



REPUBLIC OF THE PHILIPPINES  
NATIONAL ECONOMIC AND DEVELOPMENT AUTHORITY  
REGION VI - WESTERN VISAYAS



WE  
RECOVER  
AS ONE



# Western Visayas **COVID-19** Regional Recovery Plan



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## Western Visayas COVID-19 Regional Recovery Plan

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## Foreword



The coronavirus disease of 2019 (Covid-19) pandemic has significantly affected the Philippines and the world, with the number of recorded cases and deaths increasing sharply within three months after it first hit the country. At the onset, the United Nations has warned that this pandemic is far more than a health crisis - it is affecting societies and economies at their core. This public health crisis and the associated economic crisis, have posed huge challenges, raised many unknowns and imposed wrenching trade-offs.

In response to these health and economic crises, President Rodrigo Duterte issued Proclamation No. 929 declaring a state of calamity throughout the country. Subsequently, the Inter-Agency Task Force (IATF) for the Management of Infectious and Emerging Diseases, the government's body created in 2014 to assess, monitor, contain, control and prevent the spread of any potential epidemic in the Philippines, was activated in January 2020 to address the challenges brought about by COVID-19 outbreak in the country.

As chair of the IATF Technical Working Group for Anticipatory and Forward Planning, the National Economic and Development Authority (NEDA) took the lead in preparing an economic recovery plan that will contain recommendations on mitigating economic losses, as well as, policies to adapt to a New Normal state of socio-economic activities.

The Western Visayas Regional Recovery Program (RRP) is the region's come-back plan to create jobs and sustain regional economic growth amid the continuing challenges brought about by the pandemic. It serves as a guide for the region as it gradually transitions from responding to the COVID-19 pandemic to recovery under New Normal conditions. It is guided by the "We Recover as One" technical paper prepared by the the IATF Technical Working Group for Anticipatory and Forward Planning and is anchored on the guidelines and issuances of the IATF on the New Normal.

To capture the aspirations of the people, a series of multi-level and multi-sector focus group discussions were conducted among stakeholders from local government units, regional line agencies, the academe and private sector. The formulation of the recovery plan started with the generation of inputs thru on-line consultations with various stakeholders in the assessment of the effect of COVID-19 in the region within the areas of health, economic and livelihood activity, social services, infrastructure and transport, governance and environment. This was followed by a three-day virtual focus group discussions taking off from the initial draft formulated from submissions of regional line agencies, local government units, government corporations, financial institutions, and state universities and colleges.


The online FGDs were conducted to solicit comments and suggestions to improve the strategies, legislative agenda, programs and projects of the draft RRP in ensuring the effective delivery of

government services and supporting the gradual opening of the region's economy that will entice. Recognizing the important role of local government units in recovery planning, a bottom-up approach was also employed to ensure a truly responsive and sustainable plan. As frontliners in their respective jurisdictions, the local government units are expected to take on a greater role, not only in times of the COVID-19 pandemic, but also in the coming months when the region becomes most vulnerable to natural hazards such as typhoons, flooding and drought.

The realization of the development outcomes contained in the RRP entails funding and implementation across sectors at various levels of governance. Thus, the Regional Development Council will play an important part in ensuring the participation and harmonization of efforts among the development partners to make sure that the goals, objectives and targets of the RRP are achieved.

As technical secretariat of the RDC and in charge of coordinating the formulation of the RRP, the NEDA VI acknowledge, with sincere appreciation and gratitude, the invaluable inputs of the government agencies, local government units, the academe and our partners from the private sector in making this Plan a truly dynamic and workable document.

It is this united spirit that will raise our confidence in re-emerging as one of the country's fastest growing regional economy and re-aligning our development roadmap back to its path leading to a prosperous, secure, and resilient Western Visayas.



**RO-ANN A. BACAL, CESO III**  
Regional Director, NEDA-VI  
Vice-Chairperson, RDC-VI

## Message from the RDC Chairperson



The world is currently experiencing a prolonged period of uncertainty caused by the COVID-19 pandemic. Already, the new virus has affected the lives of families and individuals in over 200 countries globally.

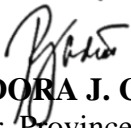
The virus first made its presence felt in the consciousness of people living in Western Visayas when the first confirmed case was reported in the country on January 30, 2020 and more so in Western Visayas on March 20, 2020, when the reverse transcription polymerase chain reaction (RT-PCR) test result was released. Since then, thousands of our people were monitored and more than a hundred were confirmed positive cases. Fortunately, fatalities were very low, but tragic nonetheless

Currently, we are still in the response phase, where we focus on medical and non-medical measures to limit transmissions and provide health care to those who need them. Effective protocol treatments of symptoms are still being studied and further validation of potential vaccines are being made. This means that government is left with non-medical measures to limit the transmission of the virus such as instituting lockdowns, travel bans, no crowded gatherings, school closures, physical distancing, and the imposition of community quarantines.

A successful virus containment policy is necessary in order to segregate the carriers and potential victims of the virus and reduce the doubling of infection time. A consequence, however, is the pause in business operations resulting in losses of income, revenues, and wages to workers. Now that we better understand the pandemic and contamination is further in between, there is a need to prepare the community towards “normalcy” and allow the economy to flourish once again.

This Regional Recovery Plan for Western Visayas identifies exactly what needs to be done and the strategies that need to be pursued to put in place new norms and sets of protocols in all sectors of society. It calls for a cautious opening of the region’s economy, a redesigning of programs and projects, while consciously aware of the risks in daily activities and transactions.

Let this be a reference for all sectors of our society on what our government plans to implement in the second half of 2020 up to 2022. We are confident that our *bayanihan* spirit will prevail, will unite us, and that we will heal as one.

  
**RHODORA J. CADIAO**  
Governor, Province of Antique  
Chairperson, RDC-VI

## Message from the RDC Co-Chairperson



For many, the COVID-19 pandemic is a crisis unlike any other in recent times. Public health experts are yet to reach a consensus on when the widespread community transmission of coronavirus will be under control.

As the outbreak spreads and the strain on our public resources deepens, the private sector has a unique ability and opportunity to change the disease's trajectory and its effect on the populace. In Western Visayas, the business groups, the private sector, the whole citizenry have stepped up to support government efforts and augment its resources in fighting the virus.

The people of Western Visayas have shown the essence of the Filipino Bayanihan spirit when local governments, private sectors and the citizens jointly took practical actions, rather than just make statements, to fight the pandemic. They explored innovative and creative actions to foster positivism and lift up the spirit of our people in times of community quarantines.

Fashionable and colorful protective gears were created by local groups of fashion designers for our health workers and front liners. The local bakers combined their resources to come up with the now famous Ilonggo pan de sal to satisfy our people's cravings during the lockdowns. Vegetables, poultry and meat products of local producers were bought by private donors and LGUs as part of social amelioration packages. Business leaders and philanthropist donated millions of pesos while researchers, scientists and the academe banded together to share their expertise and resources in order for Western Visayas to have its own duly-accredited testing laboratories. These and many more have shown the indomitable spirit of the people of Western Visayas in times of adversities.

COVID-19 has already changed the way we live and work with far-reaching impact. There are daunting challenges ahead that we must prepare. A whole of society approach is necessary to collectively overcome the spectre of the virus and bring the economy back to its feet. The private sector group actively participated in the formulation of the Regional Recovery Plan as we work and live amid COVID-19.

But beyond the formulation of the RRP lies the more challenging task of ensuring its successful implementation. And we, the private sector will again be ready to take up this challenge as we partner with government towards recovery and towards a more resilient Western Visayas.

A handwritten signature in black ink, appearing to read 'L. C. Segovia'.

**MA. LUISA C. SEGOVIA**

Trustee, Iloilo Business Club, Inc.  
Co-Chairperson, RDC-VI

# I

## Overview



# PART I

## Overview

The Corona Virus Disease 2019 (COVID-19) is an infectious disease caused by severe acute respiratory syndrome of coronavirus 2 (SARS-CoV-2). It was first identified in Wuhan, China and has since spread globally resulting in an ongoing pandemic. At this time, no vaccines or treatments for COVID-19 have been developed although clinical trials are being conducted worldwide to come up with the vaccine.

On January 30, 2020, the Department of Health (DOH) reported the first case of COVID-19 in the Philippines. In light of the confirmation of localized transmission in the country on March 7, 2020 and in anticipation of possible sustained community transmission, DOH has raised the COVID-19 Alert System to Code Red sublevel 1, a preemptive call to ensure that national and local governments and public and private health care providers can prepare for possible increase in suspected and confirmed cases.<sup>1</sup> With Code Red, the DOH has recommended to the Office of the President for the declaration of a State of Public Health Emergency which facilitate mobilization of resources, ease processes, including procurement of critical logistics and supplies, and intensifying reporting.

On March 8, 2020 the President issued Proclamation No. 922 declaring a State of Public Health Emergency. Soon after, on March 16, 2020 by virtue of Proclamation No. 929, he declared a State of Calamity throughout the country due to COVID-19.

## Organizational Structure for COVID-19

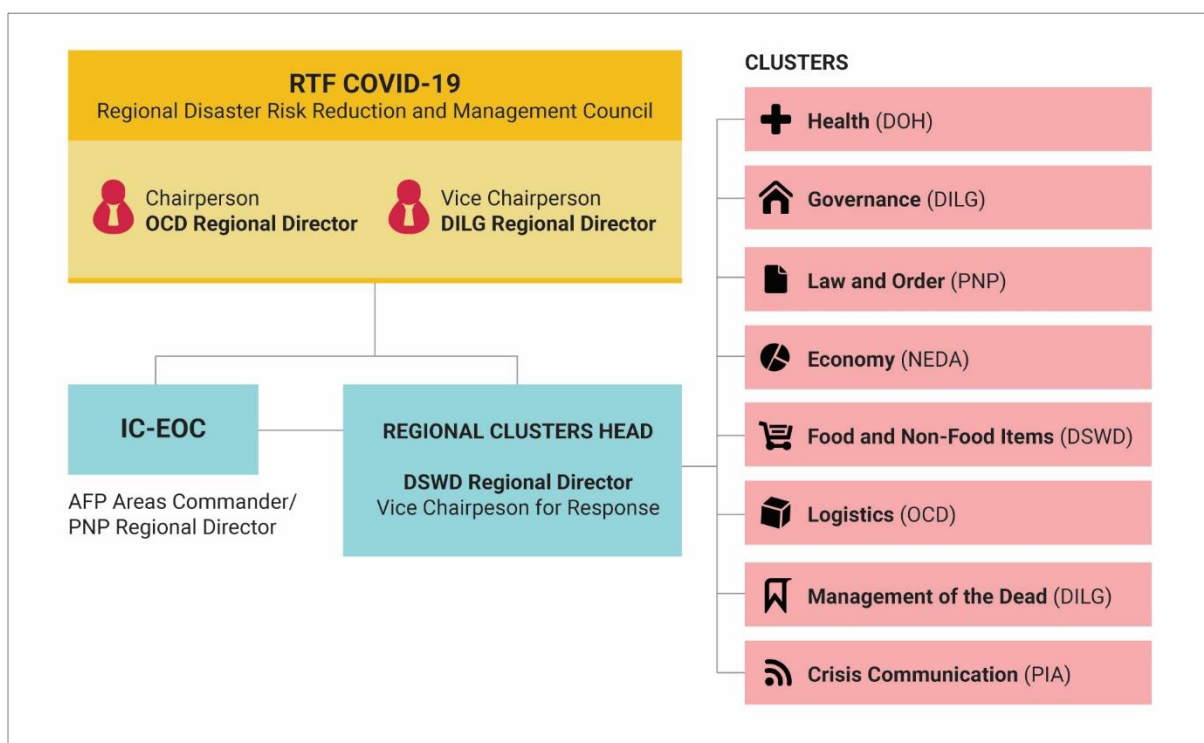
### RDRRMC Regional Task Force COVID-19

Pursuant to Memorandum No. 27, series of 2020, of the National Disaster Risk Reduction and Management Council (NDRRMC), the Regional Disaster Risk Reduction and Management Councils (RDRRMCs) activated the Response Cluster for COVID-19 to heighten the monitoring of possible effects of the outbreak, ensure timely dissemination of warnings/advisories to the public and to facilitate the effective coordination of response and humanitarian assistance at the regional level.

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<sup>1</sup> Press Release: "DOH confirms local transmission of COVID-19 in PH; report 6th case" (DOH 2020)

**Figure 1. Organizational Structure of RDRRMC-VI Task Force for COVID-19**



## Regional Inter-agency Task Force (RIATF)

On May 11, 2020, a separate Regional Interagency Task for the Management of Infectious and Emerging Diseases (RIATF) was created to serve as a policymaking body that recommends on the extension/transition of community quarantines of local government units. The RTF-COVID 19 of the RDRRMC will continue to address operational issues in the implementation of interventions for COVID 19.

The recommendation of the RIATF is forwarded to the Inter-agency Task Force for the Management of Infectious and Emerging Diseases (IATF) for final decision. The IATF was created through Executive Order 168, s. 2014 to facilitate intersectoral collaboration, establish preparedness and ensure government response to assess, monitor, contain, control and prevent the spread of any potential epidemic in the Philippines.

With the current health emergency, the IATF was convened on January 28, 2020 and thereafter issued regular recommendations for the management of COVID-19. Following the sharp increase in the number of confirmed cases in the country, the IATF issued guidelines on the imposition of Enhanced Community Quarantine (ECQ)<sup>2</sup> and General Community Quarantine (GCQ)<sup>3</sup> in select areas of the country. Resolutions 9-37 were issued since March 3 to May 15 by

<sup>2</sup> Enhanced community quarantine (ECQ) - implementation of temporary measures imposing stringent limitations on movement and transportation of people, strict regulation of operating industries, provision of food and essential services, and heightened presence of uniformed personnel to enforce community quarantine protocols

<sup>3</sup> General Community Quarantine (GCQ) - implementation of temporary measures limiting movement and transportation, regulation of operating industries, and presence of uniformed personnel to enforce community quarantine protocols.



the IATF, the latest of which was Resolution No. 37 approving the Omnibus Guidelines on the Imposition of Quarantine in the Philippines issued on May 15, 2020.

On March 27, 2020 the IATF passed Resolution No. 16 creating IATF Technical Working Group on Anticipatory and Forward Planning (AFP) to be chaired by the National Economic and Development Authority (NEDA) to provide recommendations on rebuilding confidence and adjusting to the New Normal. It is mandated to 1) reduce uncertainty by making information available to answer some pressing questions of varied stakeholders; 2) recommend programs and strategies to mitigate the losses experienced by consumers and businesses; and 3) to recommend policies and programs to adapt to a New Normal state of economic activities.

These corresponds to the three phases of the government actions against the COVID-19 threat: 1) Response, 2) Mitigation, and 3) New Normal.

- 1) In the **RESPONSE PHASE**, the strategies focus on medical and non-medical measures to limit transmissions and provide health care to those who need them. Since there is no effective treatment protocol yet, let alone a vaccine that is available for COVID-19, the government is left with non-medical measures to limit the transmission of the virus such as travel ban, no mass gatherings, school closures, physical distancing rules, and the imposition of ECQ. The capacity of the of the health system to respond will be increased, including testing, contact tracing, quarantine, hospital beds and equipment, among others.
- 2) The **MITIGATION PHASE** will address some of the adverse impact of the threat of COVID-19 and of the measures being implemented to limit transmission. Strategies to be implemented during this phase aims to ensure food security, particularly of the poor and the vulnerable, and reduce financial losses experienced to arrest a possible domino effect of adverse consequences.
- 3) As health experts predicted, COVID-19 threat will remain for some time, or at least until a vaccine or treatment is found. Thus, a set of conditions should be established to transition to **NEW NORMAL** that will allow social and economic activities to proceed, while still observing rules to limit transmissions of the virus.

