



Setting Up a Community Response Strategy for Local Government Units: Practical Advice for Reorienting Existing Systems to Deal with Covid-19

Ador R. Torneo¹, Audrey Angeli O. Andres², Kristoffer B. Berse³, Anthony Lawrence L. Borja⁴, Romielyn S. Nazareno⁵, Matthew D. Ordoñez⁶, Joseph Angelo B. Rayo⁷, Redento B. Recio⁸, Felipe F. Salvosa II⁹, Cheryl Ruth R. Soriano¹⁰

NOTICE

The views provided in this policy brief do not represent the official views of the authors' institutional affiliations. These insights are offered voluntarily as a resource for consideration by local authorities. All errors are ours.

EXECUTIVE SUMMARY

This policy brief outlines some practical considerations for local government units (LGU), specifically provinces, cities, and municipalities, currently drafting or revisiting their Covid-19 Community Response Strategy and the accompanying local measures. It integrates some of the lessons from innovative practices, observations, and inputs from our volunteer group of professionals. It also provides practical advice on how LGUs may reorient existing systems, such as the Incident Command System (ICS) and the Crisis Management Committees (CMC), to better deal with Covid-19 and its challenges. In summary, we recommend the following:

- LGUs must assign a dedicated working group to plan, devise strategies, and monitor the implementation of a Community Response Strategy for Covid-19. This can be performed by the Local Disaster Risk Reduction and Management Council (LDRRMC) or the Crisis Management Committee (CMC).
- It is more efficient to reorient this body towards Covid-19 management rather than create a new body. A qualified Health Officer should have a principal role as this is primarily a Public Health issue. This is possible within the Incident Command System, a flexible management structure that both LGUs and the security sector have been trained in.
- LGUs must develop and enact a Community Response Strategy Plan for dealing with Covid-19. This can take the form of a Contingency Plan for Pandemics that should be developed under the strategic guidance of either the LDRRMC or the CMC, whichever is functional. This should cover the Critical and Immediate-term needs, the Transitory and Medium-term needs, and the anticipated Long-term needs if the ECQ is extended. This must be regularly monitored and updated.

1 Full Professor, Department of Political Science, De La Salle University and Director, Jesse M. Robredo Institute of Governance

2 Chair, Department of Preventive Medicine and Community Health University of Perpetual Help Delta Medical System, Jonelita Foundation School of Medicine

3 Associate Professor, University of the Philippines-National College of Public Administration and Governance and Director for Research and Creative Work, UP Resilience Institute

4 Ph.D. Candidate in Public Administration, Shanghai Jiao Tong University - School of International and Public Affairs.

5 MA Development Policy Student, De La Salle University and Program Development Manager, One Renewable Energy Enterprise Inc

6 Ph.D. Candidate in Public Administration, Shanghai Jiao Tong University - School of International and Public Affairs.

7 MA Development Policy Student, De La Salle University and Medical Officer III, Department of Psychiatry and Behavioral Medicine, University of the Philippines Manila - Philippine General Hospital

8 Research Fellow, The University of Melbourne - Faculty of Architecture, Building and Planning (Informal Urbanism Research Hub)

9 Journalism Coordinator, Department of Communication and Media Studies, University of Santo Tomas

10 Full Professor, Department of Communication, De La Salle University and Research Fellow, Jesse M. Robredo Institute of Governance



Background

Since the proclamation of the enhanced community quarantine (ECQ), the national government has placed local government units (LGUs) at the forefront of containing and combating the spread of Covid-19 (de Villa, 2020). LGUs also bear the responsibility for delivering frontline services, enforcing the ECQ, and maintaining the uninterrupted flow of essential personnel, goods, and services. On top of this, they need to perform the regular local government functions and support many programs and directives of the national government.

However, LGUs vary widely in terms of population, terrain, resources, institutional capacity and readiness, public attention, financial resources, strategy, and leadership. While local leaders face major financial and physical constraints, these limitations can be addressed through rigorous planning and implementation that can maximize available resources.

Many LGUs still do not have a working Community Response Strategy or Plan to deal with Covid-19. Understandably, most LGUs have no plans for pandemics in their Disaster Risk Reduction and Management (DRRM) planning even if pandemics are mentioned in the National Disaster Risk Reduction and Management (NDRRM) Plan. Though a comprehensive database on a national scale is still unavailable and unlikely to be established at this time, our engagements with various LGUs suggest that only a handful of them have adequate means, resources, expertise, and foresight in implementing a Comprehensive Community Response Strategy for Covid-19.

This policy note outlines some practical considerations for local governments, specifically provinces, cities, and municipalities, who are currently drafting or revisiting their Covid-19 Community Response Strategy and the accompanying local measures. It integrates some lessons and insights from innovative practices, user submissions, observations, and inputs from our volunteer group of professionals. It is meant to aid local government officials who are planning, crafting, or updating their Community Response Strategy to address the immediate, medium-term, and long-term challenges of Covid-19 and the ECQ.

Establishing a Covid-19 Community Response Strategy: Considerations

Republic Act 10121 mandates all local government units (LGUs) - from provincial to barangay level - to craft and operationalize their respective Disaster Risk Reduction and Management Plans. In practice, many LGUs have focused on preparing for and responding to natural hazards, leaving pandemics off the table. This unfamiliarity with pandemics results in uncoordinated interventions among local officials and front liners. Preparing responsive LGU strategies entails the following:

Institutionalization of Effective Response Mechanisms through Incident Command System. Uncoordinated LGU responses lead to greater inefficiencies and harm the public. Institutionalized response mechanisms under an Incident Command System (ICS) can effectively identify and manage resources based on actual needs and LGU capacity. The ICS is a flexible temporary management structure that is also embedded in Executive Order No. 82, issued in 2012, which set the guidelines for how national and local government agencies should tackle pandemics, as opposed to natural hazard-triggered disasters. The Office of Civil Defense (OCD) and others have been conducting ICS cadre training for Local DRRM officers since 2010. In some LGUs, the activation of ICS allows for the integration of the local Health Officer as Incident Commander in decision-making and response planning.

