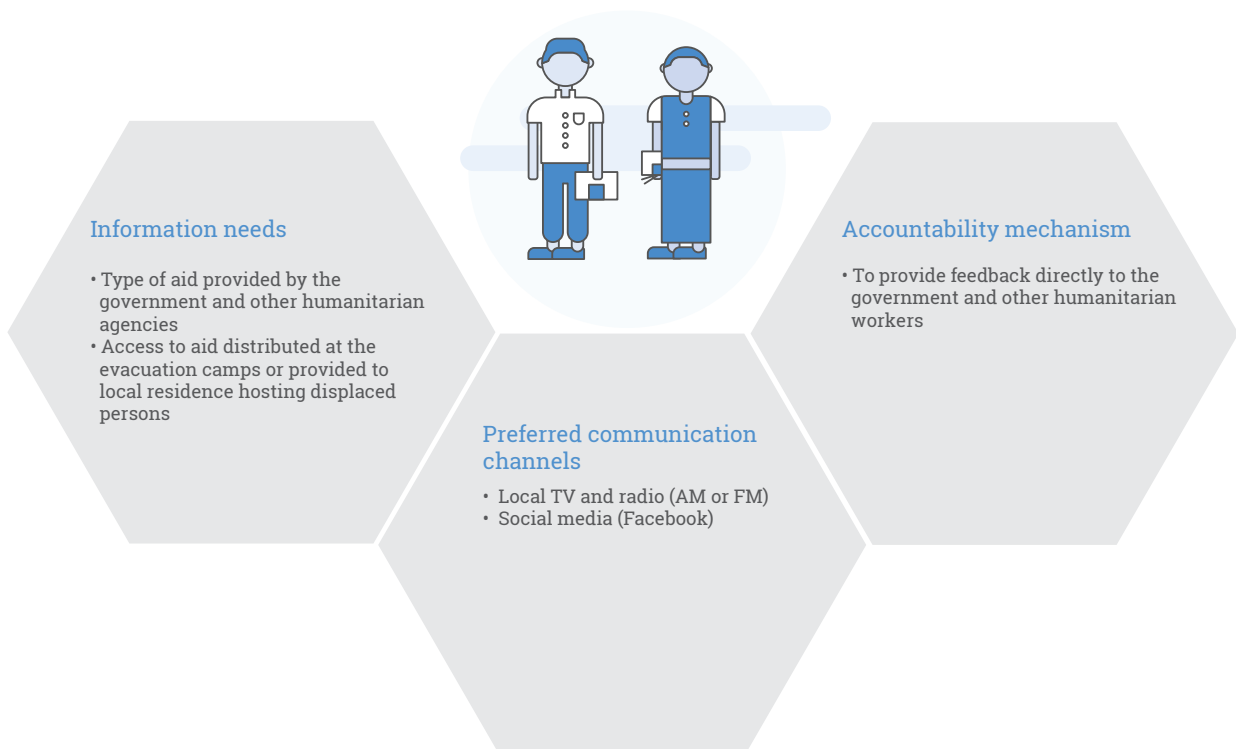
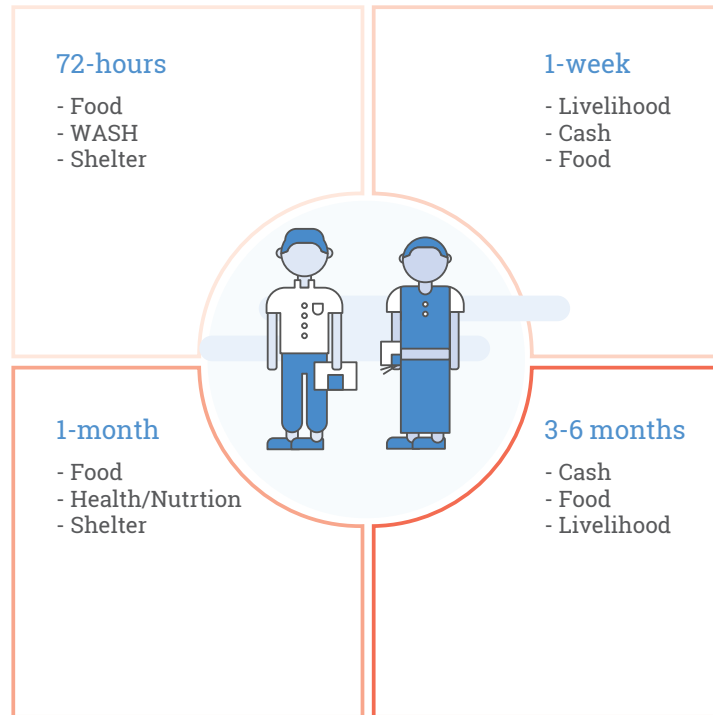
Persons with disabilities



Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

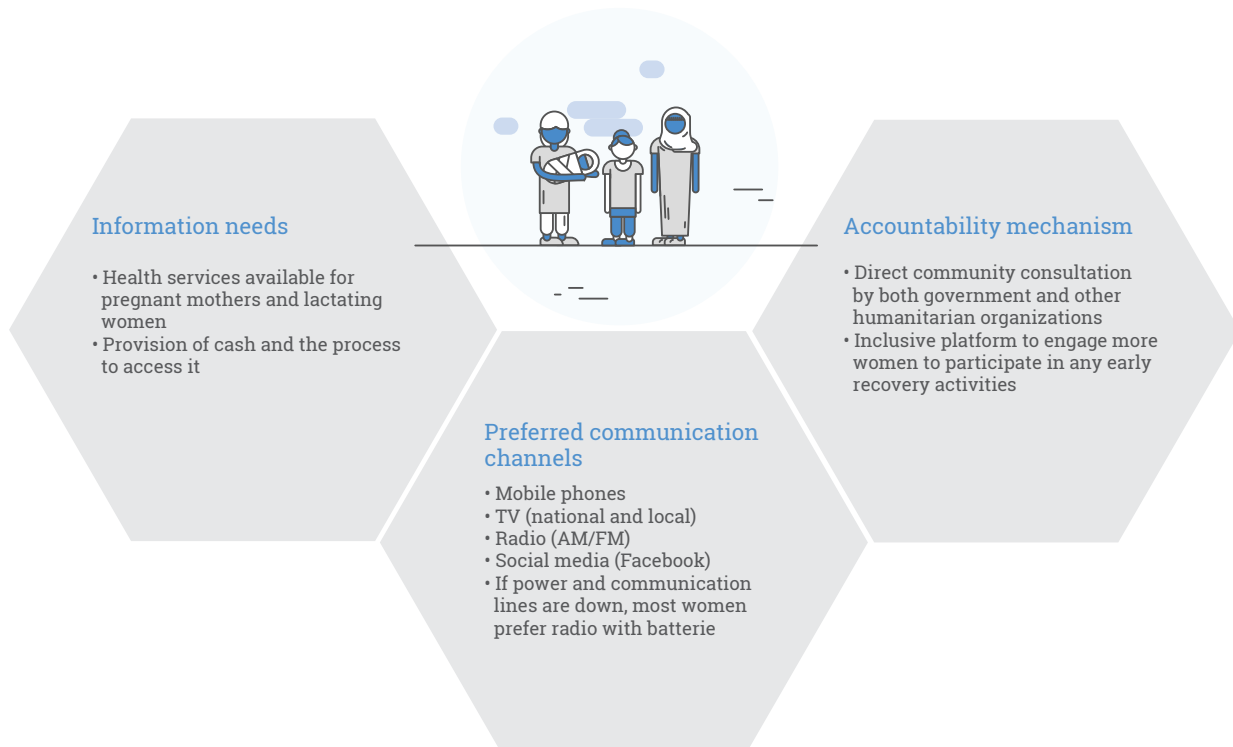
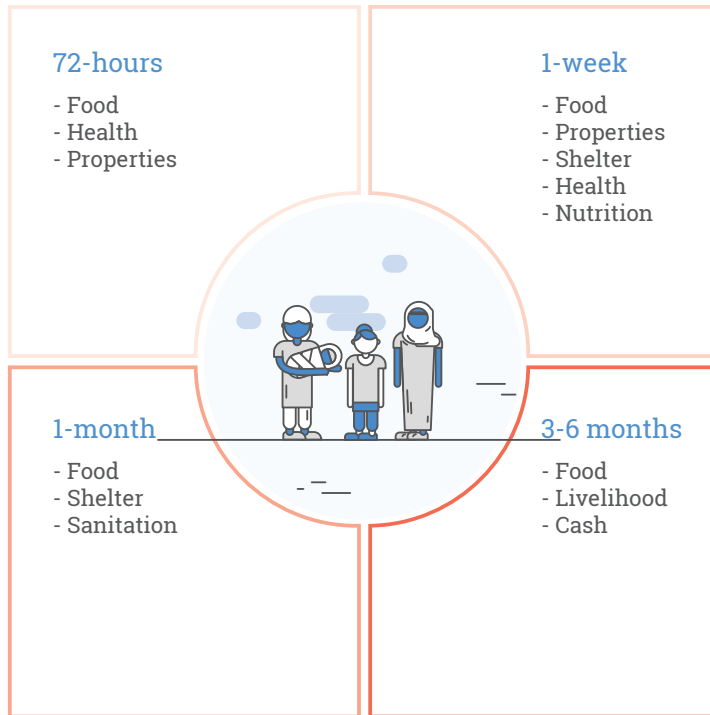
Children



Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

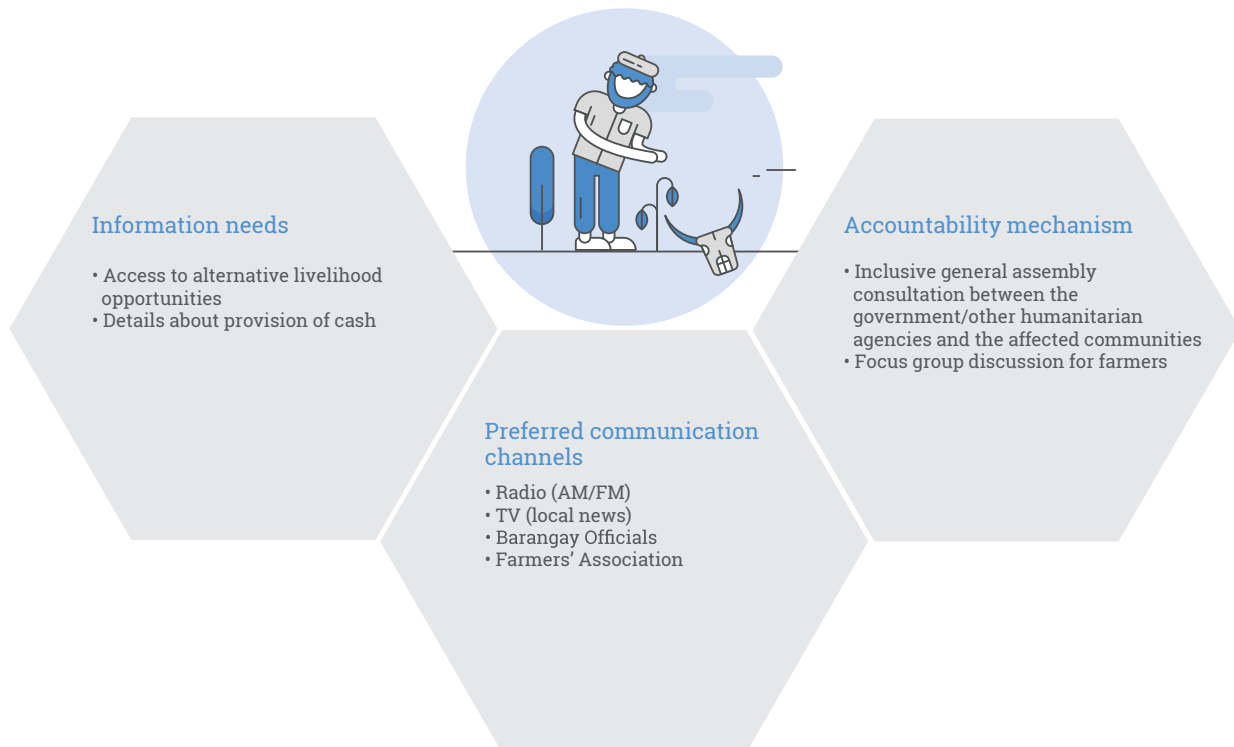
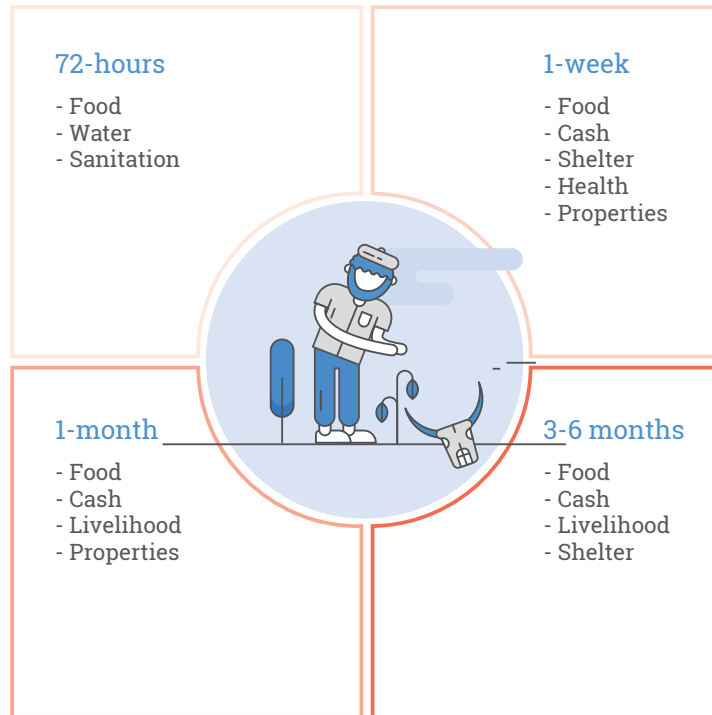
Women



Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

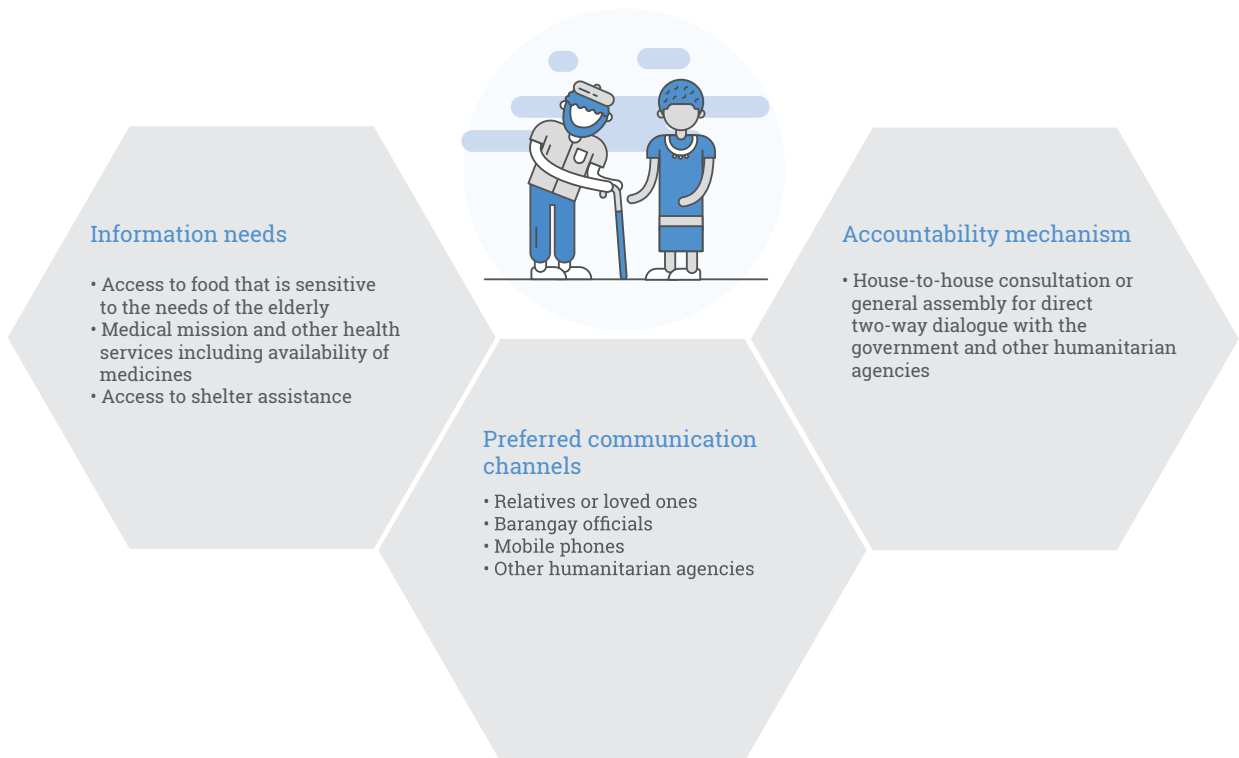
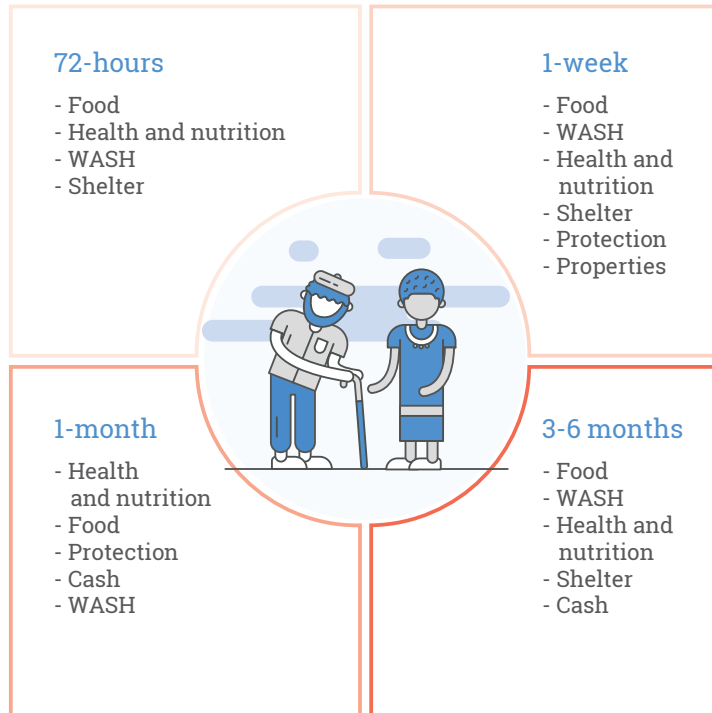
Farmers/Fisherfolks



Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

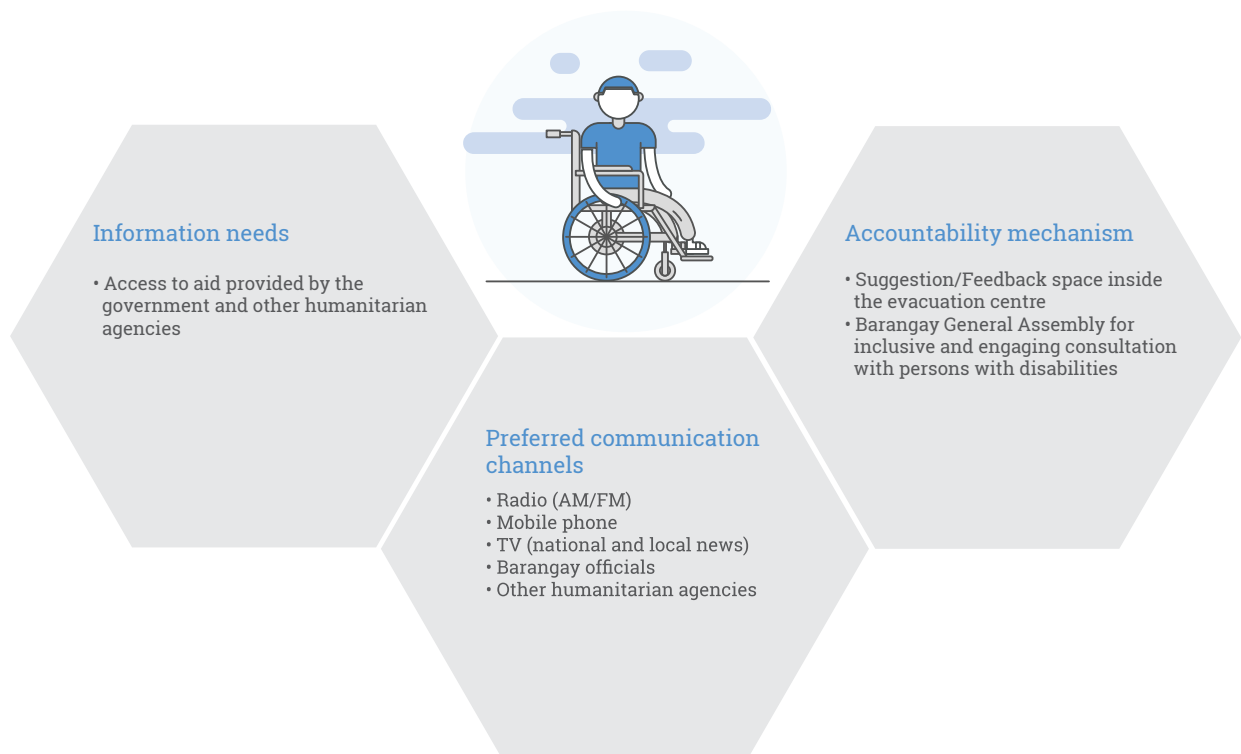
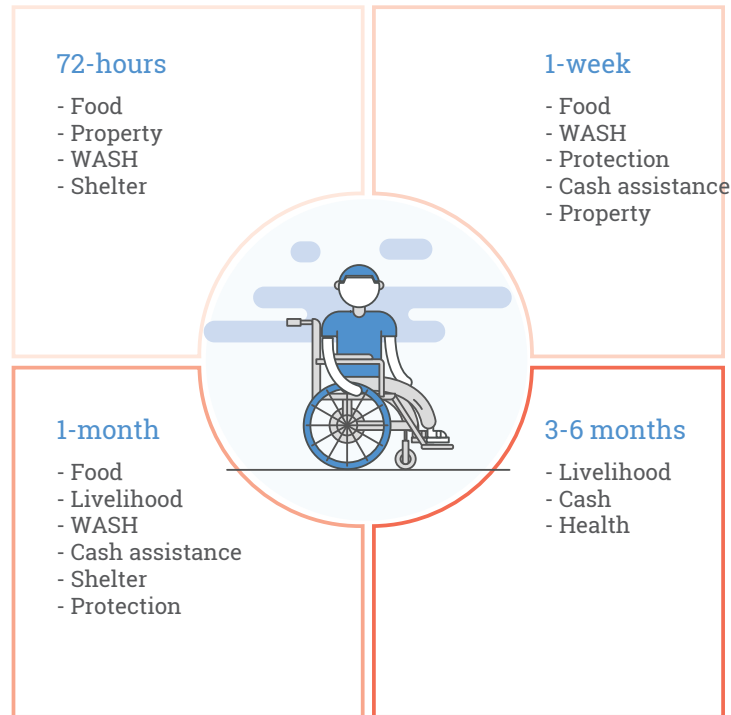
Elderly



Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

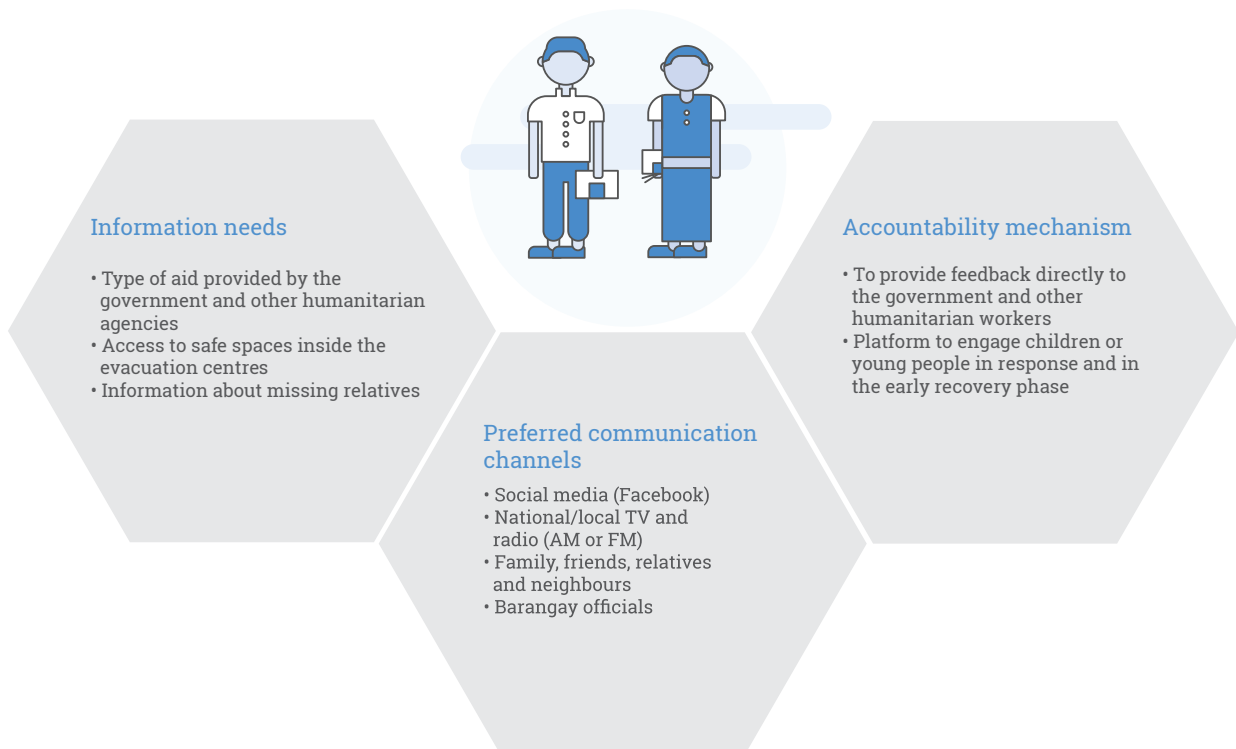
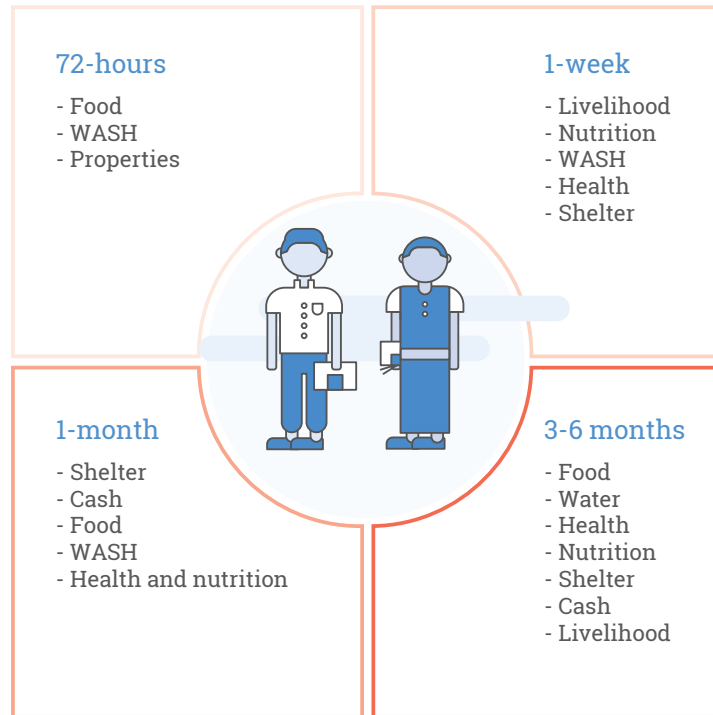
Persons with disabilities



Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

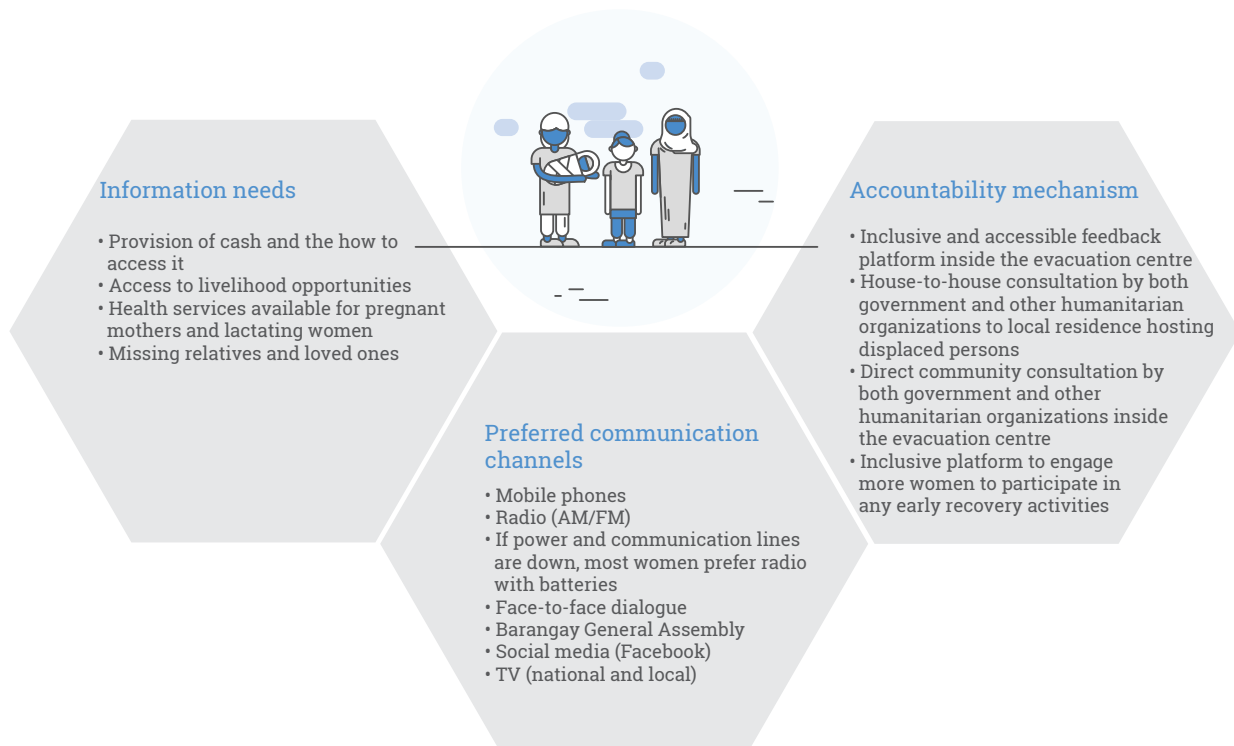
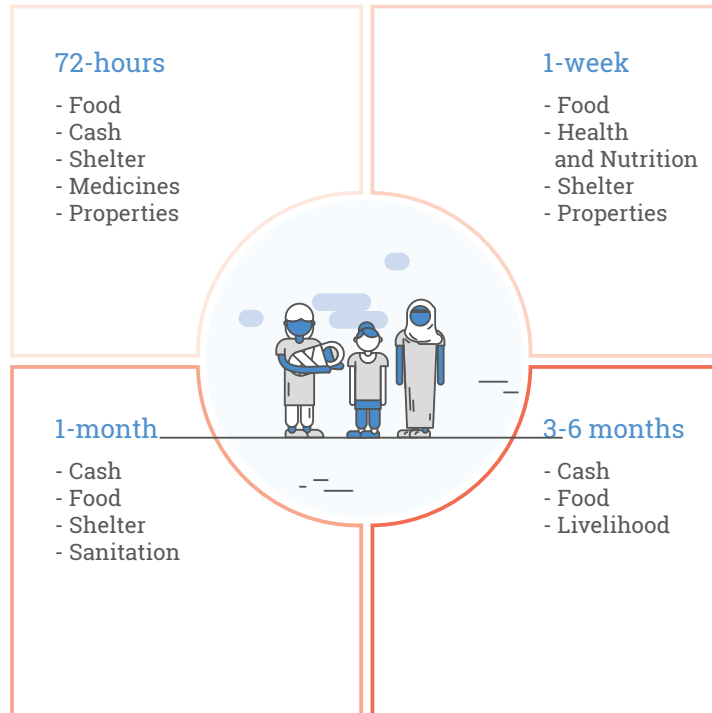
Children



Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

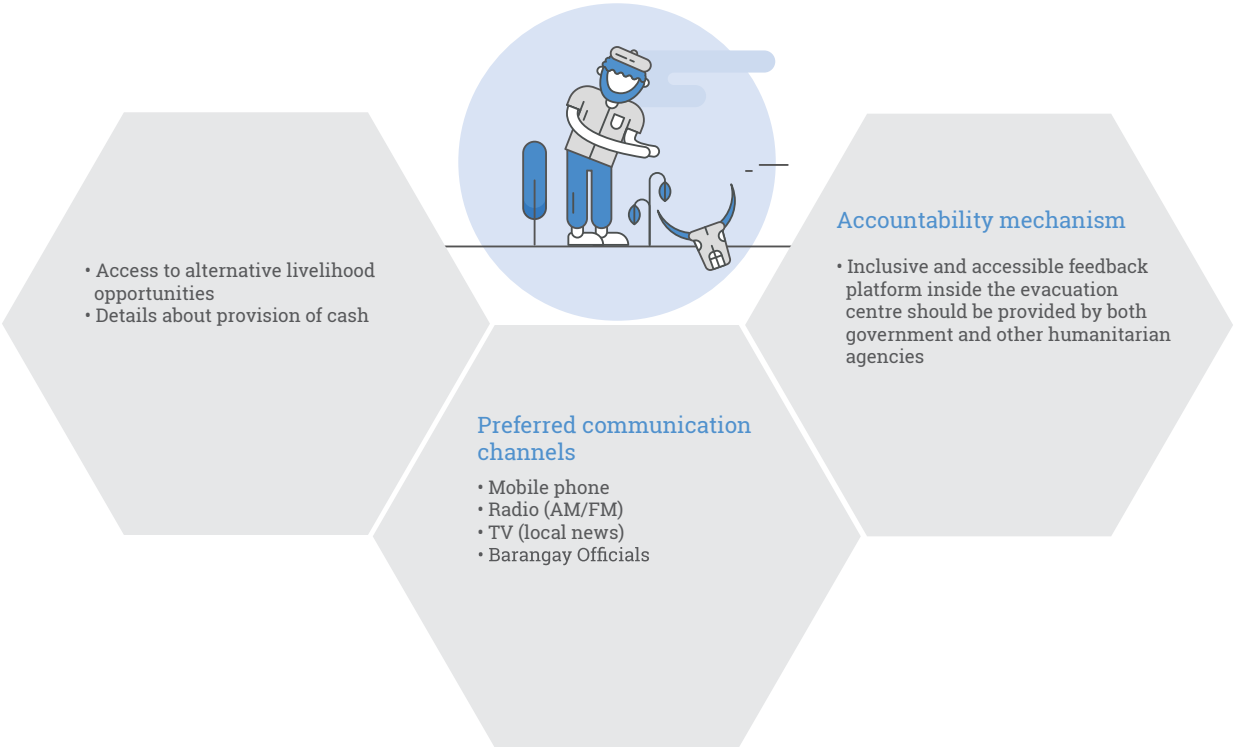
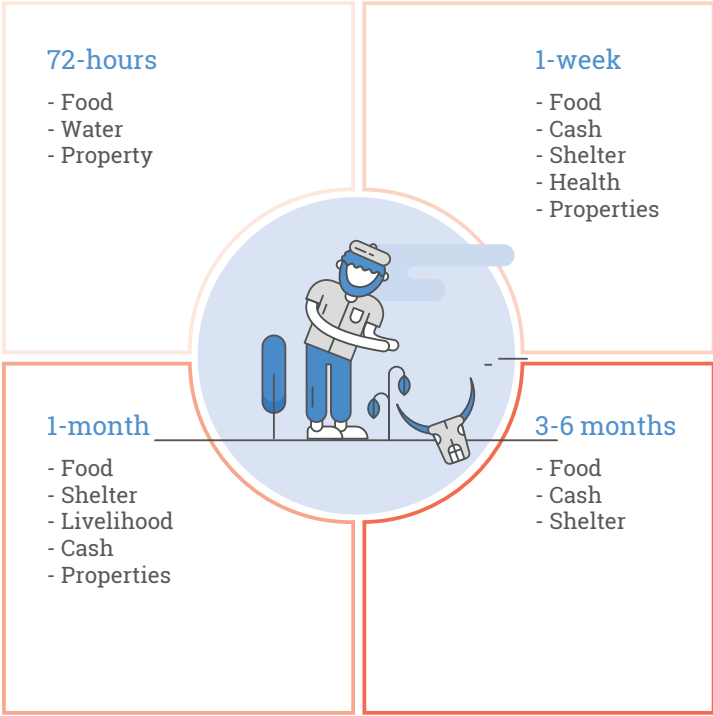
Women



Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

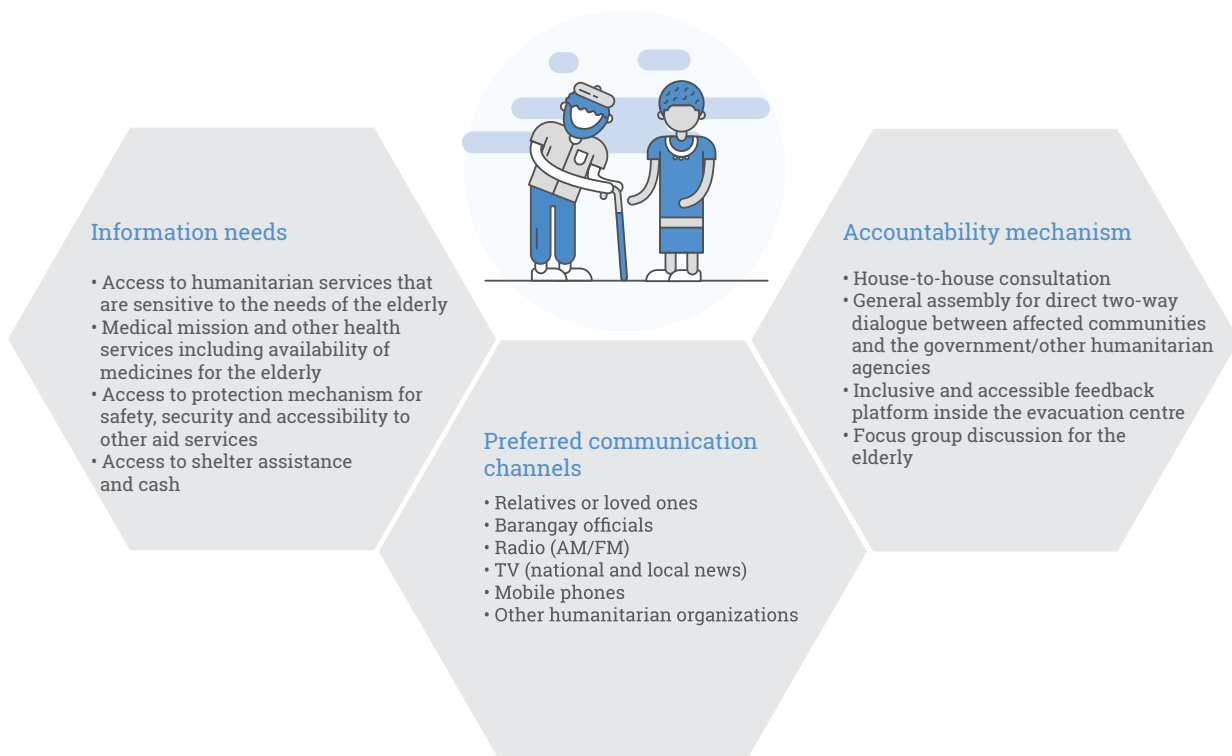
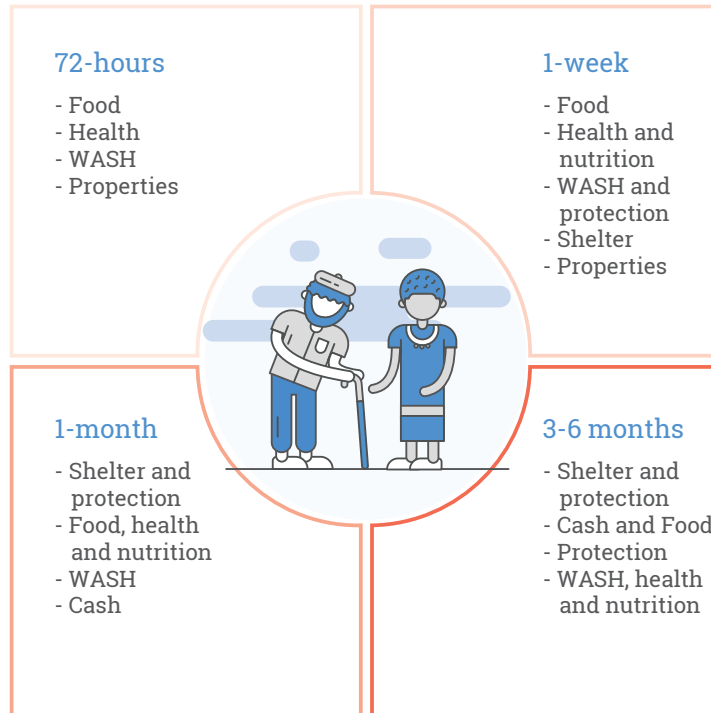
Farmers/Fisherfolks



Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

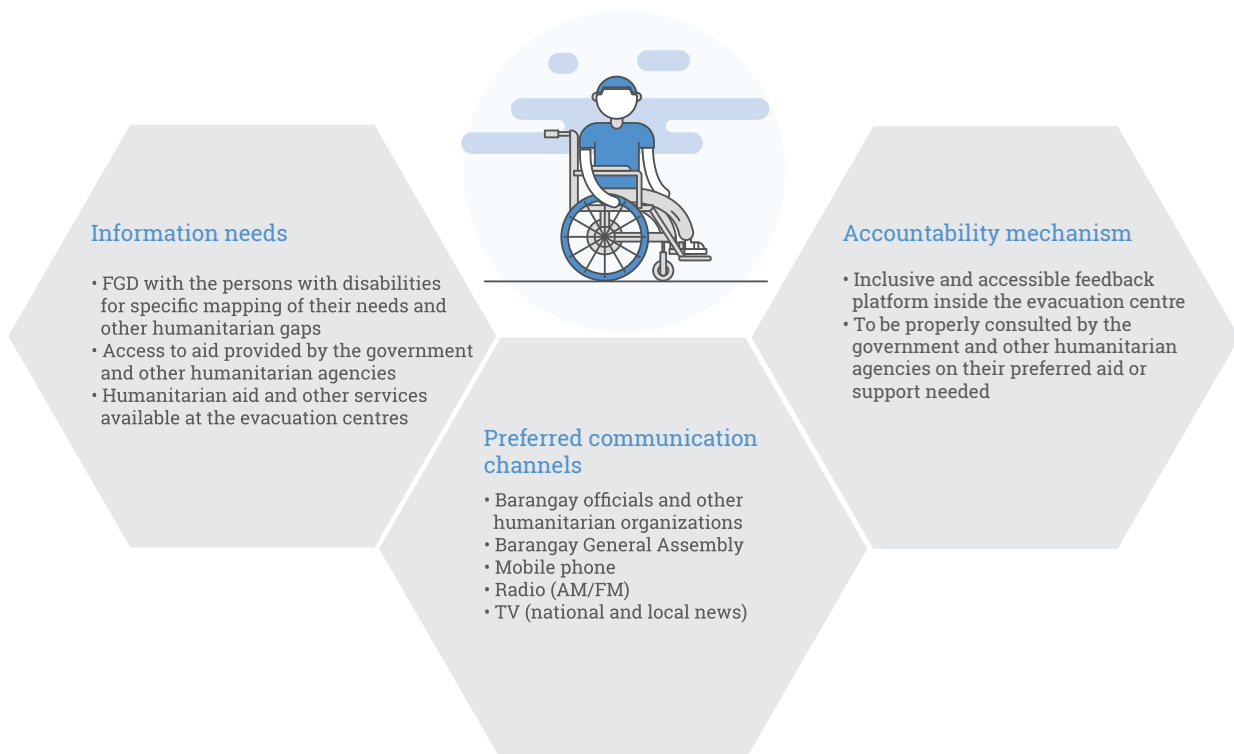
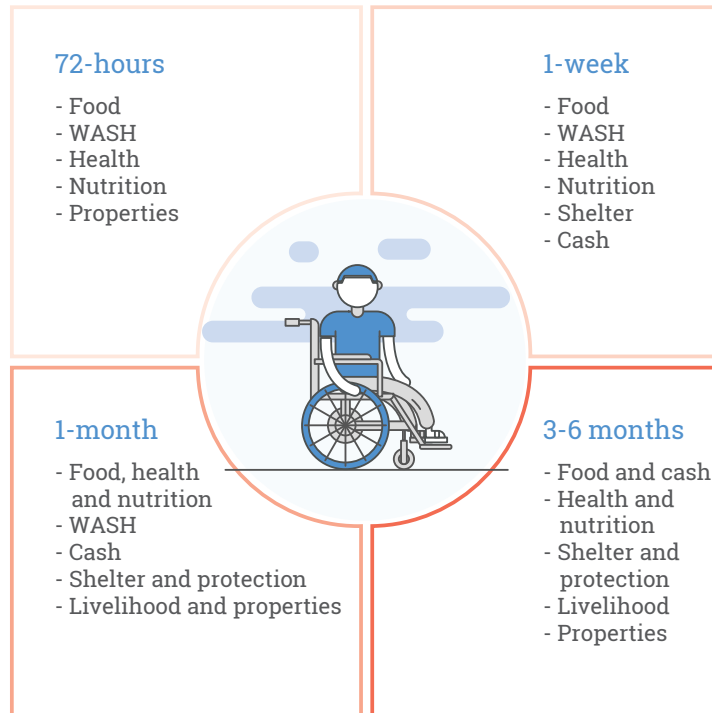
Elderly



Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

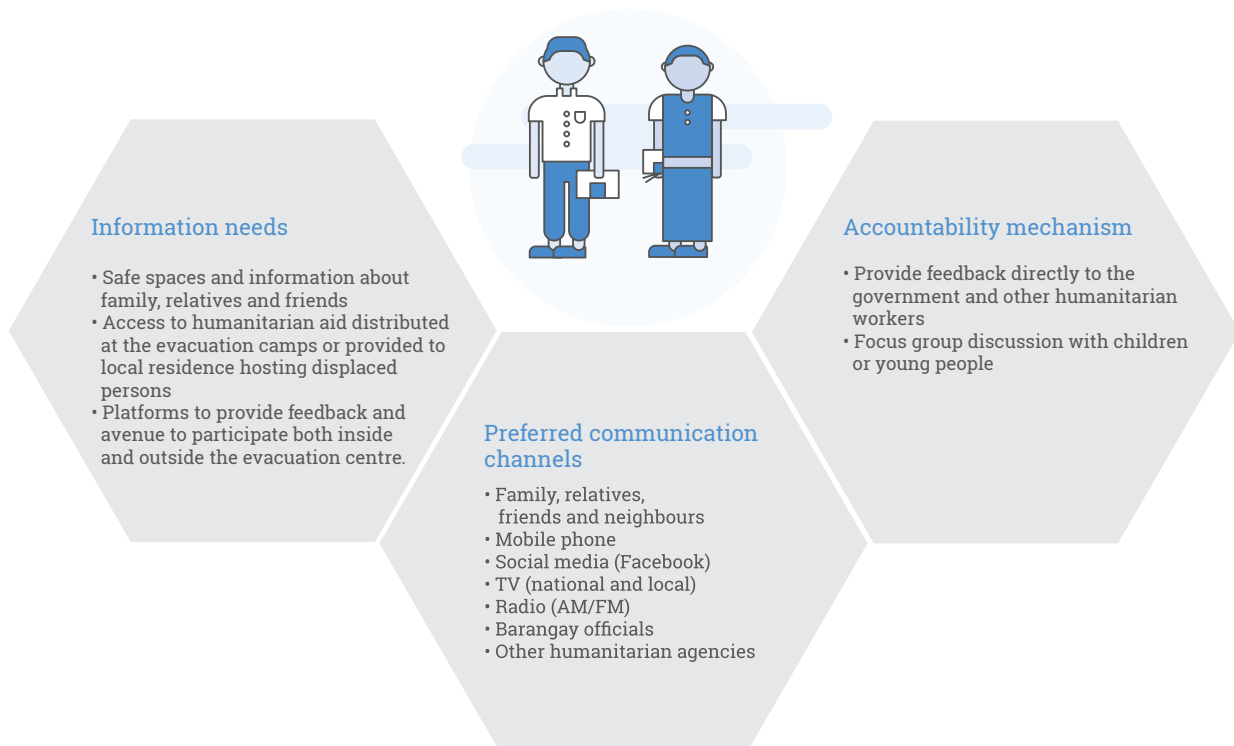
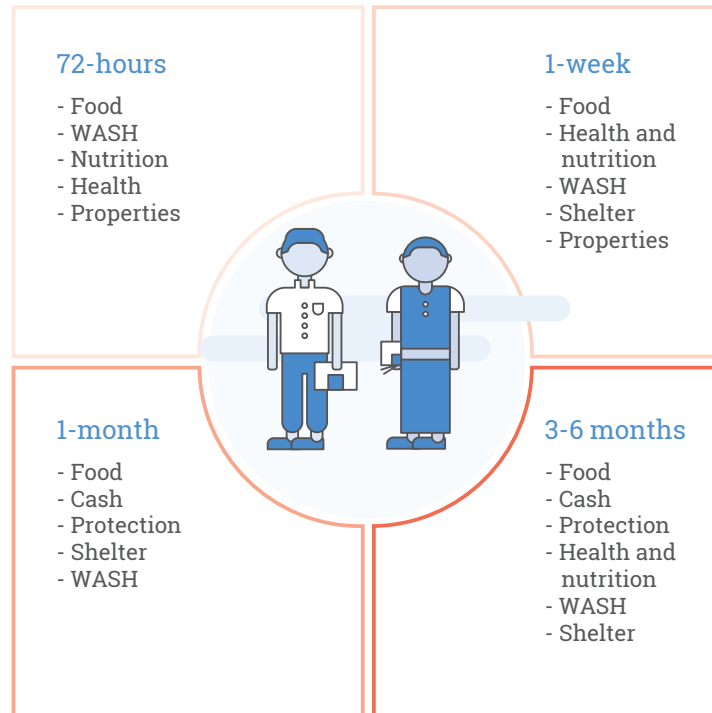
Persons with disabilities



Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

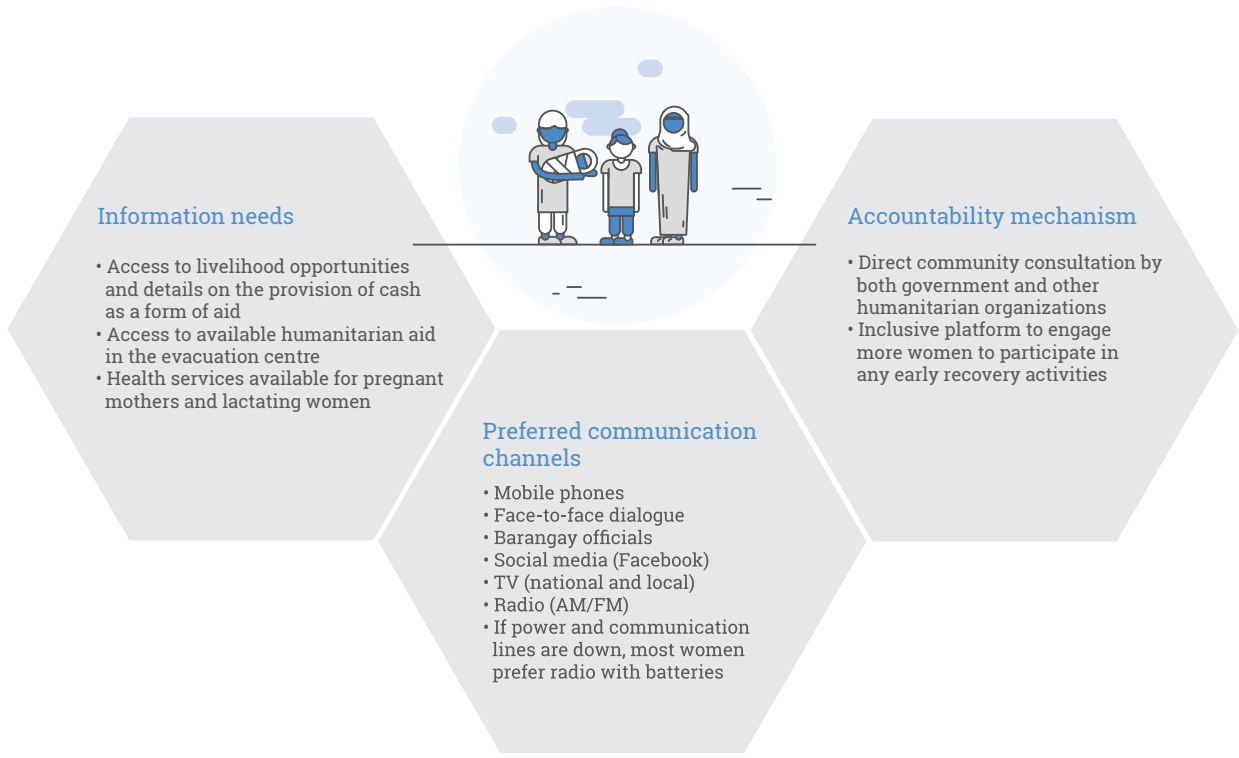
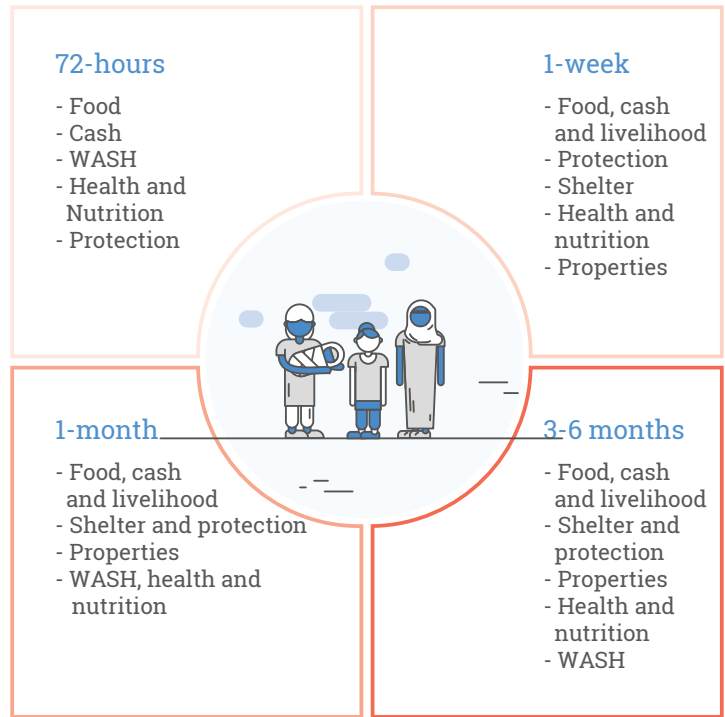
Children



Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

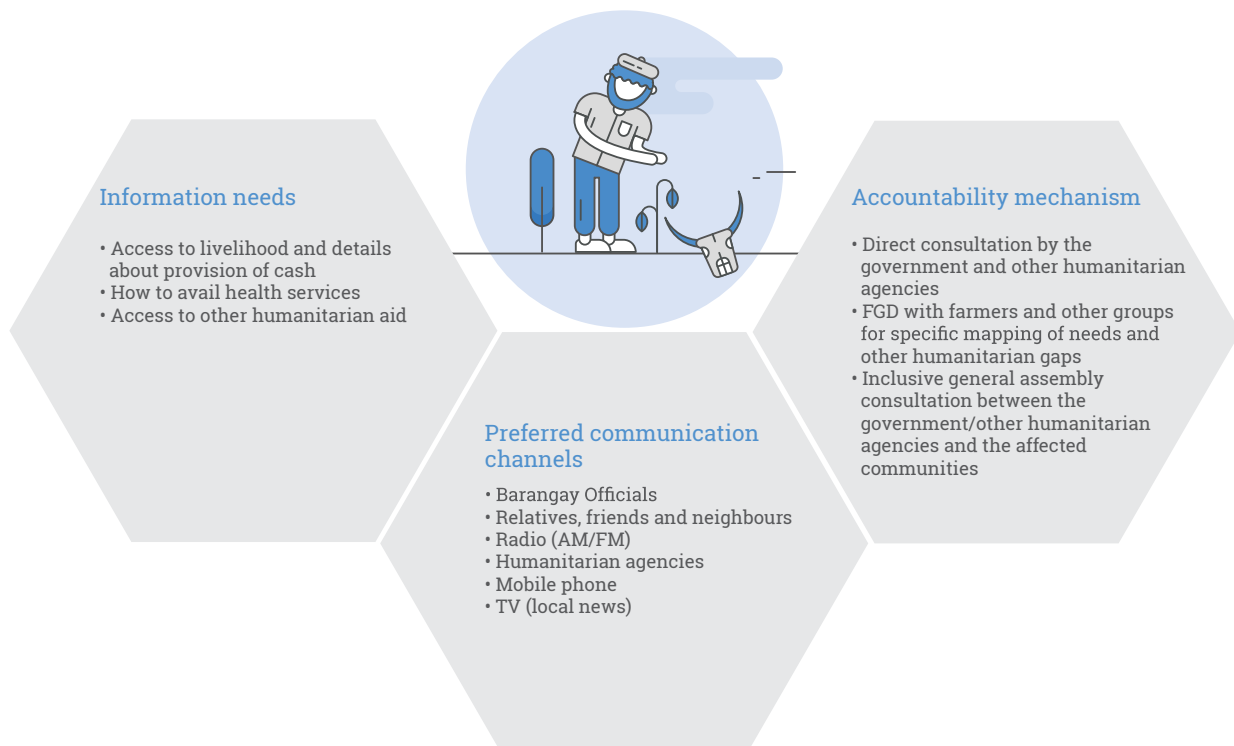
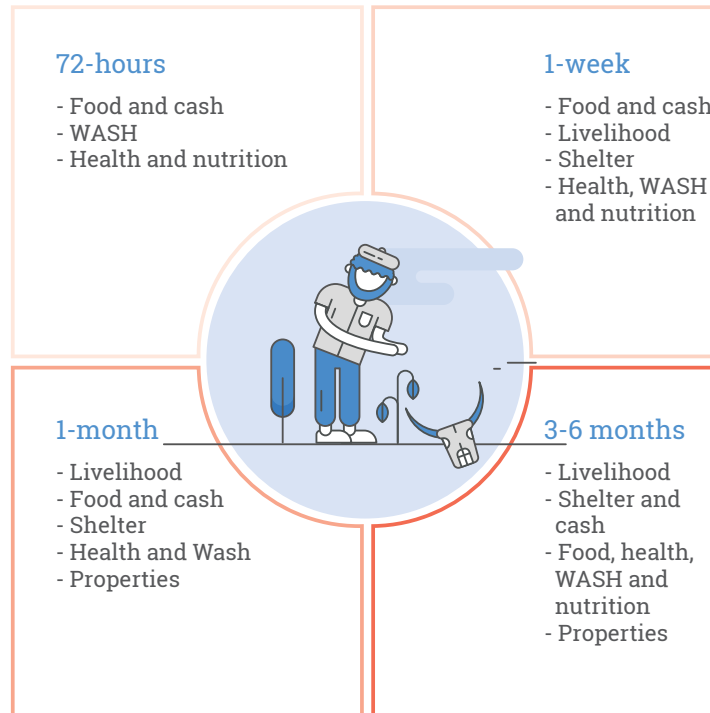
Women



Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

Farmers/Fisherfolks





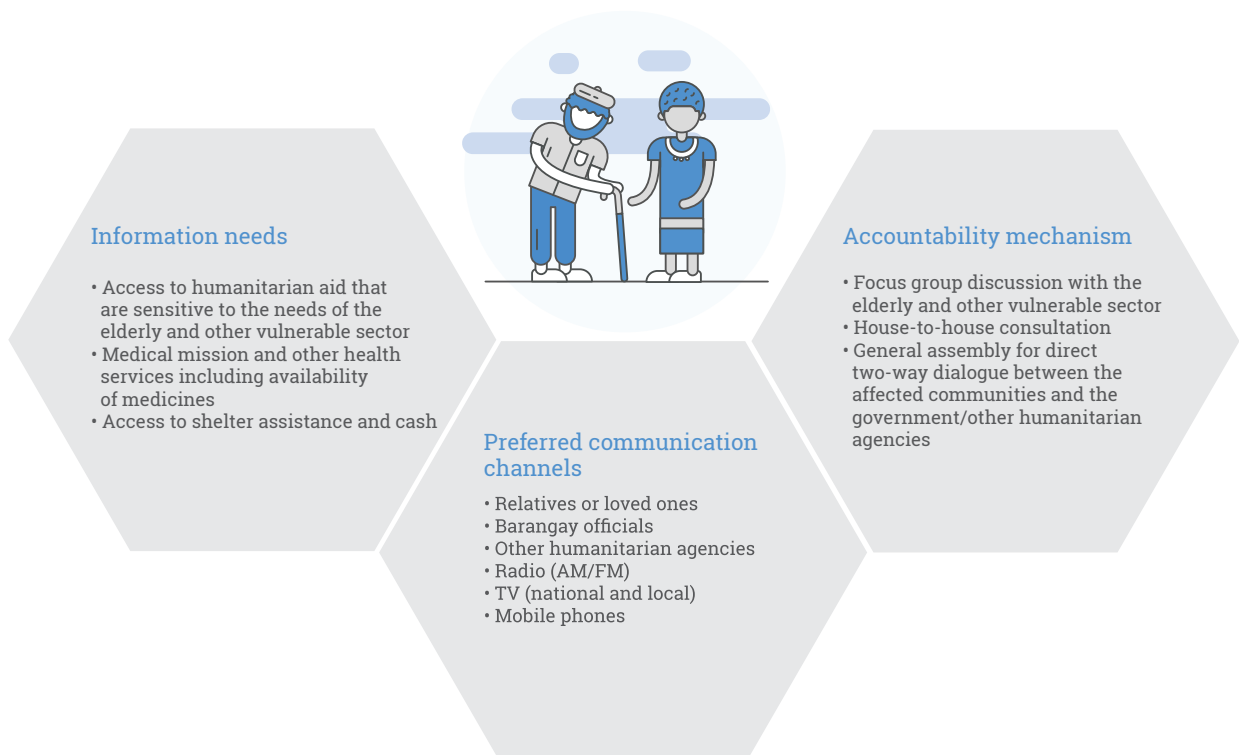
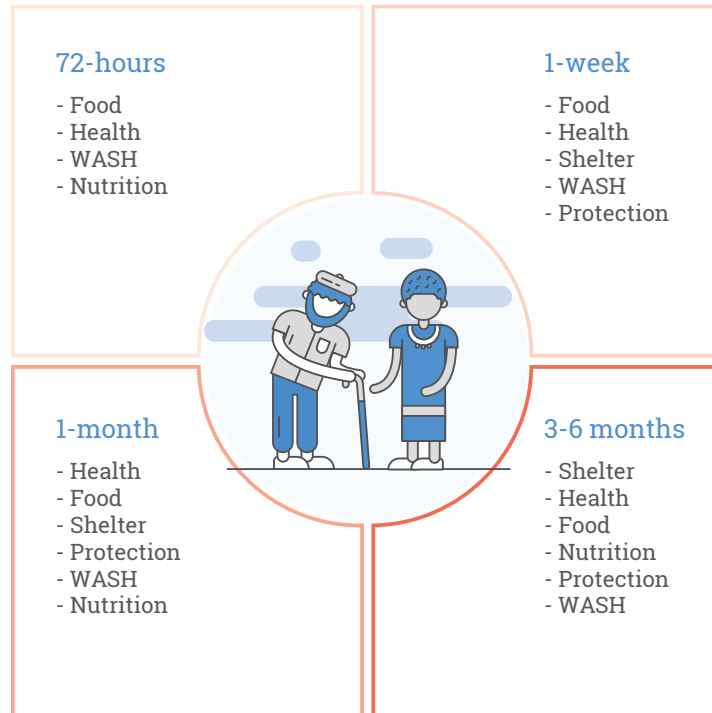
"I am looking forward to the day where our Barangay council would engage more children like us in the disaster planning. It's always been adults speaking with adults when it comes to decision making. They see us as victims even before the typhoon made a landfall. It has to change and we want more accountability."

Robin Asucena, 15 years old from Barangay Abariongan, Sto. Niño, Cagayan

Aid priorities and preferences

Barangay Ermita, San Carlos City, Negros Occidental

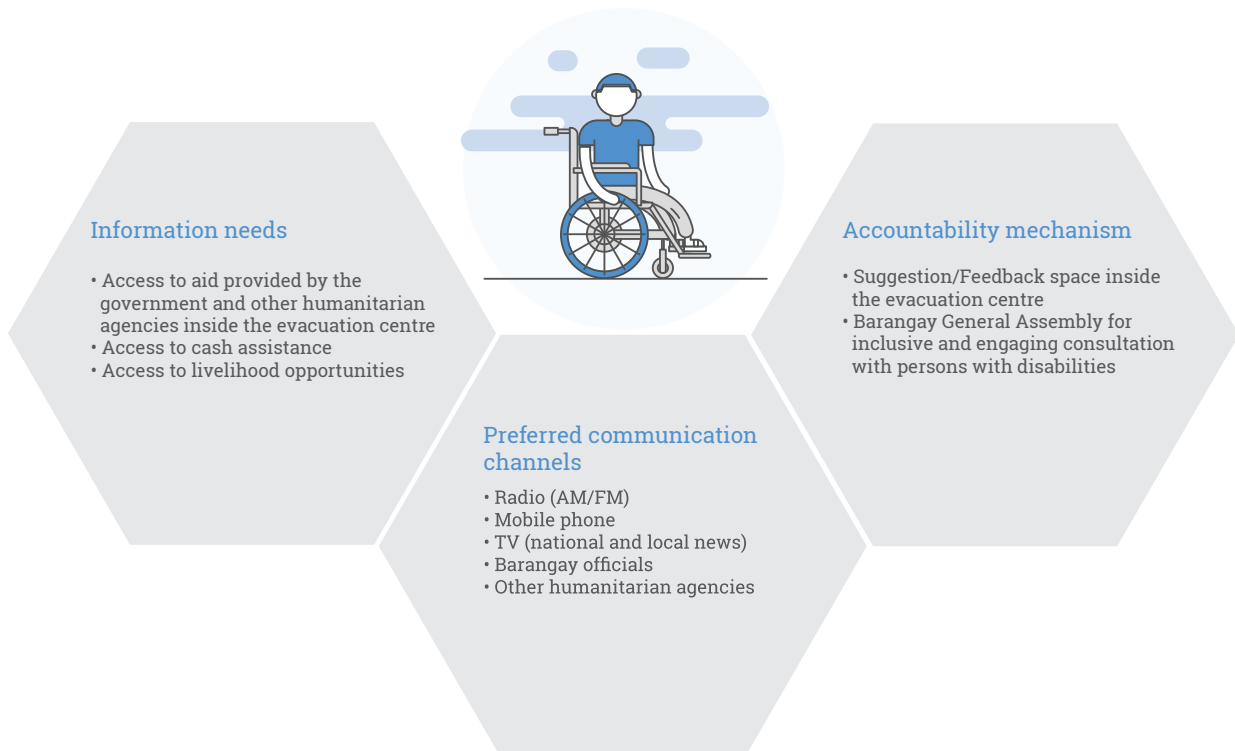
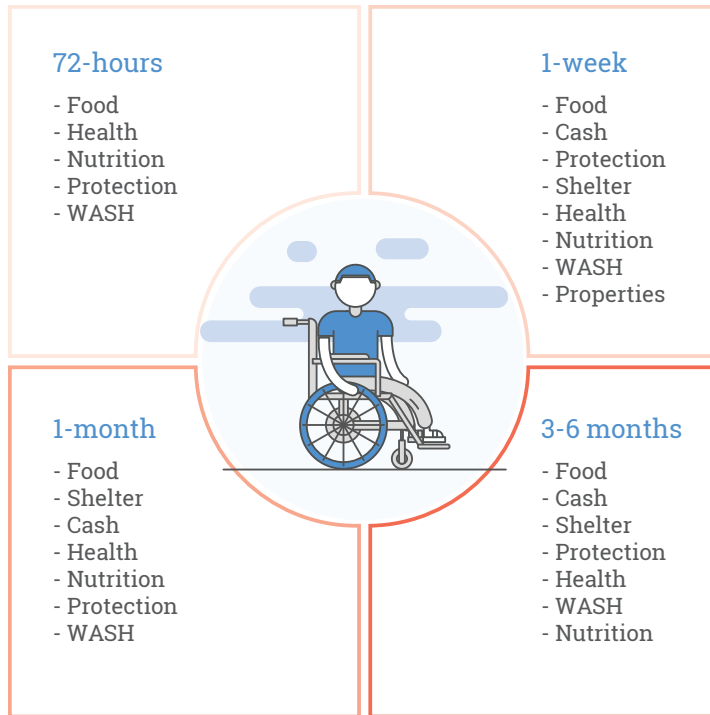
Elderly



Aid priorities and preferences

Barangay Ermita, San Carlos City, Negros Occidental

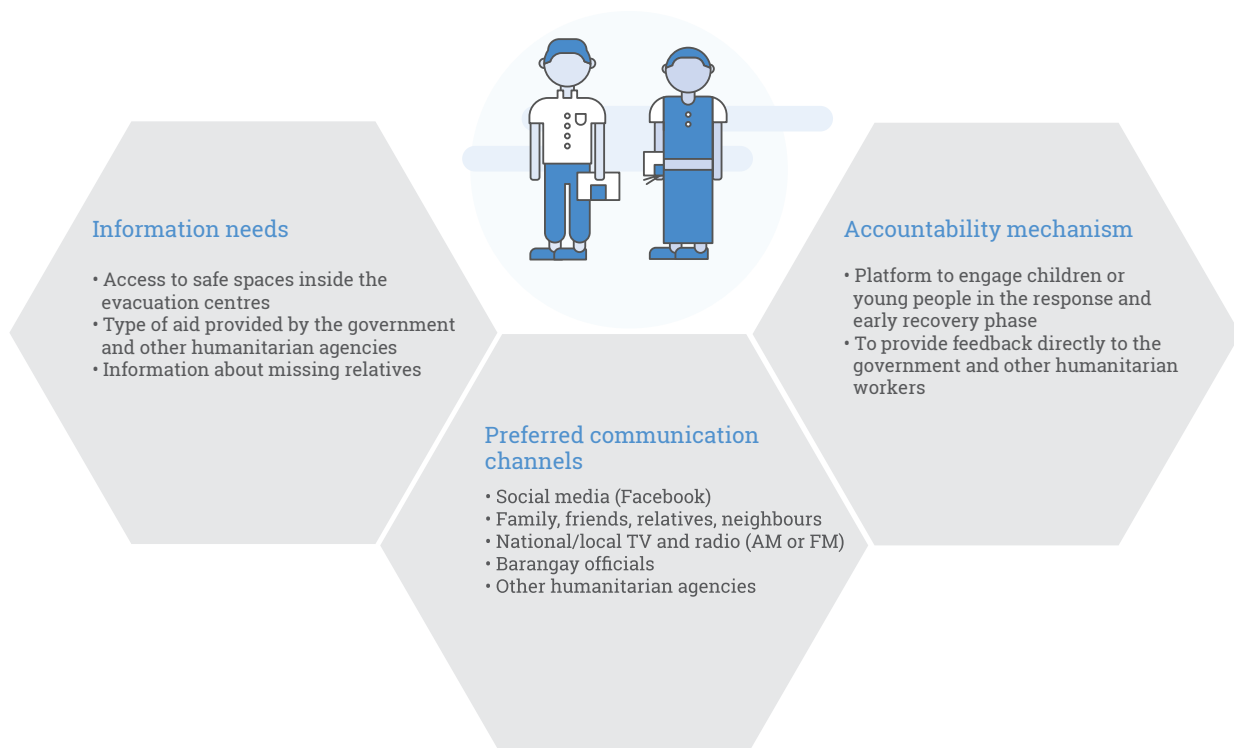
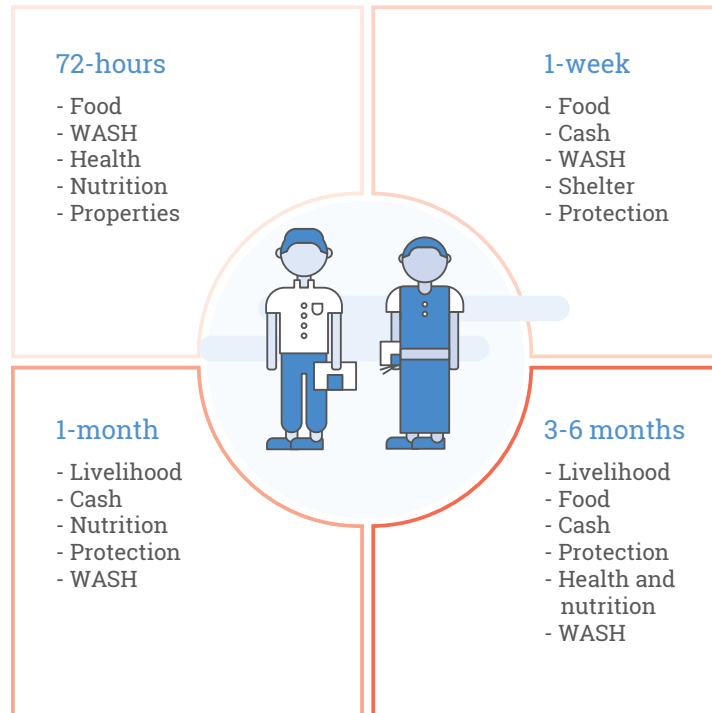
Persons with disabilities