## Impact of COVID-19 pandemic in Region VI

### Affected areas and population

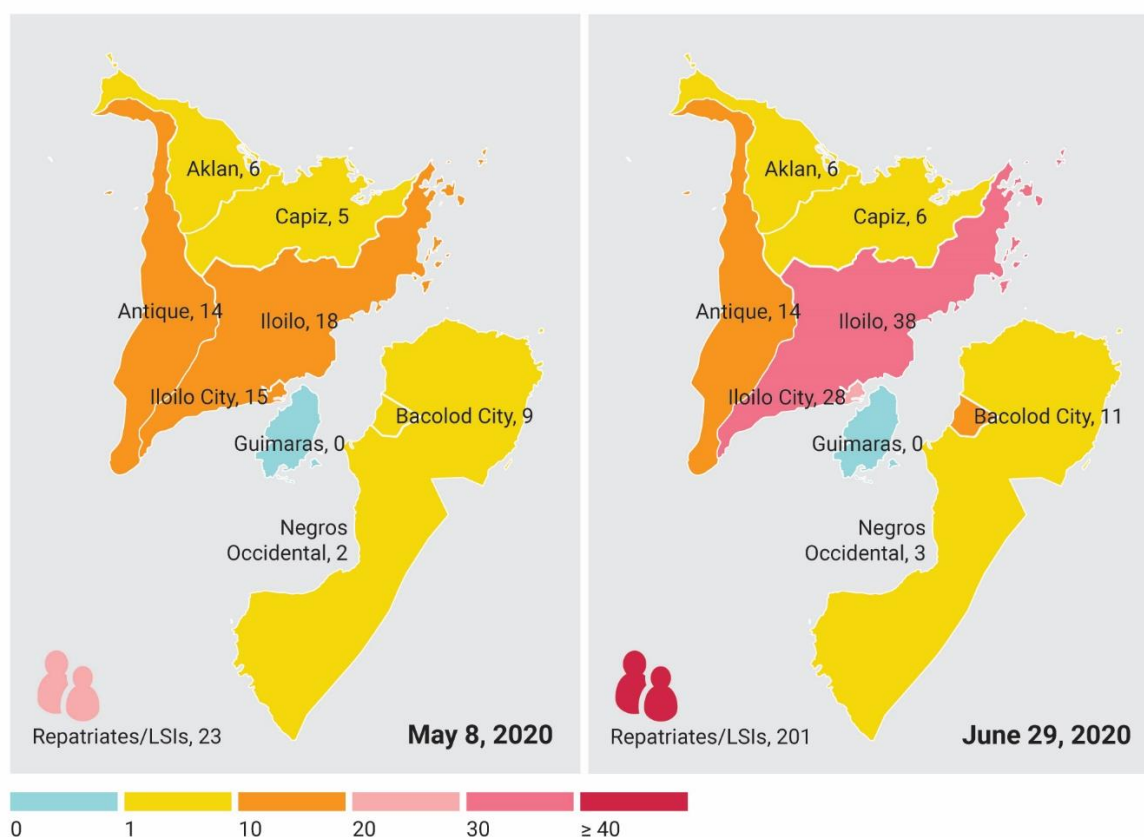
On May 8, 2020, the total number of confirmed cases in the country reached 10,463. This included 606 deaths and 1,734 recoveries. By June 30, the number of cases rose to 37,514, with 1,266 confirmed deaths and 10,266 recovery.

The first confirmed COVID-19 case in Western Visayas was recorded on March 20, 2020 when the reverse transcription polymerase chain reaction (RT-PCR) test result was released. As of

May 8, 2020, the region has 92 confirmed cases, 36 recoveries, and 10 deaths<sup>4</sup>. A remarkable increase was noted in COVID-19 cases in the course of two two months. On June 30, 2020<sup>5</sup>, confirmed cases increased to 307, and 11 deaths were recorded. Recoveries sized up to 126.

Between May 8 and June 29, 2020, it can be observed that a sharp increase of 20 confirmed cases is seen at Iloilo Province, followed by Iloilo City with 13 cases. Bacolod City had two additional cases, while Capiz had one. Remarkably, the biggest surge in the number of confirmed cases are in those group tagged by DOH as repatriates and locally stranded individuals. Confirmed cases from this group escalated from a mere 23 confirmed cases on May 8 to 201 cases on June 29. The latter being equivalent to a 773.91 percent increase.

**Figure 2. Comparative Heat Map of COVID-19 in Region VI in May 8 and June 29**



Source: DOH Western Visayas Center for Health Development

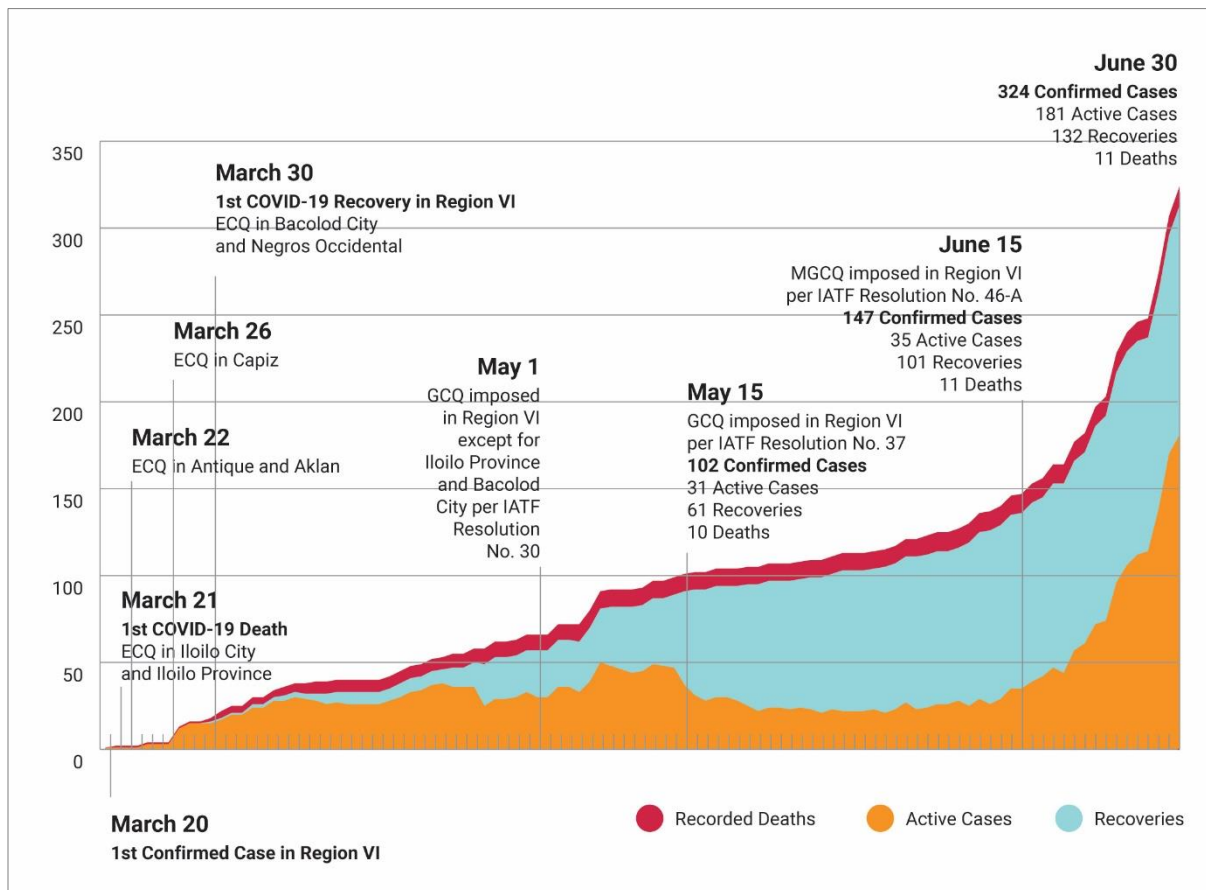
Of the 92 confirmed cases recorded on May 8, ten were reported to have died of the disease or a case fatality rate of 10.87 percent. However, this was improved to 3.58 percent in June 29 when only one additional death was recorded. Recovery rate improved from 39.0 percent on May 8 to 41.0 percent on June 29. Nonetheless, with the expected arrival of returning overseas Filipinos

<sup>4</sup> Western Visayas DOH Covid-19 Case Bulletin No. 43

<sup>5</sup> RTF COVID-19 Situational Report No. 118, as of June 30, 2020

(ROF) and locally-stranded individuals (LSIs) from areas with high number of COVID-19 cases, such as Metro Manila and Cebu, the situation has drastically changed.

**Figure 3. Cumulative Confirmed Cases, Deaths and Recoveries of COVID-19 in Region VI**



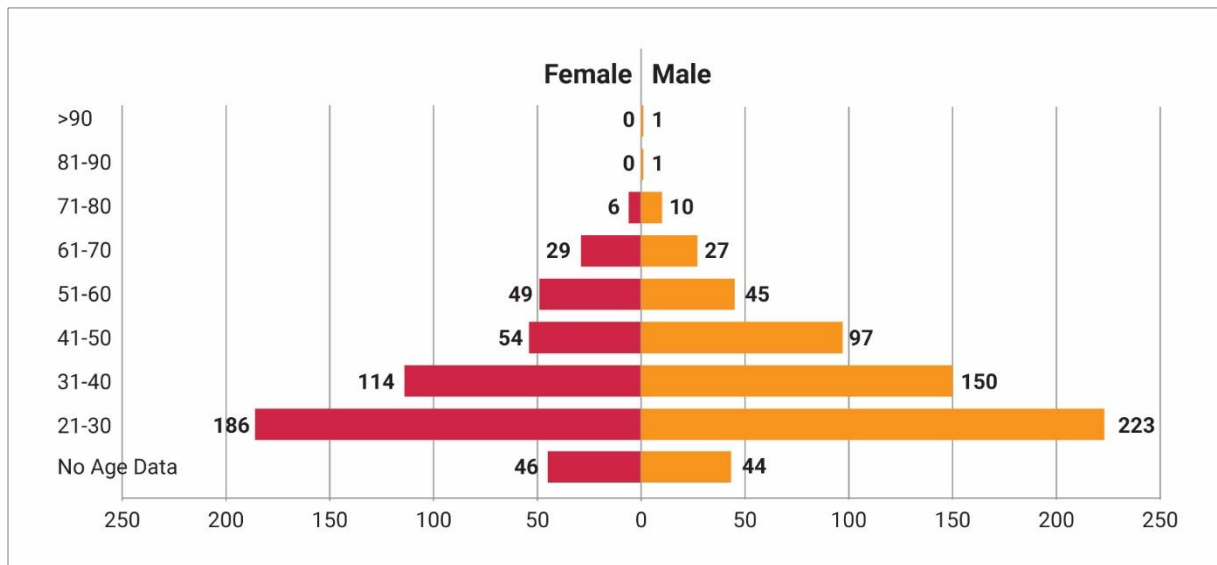
Source: DOH Western Visayas Center for Health Development

From just one confirmed case on March 20, the number of positive cases for COVID-19 increased to 102 on May 15 with 61 recoveries and 10 deaths when the general community quarantine (GCQ) was implemented regionwide per IATF Resolution No. 37. When the modified GCQ was implemented on June 15 per IATF Resolution No. 46-A, there were 4 additional active cases and recoveries increased by 40. Only additional one person died of the virus. However, from June 15 to June 30, there was a tremendous increase in the number of additional active cases - from 35 to 181 or an additional 146 active cases. On a positive note, recoveries correspondingly increased to 132 from 101 and no additional death was recorded for the period.

Data by age group and sex (as of June 29, 2020) showed that the most affected are those in the 21-30 years age group, followed by the 31-40 years age group and the 41-50 years age group. Data also shows that most of the affected are male accounting 608 or 55.8 percent of the

confirmed cases as seen on Figure 4. There are also two males with COVID-19 who belong to the age group of 81 and above.

**Figure 4. COVID-19 Cases by Sex and by Age Group, June 29, 2020**



Source: DOH Western Visayas Center for Health Development

While COVID-19 is a deadly threat mostly to the elderly and those with other underlying health issues, records show cases among the working population have been increasing. At the national level, the most number of cases fall within the 30-39 years age group<sup>6</sup>. A common inference from the data on age distribution of cases nationwide is that the most vulnerable group to the disease are the working class (employed both domestically and overseas). Young people belonging to this group are more likely asymptomatic or have milder cases of the disease.

Based on the available data on the status of the nationwide active cases, about 22 percent of the total number of cases are experiencing mild symptoms. DOH and DILG Joint Administrative Order No. 2020-0001 provides that patients with mild symptoms are either be home-quarantined or quarantined in government-designated facilities if home environment is not suitable for quarantine purposes.

## Medical facilities, laboratories, hospitals, manpower

### Testing Facilities

The Western Visayas Medical Center (WVMC) subnational laboratory (SNL) was approved by the DOH as one of the five COVID-19 testing laboratories to operate outside of Metro Manila on March 24, 2020. This facilitated the faster processing of specimens because samples from

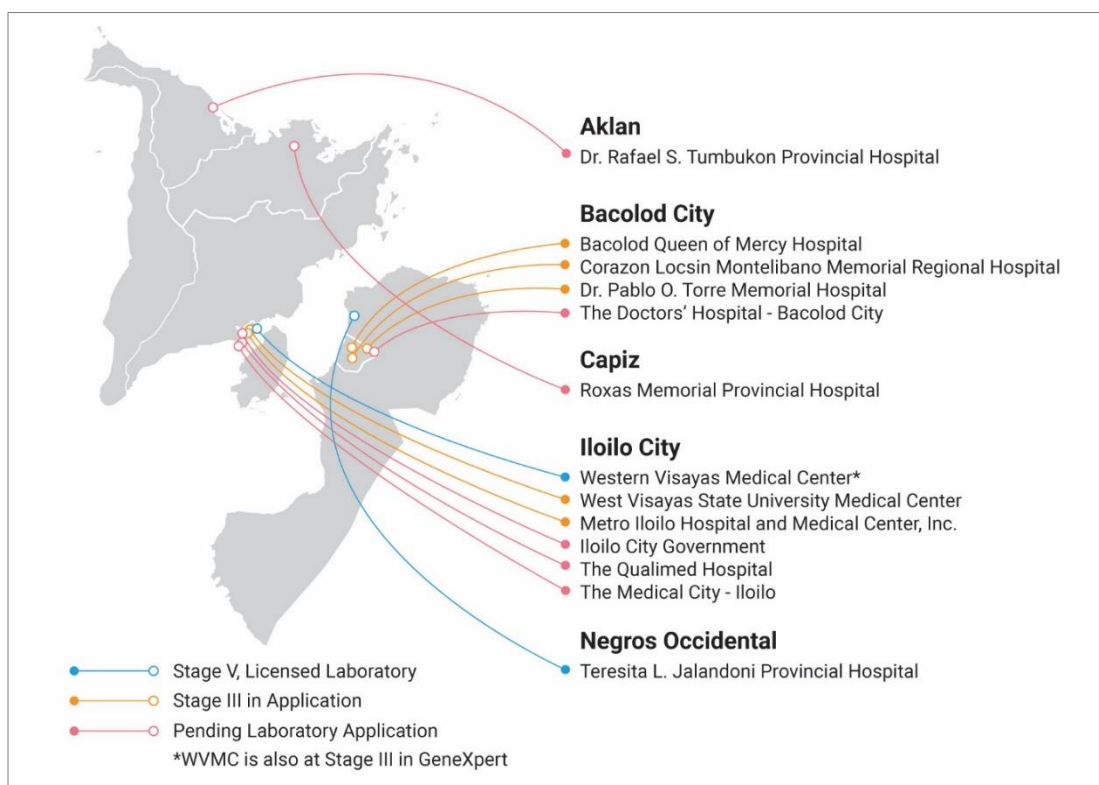
<sup>6</sup> World Health Organization, 2020

suspected COVID-19 cases from different provinces in the region are now sent directly to WVMC-SNL in Iloilo City for testing. Prior to that, samples were sent to the Research Institute for Tropical Medicine (RITM) in Metro Manila.

The WVMC-SNL is one of the 18 other reference laboratory for testing apart from the RITM. As of May, it was the sole Stage 5 laboratory in Region VI. The accreditation of WVMC-SNL as a Sub National Reference Laboratory (SNRL) for COVID-19 has contributed to the overall national laboratory testing capacity. From March 24 to May 4, 2020 there had been 3,656 tests conducted for 3,629 individuals who were suspected COVID-19 cases, 2 percent or 72 suspected cases turned out positive.

As of June 26, the Region has two licensed RT-PCR testing laboratories while five are on Stage III of their accreditation. The West Visayas State University Medical Center is also at Stage III for the RT-PCR test via GeneXpert<sup>7</sup>. In addition, there are also six additional pending RT-PCR testing laboratories of which three are private and three are public<sup>8</sup>.

**Figure 5. Status of COVID-19 Testing Laboratories in Region VI, June 2020**



Source: DOH Western Visayas Center for Health Development

<sup>7</sup> GeneXpert is a machine capable of testing COVID-19 which makes use of a rapid, real-time in vitro RT-PCR test for the qualitative detection of nucleic acid from the SARS-CoV-2 Virus that causes COVID-19. (DOH Dept. Memorandum 2020-0191)

<sup>8</sup> Western Visayas COVID-19 Weekly Situationer, Issue No. 7, DOH Western Visayas Center for Health Development, 2020

## Treatment Facilities

The DOH Data Dashboard presents the status of hospitals and health facilities in the context of the current disease outbreak. Region VI has an overall critical care utilization rate of 28.5 percent for its COVID-19 dedicated beds. Based on the number of available beds, utilization rate in government hospitals is about 30 percent while that of private hospitals is almost 23 percent. The province of Iloilo (including Iloilo City)—which has the most number of confirmed cases, has the highest critical case utilization rate at 40.5 percent (Table 1).