Establishing Functional Structures for Inter-LGU Assistance and Cooperation. Institutional resources and infrastructural capacity of LGUs are uneven. In many areas, medical professionals and health facilities are in big cities and regional centers. There must be a coordinating mechanism that allows LGU officials in adjacent towns/cities to offer their health facilities and assist affected residents in small towns with less capacity to treat infected cases. This will enable local officials to coordinate and harmonize their activities with neighboring LGUs and national government agency representatives. Local contingency plans for pandemics will spell out these issues and open avenues for

Setting Up a Community Response Strategy for Local Government Units: Practical Advice for Reorienting Existing Systems to Combat Covid-19

horizontal and vertical coordination between and among local governments and national agencies. Simulations and field exercises are also critical to determine the effectiveness and interoperability of local plans.

Involvement of Citizen Groups and Local Non-Government Formations. In this very challenging period, getting citizens and other organized groups involved as partners rather than mere followers of crisis intervention measures is vital. Local civil society groups, peoples' organizations, Pantawid Pamilya (4Ps) beneficiary groups, church-based organizations, private organizations, transport associations and other informal groups can act as third-party monitors in identifying and prioritizing the vulnerable sectors. They can act as channels for cascading key information and gathering community feedback on the implementation activities. Also, to combat corruption and patronage politics, these groups can assist in verifying the list of beneficiaries, and in distributing relief goods and cash assistance.

Initiating/Sustaining Partnership with the Local Business Sector. LGUs must establish or nurture strong and mutual partnerships with the business sector as the main driver of economic activities. Partnerships can be formalized thru Memorandum of Agreement or contracts. The business sector can help ensure sustained provision of essential services such as food, medical supplies, water, and hospital facilities (in case of hospital bed shortages) and mortuaries.

Installation of local hotlines. Setting up local Covid-19 response hotlines for communities/residents who need to report their condition, and/or whether they have received the needed services/assistance is necessary. Landlines, mobile numbers, and social media platforms can serve as avenues for receiving incident reports and legitimate complaints. This will ensure LGUs are able to immediately respond to urgent needs and mobilize the necessary resources.

Undertaking regular and frequent updates on the health condition, changing policies and interventions. In times of crisis, people look for reliable, factual and timely information. LGUs can allay fears and manage uncertainty by keeping the public informed on the current health situation and evolving government responses. Local officials can use social media

platforms (Facebook, website) and mobile public announcements for this purpose.

Accessing and repurposing of local funds. LGUs can tap other fund sources aside from the annual health, and Local DRRM Fund appropriations. The unexpended balance of the local DRRM Funds from the previous year - the Special Trust Fund - can be repurposed and reflected in the local DRRM Fund Investment Plan to sustain the increasing operational needs of the LGU. Local officials can also request for supplemental funding from the National DRRM Fund through the endorsement of the Office of Civil Defense Regional Offices.

Conclusion and Recommendations

Few LGUs are prepared to deal with the magnitude of the Covid-19 pandemic and the accompanying ECQ, and even fewer have contingency plans. With the pandemic still in its early stages and no clear end in sight, it is necessary for LGUs to come up with a Community Response Strategy in order to better address the challenges, maximize the use of resources, and harmonize and coordinate all efforts. To this end, setting up a working group to plan, devise strategies, and monitor the implementation of a Community Response Strategy for Covid-19 and the ECQ is necessary.

This can be performed by the Local Disaster Risk Reduction and Management Council (LDRRMC) or the Crisis Management Committee (CMC), whichever is functional. It is more efficient to reorient existing bodies towards Covid-19 management rather than create a new body. A qualified Health Officer should play a principal role as this is primarily a Public Health issue. This is possible within the Incident Command System, a flexible management structure used in LGUs and the security sector.

Finally, LGUs must develop and enact a Community Response Strategy Plan for dealing with Covid-19. This can take the form of a Contingency Plan for Pandemics that should be developed under the strategic guidance of either the LDRRMC or the CMC, whichever is functional. This should cover the Critical and Immediate-Term needs, the Transitory and Medium-term needs, and the anticipated Long-term needs if the ECQ is extended. This must be regularly monitored and updated.

References

de Villa, K. (2020, March 14). LGUs step up efforts to contain, combat COVID-19. Inquirer.Net. Retrieved from <https://business.inquirer.net/292521/lgus-step-up-efforts-to-contain-combat-covid-19>

National Disaster Risk Reduction and Management Council – Memorandum Circular No. 2, s. 2012 (dated March 8, 2012): Implementing Guidelines on the Use of Incident Command System (ICS) as an On-scene Disaster Response and Management Mechanism under the Philippine Disaster Risk Reduction and Management System. Retrieved last April 3, 2020 from: <https://www.ifrc.org/docs/IDRL/-%20To%20add/MEMO%20re%20Implementing%20Guidelines%20on%20the%20use%20of%20ICS%20-%20edited.pdf>

Executive Order No. 82, s. 2012, Operationalizing the Practical Guide for National Crisis Managers and the National Crisis Management Core Manual; Establishing National and Local Crisis Management Organizations; and Providing Funds Therefor. Retrieved last April 3, 2020 from: <https://www.officialgazette.gov.ph/2012/09/04/executive-order-no-82-s-2012/>



COVID-19 Research, Response & Solutions

De La Salle Volunteers

Layout by: Desmond Hans Bautista and Karren Fetalvero