Aid priorities and preferences

Barangay Ermita, San Carlos City, Negros Occidental

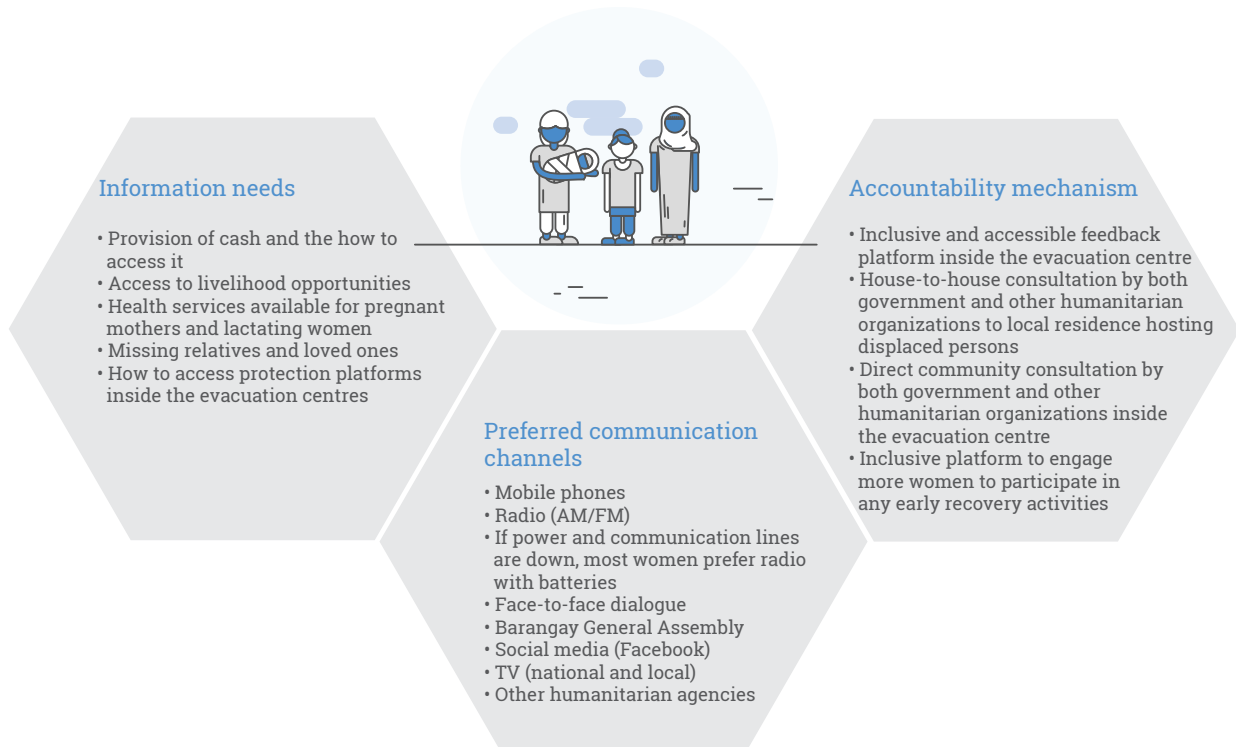
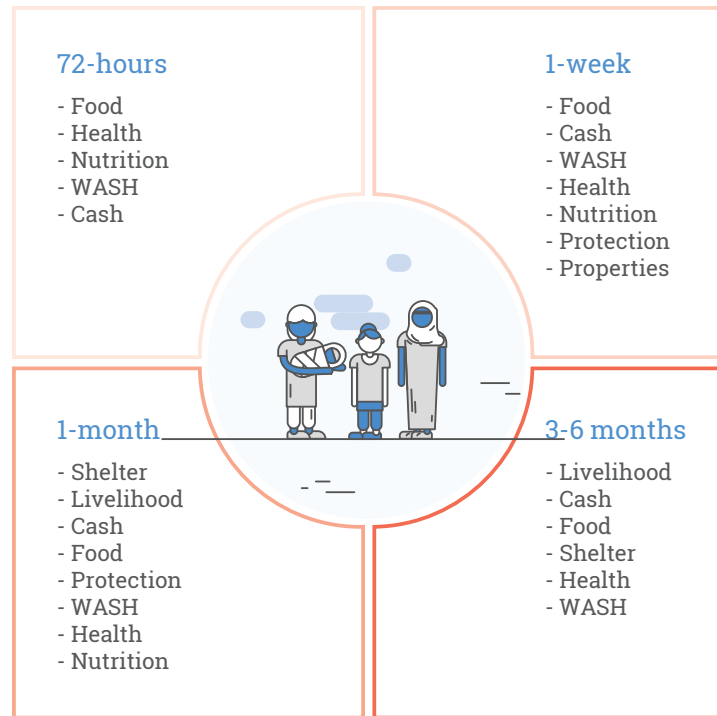
Children



Aid priorities and preferences

Barangay Ermita, San Carlos City, Negros Occidental

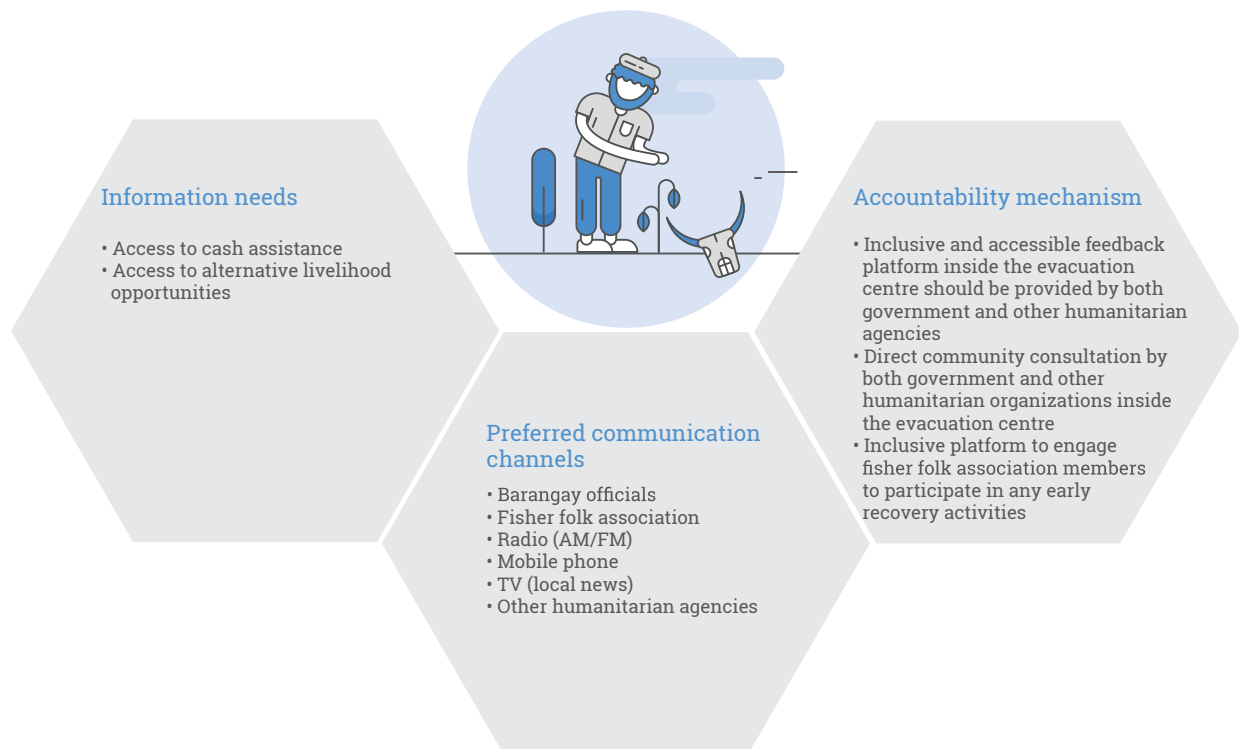
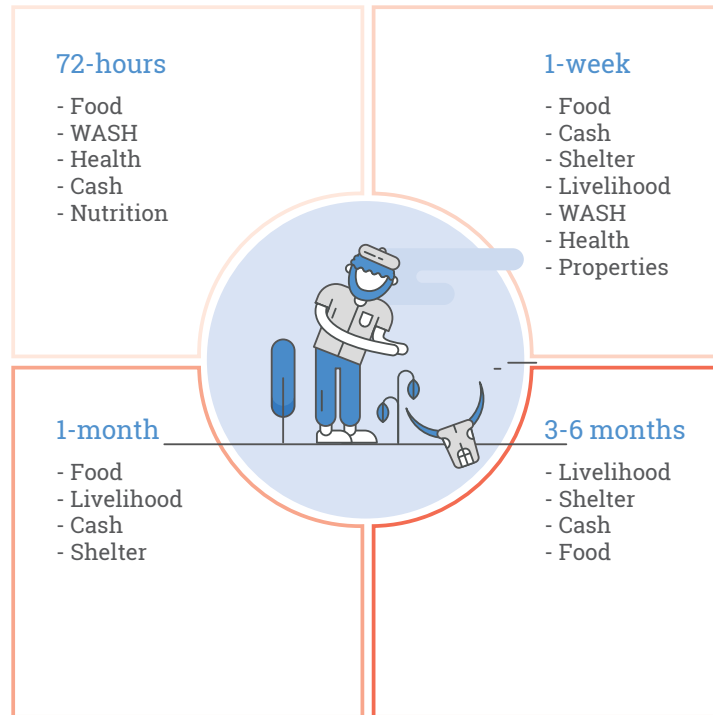
Women



Aid priorities and preferences

Barangay Ermita, San Carlos City, Negros Occidental

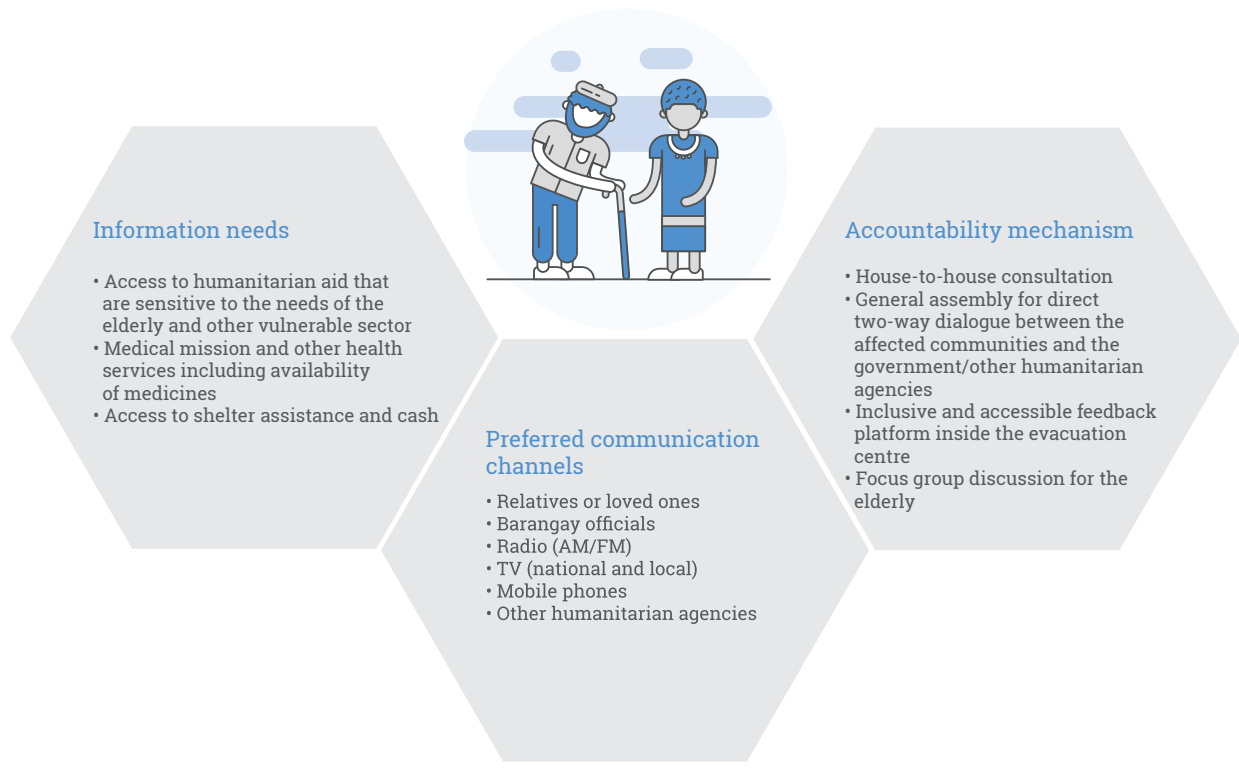
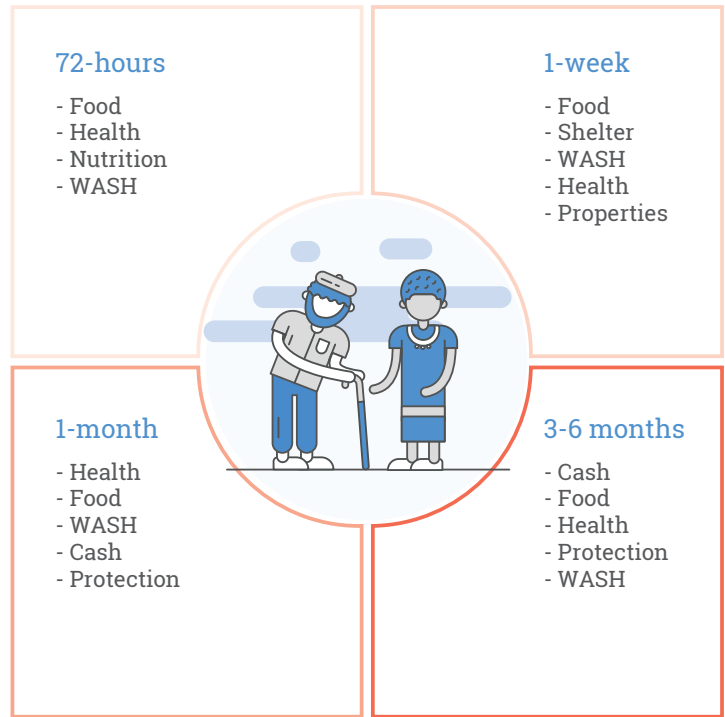
Farmers/Fisherfolks



Aid priorities and preferences

Barangay San Juan, San Carlos City, Negros Occidental

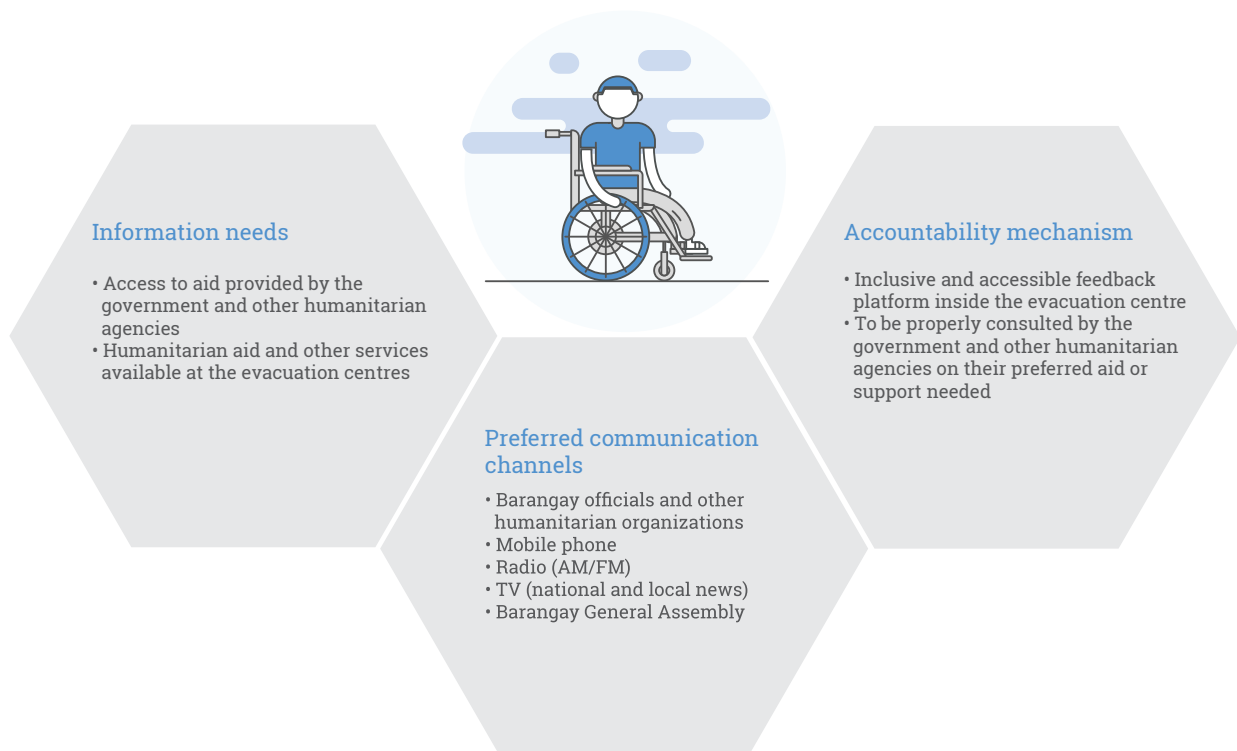
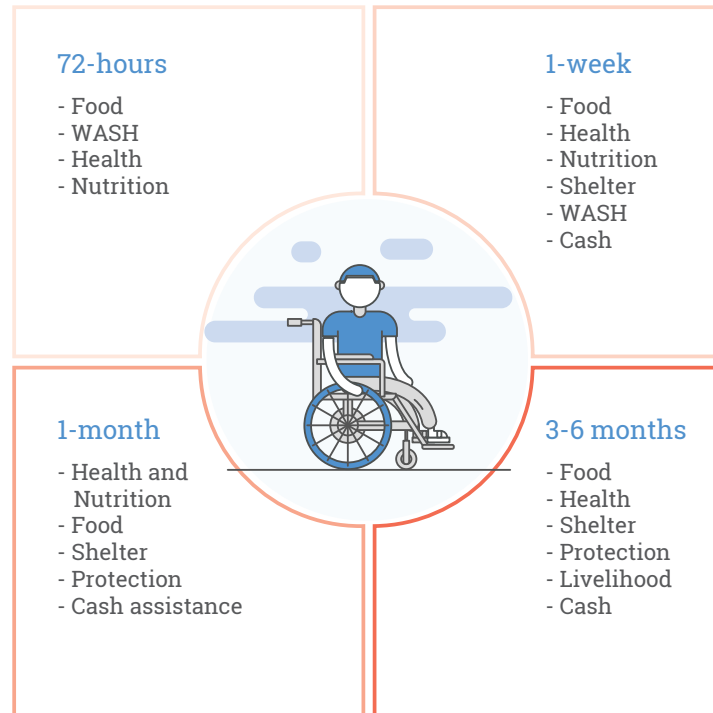
Elderly



Aid priorities and preferences

Barangay San Juan, San Carlos City, Negros Occidental

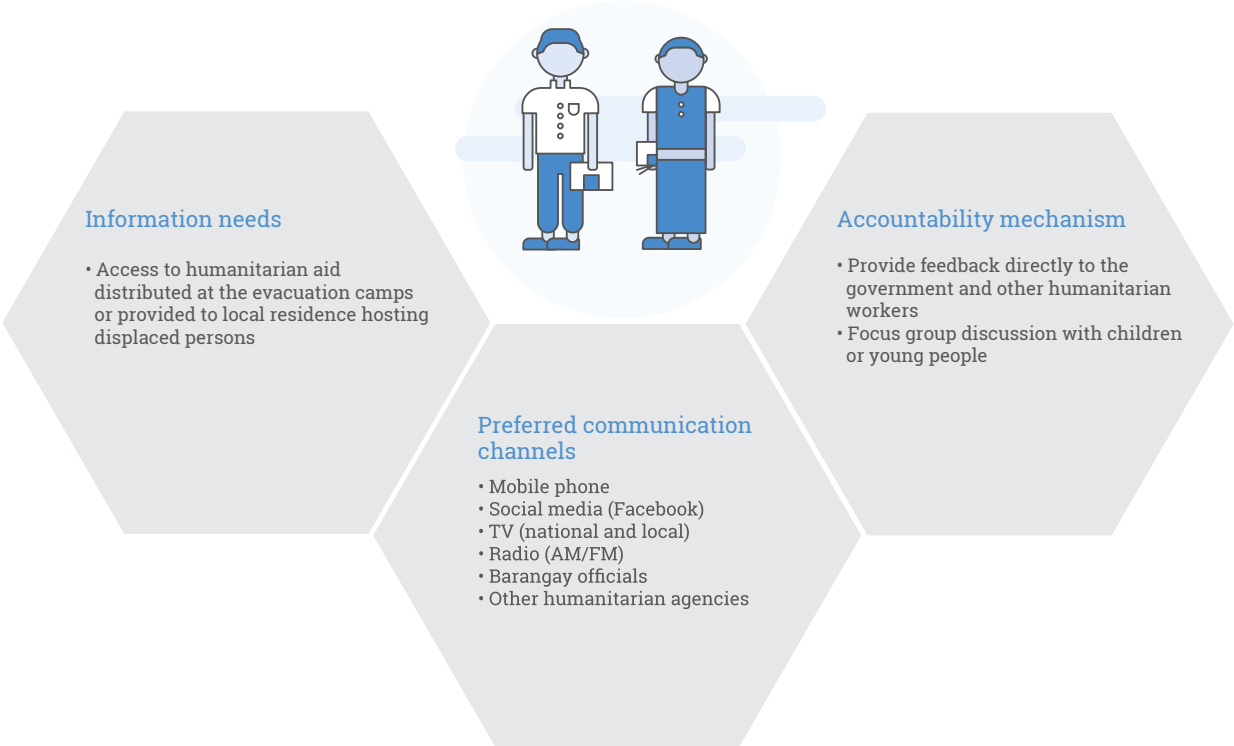
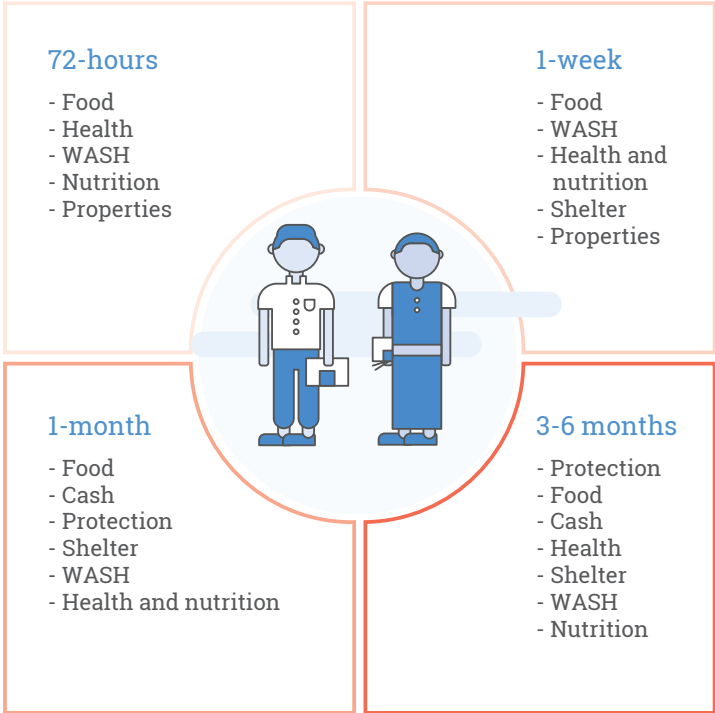
Persons with disabilities