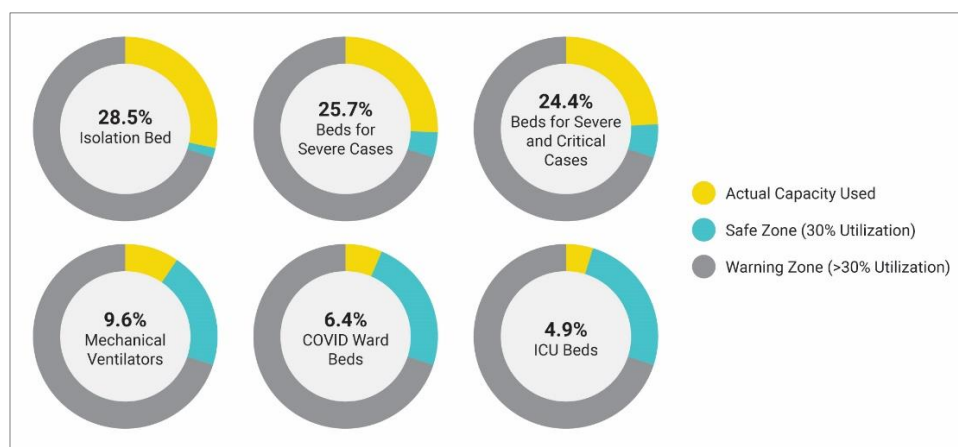
**Table 1. Critical Care Utilization Rate by Province, As of May 4, 2020**

Province / Region	Government Hospitals		Private Hospitals		Total	
	No.	Utilization Rate (in percent)	No.	Utilization Rate (in percent)	No.	Utilization Rate (in percent)
Aklan	15	29.9	7	0.0	22	4.5
Antique	2	6.7	11	0.0	13	0.0
Capiz	89	0.0	11	0.0	100	10.0
Guimaras	2	11.2	0	0.0	2	0.0
Iloilo	227	40.5	40	35.0	267	39.7
Negros Occidental	97	26.8	40	27.5	137	27.0
<b>Western Visayas</b>	<b>432</b>	<b>29.9</b>	<b>109</b>	<b>22.9</b>	<b>541</b>	<b>28.5</b>

Source: DOH Western Visayas Center for Health Development

Presented in Figure 6 are the utilization rates of hospital beds and mechanical ventilators dedicated to COVID-19 cases in the Region. The utilization rates for three hospital bed types (isolation, for severe cases, and for severe and critical cases) are marginally within the safe zone by at least 5 percent. If the utilization rates exceed the 30 percent limit, it will be categorized under the *warning zone*.

**Figure 6. Utilization Rate of COVID-19 Dedicated Hospital Beds, as of May 2020**



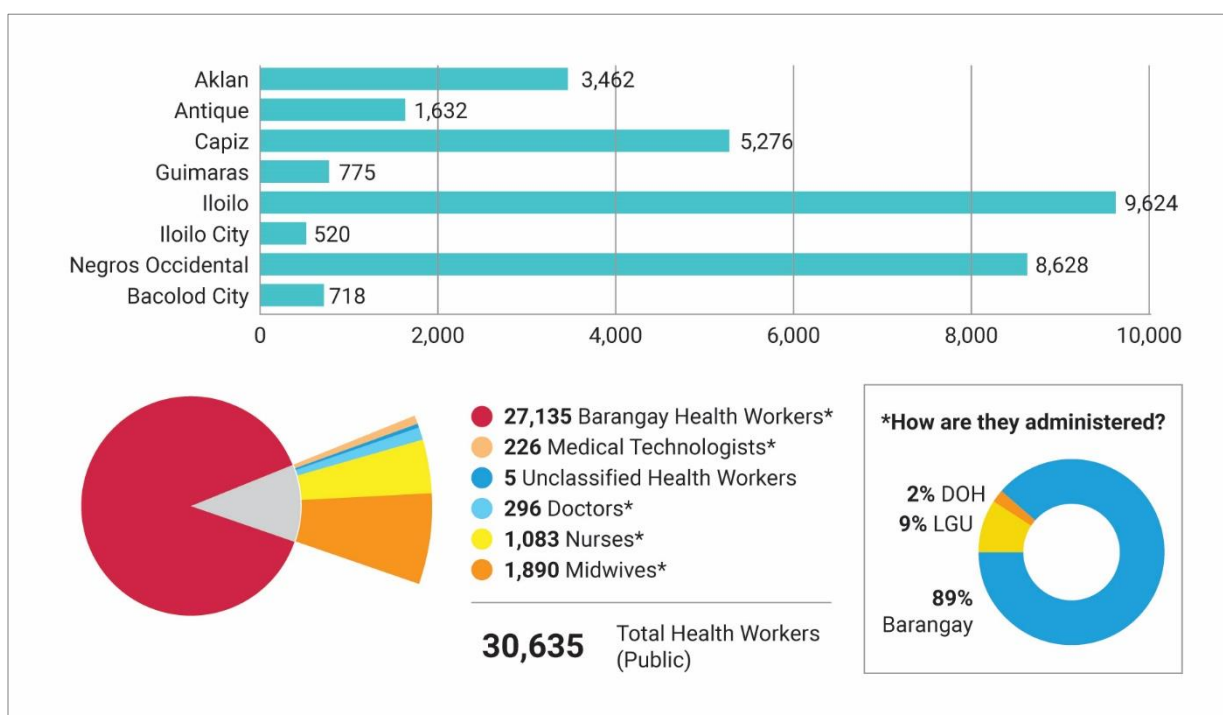
Source: DOH Western Visayas Center for Health Development

The intensive care unit (ICU) beds are the least utilized among the available facilities for COVID-19, followed by COVID ward beds and the mechanical ventilators.

### Health Workers

The region has a total of 30,635 health workers composed of doctors, nurses, midwives, medical technologists, barangay health workers and other health-related personnel. Iloilo province and Negros Occidental have the most number of health workers.

Figure 7. Summary of Public Health Workers in Region VI



Source: DOH Western Visayas Center for Health Development

As of May 8, 2020, about two percent of the total health professionals employed by the DOH are classified as unavailable human resource for health (HRH) due to either being admitted or in quarantine. This include 31 doctors, 148 nurses and 108 for other health workers. No HRH in Region VI has died due to COVID-19 as of June 2020.

# II

## Assessment of the Effect of COVID-19 in Region VI





## PART II

# Assessment of the Effect of COVID-19 in Region VI

## Health

The COVID-19 pandemic has severely disrupted the performance of the health sector. Implementation of essential health programs, the universal health care, health promotion programs, mental health and the Philhealth programs was hampered resulting to poor accomplishment in some health indicators and non-implementation or delayed implementation of these health programs.

**Absence of provincial accredited laboratory/testing center to handle COVID-19 tests.** The probables and suspects of COVID-19, especially those exhibiting virus symptoms or has a travel or exposure history in relation to the virus will be subjected for swabbing for the reverse transcription-polymerase chain reaction testing (RT-PCR) test. The sole accredited center in the region, the Western Visayas Medical Center in Iloilo City handles the swab testing and can run only 500 tests daily. Due to the influx number of specimens received by the center, the turn-around time for the processing and release of test results would be delayed, considering that there are no accredited laboratory centers at the provincial levels.

**Lack of health professionals and other frontliners.** As the region struggles to contain the spread of the COVID-19 virus, private and public hospitals are confronted with the shortage of health professionals and frontliners, who are critical in the fight against the corona virus. Ratio of population to health professionals like doctors, nurses, medical technologists and even barangay health workers is still below standard or ideal ratio. Moreover, as frontliners, the number of health professionals are getting fewer as they succumbed to the virus and the huge number of patients in both public and private hospitals.

**Shortage/Inadequacy of emergency supplies and medical logistics, including personal protective equipment (PPE) for health professionals and frontliners.** Emergency supplies and medicines in treatment and quarantine facilities in various areas of the region are insufficient. Supplies like PPEs, gowns, face shields, face masks, and respirators are essential for the protection of health workers, patients, and frontliners from hazards in healthcare facilities due to the COVID-19 virus.

**Poor implementation of minimum health protocols on COVID-19.** The surge of community transmission of COVID-19 cases was attributed to poor observance of minimum health protocols by local residents. The DOH has issued guidelines on managing positive cases, the observance of minimum health standards on wearing of masks, physical distancing, proper washing of hands, and limiting travel to basic essentials but these were poorly implemented in some LGUs. Due to inadequate knowledge and information about the pandemic, some residents did not take these precautions seriously and still have poor health and sanitation practices. Monitoring and

supervision are not strictly enforced by some LGUs in ensuring that physical distancing in mass gathering is observed such as during the giving of relief goods, distribution of social amelioration program funds, and other activities.

**Lack of capacities among some health workers and frontliners.** The increased number of cases was attributed to lack of capacities of health workers and frontliners. Not all health personnel are capacitated to respond to emergencies and disasters. There is limited number of health personnel who are capacitated to address Emerging and Re-Emerging International Diseases (EREIDs) like the COVID-19.

**Routine operations of health program and essential services were disrupted.** The imposition of enhanced community quarantines in the region in response to COVID-19 pandemic has disrupted the routine operations of health programs and other essential health services in all levels, primary health care setting and hospital operations. Support systems and interventions were prioritized for COVID-19 prevention, detection, isolation and management which resulted to compromise and displacement of health service delivery for non-COVID programs.

With the restrictions on the mobility of people and limited public transportation facilities, there was a decrease in the pre-natal, post-natal and immunization services and on tuberculosis treatment. Notably, there was increase in the prevalence of raised blood pressure which could be attributed to the anxiety and fear of COVID-19. Also, the prevalence of tobacco use decreased, which could be an indicator that people prioritize the buying food items rather than non-food products during the pandemic.

*Table 2. Impacts on Selected Health Indicators, First Quarter 2019 and First Quarter 2020*

Health Indicators	Q1-2019 (percent)	Q1-2020 (percent)	Variance
Proportion of pregnant women with at least 4 pre-natal check-ups	12.60	4.28	(66.03)
Proportion of post-partum women with at least 2 post-partum check-ups	12.52	4.69	(62.54)
Percent of Fully Immunized Children	15.46	4.81	(68.89)
Tuberculosis treatment coverage	20.00	15.00	(25.00)
Prevalence of raised blood pressure	20.97	37.95	80.97
Prevalence of current tobacco use	32.14	20.19	(37.12)

*Source: DOH Western Visayas Center for Health Development*

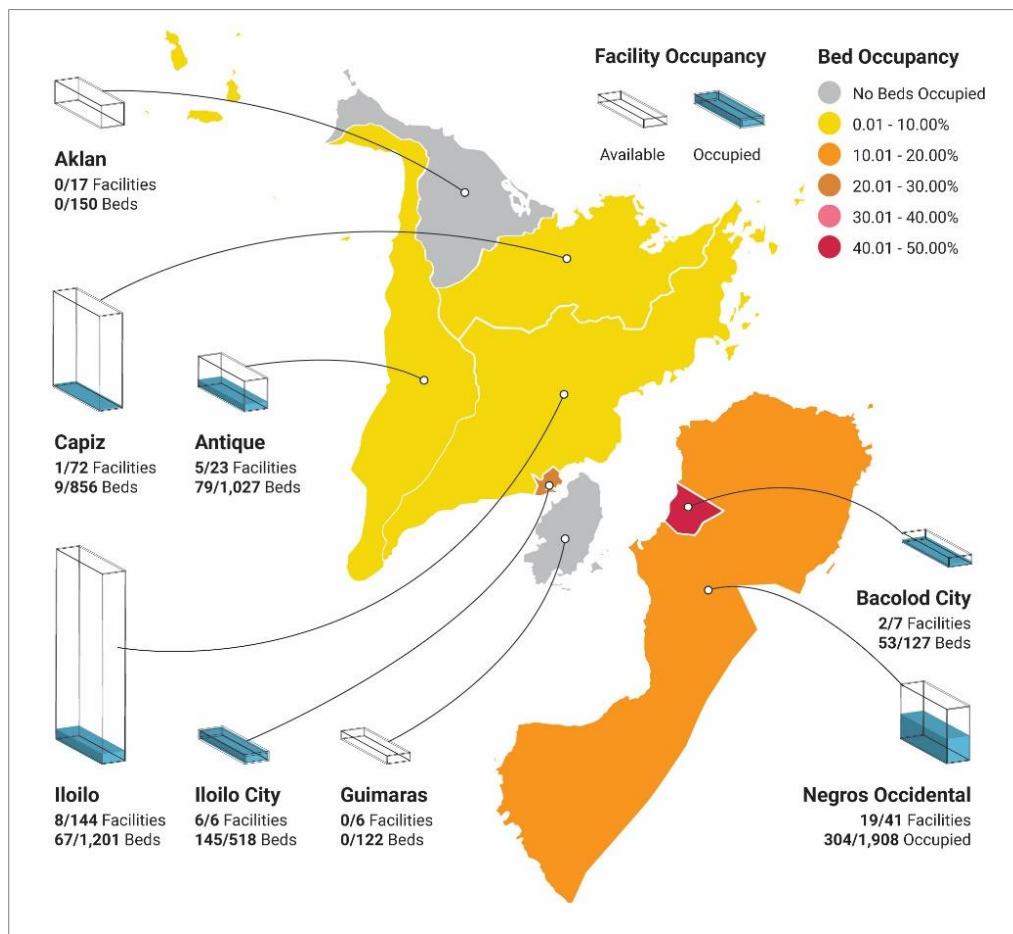
**Limited access to primary health care and non-COVID related health programs.** Delivery of primary health care services was disrupted, further limiting access of vulnerable population such as senior citizens, immune-compromised individuals, women, children, persons deprived of liberty (PDL), persons with disabilities (PWDs) and members of indigenous people (IPs) and internally displaced persons (IDPs), etc.. This was brought about by temporary closure of out-patient departments of hospital, animal bite centers, HIV treatment facilities, family planning clinics, immunization clinics, newborn screening (NBS) continuity services, maternal and child health services, TB programmatic management of drug-resistant (PMDT) clinics, diabetic/hypertensive clinics, among others. Border and travel restrictions also hampered the

preventive and screening diagnostics such as TB testing, NBS confirmatory testing, HIV testing, non-communicable diseases work ups/refill of maintenance medications, etc. This resulted to the inadequacy of DOH-centrally procured logistics at the regional level like essential medicines, e.g., antiretroviral therapy (ART), TB drugs, drugs for anti-hypertensive, anti-diabetics, vaccines and paraphernalia, micronutrient supplements, and the like. With no available air, sea and land transportation, the distribution of logistics to local government units, hospitals and other health service implementers was also delayed. Moreover, the financial support for non-COVID services was limited since the budget support was prioritized to COVID-19 related activities, logistics, and human resource for health.

Financial support for non-COVID services was limited since budget support was prioritized to COVID-19 related activities, logistics and human resource for health.

**Treatment and quarantine facilities and hospital beds are not sufficient to accommodate projected increasing number of COVID-19 cases.** As of May 10, 2020 report of the DOH, there are 316 identified quarantine facilities with 5,899 beds to accommodate COVID-19 related cases. Most of the municipalities have identified at least one quarantine facility.

*Figure 8. Distribution of COVID-19 Quarantine Facilities in Western Visayas, As of 10 May 2020*



Source: DOH Western Visayas Center for Health Development

Presently, there are 37 COVID-19 treatment facilities in the region where 21 (57%) facilities are government-owned and the other 16 (43%) are private facilities. Fifteen facilities are classified as Level I, three (3) as Level II and three (3) as Level III for government facilities. For private facilities, 10 were classified as Level II, and six (6) as Level III. In Western Visayas, WVMC has been identified as the main treatment center for COVID-19 patients.

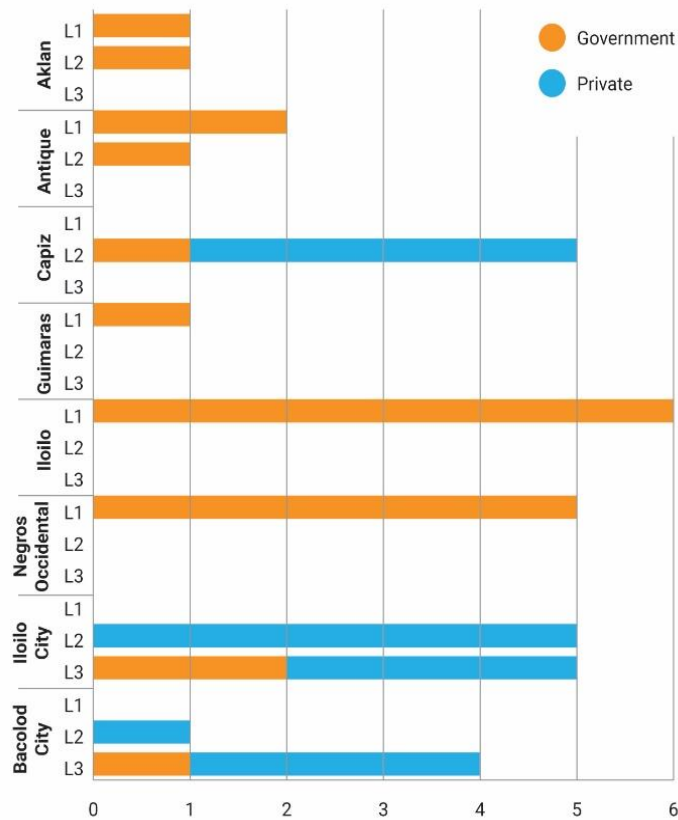
Out of 744 beds in identified treatment facilities, only 21 percent was occupied indicating that most COVID-related cases are mild. There are 84 mechanical ventilators for exclusive use of COVID-19 patients, 60 percent of which are available in private hospitals.

As of date, these facilities were not fully utilized since most probable, suspected, and asymptomatic cases are placed under home quarantine. However, the expected influx of LSIs and ROFs from areas with high COVID-cases like Metro Manila and Cebu in the next few months, may strain further the limited resources of the region, particularly for testing and quarantine. Also, with the onset of rainy months starting in July, the region will again be challenged by rising cases of dengue. In 2019, the DOH declared a dengue outbreak in Region VI, having the highest number of cases in the entire country.

**Increased volume of infectious waste and solid waste materials.** It is expected that there will be increase in volume of infectious waste materials such as disposable masks from households and health care facilities due to the rising number of COVID-19 patients. Also, solid wastes from packaging materials of establishments will increase due to surge of delivery of food and other essential products/supplies. These require strict implementation of infection prevention and control (See more discussion in thematic area on environment).

**Lack of facilities for proper management of remains of persons with COVID or similar symptoms.** There are many funeral parlors, but few crematoriums in Western Visayas. In Iloilo City there is only one crematorium, which is privately-owned and managed while Bacolod City has three private crematoriums. As a rule, remains of persons who have manifested similar symptoms, with or without confirmatory results, have to be cremated.

**Figure 9. Treatment Facilities per Province/HUC**



Source: DOH Western Visayas Center for Health Development

In compliance with the national government's standards in the management of the dead on COVID-19, public and private health facilities, in coordination with the LGUs and the relatives of the deceased will facilitate the cremation of the body of COVID-19 patients within 12 hours after death. Health facilities/centers will ensure that the bodies would be properly stored in a morgue, inside a freezer, while awaiting cremation, to prevent untimely decomposition and the spread of pathogens.

**Poor implementation of health protocols and referral system.** The current service delivery is passive and fragmented which burdens health workers with multiple tasks, and focuses services and resources on curative health care rather than on the preventive aspect. This resulted to poor implementation of health referral protocols as well as weak public-private partnership to complement the inadequacies of the health system in responding to the health crisis.

**Poor information dissemination.** Information dissemination to LGUs and vulnerable groups like IPs and in geographically isolated and disadvantaged areas (GIDAs) was poor due to connectivity problems and inefficient communication system. This affected the credibility, transparency and efficiency of the delivery of health services, especially on how government responses to the pandemic were implemented.

**Inadequate mental health and psychosocial support service (MHPSS) providers.** The COVID-19 pandemic has created a situation where one has no longer a sense of control resulting to increased anxiety among the population. People fear of infection, loss of employment, and the lack or limited financial capacity in providing essential needs such as food and medicines. Quarantine protocols will be more challenging for some segments of populations such as adolescents, elderly, immune-compromised, pregnant women, children and those with existing health problems. Psychosocial stressors and social stigma could affect the mental and psychosocial well-being of individuals, families and communities. It is thus essential that psychosocial health support is in place to protect the mental health and psychosocial well-being of individuals especially those COVID-19 positive cases.

The DOH WVCHD has trained 89 personnel to provide MHPSS to various provinces and cities. Moreover, there are 387 Municipal Health Officers, nurses and other health care workers trained in Mental Health Gap Action Program (mhGAP) who can provide basic mental health care services. With rising cases of COVID-19, more trained mental health and psychosocial support service personnel are needed to address mental health problems. Moreover, mental health services should be accessible to the population.

**High cost of hospitalization for COVID-19 patients.** Hospital expenses of COVID-19 positive indigent patients will be partially covered by Philhealth Insurance. Those who are not indigents can avail of case-to-case scheme. The package for mild pneumonia in the elderly or those with co-morbidities amounts to PhP43,997; moderate pneumonia, PhP143,267; severe pneumonia, PhP333,519; and critical pneumonia, PhP786,384. Case rate covers mandatory services, such as hospital accommodation, laboratory, supplies, equipment, and professional fee, among others, both for public and private hospitals.

The Western Visayas Medical Center (WVMC), a sub-national laboratory accredited by the DOH and PhilHealth can cover the testing expenses of probable or confirmed COVID-19 cases. PhilHealth can provide the members of these benefits, especially during the pandemic. For those who are not yet members or have gaps in paying their contributions, automatic membership and even automatic eligibility of the PhilHealth benefits are still assured.

These support, however, just cover a fraction of the expenses one incurred when hospitalized with COVID-19. Already, hospitalization costs for COVID-19 patients run to hundreds of thousands of pesos, especially with prolonged recovery period in the hospitals.

## Economic and Livelihood Activity

### Agriculture and Fishery

The agriculture and fishery sector plays a crucial role in pursuing COVID-19 pandemic recovery efforts. As the corona virus disrupted the economy, the national gross domestic product declined by 0.2 percent in the first quarter of 2020 with agriculture, fishery and forestry contracting by 0.4 percent<sup>9</sup>. With about 30 percent of the region's 3.1 million employed persons in the sector, economic growth in agriculture is more effective at reducing poverty and food insecurity. Investments in agriculture can help revive food production and create jobs, following a crisis, and enable rural communities to recover.

As the COVID-19 pandemic continues to spread globally, lockdown measures designed to contain its impact on public health were put in place. However, such measures are having significant impacts on other domains of human activity, especially on the availability of domestic food, sustainability of agriculture supply chains, as well as in ensuring that food and food products remain accessible and prices are stabilized.

**Border and quarantine restrictions disrupted sustainability of agricultural and fishery supply chains.** The strict home quarantine declared as the government's general policy in its fight against COVID-19 restricted the movements of those involved in agricultural and fishery work. Border restrictions imposed by the national government and the local government units starting on the second half of March 2020 created disruptions in local supply chains of agricultural products including fish and aquatic foods. Regular public transportation were suspended, most of the businesses or those which are considered non-essential were closed, people are generally prohibited from going out of their houses, where even special arrangements are being observed for most of those who work to stay at home. Cross border movement within the region has generally been limited.

The disruptions in transportation, trade, and labor impact on the production and delivery of goods and services, affecting some 33,037 rice farmers alone in the region, as reported by the Department of Agriculture. In a survey conducted by Inter-Agency Task Force Technical Working Group for Anticipatory and Forward Planning, 10.5 percent of the 1,390 respondents from Western Visayas were unable to continue rice farming activities, 10 percent in high value

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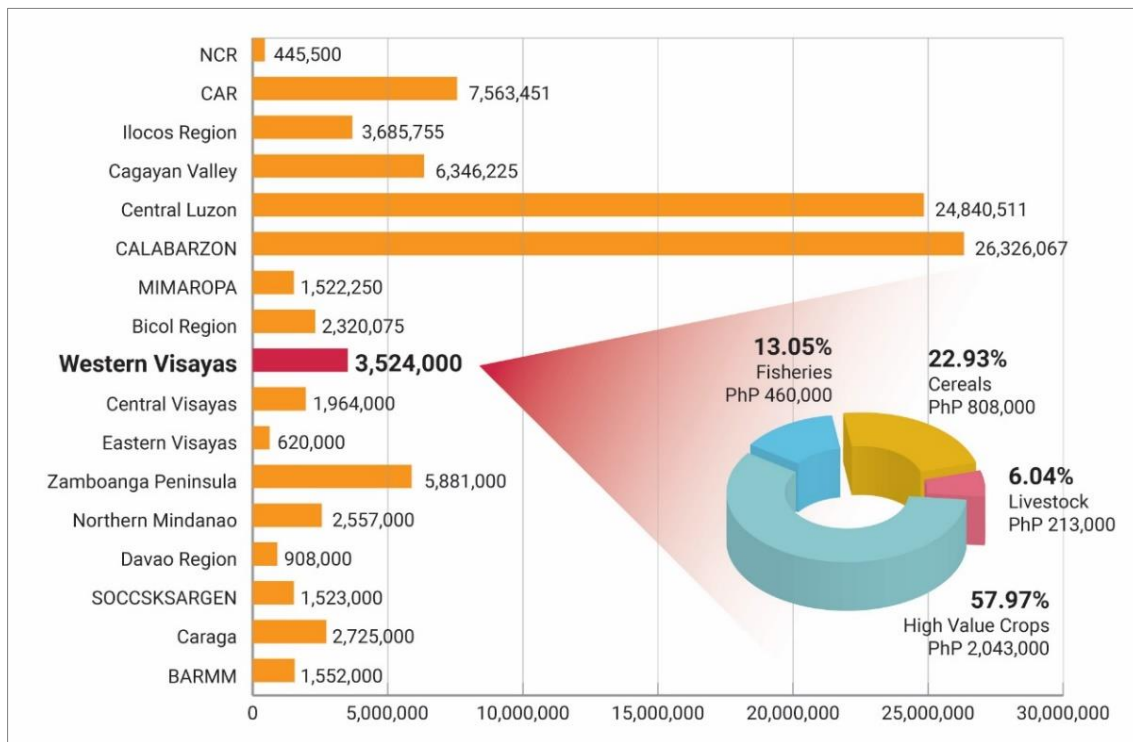
<sup>9</sup> Philippine Statistics Press Release No. 2020-083 "GDP declines by 0.2 percent in the first quarter of 2020"

vegetables farming and 8.5 percent did not continue fishing activities. Likewise, about 215.9 hectares of rice and high value crops farm lands were not planted when the ECQ was imposed in the region. Moreover, many farmers and fishers did not continue farming and fishing because they belong to an age group considered as highly vulnerable to the COVID-19 virus and are required to stay at home during the quarantine period.

Border closures and the unavailability of public transportation have also limited the access of farmers to production inputs. Although transport of agricultural supplies is allowed, the stringent requirements imposed by local government units make travel difficult for workers crossing the borders. In some cases, drivers and assistants were asked to undergo quarantine whenever they go back to their homes once they visited an area with known COVID-19 positive cases.

Likewise, this resulted to higher cost of production and marketing. Users of agricultural products discontinued their orders because public markets, where most agricultural products are sold, are closed. The demand for agriculture products also declined because bulk buyers like hotels and restaurants were closed. These factors resulted to glut in agriculture products. The problem was compounded with lack of agricultural extension workers to assist farmers and growers and the difficulty in accessing capital for production and operating costs.

**Figure 10. Direct Losses from Unsold Agricultural Produce, By Region, in PhP**



Source: IATF TWG for Anticipatory and Forward Planning

**Farmers and fisherfolks suffer loss of income due to ECQ.** Due to failure to sell their produce, many farmers and fishers suffered loss of income. Based on the business rapid assessment survey for agriculture and fisheries sector conducted by the TWG on Anticipatory and Forward

Planning, about PhP94.3 million was lost from unsold produce in the country, the biggest chunk coming from Luzon area. Although not as big as the direct losses incurred in Luzon, survey respondents from Western Visayas claim they lost about PhP3.524 million worth of direct losses from unsold produce. Those engaged in high value crops claimed the highest loss at P2.043 million, followed by cereals at PhP0.808 million. Direct losses from fisheries was at PhP460,000, livestock and poultry at PhP213,000.

**Difficulty in accessing affordable, safe and nutritious foods by consumers.** Access to affordable, safe and nutritious foods by consumers was affected with the closure of establishments that serve as channels for agricultural and fishery produce like hotels and restaurants. There were limited wholesalers of fresh fish, vegetables and other agricultural produce, who market their products outside the region due to the cancellation of domestic flights and the ECQ imposed in Metro Manila and other major markets outside the region. Access of fish harvest to cold storage was also a problem because of lack of public transportation.

**Higher cost of production and marketing.** Decreased consumer demand and increased transaction costs will have a knock-on effect that will push the price of agriculture and fishery products up and make them less affordable for poor consumers. The buying capacity of consumers had been limited due to decrease or lack income as a result of job and livelihood losses. Many people employed in the agriculture supply chains, such as fish vendors, processors, suppliers or transport workers will likely be affected.

**Disruptions in skills upgrading of farmers.** There are also other aspects brought about by COVID-19 that adversely affected the AHFF sector. Disruptions in skills upgrading programs for farmers due to the required physical distancing and cancellations of mass gatherings to prevent the spread of the disease are limiting factor that will affect production as farmers' knowledge and skills development is hindered.

## Industry and Services

Like all other sectors of the economy, the operations in the Industry and Services sectors were disrupted by restrictions on the mobility of workers, as well as fluctuations in demand due to the COVID-19 pandemic. While many employees welcome the flexibility and safety of work from home, MSMEs and other service and industry establishments were largely unprepared due to absence of appropriate health defense systems, mechanisms among MSMEs and other industry and services establishments, lack technology-enabled health and safety measures (i.e. thermal scanner). The unavailability of local testing center and inadequate supply of PPEs and other safety mechanisms were not immediately addressed.

Majority of the MSMEs and other industry and services establishments are dependent on direct cash-based transactions and are not digitally-equipped to engage in e-commerce or immediately migrate to online transactions, cashless payment or e-banking. Businesses were also discontinued due to the absence of alternate products and services for online markets and other e-commerce options. These led to closures and non-operations of MSMEs and industry and services establishments that eventually resulted to loss of income and employment of industry and services providers.

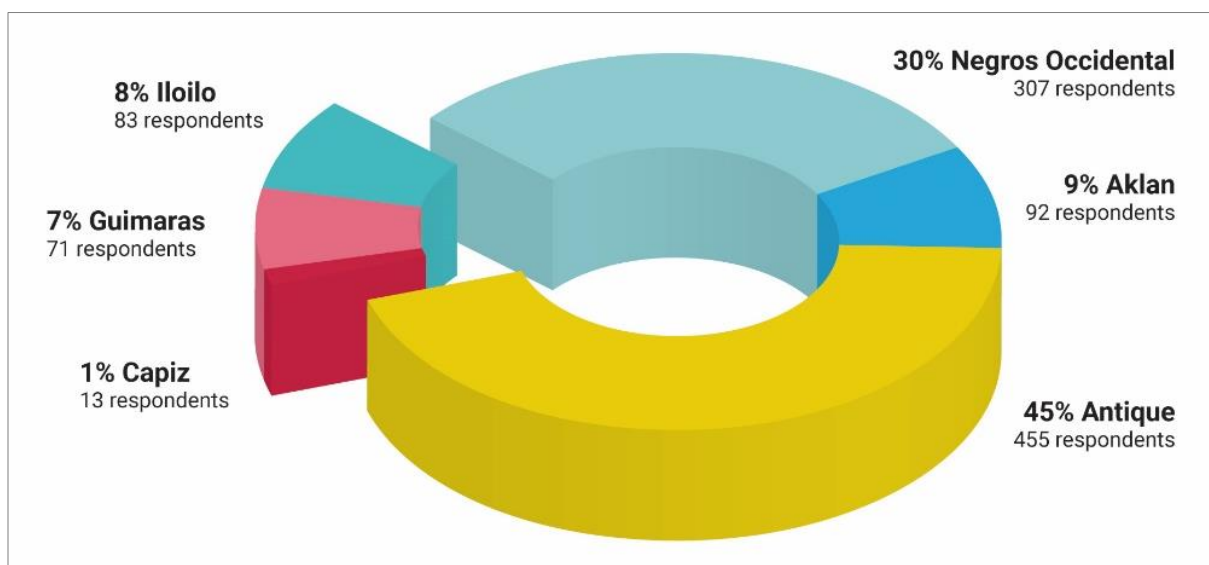


## Trade and Industry

The MSMEs in the region were caught flat-footed when the pandemic struck and the issuing ECQ was implemented. As of April 30, 2020, a total of 23,974 establishments closed their operations either partially or totally. There were tremendous losses of income among MSMEs that sold their products in OTOP (one town-one product) hubs or consolidators in the tourist areas of Boracay and Kalibo, which in normal times, would generate an average monthly sales of PhP 693,000 and PhP 459,000, respectively.

To determine the effect of COVID-19 to MSMEs in Western Visayas, DTI Region VI conducted an online quick survey from April 19 to 30, 2020 covering 1,021 respondents<sup>10</sup>. Of the total respondents, 463 are in retail, 173 in processing, 221 in services, and 164 are engaged in other enterprises.