Aid priorities and preferences

Barangay San Juan, San Carlos City, Negros Occidental

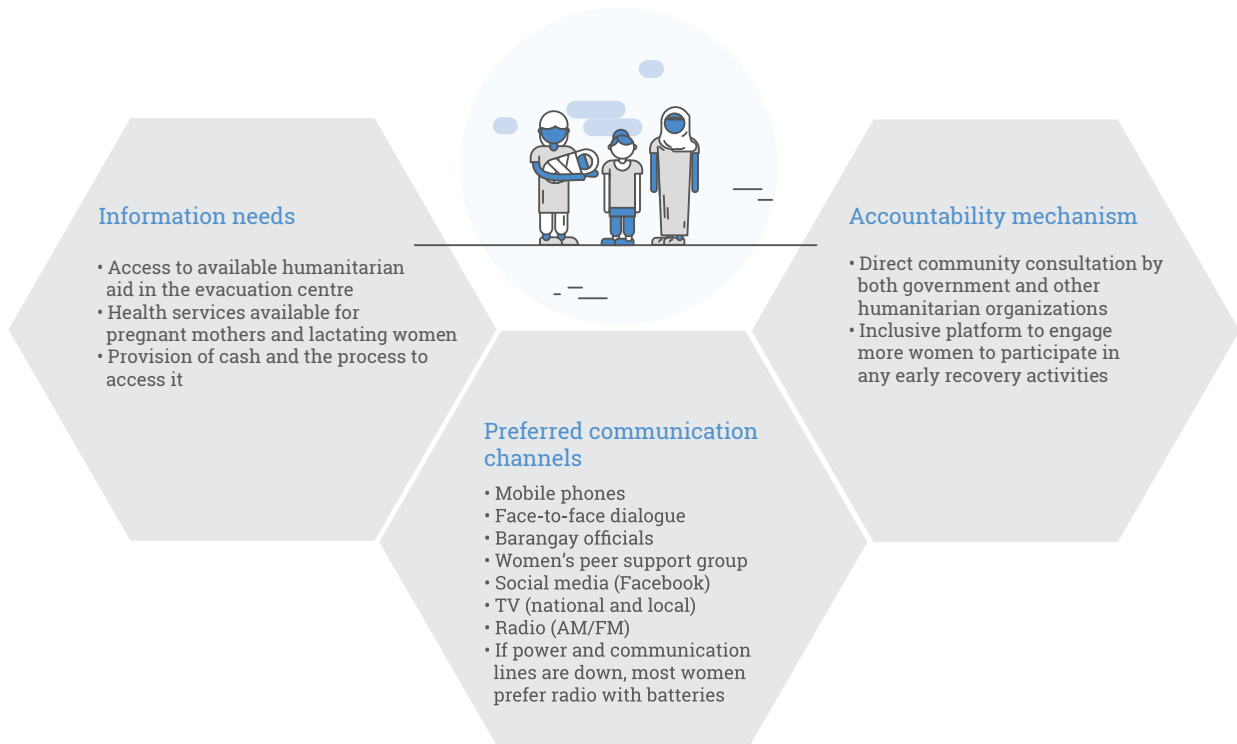
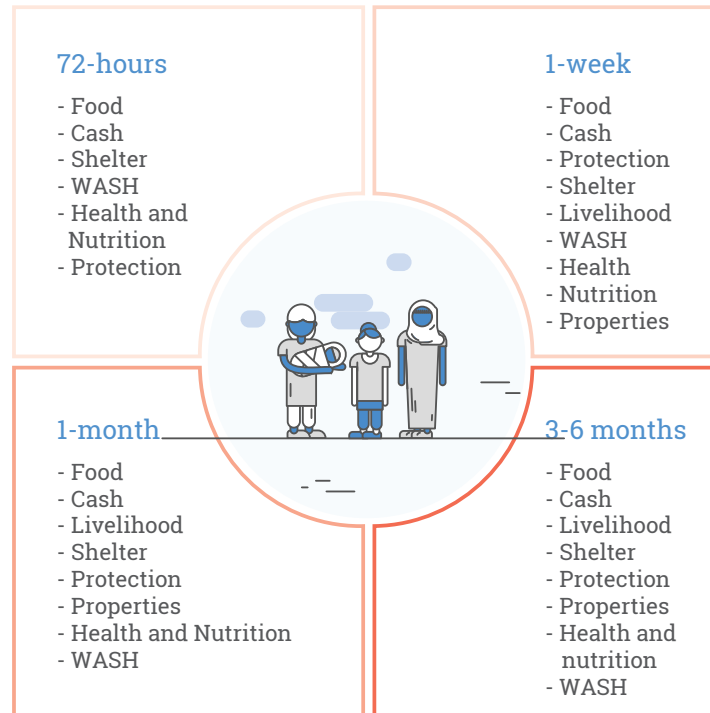
Children



Aid priorities and preferences

Barangay San Juan, San Carlos City, Negros Occidental

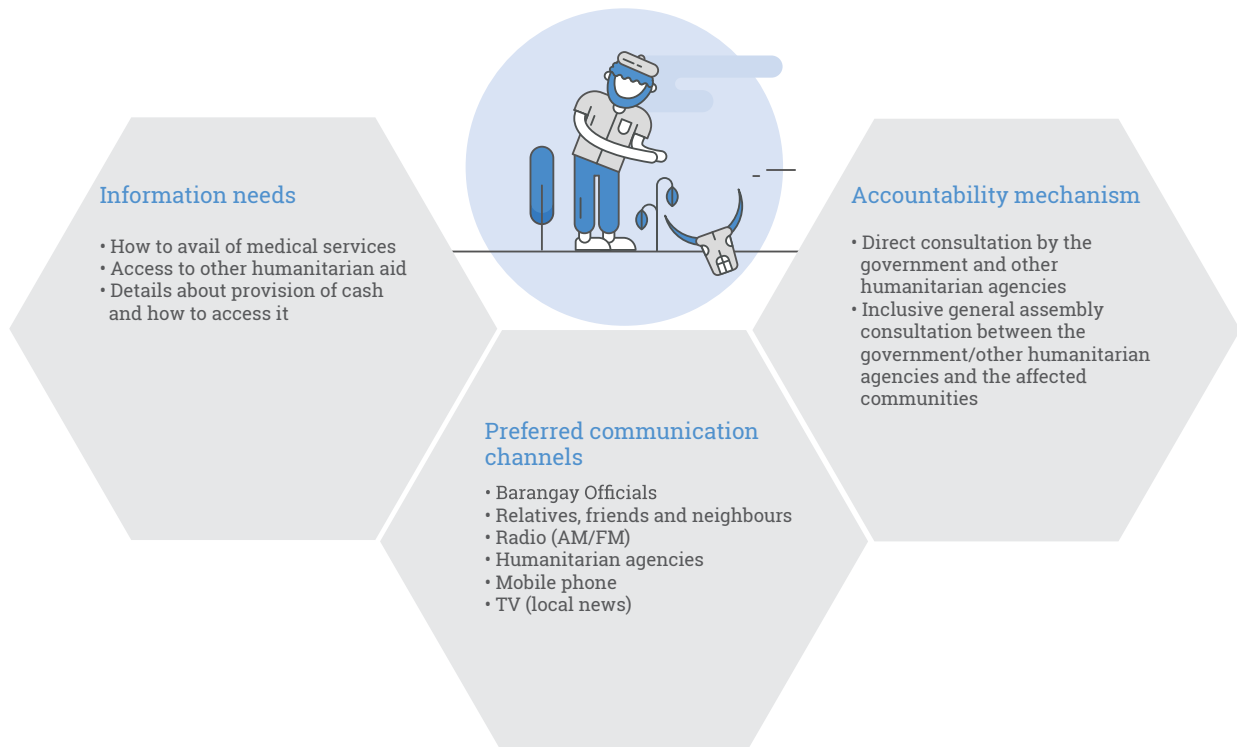
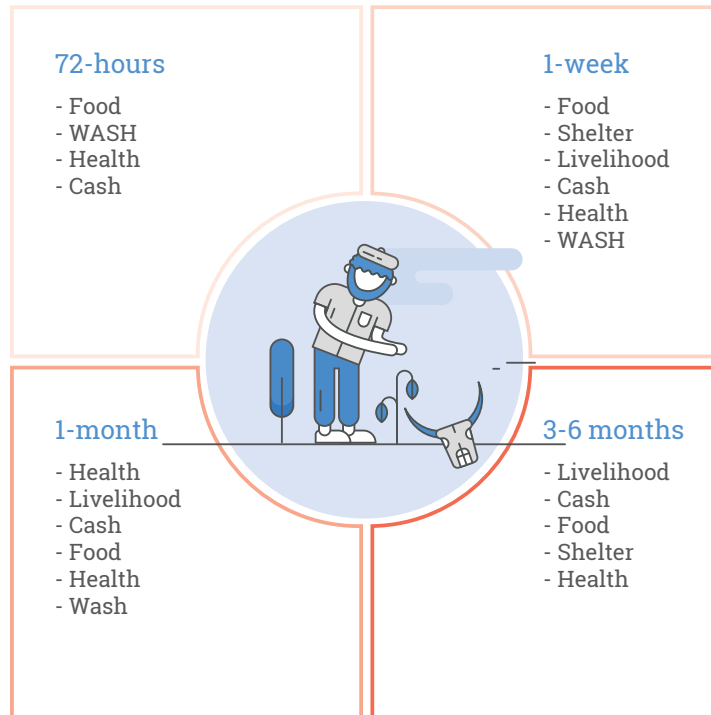
Women



Aid priorities and preferences

Barangay San Juan, San Carlos City, Negros Occidental

Farmers/Fisherfolks





"Engaging persons with disabilities through a dialogue is a recognition that vulnerable sector like us exists. We're thankful for that, however we want our local government to be more accountable by ensuring that our needs during emergency is part of their overall disaster planning. They need to be proactive now considering the recent typhoons that hit our community."

60-year-old blind woman from Barangay Apatan, Pinukpuk, Kalinga

For key informant interviews, the focus of the pre-crisis mapping is mapping the level of disaster preparedness of each pilot area and consulting the BDRRMC members on their overall capacity to provide lifesaving support within 72 hours after the typhoon landfall; for household survey, the highlight is interviewing and consulting the selected most and least vulnerable local residents; and for FGD, the emphasis is engaging the most vulnerable, less visible and less vocal members of the local community such as children, elderly, indigenous people, persons with disabilities and women as well as the farmers and fisher folks association.

Key informant interviews (KII)

The capacity of BDRRMCs in the five pilot barangays in Cagayan, Kalinga and Negros Occidental, albeit limited, clearly indicates that each BDRRMC has the minimum capacity to provide some lifesaving support to at-risk community within 72 hours to 1 week after a destructive typhoon. While the level of local support depends on each capacity, the KII results showed that it may not necessarily address the priority needs of those considered as the vulnerable sectors within 72 hours to 1 week.

Most KII respondents expect that the likely impact of a Haiyan-type typhoon will be damaging and overwhelming not only

on their capacity or role as first-line of defence but on how the whole community will cope with the aftermath. Feedback by each BDRRMC underscores the following:

- past experience of the BDRRMC members on the damaging impacts of strong typhoons on food security, livelihood, shelter and properties;
- difficulties of some local residents in each barangay in the recovery phase years after the typhoon;
- each barangay can be geographically isolated by a strong typhoon and rain-induced landslides, in case of highlands or mountainous barangays and flooding, in case of coastal areas;
- opportunities to further improve the evacuation procedure and displacement management of the affected population;
- obstacle in providing the humanitarian needs days, weeks or months after the landfall;
- good working relationship (politically) of at least four pilot barangays with the municipal and provincial government;
- self-reliance of one barangay in case of geographical isolation, being in a disadvantaged situation, limited access to humanitarian support, or if aids are restricted by the municipal and provincial government;
- established partnership with local actors like CSOs, faith or church-based groups, INGOs and other humanitarian agencies; and lastly,
- openness to any kind of humanitarian support or intervention coming from local, national and international agencies in each humanitarian phase.

By stressing each diverse capacity and limitation at the same time, evidently all BDRRMCs articulated the kind of support and aid it needs per area within days, weeks and even months after the typhoon. The basic facilities in each barangay signals a red flag in terms of its current status. Considering the urgency, each barangay endeavours to improve its prepositioning capacity with much needed support from national and provincial government and other organizations. As part of general preparedness, the priority of each BDRRMC is focused on:

- **conducting series of new or advanced community-based DRR training;**
- **improving of BDRRMC plan that includes incorporating the pre-crisis information mapping and consultation results;**
- **additional capacity building on response preparedness including prepositioning of lifesaving items;**
- **establishing more project or local initiative-based partnerships with other organizations.**

Household survey (HS)

In terms of overall ranking from 72 hours up to 3-6 months of humanitarian phase, most households in the five pilot barangays preferred the following:

- **food**
- **water**
- **health**

- **shelter**
- **livelihood**
- **cash**
- **sanitation**
- **properties**
- **nutrition and**
- **protection**

Considering in each pilot barangay the preferred humanitarian aids varies, the following are the summary from 72 hours to 3-6 months per area:

In Cagayan (Barangay Abariongan and Balagan, Sto. Nino), the overall preferred aids are: shelter, food, health, livelihood, cash, properties, nutrition, water, sanitation and protection. To break it down, within 72 hours: food, water, health, shelter, sanitation, cash, nutrition, properties, livelihood and protection; within 1 week: shelter, health, food, properties, water, nutrition, livelihood, sanitation, cash and protection; within 1 month: shelter, livelihood, cash, health, properties, nutrition, food, protection, water and sanitation; and lastly, within 3-6 months: livelihood, cash, shelter, nutrition, health, properties, protection, food, water & sanitation.

In Kalinga (Barangay Apatan, Pinukpuk), the overall preferred aids are: food, water, shelter, health, livelihood, sanitation, properties, nutrition, cash and protection. To break it down, within 72 hours: food, water, sanitation, health, nutrition, properties, shelter, livelihood, cash and protection; within 1 week: food, water, shelter, health, sanitation, nutrition, livelihood, properties, cash and protection; within 1 month: shelter, food, health, livelihood, properties, cash, water, sanitation, nutrition and protection; and lastly, within 3-6 months: cash, food, livelihood, properties, shelter, protection, water, sanitation, health & nutrition.

In Negros Occidental (Barangay Ermita and San Juan, Sipaway Island in San Carlos City), the overall preferred aids are: food, water, health, cash, sanitation, livelihood, shelter, properties, nutrition and protection. To break it down, within 72 hours: food, water, health, cash, sanitation, livelihood, shelter, protection, properties & nutrition; within 1 week: food, water, health, sanitation, cash, livelihood, shelter, nutrition, protection & properties; within 1 month: food, water, shelter, health, cash, sanitation, livelihood, properties, nutrition & protection; and lastly, within 3-6 months: food, cash, livelihood, water, health, sanitation, shelter, properties, nutrition & protection.

Majority of the households not only consider information as aid but accountability and closing the feedback loop as well. In the previous typhoon response, accountability mechanisms were identified as missing and not accessible for affected population.

In terms of access to information, most households consider knowing the type of aid provided by the government and other humanitarian agencies as equally important lifesaving information with having inclusive access to those aid. Other information needs include: how to communicate or locate missing or separated loved ones/relatives, update on possible return, relocation process and even the schedule and location of aid distribution. The main sources information are families/relatives/friends/neighbours, AM/FM radio, local newspaper/TV, government official/community leaders/religious leaders and lastly, the community groups.

The preferred communication channels for community consultation are face-to-face consultation, general barangay assembly, community leaders and government officials and mobile phones (via free SMS, calls and battery charging station services).

To ensure that both the government and humanitarian community will be held accountable on any issues affecting the aid services provided and ensure that their feedback are given platforms to be heard, most households prefer the face-to-face consultation, general barangay assembly, community leader, government official and aid workers, use of SMS and lastly, availability of feedback/suggestion box in the evacuation centre or relocation site.

Focus group discussion (FGD)

Based from the feedback provided by the FGD respondents, it is imperative that as part of pre-positioning for the next or future emergency response, humanitarian programming should be more inclusive and sensitive not only on the time-critical phase of response and early recovery, but more importantly on the specific needs of identified vulnerable groups.

For elderly across pilot barangays, the following are the identified priorities per humanitarian phase: within 72 hours: food, health/nutrition, water/sanitation/health or WASH, shelter and properties; within 1 week: food, health/nutrition, WASH, shelter, properties and protection; within 1 month: health and nutrition, food, WASH, shelter, cash and properties; and within 3-6 months: shelter, protection, health, food, WASH, cash, livelihood and properties.

For children, within 72 hours: food, WASH, health/nutrition, properties and shelter; within 1 week: food, WASH, health/nutrition, cash, livelihood, shelter and properties; within 1 month: food, cash, livelihood, shelter, protection, properties, WASH, health/nutrition; and within 3-6 months: food, cash, health/nutrition, WASH, shelter, livelihood and properties. Some children interviewed considered cash and livelihood as preferred aid since they help their parents in farming and in fishing.

For persons with disabilities, within 72 hours: food, health/nutrition, WASH, protection, properties and shelter; within 1 week: food, WASH, health/nutrition, shelter, protection, properties and cash; within 1 month: food, livelihood, protection, cash, WASH, health/nutrition, shelter and properties; and within 3-6 months: food, cash/livelihood, health/nutrition/protection, WASH and shelter/properties.

For women, within 72 hours: food/cash, protection, WASH/health/nutrition, shelter and properties; within 1 week: food/cash/livelihood, protection, shelter, WASH/health/nutrition and properties; within 1 month: food/cash/livelihood, WASH/health/nutrition, shelter/protection and properties; and within 3-6 months: food, livelihood, cash, shelter/protection/properties and WASH/health/nutrition.

In the series of FGD and consultations, most vulnerable sectors stress that the priority in terms of information needs is the inclusive access to aid provided by both the government and other humanitarian agencies. Inclusive in the sense that all respondents expect government and other humanitarian workers to be more sensitive and aware of the type of aid it provides in the process of distribution. It is expected that prior to any type of humanitarian intervention, agencies are already aware of the preferred aid by the vulnerable sectors.

With the exception of children who prefer social media, use of SMS/calls and TV as communication channels, other vulnerable sector such as elderly, farmers, fisher folk and persons with disabilities prefer the use of radio (with batteries), barangay official/community leaders, face-to-face consultation, barangay general assembly. For women, majority would like to avail and maximize all communication channels available.

For accountability and closing the feedback loop, across vulnerable sectors interviewed and consulted, the following are identified as priorities:

- **inclusive and accessible feedback platform inside the evacuation centre;**
- **house-to-house consultation by both government and other humanitarian organizations to local residence hosting**

displaced persons;

- **direct community consultation by both government and other humanitarian organizations inside the evacuation centre;**
- **inclusive platform to engage children, elderly, farmers, fisher folk, persons with disabilities and women.**

What went well

- The entire process was inclusive with the engagement of the local government, community volunteers, the most vulnerable and disadvantageous groups such as women, children, persons with disabilities, elderly, indigenous people as well as those marginalized sector like the Farmers and Fisher Folk's Association.
- The collaboration of CoPCE members and local partners proved to be strategic, with each organization offering expertise, resources and connection at the field level.
- Both the pre-crisis information mapping/consultation tool and kobo tool are well appreciated by the field volunteers, facilitators and local government. Integrating the overall process or methodology in the disaster management and contingency plan is a priority for each at-risk barangay.
- The entire process was easy to implement and does not require huge amount of funding in mobilizing local volunteers and facilitators.

- The initiative was useful for it happened months before typhoon Mangkhut and Yutu and there was substantial information that supported the rapid response assessment days after the landfall of typhoon in Northern Philippines. From September to October 2018, typhoons Mangkhut and Yutu affected Northern part of the Philippines.
- It complements existing or ongoing community-based preparedness and disaster risk reduction activities at the barangay level.
- While there were considerable delays in the identification of areas, existing partnerships in the previous response and ongoing disaster preparedness activities with local partners including CSOs, local NGOs, Social Action Centre and local government have been very useful of pushing the agenda to pilot areas in the conduct of intensive pre-crisis mapping and consultation.
- Considering geographical locations, pre-crisis mapping and consultation requires enough community preparation and appreciation of the intensive process in each barangay. There were delays in the actual conduct and this also affected the consolidation of data.
- Not all barangays engaged in this initiative have a good working relationship with municipal and provincial government. One barangay is more vulnerable compared to other areas as it lacks support from the government.
- While the entire process of the pre-crisis mapping and consultation does not require huge amount of funding, the time invested in the conduct and mobilizing the at-risk community is a major issue in terms of the availability of the people to be interviewed and consulted.
- Replicating the conduct of pre-crisis mapping and consultation in other areas requires good partnership between the government and other local organizations to ensure the process is inclusive and participatory. Not all at-risk barangays enjoyed the same level of partnership and access to common service platforms on two-way communication with other humanitarian organizations.

Challenges

- Capacitating community-based volunteers/facilitators takes some time. For pilot barangays, it would be effective to have some experienced facilitators/ enumerators that will help facilitate the pre-crisis activity. The process is intensive that requires skills in the conduct of interview, art of consultation and analysis of information or feedback being provided.

Recommendations

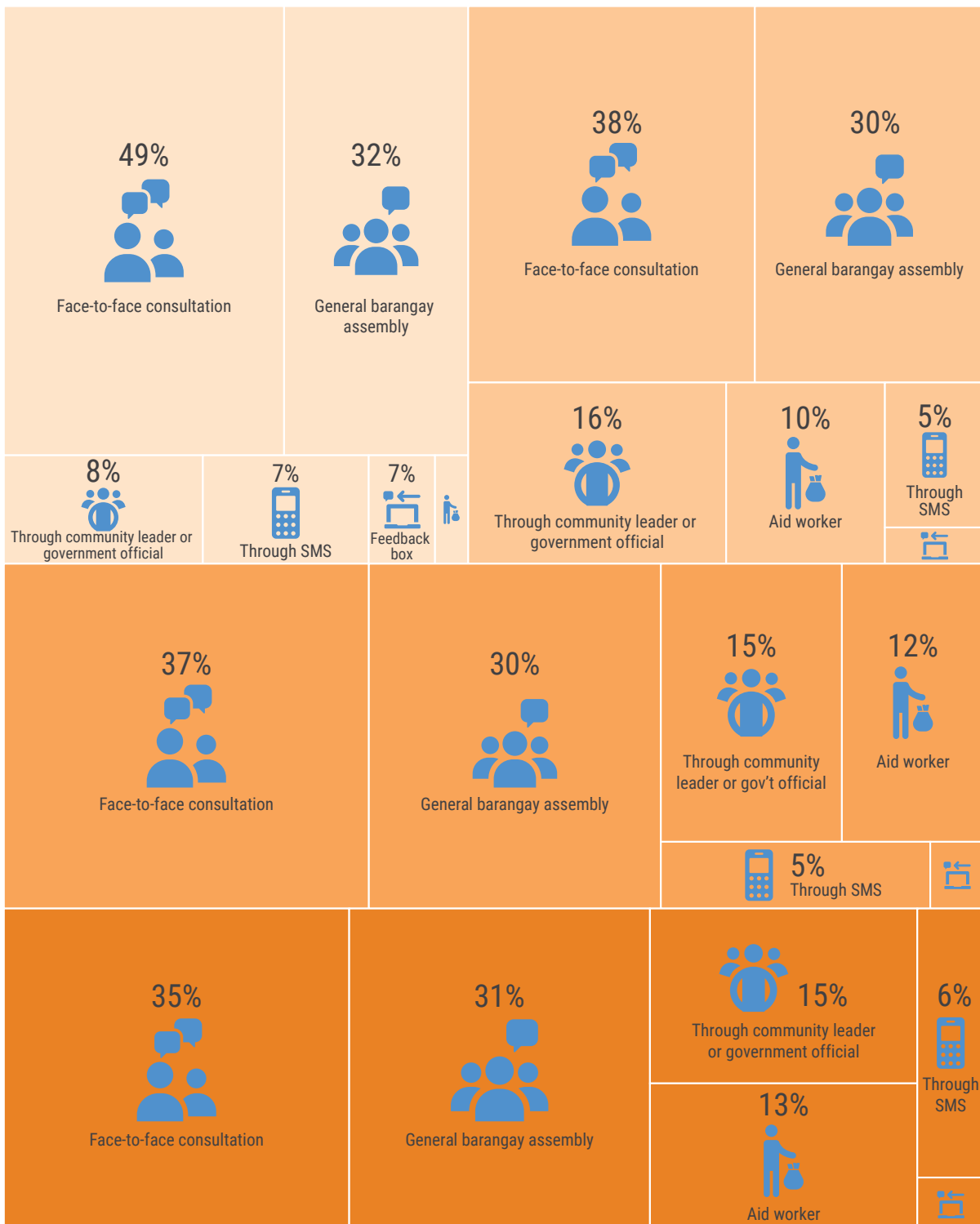
- The pre-crisis information mapping and consultation should be replicated in other vulnerable areas of Northern Luzon and Visayas Region. This time, pilot barangays and local partners will be in the frontline to provide the necessary support to other at-risk areas. Other CoPCE members can backstop the local government in the mobilization of additional resources and capacities, but the priority will be on the local CSOs and NGOs.
- Pilot barangays are expected to integrate the pre-crisis results into its BDDRM plans as well as on its typhoon specific contingency plan. As part of response preparedness, pilot barangays are expected to operationally adopt the pre-crisis results into its humanitarian response actions 72 hours, 1 week, 1 month and 3-6 months after the typhoon landfall.
- Pre-crisis information mapping and consultation results should be integrated in the cluster-specific Key Immediate Needs (KINs) as part of overall response preparedness for Haiyan-type typhoon. The process is similar to the 7.2 magnitude earthquake's pre-crisis mapping and consultation final results being incorporated to the HCT's contingency plan for Manila earthquake. For this initiative, the emphasis is on how the large-scale typhoon pre-crisis mapping and consultation will be more useful operationally and how the humanitarian community will be able to make use of the data in overall humanitarian response programming.
- Humanitarian agencies with established partnerships with the local government and at-risk communities should utilize the pre-crisis mapping and consultation results as these support localization component in the emergency response. Emphasis should be given on supporting local capacities while augmenting and complementing local resources in the time-critical phases of the humanitarian response.
- The pre-crisis mapping team to be deployed to support local government and at-risk communities should be fluent in the local language and sensitive enough with the political dynamics, culture and other practices in the area.
- In the orientation briefing, additional time is needed on the inclusion topics in order for enumerators/facilitators/volunteers minimize any biases and other attitudinal barriers in the consultation/interview process.

Appendix

Preferred channels for feedback on the aid received

Cagayan

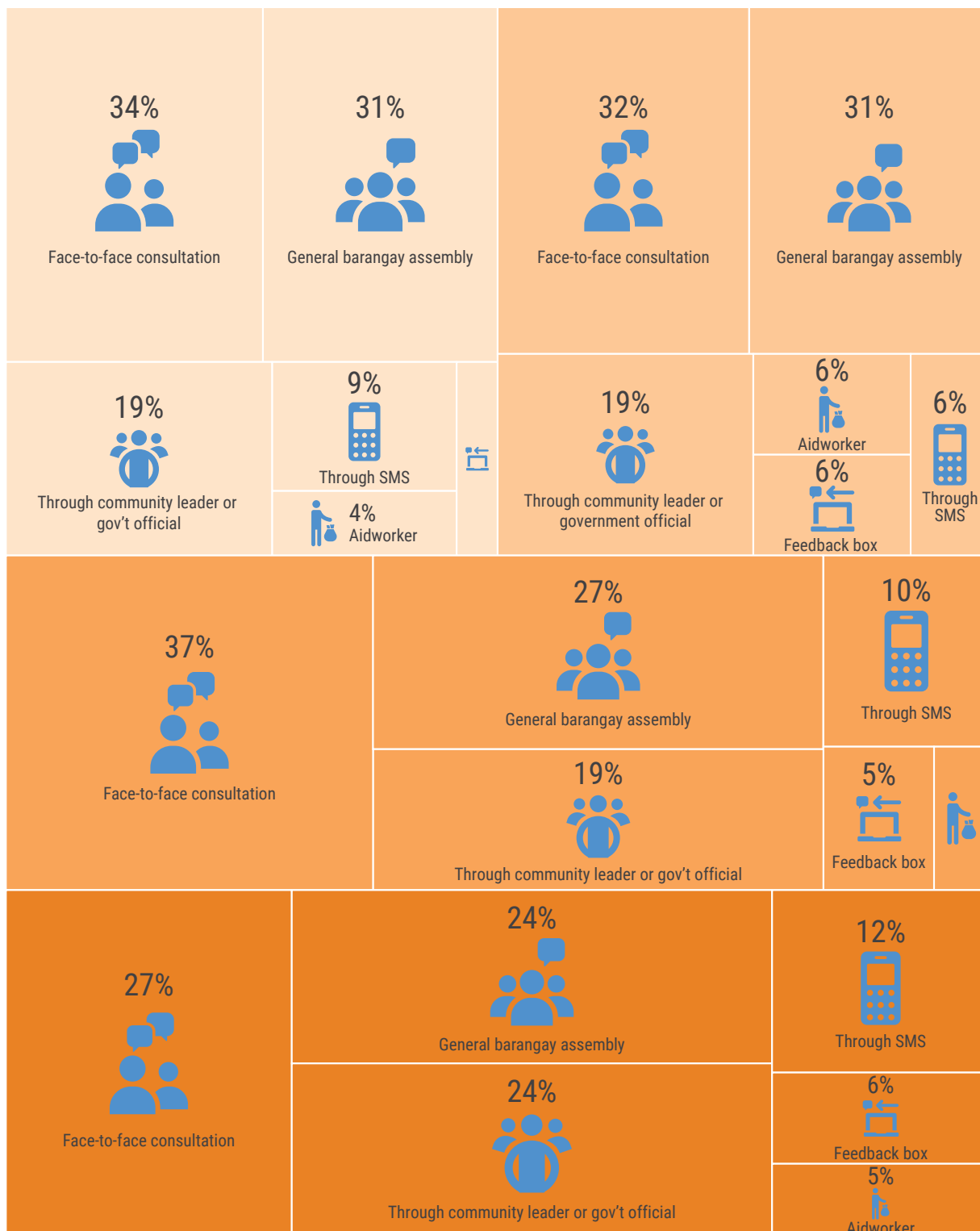
72 hours
 1 week
 1 month
 3 to 6 months