**Figure 11. Status of Operation of MSMEs, by Status and by Nature of Business**

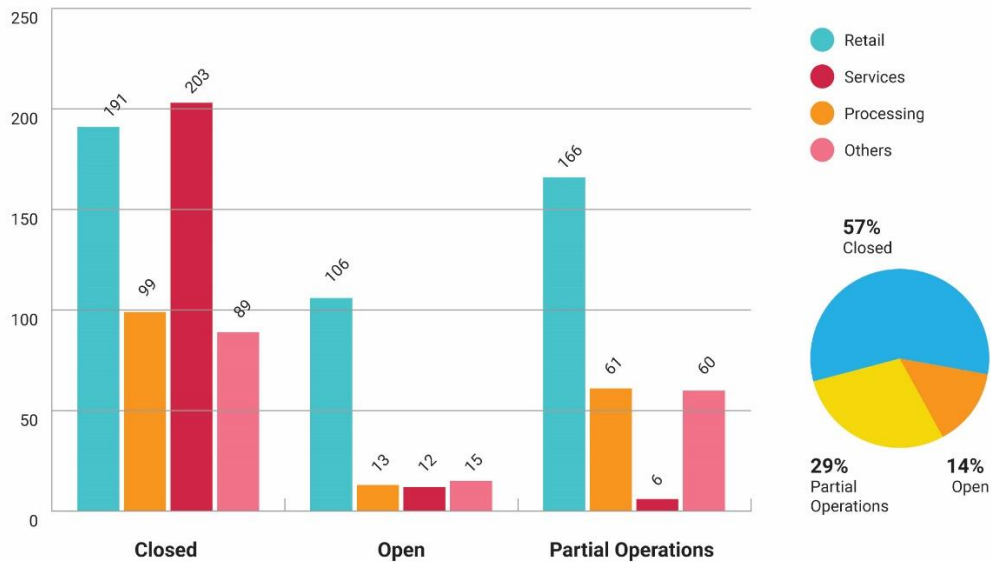


Source: Department of Trade and Industry VI

**Many MSMEs were closed or partially opened during the ECQ.** The survey results showed that the 57 percent of the MSMEs were closed. Twenty-nine percent managed to have partial operations and only 14 percent remained open. The highest number of closures are in the service business at 35 percent, closely followed by retail business (33%), processing (17%) and other types of businesses (15%).

<sup>10</sup> Of the respondents, majority or 904 (89%) belong to the micro category, with less than PhP 3 million capital, 74 (7%) are small enterprises with PhP 3 to 15 million capital and 43 (4%) are medium enterprises with PhP 15 to 100 million capital.

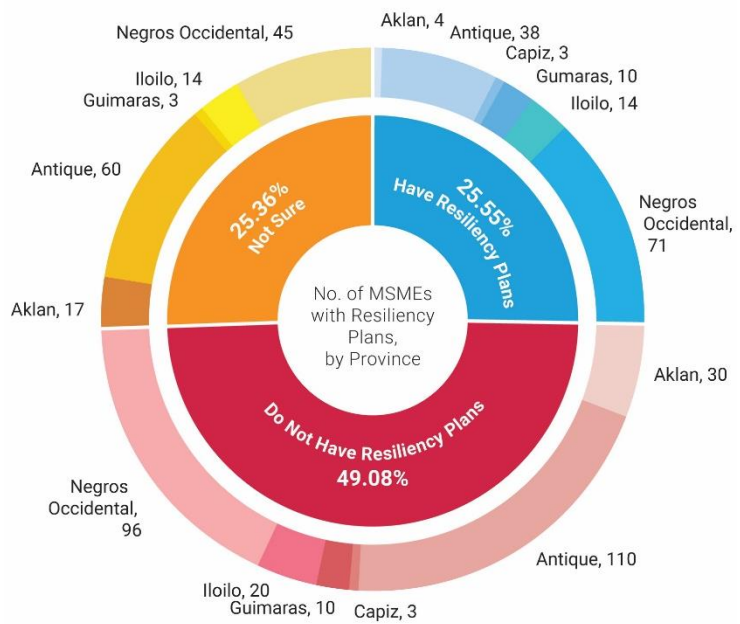
**Figure 12. Status of Operation of MSMEs, by Status and by Nature of Business**



Source: Department of Trade and Industry VI

**Majority of MSMEs do not have business resiliency or continuity plans.** In terms of preparedness of MSMEs against the health emergency, results showed that only 27 percent of the respondents said they have a business resiliency plans while majority or 50 percent do not have business resiliency or continuity plans that will establish an effective risk and contingency system against COVID-19. Ideally, the business continuity plan will have a risk profile of the enterprise and the level of vulnerability to COVID-19 in terms of its impact on people (lives of workers and family members), processes (enterprise operations), profits (revenue generation) and partnerships (enabling environment to carry out business operations). Twenty-three percent of MSME respondents answered they may have a resiliency plan as they responded ‘maybe’.

**Figure 13. Distribution of Respondents, Quick Survey on Effect of COVID-19 on MSMEs**



Source: Department of Trade and Industry VI

**Loss of income especially among Wearables and Home-style businesses.** Among the identified industry clusters, loss of income is highest for wearables and home-style businesses. These clusters, which comprise the biggest chunk of the region’s MSMEs, include the basket makers, weavers, garment makers and home decor producers in Aklan and Antique. In terms of income loss and in the number of MSMEs who stopped operation, also greatly affected are those belonging to the processed fruits and nuts cluster.

*Table 3. Impact of COVID-19 by Priority Cluster*

Priority Cluster	Total No. of Respondents	Loss of Income	Stopped Operation	Laid-Off Employees	Others
Bamboo	20	19	11	4	1
Cacao	18	16	12	7	1
Coffee	27	21	15	6	2
IT-BPM	23	15	4	2	8
Processed Fruits and Nuts	42	32	23	3	4
Wearable and Homestyle	76	57	47	10	3

Source: Department of Trade and Industry VI

**MSMEs’ recovery need government support.** On the timeline to resume business operations and the required interventions by MSMEs in order to recover once the ECQ is lifted, 81 percent of the respondents preferred to resume operations immediately, 15 percent will be ready to resume within three months and 4 percent said they can resume within six months or more. Most MSMEs are classified as single proprietorship who are saddled by problems of lack of raw materials, market linkages, training for new technology, and working capital.

*Table 4. Number of MSMEs, by Nature of Business and by Type of Needed Assistance to Recover from the Pandemic*

Nature of Business	Assistance Needed to Recover from Pandemic				
	Working Capital	Raw Materials	Market Linkages	Training for New Technology	Others
Retail	11	255	192	85	1
Services	5	131	130	72	4
Processing	2	123	126	70	4
Others	156	91	74	44	2
<b>TOTAL</b>	<b>174</b>	<b>600</b>	<b>522</b>	<b>271</b>	<b>11</b>

Source: Department of Trade and Industry VI

The MSMEs identified assistance they need from government to recover from the pandemic. These include access to working capital, raw materials, market linkages, training for new technology. Specifically, they need support for the enhancement of productivity and constant production innovation, supply of goods for e-commerce option, availability and access to internet to market the goods, Food and Drug Administration (FDA)-ready facility, services for essential related business, opportunities in government projects collaboration, resumption of delivery of suppliers, availability of proper hygienic uniforms and safe transportation services, follow-up for P3 conduit application and the procurement of safe and protective packaging materials and supplies.

Some retail MSMEs and manufacturing establishments were allowed to continue operations if they could implement precautionary measures such as wearing of face mask and in ensuring the availability of facilities for hand sanitation at the entrance and in strategic areas of the establishments. MSMEs also restricted the number of customers allowed to enter the establishments at a particular time to ensure physical distancing. Some utilized a skeletal workforce and provided their staff with temporary accommodation or a reliable shuttle service to homes within the immediate vicinity.

In order to facilitate and ensure the continued supply of basic goods and services to the public, strategic interventions were implemented by various government agencies.

**Issuance of passes to expedite the smooth delivery of goods and raw and packaging materials.** DTI issued a total of 6,102 ‘Do Not Delay Pass’ to 1,860 companies as of April 30, 2020. The passes will facilitate the smooth entry and exit of vehicles transporting essential goods at the borders. To avert overpricing of basic goods, DTI conducted daily price monitoring throughout the region to ensure compliance by establishments of the Price Act (RA 7581), particularly on the Automatic Price Control provision.

**Concessions on residential and commercial rents.** To ease the burden of MSMEs on payment of rentals during the ECQ, DTI issued Memorandum Circular No. 20-12 or guidelines on the concessions on residential and commercial rents of MSMEs. This is to enforce measures to allow a 30-day grace period for residential rents whose due date are within the period of ECQ, without incurring interests, penalties, fees and other charges.

**Loan assistance for MSMEs.** Benefits were provided under the Joint Memorandum Circular No. 1 prescribing Social Amelioration Programs (SAP) for people affected by COVID-19. Specifically for MSMEs, assistance will be provided by the DTI after the ECQ, through its financing arm, Small Business (SB) Corporation. The COVID-19 Enterprise Rehabilitation Facility, under the *Pondo sa Pagbabago at Pag-asenso* (P3-ERF) loan assistance will offer a loanable amount of a minimum of PhP10,000 and a maximum of PhP 500,000. As of May 8, 2020, a total of 464 inquiries on P3-ERF from potential applicants were responded by the SB Corporation and applications are being processed.

**Table 5. Status of Social Amelioration Program for MSMEs by Province, Region VI**

Region / Province	No. of P3-ERF Inquiries <sup>a</sup>	Total Processed Loan Moratorium	Number of Processed Loan Moratorium on Payment/Deferred				Total
			Retail		Wholesale		
			Regular	P3	Regular	P3	
Aklan	55	64	1	1	0	0	2
Antique	6	43	0	2	0	0	2
Capiz	113	79	1	3	0	0	4
Guimaras	17	54	0	0	0	0	0
Iloilo	149	152	1	1	1	1	4
Negros Occidental	124	159	2	4	0	0	6
<b>Region VI</b>	<b>464</b>	<b>551</b>	<b>5</b>	<b>11</b>	<b>1</b>	<b>1</b>	<b>18</b>

Note: <sup>a/</sup> Inquiries from potential applicants as of May 8, 2020

<sup>b/</sup> Applications processed and approved (Regular and P3) on Payment/ Deferred (as of May 13)

Source: SB Corporation and Department of Trade and Industry VI

The SB Corporation also grants moratorium on loan payments for existing borrowers. Affected borrowers shall be allowed to pay only their interest due for the succeeding six months. Interest rate will continue to accrue during the moratorium. The term of their loan shall be extended based on the number of months covered by the moratorium. As of May 13, a total of 551 applications for loan moratorium (on payment / deferred) was processed and approved for both Regular and P3 applicants.

### Tourism

**The tourism industry was put into a standstill by the COVID-19 pandemic.** The first five months of the year are usually the time when the tourism industry draws more visitors to the region, starting with the religious festivals in January up to the peak of summer season in the month of May. Unfortunately, these were the very months when community quarantines were imposed in the region and throughout the country to limit transmission. The suspension of travels by air, land and sea and imposition of border controls by LGUs stopped people from visiting the many and varied tourist attractions of the region.

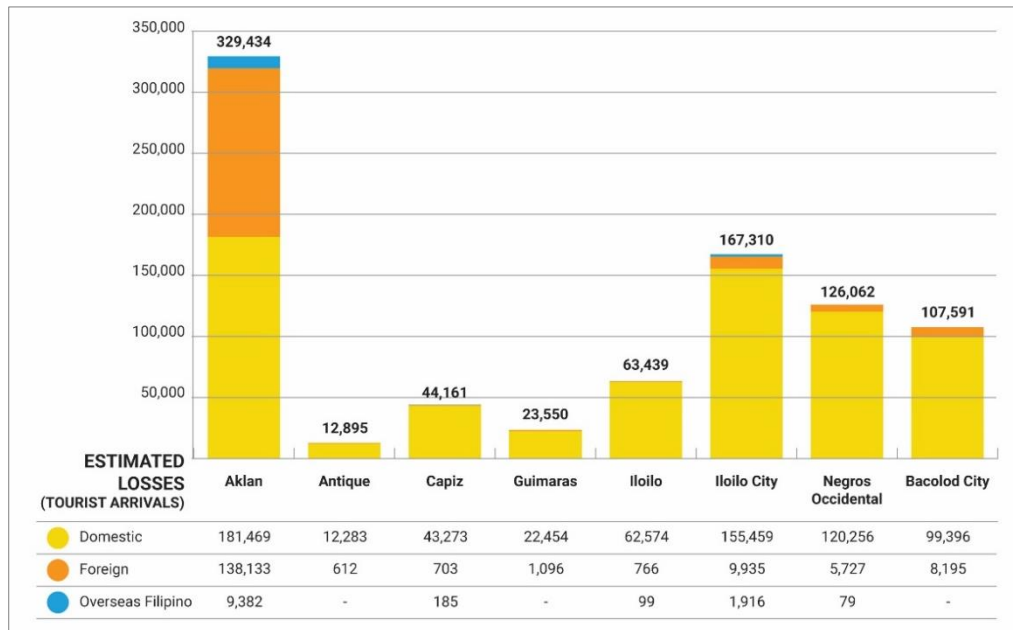
Local and foreign tourists visit Western Visayas for its many island destinations such as Boracay Island in Aklan, Isla de Gigantes in Iloilo and Mararison Island in Antique. Tourists also flock to the region for the many available tourism routes and packages offered such as the island hopping in the Carbin Reef and Suyac Island in Sagay City, Negros Occidental and in Isla Naburot, Guimaras.

There are also available river tours in Cadimahan-Libotong and Palina Greenbelt Ecopark in Capiz, the themed-accommodation packages in the beach resorts of Sipalay City, Negros

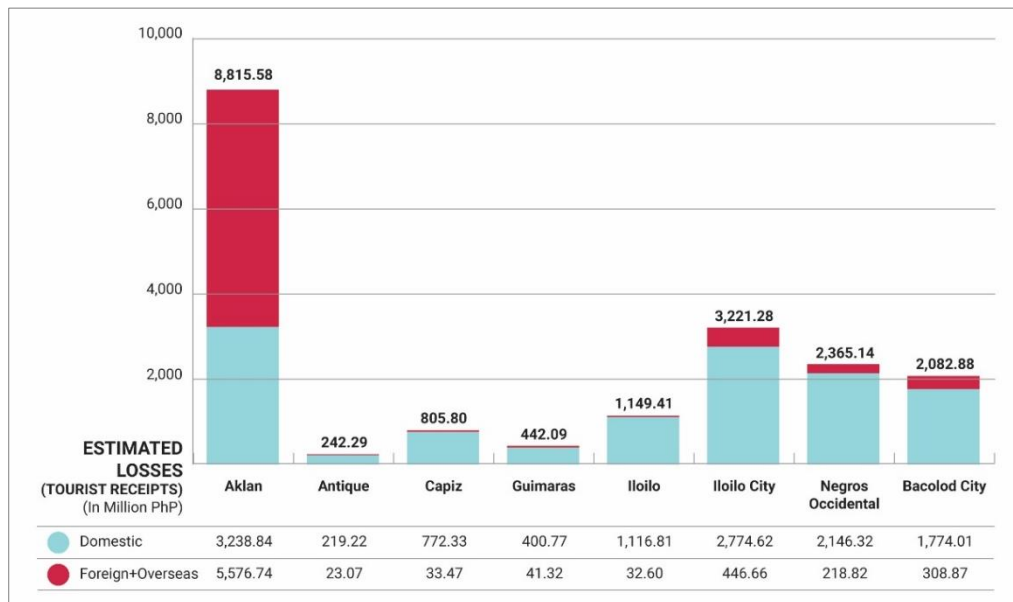
Occidental, the eco-adventure tour experience in Mambukal, Murcia, Negros Occidental and Padlusan Adventure Park in San Remigio, Antique.

**Potential tourism receipts were not realized due to ECQ.** With the implementation of the ECQ due to the COVID-19 pandemic, the expected 875,000 tourists that would have likely visited the region from March 17 to April 30, 2020 was not realized. This could have earned potential tourism receipts of PhP 19 billion.

*Figure 14. Estimated Losses in Tourist Arrivals by Province/HUC, Region VI*



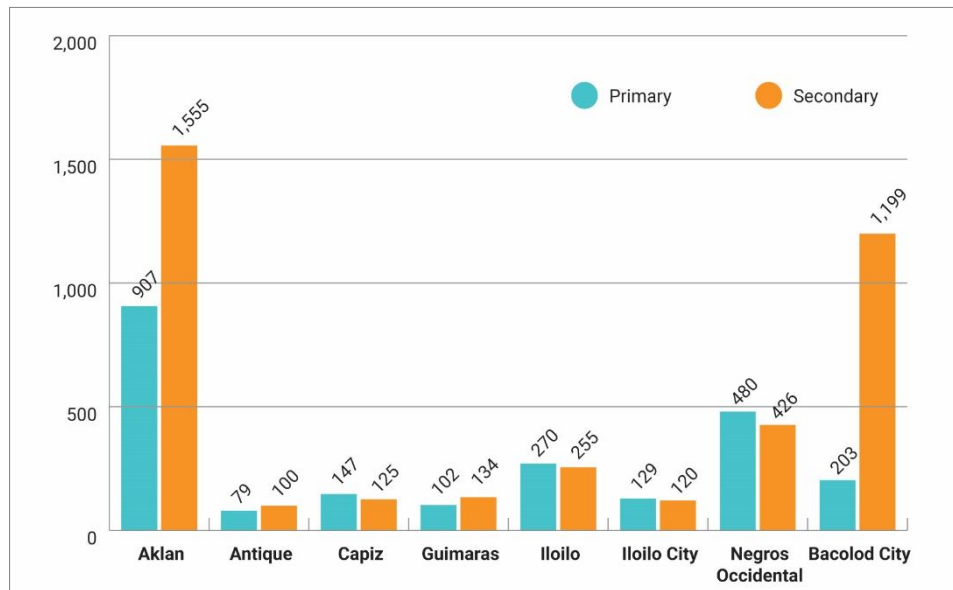
*Figure 15. Estimated Losses in Tourist Receipts by Province/HUC, Region VI*



Source: Department of Tourism VI

**At least 30 percent of tourism enterprises were adversely hit by the pandemic.** Based on the latest inventory of DOT-VI, there are 6,231 primary and secondary tourism enterprises in Western Visayas, the highest number of which are in Aklan and Bacolod City.

**Figure 16. Number of Primary and Secondary Tourism Enterprises, Region VI**

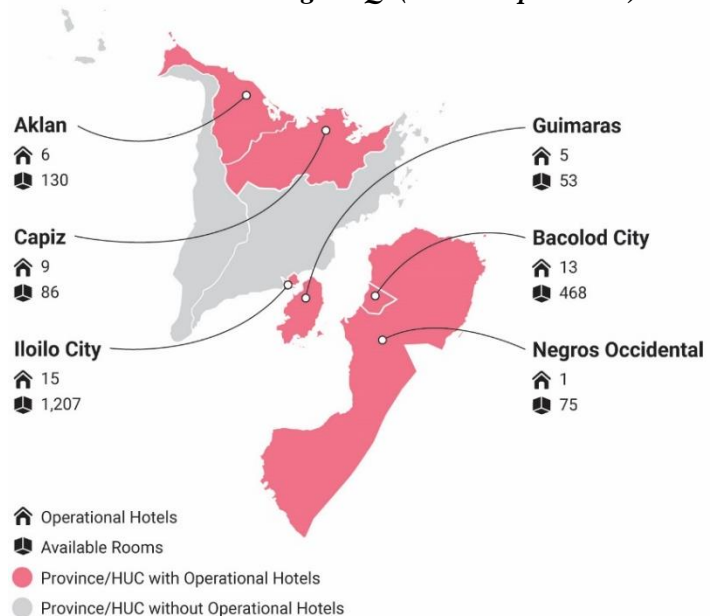


Source: Department of Tourism VI

Of the 6,231 enterprises, a total of 1,815 tourism enterprises were hardly hit by the pandemic. Based on the survey conducted by DOT-VI, out of 651 accommodation establishments, only 48 were operational during the implementation of the ECQ in March to April. Some establishments with 2,019 available rooms served as temporary accommodation for health workers, on-duty staff of Business Process Outsourcing (BPO) companies, long staying tourists, walk-in guests, and stranded OFWs.

**Other tourism industry players were also affected by pandemic.** Aside from tourism establishments, other affected primary tourism industry players are the 76 travel

**Figure 17. Number of Operational Accommodation Establishments during ECQ (March-April 2020)**



Source: Department of Tourism VI

and tours businesses, 64 tourist transport operators, and 218 other tourism enterprises classified as MICE facilities, eco-tour facilities, and tour guiding services.

Secondary tourism enterprises in the region were also affected by the pandemic. These include the 121 health and wellness services and 685 enterprises such as farm tourism sites, shopping malls, specialty shops, museums, galleries, restaurants, tourism recreational facilities, and tourism entertainment complex.

**Tourism workforce were displaced.** With barely no activity in the tourism industry, workforce in accommodation establishments, restaurants, and tourist transport service have lost their income. There are 149 DOT-accredited regional and community tour guides that were displaced due to the pandemic and most of them are not qualified to avail of DOLE's CAMP and TUPAD program because they are free-lance/informal workers.

**Repatriation assistance and transfer services were provided to stranded tourists.** The evacuation operations initiated by the DOT-Region VI, in cooperation with LGUs and the foreign embassies, served 3,231 stranded tourists in the region as of May 27, 2020. These included 2,838 foreign tourists and 393 domestic tourists. Forty-five rescue missions were mounted in selected gateways including Caticlan, Iloilo City, Bacolod/Silay, and Sipalay.

With no commercial flights available, DOT-VI, with the assistance of the LGUs, initiated a total of 57 flights for stranded tourists in Panay and Negros Occidental and facilitated their transfer to designated airports in Cebu and Dumaguete where they could be repatriated to their home countries.

On top of the repatriation flights and transfer services, DOT-VI also distributed tourist care kits and vouchers to stranded foreign tourists and provided a total of PhP 500,000 cash assistance to 250 stranded domestic tourists at PhP 2,000 per person. However, despite the several rescue missions implemented there are still remaining 1,023 stranded tourists in the region, 653 of which are foreign and 370 are domestic (as of May 27, 2020).

### *Science and Technology*

During the ECQ, the Office of the Undersecretary for Regional Operations of the DOST conducted a nationwide online survey on the situation of the MSMEs that are beneficiaries of the DOST Small Enterprise Technology Upgrading Program (SETUP). The firms were asked about the status of their operations and on their perceived capability to meet the refund requirements of the program during the ECQ.

**Economic and opportunity losses were experienced by SET-UP MSMEs.** The survey shows that although majority of the firms stopped operating, more than 50 percent of those that continued operating reported that their market reach was limited to their locality although a very small percentage still managed to bring their products outside of the regional boundaries. A majority of the firms responded that they may not be able to meet the refund requirements of the program for the next three months.



**Program implementation for 2020 were put on hold.** Before COVID-19, the implementation of programs and projects targeted for 2020 were on schedule. These activities were put on hold when the ECQ was implemented last March 2020.

**MSMEs need to migrate online to adjust to changes in product priorities and consumer preferences.** Restrictions on the movement of people and business operations in response to the outbreak of Covid-19 are changing the way people are consuming and paying for goods and services. Adherence to social-distancing measures is increasing demand for electronic payment (e-payment) for services such as food delivery and utilities, especially as physical money has been identified as a vehicle for the spread of viruses and bacteria.

There are technological challenges as well, such as the increased demand for health-related technologies and innovations and those related to increasing the shelf-life of food products. Even as consumers are changing their behaviors and flocking online, small businesses likewise need to migrate online if they are to keep afloat. Interventions should be provided in allowing small businesses to ease themselves into the digital world while helping them adjust to and overcome the challenges of digitalization. Among others, these measures will aid MSMEs in engaging with customers, managing transactions from safe distances as well as delivering goods and services efficiently, hence allowing them to tap into new revenue streams and address various pain points including cost reduction.

**Science and technology innovations were developed to mitigate COVID-19 impact.** The UP-NIH/DOST COVID-19 test kits, RxBox, FASSSTER, TANOD COVID and other contract tracing applications have helped mitigate the debilitating impacts of COVID-19 and other possible societal problems in the future.

### *Financial Services*

Financial and banking processes are also hampered on the onset of the particularly on the delivery of essential services of banks such as deposits and withdrawals, processing of bank loans, and other monetary transactions and financial services for the public. Some challenges the banking industry need to address during the pandemic are the following:

**Increased cash withdrawals by banks.** Due to high demand for cash from various stakeholders, there was a sudden increase of cash withdrawals by banks from the Bangko Sentral ng Pilipinas (BSP). A huge amount of withdrawal was accounted to the government banks in order to implement the government financial assistance programs.

**Safety threats and digital risks for banks.** Various risks during the period of pandemic was also noted by BSP. There is the probability of contamination of bank cash that are rolled in the market. The possibility of local transmission of COVID-19 also puts the health and safety of bank personnel and clients at high risk. Probable digital risk in the banking industry is also inevitable due to the proliferation of COVID-19 pandemic-themed malicious websites, phishing and digital fraud that may compromise bank data information and privacy of depositors.

Unavailability of public transportation and insufficient supplies of PPEs and health protective items, particularly facemasks and sanitizers, also hindered the daily operations of various banks across the regions. Banks are also challenged in providing efficient banking services due to the difficulty in the connectivity of personnel who are in the work-from-home status.

**Cancellation of scheduled activities to avoid mass gatherings.** BSP had to suspend some of its scheduled activities for the year to avoid mass gatherings of people. These include the conduct of Financial Literacy (FinLit) sessions to Comprehensive Social Benefits Program (CSBP) beneficiaries, public information campaigns (PIC) at the LGUs, and the BSP 2nd quarter 2020 Business Expectations Survey (BES) which is one of the major basis of the Monetary Board (MB) in the formulation of monetary policies.

Nonetheless, interventions were undertaken to ensure the continuous provision of the necessary bank services to the public. Local banks in Western Visayas opted for the skeletal workforce and compressed schedule. Protective measures were also implemented by all banks such as installation of protective cover to all bank teller cubicles, ‘No Face Masks, No Entry’ policy, hand sanitation of all incoming clients in the bank premises, and utilization of thermal scanner in bank entrances.

All banks also promoted the utilization of online banking systems for the processing of various bills payment and bank transfers including online processing of loan applications in order to lessen the face-to-face transactions.

## Social Services

### Education and Training

#### *Basic Education*

Public and private schools at all levels up until May 30, 2020 have been ordered closed, affecting 2,046,081 public and private school learners in the region. There were schools which were able to complete their final exams before the imposition of the Enhanced Community Quarantine (ECQ), others were unable to complete the requirements for the school year. Thus, some students lack the required credentials necessary to move on to the next level. While some private schools continued paying the salaries of their personnel, their teachers were no longer paid from April to May because of the ECQ and will not be paid until the opening of the classes.

The pandemic crisis could impact on the education sector in the long run, affecting essential learning competencies of children and youth. The impact of online schooling is expected to be felt disproportionately by learners from poor families who have no access to digital materials and in areas with poor internet connection. The government is currently exploring several learning alternative modes for this group of learners.

The COVID-19 pandemic has redirected basic education operations to adapt with the current health protocols imposed by the government. Department of Education (DepEd) Memorandum No. 43, s. 2020 calls for strict social distancing measures by all its offices and the observance of

health protection measures while delivering essential services, functions and responsibilities, priority programs and projects to achieve the goals of basic education.

**Abrupt closure of school year and cancellation of other scheduled activities.** The postponement of school activities, scheduled trainings, workshops, and seminars, national assessment tests, on-site monitoring, evaluation, validation of programs and other activities reflected in the work plan were among the effects of the pandemic in basic education operations. Official travels, sports events, researches and procurement process were cancelled. This caused delays in the submission of school reports and disruptions of workflow in the regional and division offices. Schools were forced to end the school year earlier with unfinished activities. Graduating students and pupils were promoted to the next grade/year level without holding traditional end-of-school year rites.

**Internet connectivity issues and other concerns of education work force.** Majority of personnel were not able to perform their normal functions except for those identified as essential in the continuity of the overall performance of the agency, like finance and administration divisions. Poor internet connection further constrained the functioning of personnel who were forced to work from home and teachers who needed to comply with school reports. The unavailability of transportation caused difficulty to office personnel who needed to report to their respective offices assigned as skeletal workforce.

**Difficulty in adopting distance and e-learning.** In the case of Western Visayas, distance learning and e-learning were not the preferred choice of teaching and studying. The teachers were not technically, psychologically and educationally prepared to conduct online classes. Weak and expensive internet connection continually beset the region even before the onset of the COVID-19 pandemic due to limited infrastructure support in providing fast, cheap and reliable internet connection.

Most learners, particularly the poor and marginalized are not equipped technologically in shifting to online modes of learning. Families which could barely provide for their educational needs are further burdened by the high costs incurred in accessing internet facilities. In the Philippine context, acquiring good internet connection is not a basic need but rather a luxury to many who could not afford it.

During the quarantine period, the safety of teachers was a paramount concern which significantly affected work performance even in a work-from-home arrangement. Thus, teachers' salaries and other benefits were released in advance to provide them financial support during the quarantine period.

### *Higher Education*

In higher education, class disruptions were also experienced brought about by the abrupt and early closure of colleges and universities.

**Alternative learning strategies were undertaken.** Like the learners in basic education, students of higher education institutions (HEIs) were not able to complete their school

requirements, especially those who are graduating during the quarantine period due to early closure of schools. Alternative learning activities, case studies, assignments and other activities were pursued using multimedia learning and teleconferencing platforms like Gmail, Google Hangouts, Skype, Zoom, and even Facebook. For students and teachers who have limited or no internet connection, phone calls and text messages were helpful in giving and receiving school-related instructions.

Public and private HEIs in the region exercised flexibility in adjusting their respective academic calendar, in deployment of students currently undergoing the National Service Training Program (NSTP), and in offering alternative school-based activities. Alternative options for students undergoing practicum or on-the-job trainings (OJT) were also provided to enable them to complete their required training hours.

Although there were schools who opted to cancel or postpone their graduation ceremonies, majority of the colleges and universities conducted online or virtual graduation ceremonies to avoid mass gatherings and to facilitate the advancement of students to the next level.

**Prolonged quarantine period caused mental and emotional health problems.** Long confinements in dormitories and boarding houses caused anxiety and fear among students and teachers, especially those from outside the region. Also, limited access to public transportation during the ECQ prevented them from going home immediately resulting to being stranded for long periods in Manila, Cebu, Davao and other parts of the region. There are also concerns of mass hysteria in school communities where the spread of fake news in social media and online platforms led to misinformation.

**Spirit of volunteerism prevalent among HEIs.** Private and public HEIs have been active partners of the government during the quarantine period. The SUCs volunteered to produce facemasks and PPEs for health workers and frontliners in the region. Some SUCs, in coordination with the LGUs, also lent their vehicles to transport frontliners, particularly those who had to travel from their houses to their work places. Other SUCs raised funds to provide food packs to stranded students and faculty. Some public and private schools offered their facilities, resources and experts to put up an accredited COVID-19 testing center in the region.

**Policy guidelines were issued to HEIs to address COVID-19 challenges.** The Commission on Higher Education (CHED) issued the following guidelines to both public<sup>11</sup> and private higher education institutions (HEIs) to initially address the challenges posed by the pandemic:

- Advisory No. 1 dated February 12, 2020 calling for massive information campaign, prevention and control, screening, athletic and other concerns, travel, creation of in-house information resource units.
- Advisory No. 2 dated March 11, 2020 calling for the creation of the preparation of an HEI Emergency Plan, suspension of classes in all levels, assistance to students, teachers, staff and HEI administrators who are abroad, and the guidance for HEIs with identified cases of COVID-19 in the university's respective community.

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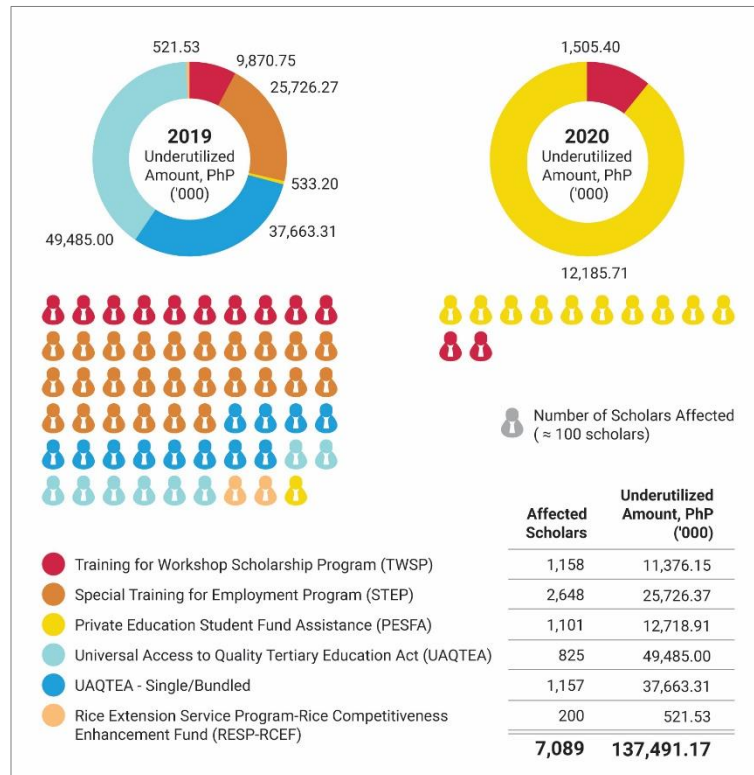
<sup>11</sup> Public HEIs include SUCs and LUCs

- Advisory No. 3 issued on March 11, 2020 supporting the Resolution of the IATF on the management of infectious diseases invoking the exercise of academic freedom and contextual realities of individual educational institutions.

### Training

**Non-completion of trainings/scholarship programs on Technical and Vocational Education and Training (TVET).** The scheduled trainings for CY 2020 for TESDA scholars were postponed due to the pandemic. A total of 7,089 scholars enrolled in 2019 and 2020 were affected and not able to complete their scholarship programs when the quarantine period was implemented. These include Training for Workshop Scholarship Program (TWSP), Special Training for Employment Program (STEP) and Private Education Student Fund Assistance (PESFA) as well as trainings funded under the Universal Access to Quality Tertiary Education Act (UAQTEA) and the Rice Extension Service Program-Rice Competitiveness Enhancement Fund (RESP-RCEF). This resulted to the underutilization of PhP137 billion worth of government investment for technical skills and development in both 2019 and 2020.

**Figure 18. Number of TVET Scholarship Programs and Scholars Affected by COVID-19, 2019 and 2020**



Source: Technical Education and Skills Development Authority VI

### Social Protection and Housing Services

**Pandemic have further limited access to livelihood and basic social services.** The pandemic affected the most vulnerable groups of the society such as children, women, elderly, persons with disabilities, indigenous peoples, informal settlers, OFWs, IPs, farmers, fisherfolks, drivers of public utility vehicles, formal and informal workers and other sectors. Access to livelihood and basic social services like health, education, food and nutrition, water and sanitation, information, communication and transportation was limited.