Preferred channels for feedback on the aid recieved

Kalinga

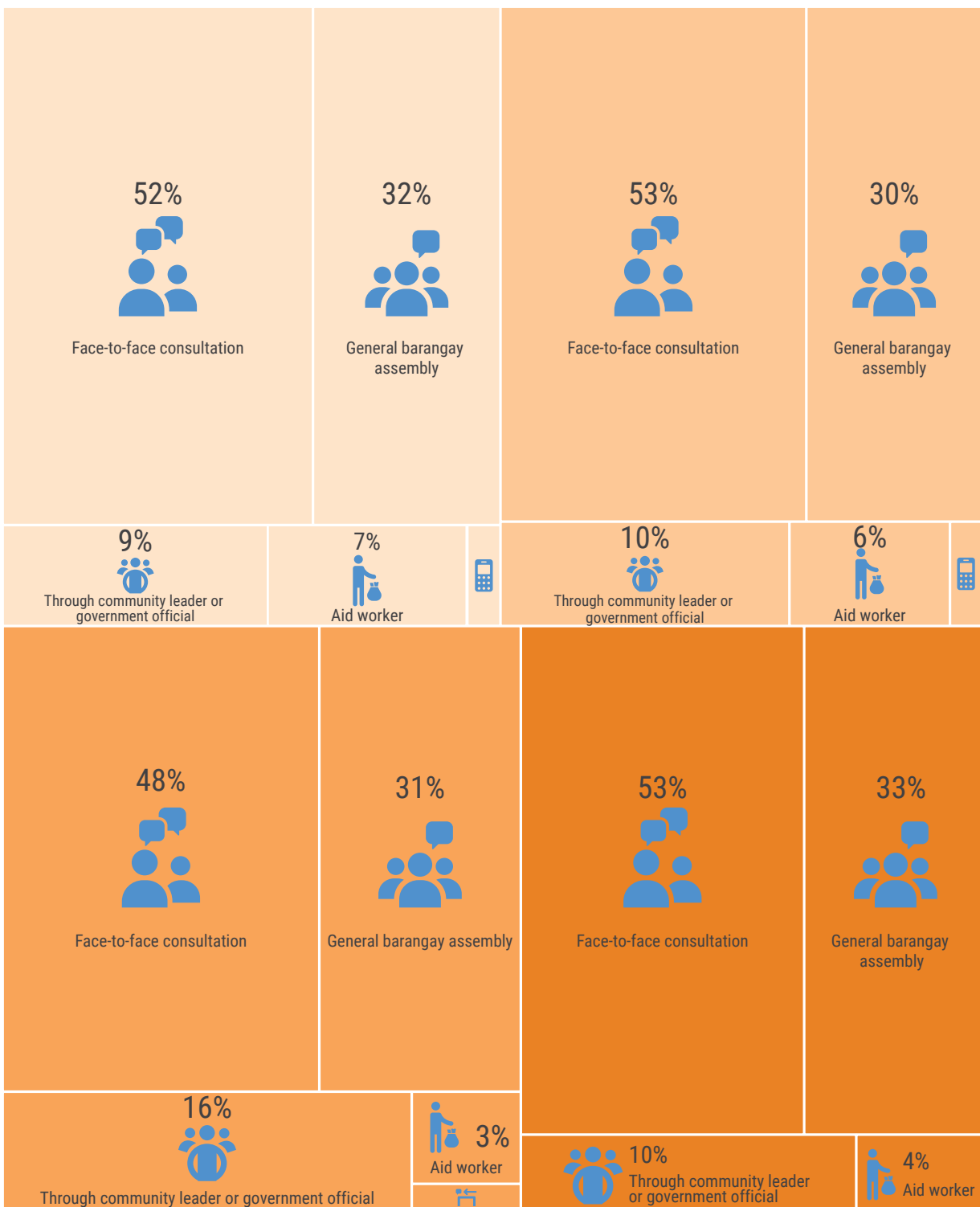
72 hours 1 week 1 month 3 to 6 months



Preferred channels for feedback on the aid received

Negros Occidental

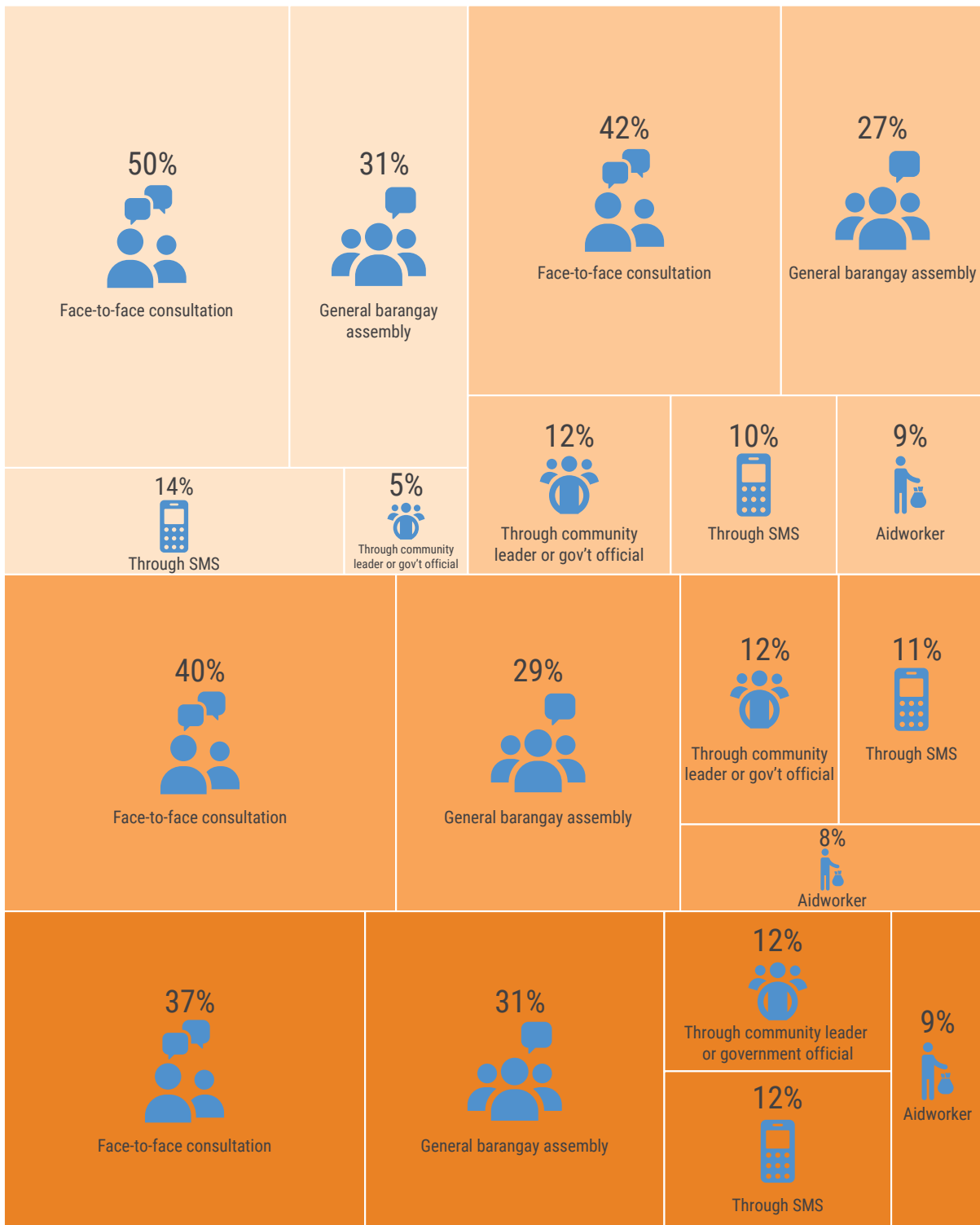
72 hours 1 week 1 month 3 to 6 months



Preferred channels for needs consultation

Cagayan

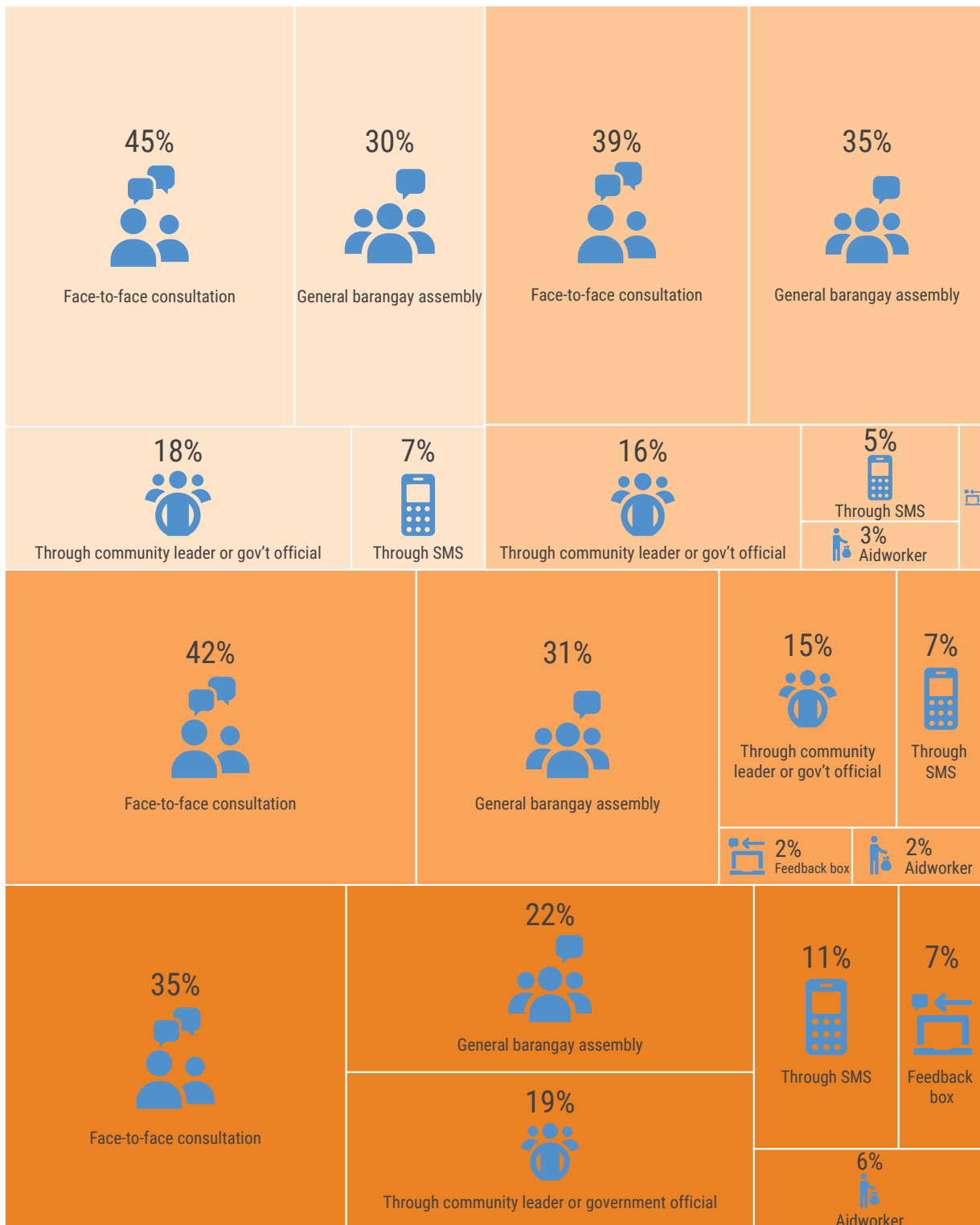
72 hours 1 week 1 month 3 to 6 months



Preferred channels for needs consultation

Kalinga

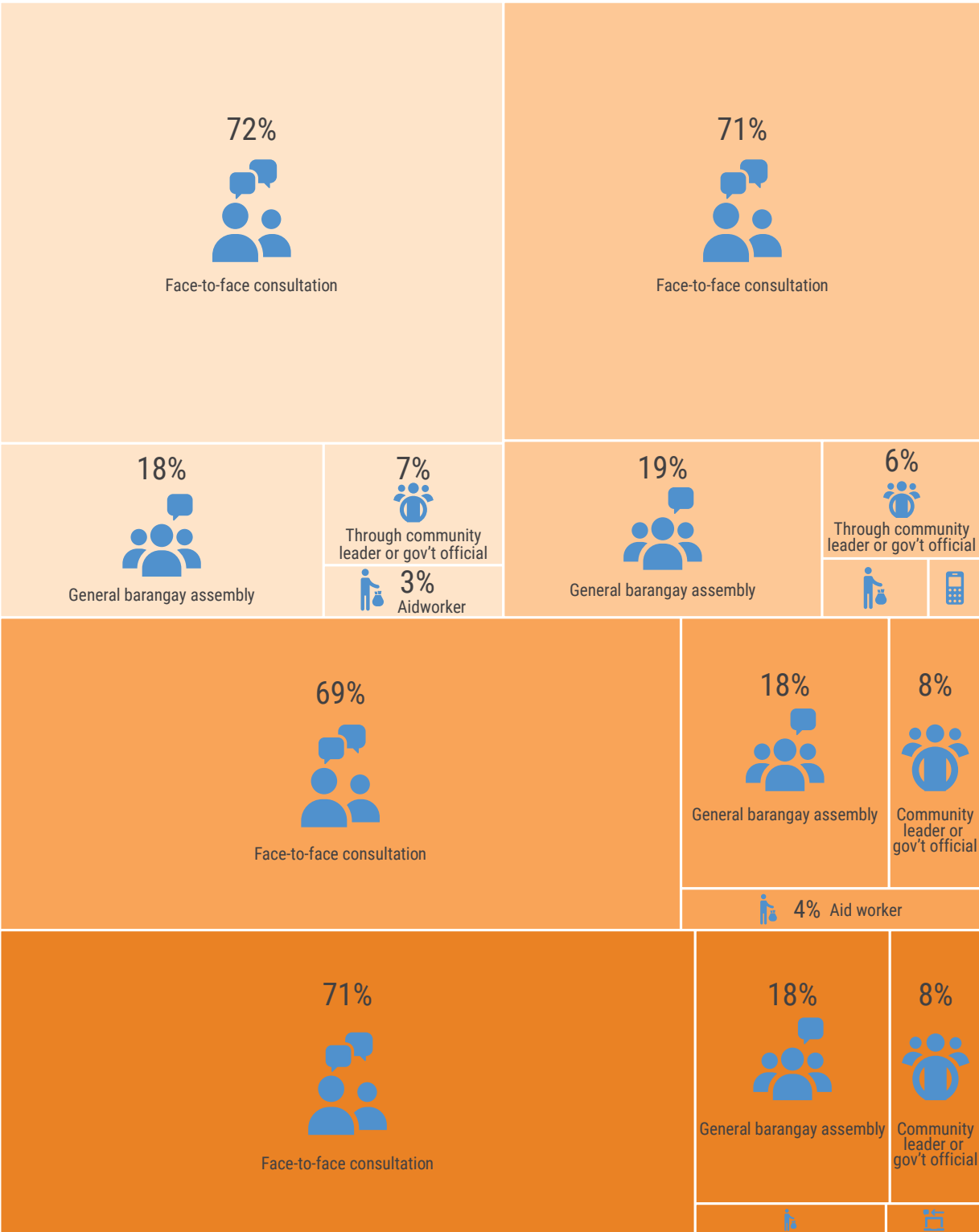
72 hours 1 week 1 month 3 to 6 months



Preferred channels for needs consultation

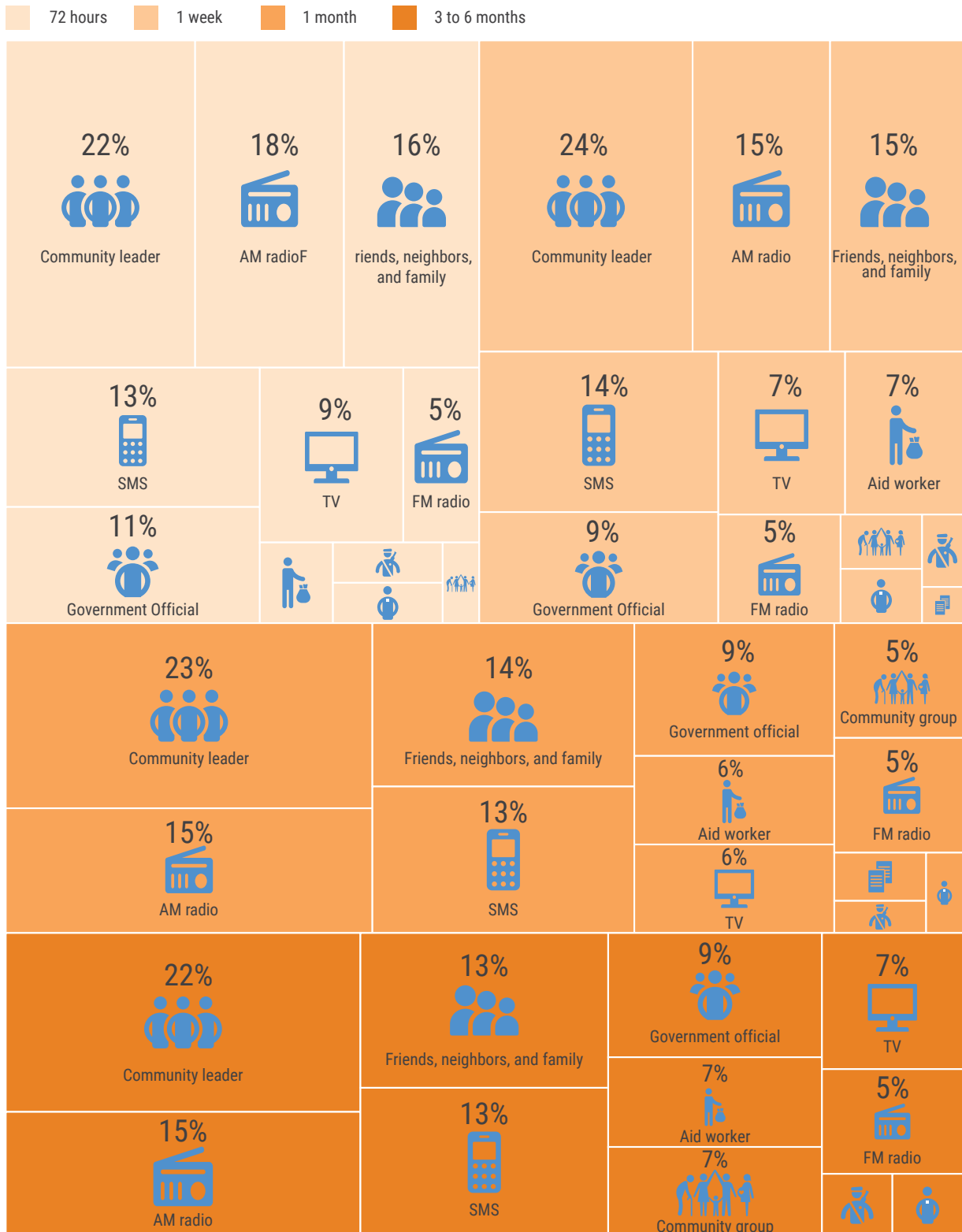
Negros Occidental

72 hours 1 week 1 month 3 to 6 months



Sources of information after the disaster

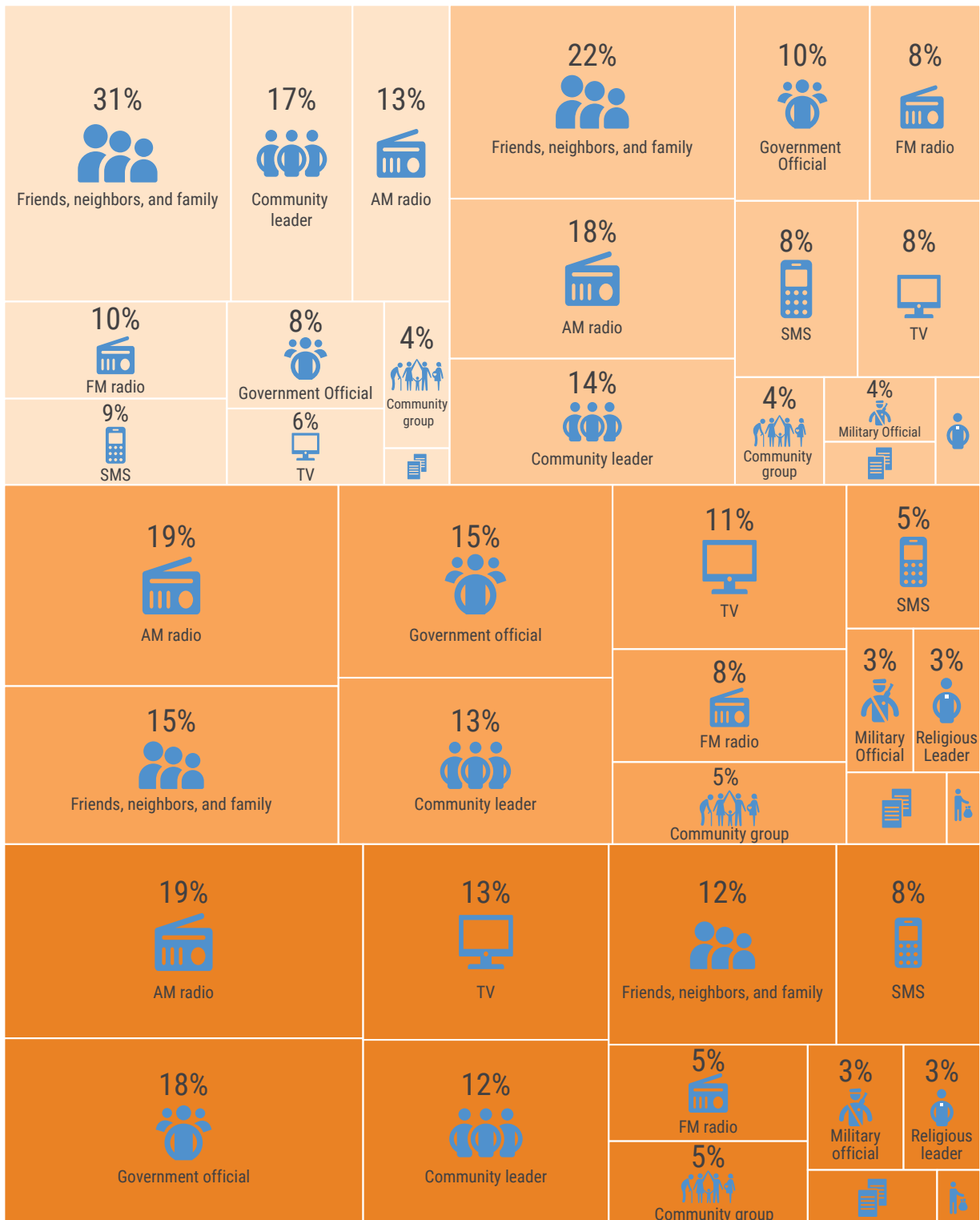
Cagayan



Sources of information after the disaster

Kalinga

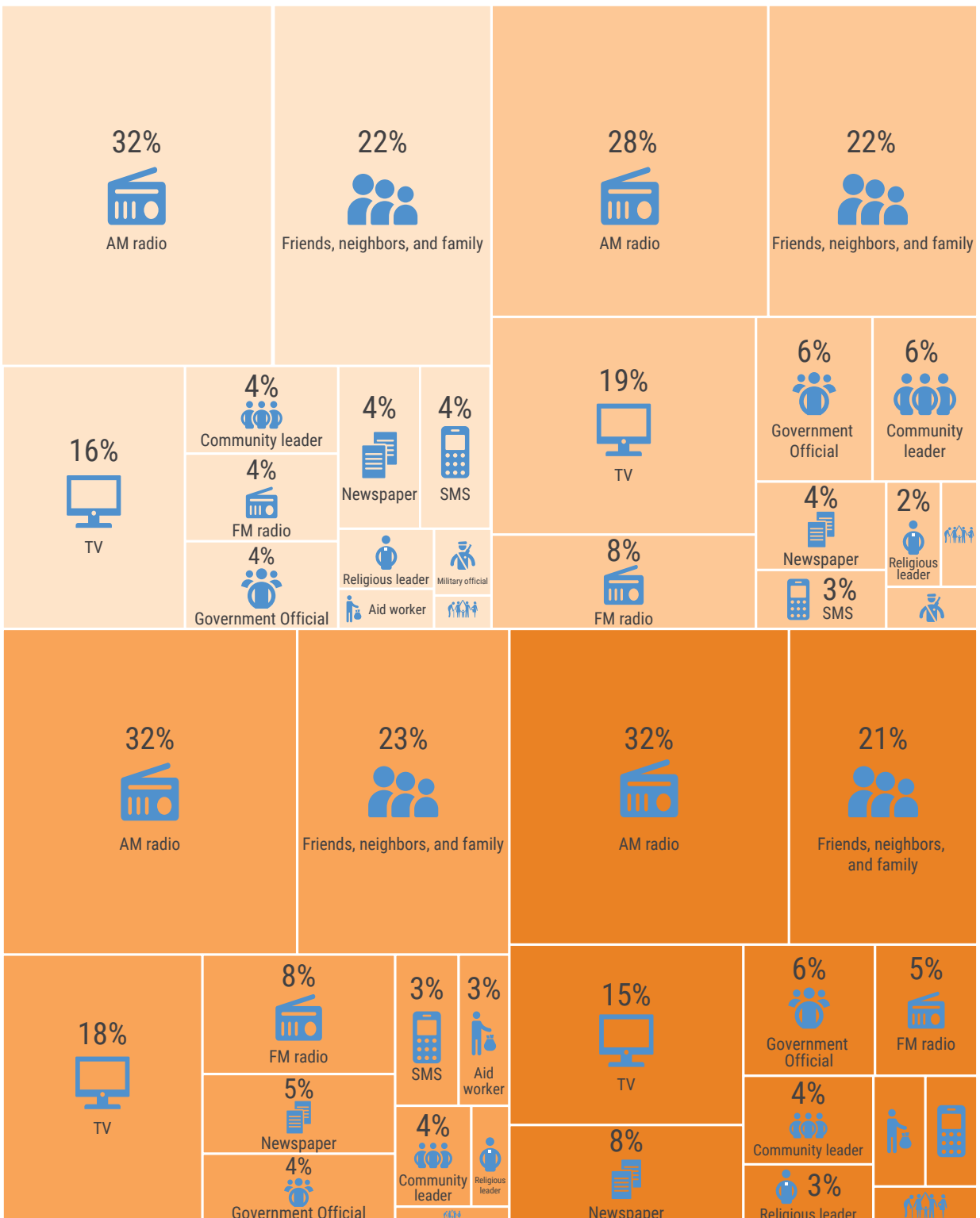
72 hours 1 week 1 month 3 to 6 months



Sources of information after the disaster

Negros Occidental

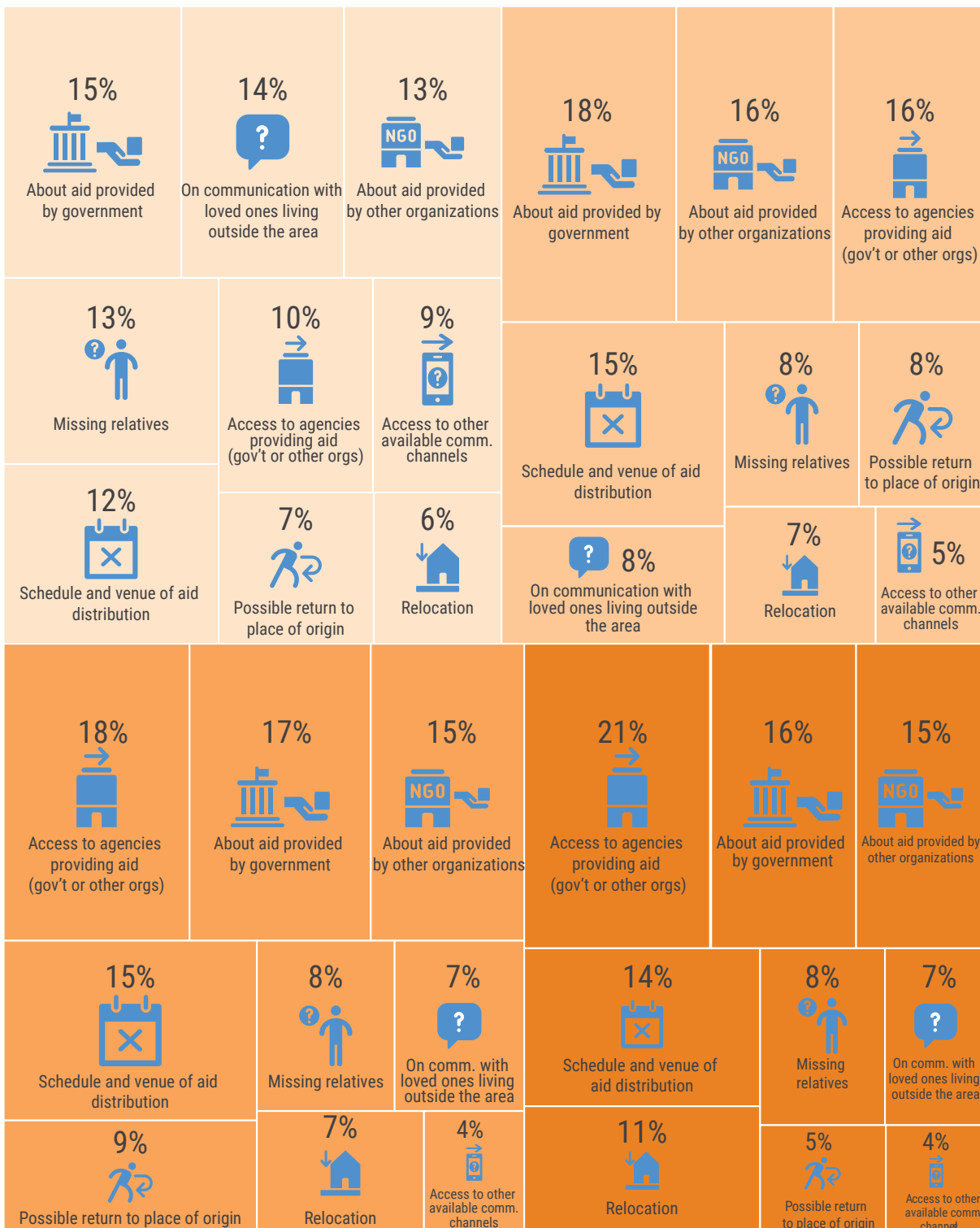
72 hours 1 week 1 month 3 to 6 months



Information needs after the disaster

Cagayan

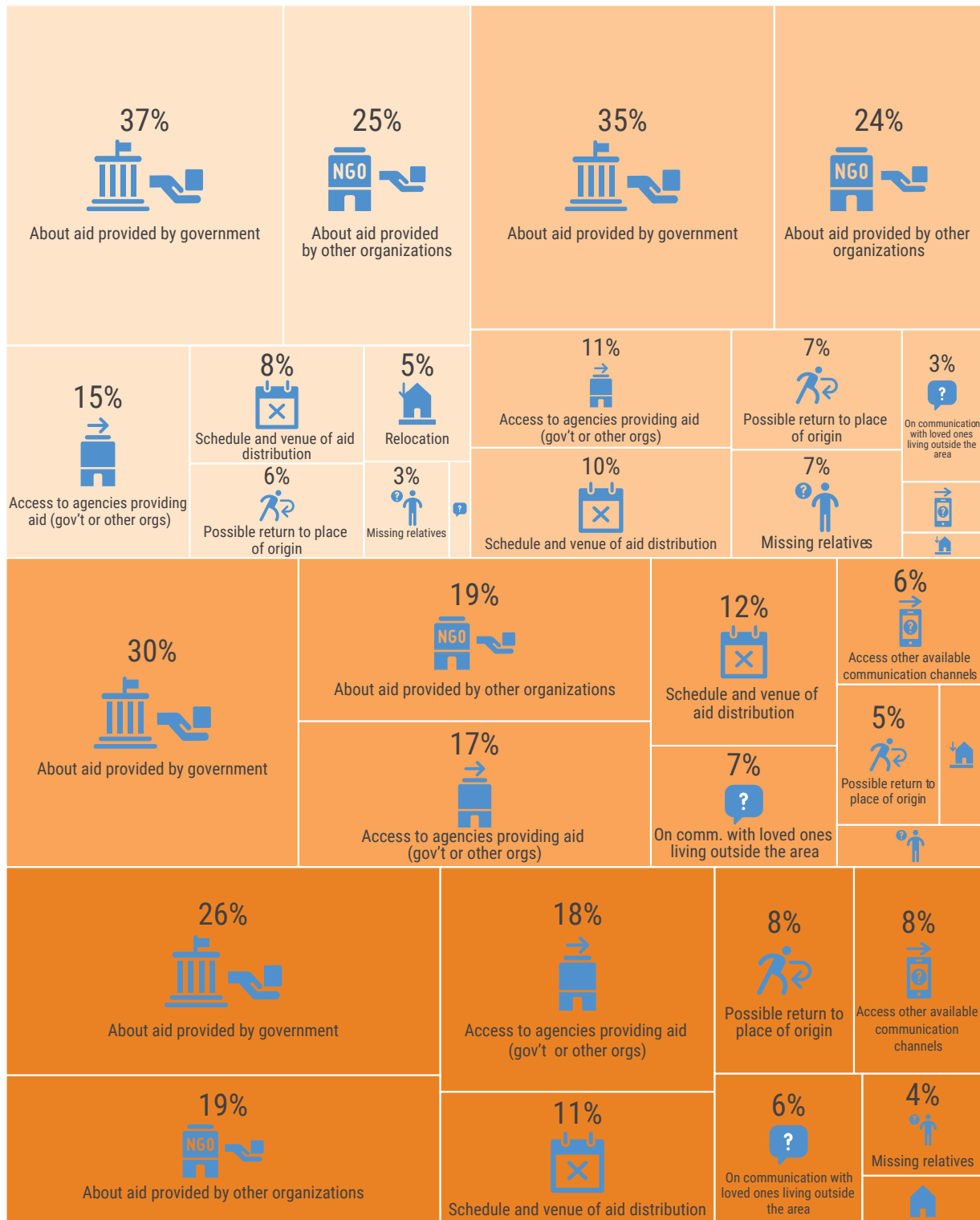
72 hours 1 week 1 month 3 to 6 months



Information needs after the disaster

Kalinga

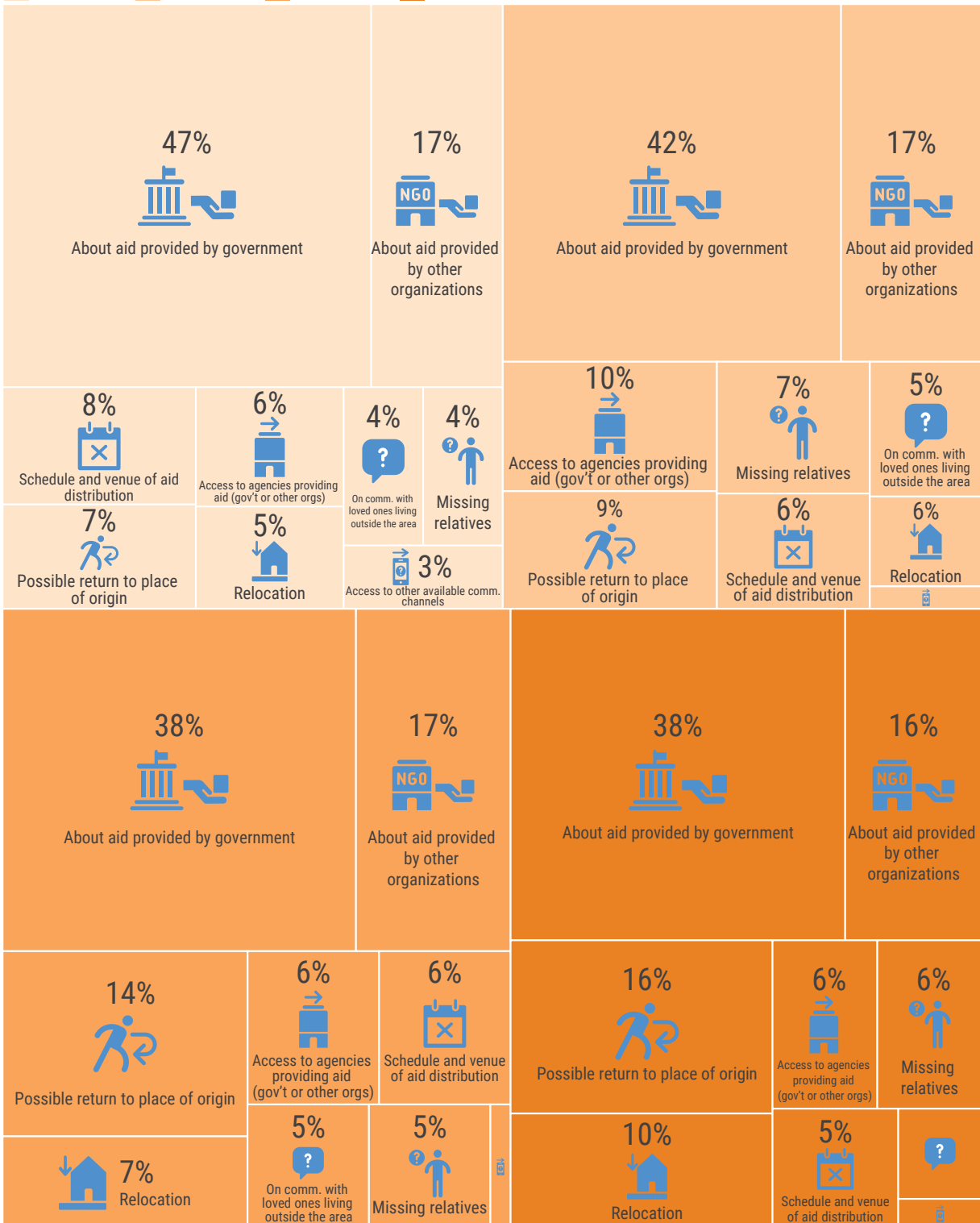
72 hours 1 week 1 month 3 to 6 months



Information needs after the disaster

Negros Occidental





















72 hours 1 week 1 month 3 to 6 months






















Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

FOOD

OVERALL	75%  food packs	60%  basic commodities	49%  hot meals	24%  condiments
72 Hours	88%  food packs	67%  basic commodities	50%  hot meals	33%  condiments
1 Week	76%  food packs	53%  hot meals	41%  basic commodities	6%  condiments
1 Month	63%  basic commodities	50%  food packs	38%  hot meals	25%  condiments
3-6 Months	83%  basic commodities	50%  food packs	50%  hot meals	33%  condiments

WATER

OVERALL	61%  well	45%  borehole	36%  storage	24%  pipe	3%  stream/river
72 Hours	67%  well	53%  borehole	47%  storage	20%  pipe	7%  stream/river
1 Week	73%  well	45%  storage	45%  borehole	18%  pipe	
1 Month	40%  pipe	40%  borehole	20%  well		
3-6 Months	50%  well	50%  pipe			









































Aid priorities and preferences


























Barangay Abariongan, Sto. Nino, Cagayan

	SHELTER			SANITARY & HYGEINE	
OVERALL	87% iron sheet	53% bamboo	5% tarpaulin	96% hygiene kits	87% sanitary facilities
72 Hours	78% iron sheet	56% bamboo	22% tarpaulin	100% hygiene kits	100% sanitary facilities
1 Week	81% iron sheet	63% bamboo	6% tarpaulin	100% hygiene kits	86% sanitary facilities
1 Month	95% iron sheet	52% bamboo		100% hygiene kits	80% sanitary facilities
3-6 Months	89% iron sheet	33% bamboo		100% hygiene kits	100% sanitary facilities
HEALTH					
OVERALL	93% medical supplies	73% health facility	58% birthing facility	33% ambulance	29% hospital
72 Hours	93% medical supplies	57% health facility	50% birthing facility	43% ambulance	36% hospital
1 Week	93% medical supplies	73% health facility	53% birthing facility	20% ambulance	13% hospital
1 Month	91% medical supplies	82% health facility	64% birthing facility	18% ambulance	18% hospital
3-6 Months	100% medical supplies	100% health facility	80% birthing facility	80% ambulance	80% hospital

Aid priorities and preferences



























Barangay Abariongan, Sto. Nino, Cagayan

PROTECTION								
OVERALL	94%	94%	89%	83%	78%	67%	67%	61%
	 law & order	 safe space	 safety & security patrol	 medical, psycho social	 feedback/reporting	 safety & security in ECs	 gender-based violence	 separation from family
72 Hours	100%	100%	100%	100%	100%	50%	50%	50%
	 law & order	 safe space	 safety & security patrol	 medical, psycho social	 feedback/reporting	 safety & security in ECs	 gender-based violence	 separation from family
1 Week	100%	100%	100%	100%	75%	50%	50%	50%
	 law & order	 safe space	 safety & security patrol	 medical, psycho social	 feedback/reporting	 safety & security in ECs	 gender-based violence	 separation from family
1 Month	100%	83%	83%	67%	50%	50%	50%	50%
	 law & order	 safe space	 safety & security patrol	 medical, psycho social	 feedback/reporting	 safety & security in ECs	 gender-based violence	 separation from family
3-6 Months	100%	100%	100%	100%	83%	83%	83%	83%
	 safe space	 gender-based violence	 safety & security in ECs	 feedback/reporting	 law & order	 medical, psycho social	 safety & security patrol	 separation from family






























NUTRITION					
OVERALL	94%	65%	65%	65%	45%
	 medicine	 safe space for infants	 health center	 mobile clinic	 breastfeeding area
72 Hours	100%	57%	57%	43%	29%
	 medicine	 mobile clinic	 health center	 safe space for infants	 breastfeeding area
1 Week	100%	75%	50%	50%	50%
	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area	 health center
1 Month	88%	75%	63%	63%	50%
	 medicine	 mobile clinic	 safe space for infants	 health center	 breastfeeding area
3-6 Months	88%	88%	75%	75%	50%
	 medicine	 health center	 safe space for infants	 mobile clinic	 breastfeeding area

Aid priorities and preferences

Barangay Abariongan, Sto. Nino, Cagayan

	CASH			LIVELIHOOD		
OVERALL	51%	19%	8%	79%	71%	69%
	 food	 transportation fare/others	 water	 food/cash for work	 alternative livelihood	 new source of income
72 Hours	75%			33%	33%	
	 food			 alternative livelihood	 food/cash for work	
1 Week	67%	33%		89%	89%	67%
	 food	 transportation fare/others		 new source of income	 food/cash for work	 alternative livelihood
1 Month	50%	25%	8%	79%	79%	71%
	 food	 transportation fare/others	 water	 alternative livelihood	 food/cash for work	 new source of income
3-6 Months	44%	17%	11%	81%	75%	69%
	 food	 transportation fare/others	 water	 food/cash for work	 alternative livelihood	 new source of income



















PROPERTIES

OVERALL	74%	47%	32%	32%	21%	16%	11%
	 documents	 appliances	 farm land/area	 first aid kit	 handy items	 pig pen	 sari-sari store
72 Hours	67%	67%	33%	33%	33%		
	 documents	 pig pen	 farm land/area	 first aid kit	 appliances		
1 Week	63%	38%	38%	38%	25%	13%	13%
	 documents	 appliances	 handy items	 first aid kit	 farm land/area	 pig pen	 sari-sari store
1 Month	75%	50%	25%	25%	25%		
	 documents	 appliances	 sari-sari store	 farm land/area	 first aid kit		
3-6 Months	100%	75%	50%	25%	25%		
	 documents	 appliances	 farm land/area	 first aid kit	 handy items		

















Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

FOOD




OVERALL	61%  basic commodities	59%  food packs	49%  hot meals	44%  condiments
72 Hours	79%  food packs	67%  basic commodities	50%  condiments	38%  hot meals
1 Week	78%  hot meals	56%  food packs	22%  basic commodities	22%  condiments
1 Month	80%  basic commodities	60%  hot meals	40%  condiments	
3-6 Months	100%  basic commodities	67%  condiments	33%  hot meals	

WATER

OVERALL	65%  well	43%  pipe	39%  storage	26%  borehole	17%  stream/river
72 Hours	67%  well	60%  storage	47%  pipe	33%  borehole	27%  stream/river
1 Week	60%  well	40%  pipe	20%  borehole		
1 Month	50%  pipe	50%  well			
3-6 Months	100%  well				

Aid priorities and preferences




























Barangay Balagan, Sto. Nino, Cagayan

	SHELTER			SANITARY & HYGEINE	
OVERALL	89%  iron sheet	66%  bamboo	5%  tarpaulin	100%  sanitary facilities	100%  hygiene kits
72 Hours	88%  bamboo	75%  iron sheet		100%  sanitary facilities	100%  hygiene kits
1 Week	79%  iron sheet	57%  bamboo	14%  tarpaulin	100%  sanitary facilities	100%  hygiene kits
1 Month	100%  iron sheet	64%  bamboo		100%  sanitary facilities	100%  hygiene kits
3-6 Months	100%  iron sheet	63%  bamboo			
HEALTH					
OVERALL	91%  medical supplies	80%  health facility	45%  birthing facility	27%  hospital	20%  ambulance
72 Hours	100%  medical supplies	38%  health facility	38%  birthing facility	23%  hospital	15%  ambulance
1 Week	100%  health facility	92%  medical supplies	31%  birthing facility	23%  hospital	15%  ambulance
1 Month	100%  health facility	80%  medical supplies	50%  birthing facility	10%  hospital	
3-6 Months	88%  health facility	88%  medical supplies	75%  birthing facility	63%  hospital	63%  ambulance


























Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

PROTECTION
























OVERALL	91%	91%	64%	55%	45%	45%	27%	9%
								
	law & order	safe space	safety & security patrol	medical, psycho social	feedback/reporting	safety & security in ECs	gender-based violence	separation from family
72 Hours	100%	100%	100%	100%	100%	100%		
								
	law & order	safe space	safety & security patrol	medical, psycho social	feedback/reporting	safety & security in ECs		
1 Week	100%	100%	50%	50%	50%	50%		
								
	law & order	safe space	medical, psycho social	feedback/reporting	safety & security in ECs	gender-based violence		
1 Month	100%	100%	67%	33%	33%			
								
	law & order	safe space	safety & security patrol	medical, psycho social	feedback/reporting			
3-6 Months	80%	80%	80%	60%	60%	40%	40%	20%
								
	law & order	safe space	safety & security patrol	medical, psycho social	safety & security in ECs	feedback/reporting	gender-based violence	separation from family

NUTRITION

OVERALL	96%	73%	65%	62%	58%
					
	medicine	safe space for infants	health center	mobile clinic	breastfeeding area
72 Hours	100%	60%	20%	20%	20%
					
	medicine	safe space for infants	health center	mobile clinic	breastfeeding area
1 Week	100%	75%	63%	50%	38%
					
	medicine	mobile clinic	safe space for infants	breastfeeding area	health center
1 Month	100%	86%	86%	71%	71%
					
	health center	medicine	safe space for infants	mobile clinic	breastfeeding area
3-6 Months	100%	100%	83%	83%	67%
					
	health center	medicine	safe space for infants	breastfeeding area	mobile clinic

Aid priorities and preferences

Barangay Balagan, Sto. Nino, Cagayan

	CASH			LIVELIHOOD		
OVERALL	74%  food	38%  water	26%  transportation fare/others	88% <input checked="" type="checkbox"/> alternative livelihood	49%  new source of income	47%  food/cash for work
72 Hours	88%  food			100% <input checked="" type="checkbox"/> alternative livelihood	100%  new source of income	100%  food/cash for work
1 Week	100%  food	75%  water	2 5%  transportation fare/others	100% <input checked="" type="checkbox"/> alternative livelihood	43%  new source of income	14%  food/cash for work
1 Month	69%  food	46%  water	38%  transportation fare/others	88% <input checked="" type="checkbox"/> alternative livelihood	53%  new source of income	65%  food/cash for work
3-6 Months	56%  food	44%  water	33%  transportation fare/others	83% <input checked="" type="checkbox"/> alternative livelihood	44%  new source of income	39%  food/cash for work





















PROPERTIES

OVERALL	87%  documents	63%  appliances	39%  handy items	26%  farm land/area	21%  first aid kit	16%  pig pen	5%  sari-sari store
72 Hours	100%  documents	67%  appliances	67%  farm land/area	50%  first aid kit	33%  handy items	17%  pig pen	
1 Week	73%  documents	45%  appliances	45%  handy items	18%  farm land/area	18%  first aid kit	18%  pig pen	18%  sari-sari store
1 Month	92%  documents	77%  appliances	31%  handy items	23%  pig pen	15%  farm land/area	15%  first aid kit	
3-6 Months	88%  documents	63%  appliances	50%  handy items	25%  farm land/area	13%  first aid kit		


























Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

FOOD

OVERALL	63%  food packs	43%  basic commodities	31%  hot meals	14%  condiments
72 Hours	80%  food packs	25%  hot meals	20%  basic commodities	0%  condiments
1 Week	74%  food packs	44%  hot meals	33%  basic commodities	0%  condiments
1 Month	73%  basic commodities	43%  food packs	30%  hot meals	19%  condiments
3-6 Months	61%  basic commodities	44%  condiments	42%  food packs	28%  hot meals





















WATER

OVERALL	67%  storage	40%  pipe	34%  well	14%  stream/river	8%  borehole
72 Hours	85%  storage	18%  well	12%  pipe	9%  stream/river	0%  borehole
1 Week	72%  storage	31%  pipe	31%  well	6%  stream/river	3%  borehole
1 Month	67%  pipe	57%  storage	40%  well	17%  stream/river	3%  borehole
3-6 Months	53%  pipe	53%  storage	47%  well	27%  borehole	23%  stream/river


























Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

SHELTER

OVERALL	50%  iron sheet	44%  bamboo	31%  tarpaulin	25%  nipa hut
72 Hours	60%  tarpaulin	27%  nipa hut	13%  bamboo	13%  iron sheet
1 Week	48%  bamboo	26%  nipa hut	26%  tarpaulin	23%  iron sheet
1 Month	54%  bamboo	54%  iron sheet	26%  tarpaulin	21%  nipa hut
3-6 Months	91%  iron sheet	41%  bamboo	28%  nipa hut	28%  tarpaulin





















HEALTH

OVERALL	71%  health facility	37%  medical supplies	36%  hospital	33%  ambulance	13%  birthing facility
72 Hours	79%  health facility	26%  medical supplies	16%  ambulance	16%  hospital	0%  birthing facility
1 Week	72%  health facility	41%  medical supplies	24%  hospital	10%  ambulance	3%  birthing facility
1 Month	67%  health facility	42%  ambulance	39%  hospital	36%  medical supplies	17%  birthing facility
3-6 Months	68%  health facility	57%  ambulance	57%  hospital	39%  medical supplies	29%  birthing facility


























Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga

PROTECTION





























































OVERALL	51%	44%	37%	21%
	 safety & security patrol	 safe space	 protection mechanism	 medical, psycho social
72 Hours	69%	38%	0%	0%
	 safety & security patrol	 safe space	 protection mechanism	 medical, psycho social
1 Week	63 %	32%	32%	0%
	 safety & security patrol	 safe space	 protection mechanism	 medical, psycho social
1 Month	48%	44%	30%	30%
	 safety & security patrol	 protection mechanism	 safe space	 medical, psycho social
3-6 Months	68%	48%	39%	35%
	 safe space	 protection mechanism	 safety & security patrol	 medical, psycho social

NUTRITION

OVERALL	52%	45%	34%	21%	18%
	 health center	 mobile clinic	 medicine	 safe space for infants	 breastfeeding area
72 Hours	47%	41%	12%	12%	6%
	 health center	 mobile clinic	 breastfeeding area	 safe space for infants	 medicine
1 Week	41%	37%	37%	19%	15%
	 mobile clinic	 health center	 medicine	 breastfeeding area	 safe space for infants
1 Month	63%	43%	33%	20%	17%
	 health center	 mobile clinic	 medicine	 safe space for infants	 breastfeeding area
3-6 Months	57%	54%	50%	32%	21%
	 health center	 mobile clinic	 medicine	 safe space for infants	 breastfeeding area

Aid priorities and preferences

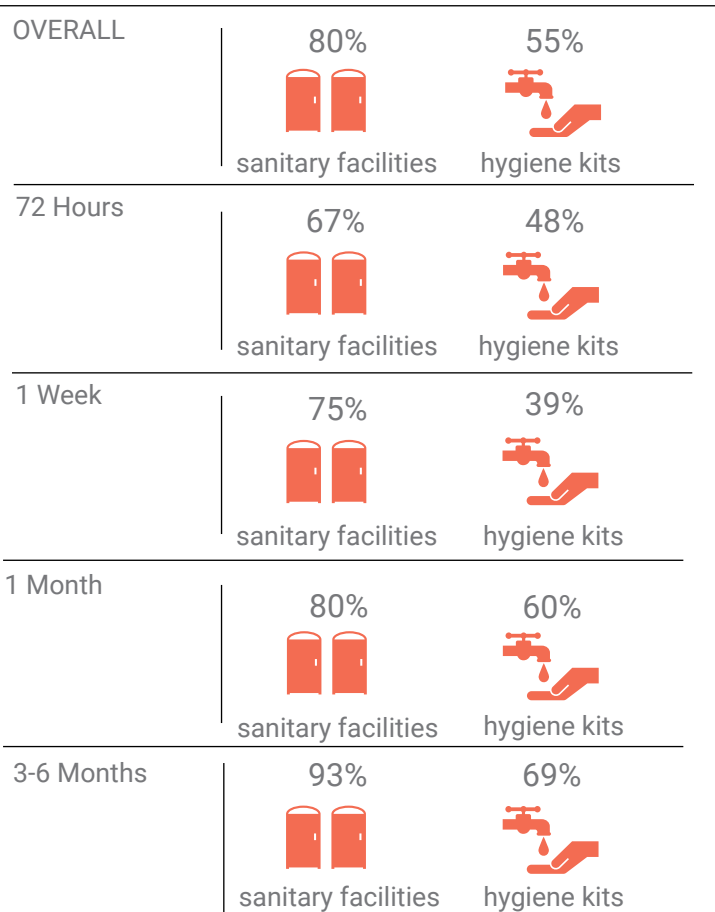
Barangay Apatan, Pinukpuk, Kalinga

CASH				LIVELIHOOD		
OVERALL	77%	40%	17%	45%	45%	39%
						
	food	water	transportation fare/others	new source of income	food/cash for work	alternative livelihood
72 Hours	100%	8%	0%	64%	29%	21%
						
	food	water	transportation fare/others	alternative livelihood	food/cash for work	new source of income
1 Week	79%	42%	0%	54%	33%	29%
						
	food	water	transportation fare/others	food/cash for work	alternative livelihood	new source of income
1 Month	75%	50%	16%	60%	46%	40%
						
	food	water	transportation fare/others	new source of income	food/cash for work	alternative livelihood
3-6 Months	70%	41%	32%	72%	50%	33%
						
	food	water	transportation fare/others	food/cash for work	new source of income	alternative livelihood
PROPERTIES						
OVERALL	58%	38%	35%	31%	25%	20%
						
	farm land/area	first aid kit	sari-sari store	handy items	documents	appliances
72 Hours	69%	44%	38%	6%	6%	6%
						
	farm land/area	documents	first aid kit	appliances	sari-sari store	handy items
1 Week	50%	45%	32%	18%	18%	9%
						
	farm land/area	first aid kit	sari-sari store	documents	handy items	appliances
1 Month	56%	53%	44%	34%	28%	16%
						
	farm land/area	sari-sari store	first aid kit	handy items	appliances	documents
3-6 Months	59%	47%	32%	29%	29%	26%
						
	farm land/area	handy items	sari-sari store	documents	first aid kit	appliances

Aid priorities and preferences

Barangay Apatan, Pinukpuk, Kalinga





















SANITATION


























Aid priorities and preferences

Barangay Ermita (Sipaway), San Carlos City, Negros Occidental

FOOD

OVERALL	86%  food packs	23%  hot meals	21%  basic commodities	7%  condiments
72 Hours	81%  food packs	24%  hot meals	22%  basic commodities	5%  condiments
1 Week	96%  food packs	17%  hot meals	17%  basic commodities	4%  condiments
1 Month	92%  food packs	20%  hot meals	20%  basic commodities	4%  condiments
3-6 Months	80%  food packs	32%  hot meals	24%  basic commodities	16%  condiments

WATER

OVERALL	64%  storage	31%  stream/river	20%  pipe	20%  well	7%  borehole
72 Hours	71%  storage	18%  stream/river	18%  pipe	6%  well	
1 Week	67%  storage	67%  stream/river	11%  pipe	11%  well	11%  borehole
1 Month	63%  storage	38%  well	25%  pipe	13%  stream/river	
3-6 Months	55%  storage	36%  stream/river	36%  well	27%  pipe	18%  borehole

Aid priorities and preferences

Barangay Ermita (Sipaway), San Carlos City, Negros Occidental

	SHELTER			SANITARY & HYGEINE	
OVERALL	69% nipa hut	54% bamboo	15% iron sheet	73% sanitary facilities	50% hygiene kits
72 Hours	67% nipa hut	33% bamboo		75% sanitary facilities	50% hygiene kits
1 Week	50% nipa hut	50% bamboo		80% sanitary facilities	20% hygiene kits
1 Month	75% nipa hut	50% bamboo		83% hygiene kits	67% sanitary facilities
3-6 Months	75% nipa hut	75% bamboo	50% iron sheet	67% hygiene kits	67% sanitary facilities
HEALTH					
OVERALL	85% health facility	30% medical supplies	19% birthing facility	11% hospital	7% ambulance
72 Hours	60% health facility	60% birthing facility	20% medical supplies		
1 Week	89% health facility	11% medical supplies	11% hospital	11% ambulance	
1 Month	100% health facility	33% medical supplies	17% birthing facility	17% hospital	
3-6 Months	86% health facility	57% medical supplies	14% birthing facility	14% hospital	14% ambulance

Aid priorities and preferences

Barangay Ermita (Sipaway), San Carlos City, Negros Occidental

PROTECTION

























OVERALL	91% safety & security in ECs	73% safety & security patrol	45% law & order	45% medical, psycho social	36% safe space	36% feedback/reporting	36% separation from family	27% gender-based violence
72 Hours	100% safety & security in ECs	67% safety & security patrol	67% feedback/reporting	33% law & order	33% medical, psycho social	33% safe space	33% separation from family	33% gender-based violence
1 Week	100% safety & security in ECs	100% safety & security patrol	100% separation from family					
1 Month	75% safety & security in ECs	50% safety & security patrol	50% law & order	50% medical, psycho social	50% safe space	25% feedback/reporting	25% gender-based violence	
3-6 Months	100% safety & security in ECs	100% safety & security patrol	67% law & order	67% medical, psycho social	67% separation from family	33% safe space	33% feedback/reporting	33% gender-based violence

NUTRITION
























OVERALL	79% health center	36% medicine	29% mobile clinic	21% safe space for infants
72 Hours	67% health center	67% safe space for infants	33% mobile clinic	
1 Week	67% health center	67% medicine		
1 Month	100% health center	25% safe space for infants	25% mobile clinic	
3-6 Months	75% health center	75% medicine	50% mobile clinic	

Aid priorities and preferences

Barangay Ermita (Sipaway), San Carlos City, Negros Occidental

	CASH			LIVELIHOOD		
OVERALL	62%	38%	23%	64%	46%	14%
	 food	 transportation fare/others	 water	 alternative livelihood	 new source of income	 food/cash for work
72 Hours	100%	50%		80%	40%	20%
	 food	 water		 new source of income	 alternative livelihood	 food/cash for work
1 Week	100%			75%	50%	
	 food			 alternative livelihood	 new source of income	
1 Month	67%	33%		57%	43%	
	 food	 transportation fare/others		 alternative livelihood	 new source of income	
3-6 Months	67%	33%	33%	75%	33%	25%
	 transportation fare/others	 water	 food	 alternative livelihood	 new source of income	 food/cash for work




















PROPERTIES

OVERALL	68%	37%	16%	11%	5%	5%	5%	5%
	 sari-sari store	 farm land/area	 pig pen	 documents	 handy items	 first aid kit	 rented stall	 fish pond
72 Hours	100%	100%	50%					
	 sari-sari store	 rented stall	 farm land/area					
1 Week	100%							
	 sari-sari store							
1 Month	63%	38%	25%					
	 sari-sari store	 farm land/area	 pig pen					
3-6 Months	63%	38%	25%	13%	13%	13%	13%	13%
	 sari-sari store	 farm land/area	 documents	 handy items	 first aid kit	 pig pen	 rented stall	 fish pond
























Aid priorities and preferences

Barangay San Juan (Sipaway), San Carlos City, Negros Occidental

FOOD




















































OVERALL	78%  basic commodities	75%  food packs	10%  hot meals	3%  condiments
72 Hours	76%  basic commodities	65%  food packs	7%  hot meals	2%  condiments
1 Week	75%  basic commodities	75%  food packs	13%  hot meals	
1 Month	86%  food packs	80%  basic commodities	11%  hot meals	3%  condiments
3-6 Months	83%  food packs	83%  basic commodities	10%  hot meals	7%  condiments

WATER

OVERALL	88%  storage	20%  stream/river	15%  well	11%  pipe	4%  borehole
72 Hours	60%  storage	18%  stream/river	15%  well	15%  pipe	5%  borehole
1 Week	86%  storage	22%  stream/river	14%  well	8%  pipe	
1 Month	85%  storage	21%  stream/river	9%  well	9%  pipe	9%  borehole
3-6 Months	96%  storage	22%  well	19%  stream/river	11%  pipe	





























































Aid priorities and preferences

Barangay San Juan (Sipaway), San Carlos City, Negros Occidental

SHELTER		SANITARY & HYGEINE				
OVERALL	65%	51%	38%	1%	59%	57%
						
	bamboo	nipa hut	iron sheet	tarpaulin	hygiene kits	sanitary facilities
	<hr/>					
	75%	71%	29%	4%	68%	46%
72 Hours						
	bamboo	nipa hut	iron sheet	tarpaulin	hygiene kits	sanitary facilities
<hr/>						
1 Week	62%	50%	42%		63%	60%
						
	bamboo	nipa hut	iron sheet		sanitary facilities	hygiene kits
<hr/>						
1 Month	55%	47%	39%		64%	54%
						
	bamboo	iron sheet	nipa hut		hygiene kits	sanitary facilities
<hr/>						
3-6 Months	72%	48%	32%		64%	44%
						
	bamboo	nipa hut	iron sheet		sanitary facilities	hygiene kits
<hr/>						
HEALTH						
OVERALL	82%	75%	55%	13%	5%	
						
	health facility	medical supplies	ambulance	hospital	birthing facility	
	<hr/>					
	90%	77%	70%	7%	3%	
72 Hours						
	health facility	medical supplies	ambulance	hospital	birthing facility	
<hr/>						
1 Week	82%	73%	48%	12%		
						
	health facility	medical supplies	ambulance	hospital		
<hr/>						
1 Month	81%	71%	52%	10%	3%	
						
	health facility	medical supplies	ambulance	hospital	birthing facility	
<hr/>						
3-6 Months	80%	72%	48%	16%	12%	
						
	medical supplies	health facility	ambulance	birthing facility	hospital	

























































Aid priorities and preferences

Barangay San Juan (Sipaway), San Carlos City, Negros Occidental

PROTECTION								
OVERALL	94%	72%	63%	27%	25%	3%	3%	2%
	 safety & security in ECs	 safe space	 medical, psycho social	 law & order	 safety & security patrol	 feedback/reporting	 separation from family	 gender-based violence
72 Hours	93%	70%	56%	26%	22%	7%	4%	4%
	 safety & security in ECs	 safe space	 medical, psycho social	 law & order	 safety & security patrol	 separation from family	 feedback/reporting	 gender-based violence
1 Week	95%	71%	71%	29%	24%	5%	5%	
	 safety & security in ECs	 safe space	 medical, psycho social	 law & order	 safety & security patrol	 separation from family	 feedback/reporting	
1 Month	91%	77%	64%	27%	18%	5%	5%	
	 safety & security in ECs	 safe space	 medical, psycho social	 law & order	 safety & security patrol	 feedback/reporting	 gender-based violence	
3-6 Months	100%	67%	61%	39%	28%			
	 safety & security in ECs	 safe space	 medical, psycho social	 safety & security patrol	 law & order			
NUTRITION								
OVERALL		70%	60%	36%	22%	15%		
		 health center	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area		
72 Hours		69%	69%	42%	19%	15%		
		 health center	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area		
1 Week		75%	55%	25%	20%	15%		
		 health center	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area		
1 Month		74%	52%	39%	22%	13%		
		 health center	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area		
3-6 Months		63%	63%	37%	26%	16%		
		 health center	 medicine	 safe space for infants	 mobile clinic	 breastfeeding area		

Aid priorities and preferences

Barangay San Juan (Sipaway), San Carlos City, Negros Occidental

	CASH			LIVELIHOOD			
OVERALL	88%  food	46%  water	8%  transportation fare/others	62%  new source of income	53%  alternative livelihood	6%  food/cash for work	
72 Hours	93%  food	67%  water		56%  new source of income	48%  alternative livelihood	4%  food/cash for work	
1 Week	93%  food	54%  water	4%  transportation fare/others	76%  new source of income	44%  alternative livelihood	4%  food/cash for work	
1 Month	94%  food	35%  water	15%  transportation fare/others	56%  new source of income	56%  alternative livelihood	7%  food/cash for work	
3-6 Months	74%  food	31%  water	11%  transportation fare/others	62%  new source of income	62%  alternative livelihood	7%  food/cash for work	
PROPERTIES							
OVERALL	48%  documents	23%  appliances	5%  sari-sari store	5%  first aid kit	3%  pig pen	2%  handy items	1%  farm land/area
72 Hours	52%  documents	26%  appliances	4%  first aid kit	4%  pig pen			
1 Week	48%  documents	29%  appliances	5%  first aid kit	5%  pig pen			
1 Month	46%  documents	17%  appliances	8%  first aid kit	4%  sari-sari store	4%  pig pen	4%  handy items	4%  farm land/area
3-6 Months	48%  documents	19%  appliances	19%  sari-sari store	5%  first aid kit	5%  handy items		

Pre-crisis information mapping and consultation kobotoolbox online link:

<https://ee.humanitarianresponse.info/x/#0HhLdFhT>

Videos

<https://www.humanitarianresponse.info/en/operations/philippines/accountability-affected-populationscommunications-communities-community>

Pre-crisis Community Perception Survey Form (English)

<https://www.humanitarianresponse.info/en/operations/philippines/document/philippines-cop-community-engagement-pre-crisis-community-perception>

Pre-crisis Community Perception Survey Form (Filipino)

<https://www.humanitarianresponse.info/en/operations/philippines/document/philippines-cop-community-engagement-pre-crisis-community-0>

Pre-crisis Community Perception Survey Form (Ilocano)

<https://www.humanitarianresponse.info/en/operations/philippines/document/philippines-cop-community-engagement-pre-crisis-community-1>

Pre-Crisis Information Mapping Survey and Consultation (Manila Earthquake) report 19Sept2017

<https://www.humanitarianresponse.info/en/operations/philippines/document/philippines-pre-crisis-information-mapping-survey-and-consultation>

Washington Group of Questions (WGQs)

<http://www.washingtongroup-disability.com/washington-group-question-sets/extended-set-of-disability-questions/>

Pre-disaster statistics

<https://data.humdata.org/dataset/philippines-pre-disaster-indicators>

Community of Practice on Community Engagement (CoPCE)



The Humanitarian Country Team (HCT) advocates for community engagement and accountability to the affected population to be central component of disaster preparedness and response. Under the HCT, the CoPCE provides strategic direction and technical support to any field level working group on community engagement in a event of a major emergency. Support includes improving two-way communication platforms, feedback avenues, accountability pathways, closing-the-feedback-loop mechanisms, common services partnerships and innovations in the use of various technologies for communicating and engaging with the affected communities.

This report is a product of the Humanitarian Country Team's Community of Practice on Community Engagement

<https://www.humanitarianresponse.info/en/operations/philippines/accountability-affected-populationscommunications-communities-community>

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Photo credits: Care-Philippines, Christian Aid, NASSA/Caritas-Philippines and OCHA