The elderly has the highest direct risk during the COVID-19 pandemic because of the presence of co-morbidity factors usually present in their older ages. Children, persons with disabilities,

the homeless, the people in institutions (care homes, special needs facilities, prisons, migrant detention centers) will mostly affected by the disrupted health and social services.

Women who are at work are likely to lose income because they have to provide childcare during school closures and care for the elderly. Those, whose source of livelihood were affected by the pandemic, will be susceptible to financial insecurity, poorer health and anxiety. The IP communities are especially at risk because most of them are living in extreme poverty and are more likely to suffer negative outcomes from infectious diseases. Many of them are already affected by malnutrition, pre-existing health conditions, and lack of access to quality healthcare, clean and potable water, internet, power, etc. because of their inaccessible location.

**Operational challenges hampered the efficient distribution of emergency subsidies to poor beneficiaries.** There are around 1.8 million poor and low income families in Region VI, including the Pantawid Pamilyang Pilipino Program (4Ps) beneficiaries. The DSWD, through its Social Amelioration Program (SAP), a cash-based emergency subsidy for Filipino families whose lives were affected by the enhanced community quarantine against the spread of COVID-19, has allotted funds for those who have no capacity to feed their families. The DSWD in coordination with the LGUs, Philippine National Police (PNP) and Armed Forces of the Philippines (AFP) distributed the cash assistance to qualified beneficiaries. A total target of 1,476,144 SAP beneficiaries (including 4Ps) received financial aid worth PhP 8.422 billion.

Some of the major challenges in the distribution of cash assistance were the discrepancies in figures between the LGUs and the DSWD, because the latter has been using the 2015 population census. Unclear SAP guidelines, unavailability of public transport service, weak communication system, politicking, security threat to personnel were among the reasons for the delayed distribution of SAP in some LGUs. The confusion on the identification of beneficiaries was addressed by concerned units/agencies through validation of qualified beneficiaries. Other issues raised were the alleged irregularities on distribution of cash aid by some local government units<sup>12</sup>, social distancing not practiced during SAP distribution, misuse of SAP assistance, etc. Complaints were forwarded to the Criminal Investigation and Detection Group (CIDG-6) of PNP for formal investigation. According to DILG, charges will be filed for violation of Republic Act 3019 or the Anti-Graft and Corrupt Practices Act, RA 11469 or the Bayanihan to Heal as One Act, RA 6713 or The Code of Conduct and Ethical Standards for Public Officials and Employees and falsification of public documents.

**Displaced workers due to temporary closure/non-operation of business and other establishments were provided government interventions.** Thousands of people from the workforce were placed on forced leave, affecting their income and livelihood upon the lockdown and imposition of ECQ. In Western Visayas, 3,761 establishments implemented either temporary closure or flexible work arrangements which affected 72,313 workers. Most of these affected workers are in education, manufacturing, and hotel, restaurant and tourism-related sectors. Non-operation of some essential establishments such as supermarkets, groceries, drugstores, etc. have affected workers' access to basic goods and services during the lockdown.

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<sup>12</sup> News published by Philippine Star "Negros village chief charged over SAP anomaly" dated May 9, 2020

The Department of Labor and Employment (DOLE), through its Department Order 209, released the guidelines on COVID-19 Adjustment Measures Program (CAMP). The program is a one-time financial support initiative provided by DOLE to affected workers<sup>13</sup>, amounting to PhP 5,000. As of May 14, 2020, a total of 1,412 establishments have already been assisted covering 23,867 employees all over the region.

For the informal sector, DOLE implemented the TUPAD #BKBK (*Tulong Panghanapbuhay sa Ating Displaced/Disadvantaged Workers Program #Barangay Ko, Bahay Ko*) Disinfecting /Sanitation Project. This is intended for workers in the informal sector whose livelihoods are affected by the community quarantines imposed by the local government units in the fight against coronavirus disease. As of April 30, 2020, a total of 12,601 beneficiaries were already assisted in Region VI.

**Emergency/Loan assistance and moratoriums were extended to private and government workers.** The Social Security System (SSS) has mobilized its funds to cover unemployment benefits for dislocated workers. It has offered calamity loans of up to PhP 20,000 (or equivalent to one-month salary) to its affected members during the ECQ starting April 24, 2020. An amount of PhP 20.4 billion was already allotted for the said loan facility nationwide which will cater to SSS members who lost their jobs and/or other sources of income while under the ECQ. Qualified borrowers will have to pay the loan in 27 months, inclusive of a 3-month moratorium period, at 10 percent interest per annum computed on a diminishing principal balance. In addition, SSS will also waive the one percent service fee and to temporarily hold payments of housing and pension loans.

The Government Service Insurance System (GSIS) has extended its loan programs for the affected government employees and retirees. It also granted a moratorium on loan payments for its members and pensioners, including housing loan amortization of borrowers. Collection of loan payments due for the months of March, April and May 2020 will be deferred without penalty or additional interest but collection of payments will resume on June 1, 2020.

The Home Mutual Development Fund (HDMF) or the Pag-IBIG has extended cash loans to its members during the quarantine period. The agency's cash loans, also known as short-term loans (STL), are composed of the Calamity Loan (CL) and Multi-Purpose Loan (MPL). In light of the pandemic, the agency acted quickly to move the application process for its short-term loans online. It also granted a 3-month moratorium on all loan payments amid COVID-19 quarantine from March to June 2020 for their eligible members on housing loan and short-term loans.

The National Housing Authority (NHA) has suspended its collection of amortization or lease payments from residential account holders, individual accounts and community association account holders in all its existing projects for three months without incurring delinquency or additional interest charges.

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<sup>13</sup> Affected workers are those from the formal sector who have suffered interruption of wages/income during the ECQ. These are also employees in a flexible work arrangements enforced by their employers such as reduced work hours/days, rotation of workers, or on forced leave.

**Displaced returning Overseas Filipino Workers (OFWs) and Locally Stranded Individuals (LSIs) availed of government assistance.** As of May 13, 2020, there were 300 repatriated OFWs, 278 of them were from Manila and 22 from Cebu. However, there are still thousands of residents of Western Visayas that were displaced and are stranded in Manila and other parts of the country. These residents would require support to enable them to return and recover their livelihood. They also need to undergo quarantine procedures before they could be allowed to go home to their families to avoid contamination. As of May 13, there were 13 repatriated OFWs who have been confirmed positive cases of COVID-19.

The Overseas Workers Welfare Administration (OWWA), with assistance from the Bureau of Quarantine (BOQ) and the DOT, have already set guidelines/protocol about the returning of OFWs, including policies on RT-PCR testing prior to travel of stranded individuals and repatriates. The OWWA has provided assistance to families left behind by OFWs who are currently out of work abroad. The LGUs referred the OFWs to DOT and DOH to assist them in undergoing RT-PCR tests and be brought back to the region.

Land- and sea-based OFWs, whose employments were affected by the COVID-19 global pandemic, can avail of a one-time financial assistance of PhP 10,000. The DOLE has already prepared the guidelines of its DOLE-AKAP assistance program for OFWs to ensure effective and streamlined implementation. The DOLE-AKAP will cover regular/documented OFWs as defined in the 2016 Revised Philippine Overseas Employment Administration (POEA) Rules and Regulations. Balik-Manggagawa who are unable to return to host country in view of lockdown due to COVID-19 are also entitled to receive the PhP 10,000 assistance.

Locally Stranded Individuals from other areas of the country were provided with food assistance and temporary shelters. The government facilitated their RT-PCR tests and return to the region using various modes of transport.

**Informal settlers in slum areas and socialized housing/relocation sites are vulnerable to COVID-19 contamination.** Despite the ECQ guidelines requiring everyone to stay at home to prevent contamination, implementation of physical distancing was hardly implemented by the most households living in informal settlements, majority of which are located in the highly urbanized cities of Iloilo and Bacolod. Informal settlements are usually crowded and squalid, where houses are sub-standard and are built close to each other. This makes it difficult for residents to safeguard themselves against getting infected.

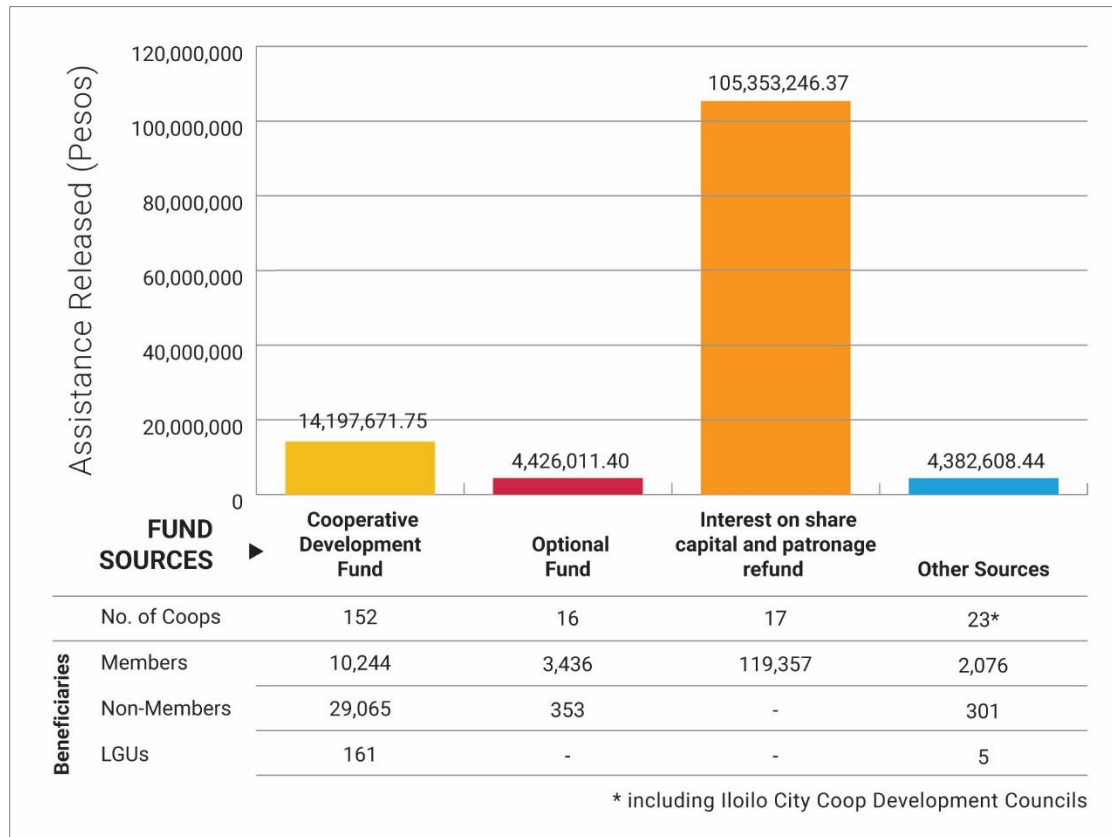
The situation is aggravated by the lack of access to basic amenities like sanitary toilets and clean water. In socialized housing communities, especially in relocation sites, the housing units are small (22 square meters on the average), making it almost impossible to observe physical distancing.

**Assistance to members of cooperatives.** The Cooperative Development Authority (CDA) has 1,069 operating cooperatives in the region with 501,612 members who were also affected by the pandemic. As of May 12, 2020, a total of 135,113 cooperative members, 29,719 non-members and 166 LGUs and hospitals have availed of the assistance provided by 208 cooperatives in the region through their cooperatives' funds amounting to PhP128.36 million. These were used to



purchase food packs, rice and other essential items and were distributed to the cooperative members, frontliners and to the vulnerable sectors of the community.

**Figure 19. Number of Cooperatives and Beneficiaries Assisted by the CDA (As of May 12, 2020)**



Source: Cooperative Development Authority VI

**The operations of the cooperatives were constrained during the pandemic.** The cooperatives find it difficult to access the programs and projects being offered by partner-agencies as well as in marketing or transporting their products. They could not conduct regular meetings, assemblies, and other gatherings because their members find it difficult to participate in these activities because of the lack of public transportation and other restrictions imposed by the ECQ. These also forced them to cancel scheduled capacity building program and livelihood activities. The constraints also resulted to delayed submission of mandatory reports.

**Borrower’s delinquency in housing loan amortization resulted to low collection efficiency and non-performing loans.** Despite the three-month moratorium in loan payments, there are some housing loan borrowers who lost their income and livelihood and will likely remiss in the payment of loan amortization. The worst case scenario may result to foreclosure of assets of borrowers or increase in non-performing loans.

**Slowdown in housing-related transactions.** No housing related transaction involving the issuance of all types of permit, certificates of registration, licenses to sell, development permits

on condominium, certificates of completion, site zoning certifications, registration of real estate brokers and salespersons and mortgage clearances was conducted starting April 2020 when community quarantine was implemented.

The liquidity crunch in banking and non-banking financial companies will likely impact on construction demand. There will be lower demand in the housing sector as people will likely refrain or will not prioritize borrowing for housing but will give priority to goods and services essential for survival during the pandemic.

The stringent border restrictions and work stoppage disrupted the production and delivery of construction materials which will likely result to delay in the resumption of construction activities and increase in cost of construction supplies and materials.

## Infrastructure and Transport

The COVID-19 pandemic has adversely affected the region's transportation industry, leading to cancellation of domestic and international flights, no jeepney and bus services on the streets, decline in ship calls, and reduction in volume of cargoes and passengers. Airlines experienced sudden increases in requests for refunds and no-shows at the onset of the pandemic. To avert the entry of imported cases of COVID-19, the government imposed travel bans to and from China, Hong Kong and Macau on March 13, 2020. In Region VI, local government units issued Executive Orders imposing restrictions in air, sea and land travels in a bid to protect their areas of jurisdiction from the entry of the virus as early as February 26, 2020 .

The recovery plan for infrastructure and transportation is intended to address the weaknesses in the sector that hampered the efficient delivery of goods and services and movement of people by air, sea and land, especially with border controls and other restrictions imposed during the pandemic.

### Seaports and Airports

#### Seaports

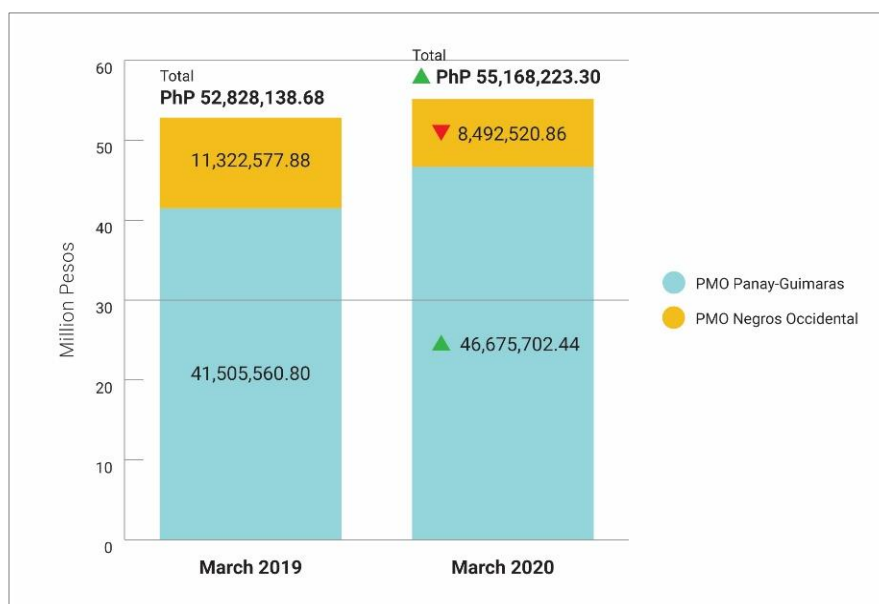
The strict border controls issued by the LGUs affected the operations of 4 base ports, 11 terminal ports, 13 other government ports, 2 LGU ports and 28 private ports. Among these, 8 ports and 2 private ports have roll-on/roll-off (RORO) facilities.

**Port operations continued despite the lockdown.** Although the enhanced community quarantine (ECQ) was declared in the region, port operations still continued, though limited. The discharging of cargoes was slower because of curfew and strict implementation of truck bans by the LGUs. Also, turn-around of cargo ships was longer due to the practice of requiring container vans to be filled-up first before they are shipped. Port management likewise added health and sanitation precautions due to COVID-19. For the safety of the staff, employees were allowed to work from home. These measures hampered port operations given that only a skeletal force was providing the manpower back-up for all port transactions.

**Despite travel restrictions, port revenues still increased.** During the 60-day lockdown, the frequency of RORO trips decreased by 75 percent due to limitations in rolling cargoes and no passengers were yet allowed to travel. A comparison of data on port revenues generated from March 2019 and March 2020 showed that despite the restrictions imposed, total port revenues for Western Visayas still managed to increase by 0.04 percent with Panay/Guimaras PMO having a positive variance of 0.12 percent. A significant decrease in revenue of 24.99 percent, however, was noted in Negros Occidental.

The increase in revenues generated by PMO Panay/Guimaras was attributed to the spike in non-direct port income or other income. Compared with the PhP4.1 million generated in March 2019, revenue increased to PhP15.5 million in March 2020. Of the total non-direct port income, leases and rentals of space contributed the most at PhP13.6 million, comprising 29.14 percent of overall port revenues generated in March 2020. On the other hand, there was a decline in revenues generated from port dues, dockage fees, wharfage, storage fees share on arrastre/stevedoring income and pilotage.

**Figure 20. Port Revenues Generated, March 2019 and March 2020**



Source: Philippine Ports Authority

**Decrease in the number of inbound and outbound ship calls and passengers.** With travel restrictions imposed in March 2020, there was a decrease in the number of inbound and outbound ship calls for Panay and Guimaras, as well as for Negros Occidental, compared to March 2019. In Negros Occidental, San Carlos terminal port and Paco Beach (a government port) registered about 65 percent decrease vis-à-vis the March 2019 record for shipcalls. On the other hand, Fort San Pedro (Iloilo City) and Jordan Port (Guimaras) showed significant increases in inbound and outbound shipcalls at roughly 350 percent and 148 percent, respectively.

**Table 6. Inbound and Outbound Shipcalls, March 2019 and March 2020**

Seaports	Inbound Shipcalls			Outbound Shipcalls		
	March 2019	March 2020	% change	March 2019	March 2020	% change
<b>Panay/Guimaras</b>						
Fort San Pedro	76	342	350.00▲	77	351	355.84▲
Iloilo Commercial Port Complex	65	77	18.46▲	70	80	14.29▲
Iloilo River Wharf	1,053	957	9.12▼	1,064	963	9.49▼
Terminal Port - Aklan Dumaguít	9	7	22.22▼	12	8	33.33▼
Terminal Port – Antique (San Jose de Buenavista)	78	41	47.44▼	84	42	50.00▼
Terminal Port – Capiz (Culasi)	119	93	21.85▼	122	96	21.31▼
Terminal Port – Guimaras (Jordan)	309	769	148.87▲	310	770	148.39▲
Terminal Port – Iloilo (Dumangas)	1,033	806	21.97▼	1,034	809	21.76▼
Terminal Port – Iloilo (Estancia)	297	162	45.45▼	309	159	48.54▼
Other Government Ports	101	127	25.74▲	106	121	14.15▲
Private Ports	89	65	26.97▼	100	71	29.00▼
<b>Negros Occidental</b>						
Banago Port (baseport)	164	99	39.63▼	164	99	39.63▼
Danao Port (terminal port)	62	58	6.45▼	62	58	6.45▼
Hinobaan (terminal port)	11	12	9.09▲	11	12	9.09▲
Pulupandan (terminal port)	9	7	22.22▼	9	7	22.22▼
San Carlos (terminal port)	522	184	64.75▼	522	184	64.75▼
Cadiz LGU (other government port)	36	27	25.00▼	36	27	25.00▼
Paco Beach (other government port)	77	27	64.94▼	77	27	64.94▼
Sagay (other government port)	97	113	16.49▲	97	113	16.49▲
Barcelona (private port)	346	424	22.54▲	346	424	22.54▲
BREDCO (private port)	1,792	1,202	32.92▼	1,792	1,202	32.92▼
Cadiz (private port)	116	172	48.28▲	116	172	48.28▲
F. Yap (private port)	86	65	24.42▼	86	65	24.42▼

Source: Philippine Ports Authority

Consequently, the number of inbound and outbound passengers declined. There were ports that used to cater to more than 100,000 passengers like the BREDCO port in Negros Occidental, where passenger arrival declined by more than 50 percent in March 2020. The Panay/Guimaras area, which includes the Iloilo River Wharf and the Dumangas Port showed decreases in inbound and outbound passengers by over 50 percent and about 40 percent, respectively.

However, Fort San Pedro showed an increase of inbound passengers in March 2020, more than double compared with March 2019 at about 124 percent. On the other hand, outbound passengers slightly declined by 8.26 percent in March 2020 indicating that more passengers were going back to Western Visayas prior to the imposition of ECQ in Metro Manila.

**Table 7. Inbound and Outbound Passengers, March 2019 and March 2020**

Seaports	Inbound Passengers			Outbound Passengers		
	March 2019	March 2020	% change	March 2019	March 2020	% change
<b>Panay/Guimaras</b>						
Fort San Pedro	11,271	25,231	123.86 ▲	12,605	11,564	8.26 ▼
Iloilo Commercial Port Complex						
Iloilo River Wharf	89,992	44,188	50.90 ▼	88,410	40,198	54.53 ▼
Terminal Port - Aklan Dumaguít						
Terminal Port – Antique (San Jose de Buenavista)						
Terminal Port – Capiz (Culasi)	6,423	2,411	62.46 ▼	6,610	2,761	58.23 ▼
Terminal Port – Guimaras (Jordan)	5,269	14,254	170.53 ▲	6,275	21,597	244.18 ▲
Terminal Port – Iloilo (Dumangas)	68,801	40,907	40.54 ▼	65,140	39,066	40.03 ▼
Other Government Ports	2,291	712	68.92 ▼	3,234	1,000	69.08 ▼
Private Ports	995	316	68.24 ▼	951	375	60.57 ▼
<b>Negros Occidental</b>						
Banago Port (baseport)	10,224	3,669	64.11 ▼	7,308	2,540	65.24 ▼
Danao Port (terminal port)	922	1,005	9.00 ▲	957	946	1.15 ▼
San Carlos (terminal port)	37,087	17,807	51.99 ▼	40,278	17,983	55.35 ▼
Cadiz LGU (other government port)	2,421	1,051	56.59 ▼	2,492	985	60.47 ▼
Paco Beach (other gov't. port)	3,238	795	75.45 ▼	3,571	840	76.48 ▼
Sagay (other gov't port)	443	1,743	293.45 ▲	532	1,588	198.50 ▲
Barcelona (private port)	10,088	10,957	8.61 ▲	8,547	10,637	24.45 ▲
BREDCO (private port)	158,638	73,753	53.51 ▼	146,459	61,477	58.02 ▼
F. Yap (private port)	2,880	1,636	43.19 ▼	1,790	1,258	29.72 ▼

Source: Philippine Ports Authority

**Added health and sanitation precautions were imposed.** Passengers had to contend with the new protocols being imposed in the ports such as observance of quarantine protocols and physical distancing which delayed passenger boarding resulting to long queues of vehicles and inbound and outbound passengers. Even so, there were setbacks in the implementation of quarantine protocols. These include breach in shipping company's procedures for persons boarding the vessels, and shipping companies allowing their crews to disembark despite strict directives from port authorities of no disembarking.

**Strict border control caused port congestions.** The extension of a vessel's stay in port resulted to low berth occupancy rate. Also, the delays in turnaround time of delivery trucks resulted to non-withdrawal of cargoes by shippers/consignees.

**Suspension of rehabilitation projects due to lack of manpower and construction materials.** PPA suspended the implementation of ongoing projects because of the restrictions imposed on the movement of personnel and construction workers as well as the delivery of materials as a consequence of the imposed quarantine.

**Lack of safety protection of port employees, staff, operator.** The ports lacked health safety inspection areas, PPEs, disinfectants to be used not only during pandemic-like cases, but also in times of natural calamities.

**Port workers like porters, dockworkers were deprived of daily income due to cancellation of trips of passenger vessels.** Interventions were provided to employees such as early release of salary and midyear bonuses, granting of COVID-19 hazard pay, and, granting of rice to PPA personnel as social amelioration measures.

**No systematic reporting for all port operations.** Situational reports and data are important for managers and decision-makers. Unfortunately, coming up with a consolidated picture on the status of the region's ports is non-existent because no one has been tasked by central office to do this work. Reports are separately prepared by the port management offices of Iloilo/Panay and Negros Occidental making it difficult to have a quick overall picture of the region's port activities. It is recommended that the PPA Management designates a PMO to prepare the consolidated report from all port operations in the region for quick analysis of port activities in Western Visayas.

### *Airports*

All airport operations were suspended during the ECQ, except when they had to cater to cargoes and transporting the following: a) health workers responding to emergency; b) members of PNP and all branches of AFP; c) persons travelling for urgent reasons; and, d) persons travelling to the province on common carriers and/or transport for the conduct of trade, delivery of social/humanitarian services, fishing/marine activities, scientific/academic pursuit, and such other essential purposes, other than carriage of passengers.

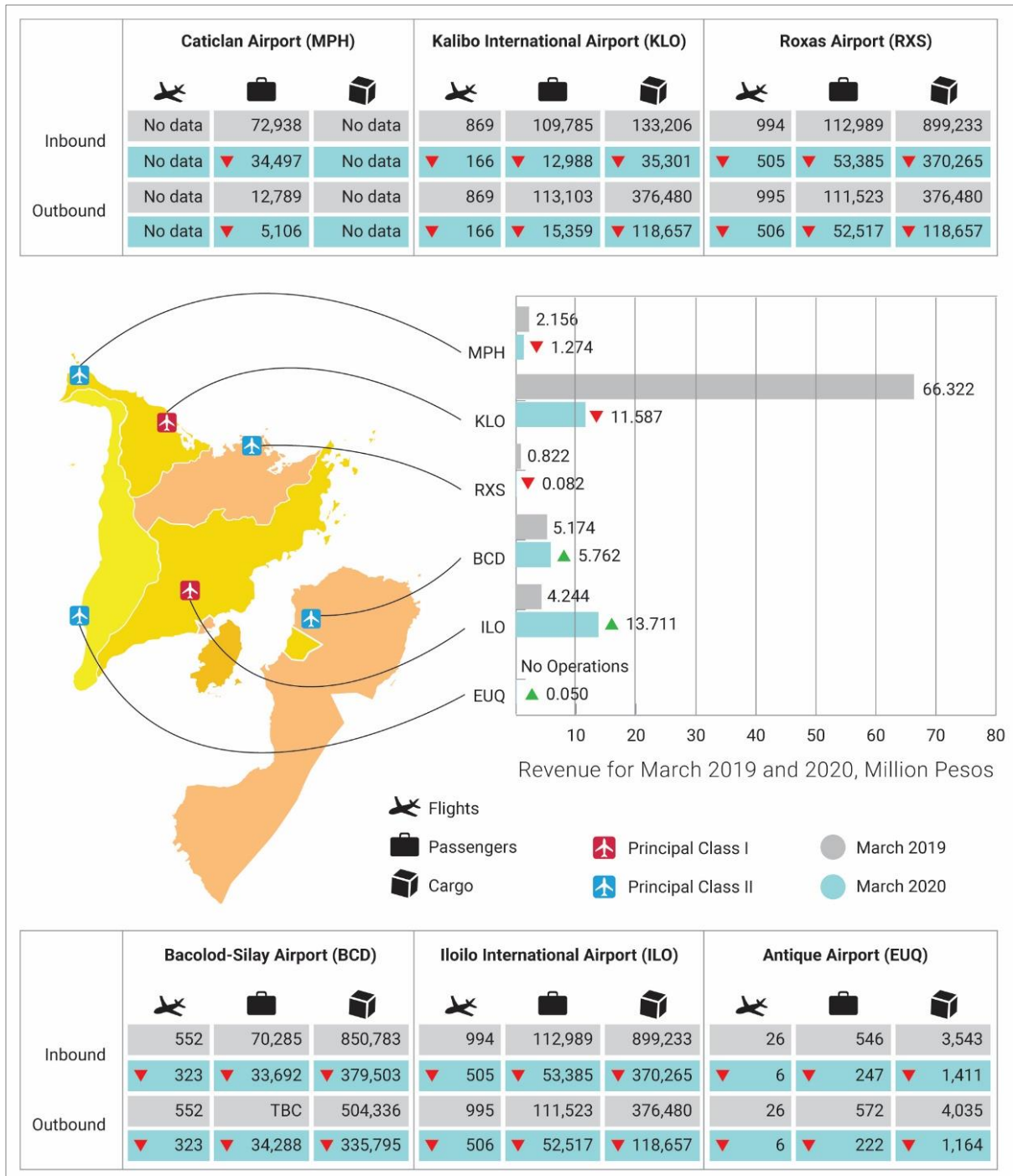
**Significant drop in airport revenues.** With all domestic and international flights temporarily suspended starting March 17 and March 26, 2020, respectively, there was a 59 percent drop in overall airport revenues. Airports that were heavily affected were Roxas Airport and Kalibo International Airport with significant dip in revenues of about 90.0 percent and 83.0 percent, respectively. However, Iloilo International Airport made substantial gains at 223.02 percent, which is more than double the revenues earned in March 2019. Bacolod-Silay Airport also gained by 11.36 percent. These airports were utilized for special inbound and outbound flights to evacuate stranded international and domestic tourists, as well as cargo flights for medical kits and supplies and other critical supplies needed in and out the region.

**Number of flights, volume of passengers and cargoes were significantly affected.** The number of inbound and outbound flights dropped with Kalibo International Airport experiencing the highest drop of about 81.0 percent, followed by Roxas Airport with a 78.35 percent drop.

Correspondingly, the number of inbound and outbound passengers dropped significantly in all airports in Region VI, with passengers just limited to passengers such as stranded foreign tourists and locals, health personnel and government officials.

The number of inbound and outbound cargoes handled by airports also decreased. Roxas Airport suffered the most with inbound cargoes reduced by 82.56 percent and outbound cargoes, by 86.95 percent.

**Figure 21. Airport Revenues Generated, in Million PhP and Inbound and Outbound Flights, Passengers, and Cargo, March 2019 and March 2020**



Source: Civil Aviation Authority of the Philippines VI

Most of the cargoes would usually be marine products, but because very few establishments especially in Metro Manila and Cebu were closed, many orders are presumed to have been cancelled. Also, given the situation, fishers would, most likely, have limited their catch to home consumption since their community under ECG would be on lockdown with very few public jeepneys and buses available to transport their products.

**Delayed completion of airport projects in the region.** Ongoing projects for rehabilitation or expansion of airports were temporarily suspended and may not be completed on targeted dates. Suppliers and contractors were informed of projects that were put on hold and the rescheduling of completion. Some contractors requested for project extension, which will be subjected for review and consideration. On the other hand, projects under procurement process were placed on hold on the following grounds:

1. No observers of their bidding process attended, as required by RA9184, despite follow-ups and reminders.
2. Few bidders could attend the pre-bidding conference and opening of bids because of fear of infection.
3. Program of Works submitted to Bids and Awards Committee were put on hold because there were no prospective bidders for public bidding and small value procurement. Dissemination of canvasses were also held off because stores/establishments, except for essential commodities like food and groceries, were closed during ECQ.

In dealing with COVID-19, airport operations, health safety concerns and limited logistics affect airport operations. These include the following:

**Shortage of PPEs for personnel and disinfection supply for the public.** There was shortage of PPE for personnel handling strategic posts that require face-to-face transaction. Supply of alcohol and sanitizers inside the building particularly in restrooms and entrances is also limited.

**Limited personnel to manage airport operation.** With skeletal work schedule, air traffic controllers have to render 24-hour straight duty. Thus, CAAP implemented a one-day duty/three-days off to ease the stress on air traffic controllers.

**Airport facilities are not fully equipped to adhere to minimum health requirements.** International and domestic passenger terminal buildings especially at the Iloilo and Kalibo International airports are not equipped with radar scanner that determines the thermal heat of persons from afar, which is needed during medical emergencies such as COVID-19. In compliance with the minimum health requirements, physical distancing markers/signages were set up in passenger terminal buildings particularly at the departure/entrance, check-in counters, final check in and pre-departure areas. However, in some instances, spaces are limited to allow physical distancing among international and domestic passengers.



There are no permanent isolation rooms established in airports for suspected COVID-19 cases, in compliance to quarantine guidelines. Kalibo International Airport, which has direct flights to Wuhan, China was provided with a temporary isolation room at the international passenger terminal building under the supervision of the Bureau of Quarantine.

**No established airport protocols for public health emergencies.** Operations manual and procedures do not respond to the changing of operational norms, just like what is happening under the COVID-19 pandemic. There are cases when stranded passengers were accommodated in pre-departure areas of airports and meals, beddings and transportation were shouldered by the LGUs and congressmen. Airport authorities must formulate and provide guidance on protocols to be followed in times of disasters or medical emergencies.

## Land transport

**Challenge of distancing passengers.** During the initial 14-day ECQ in March, public transportation did not follow physical distancing and jeepneys were operating in full capacity. To prevent the spread of the virus, mobility of people was limited to one person per household. Public transportation operated at reduced capacity in accordance with guidelines issued by DOTr. Eventually, barriers were put in place between passengers of jeepneys, taxis, vans and buses to adhere to physical distancing. For motorcycle riders, a proposal to reconfigure the motorcycle to allow physical distancing, even with a back rider is being considered.

**The lack of public transportation and border restrictions affected frontline workers, as well as, transport of basic supplies and commodities.** Frontliners, especially health, fastfoods, groceries and market workers, were affected. In the first 14 days of ECQ, public vehicles plying the streets were limited to buses and mini-buses and tricycles with only three passengers. However, these were not enough to cater to the riding needs of the frontliners. LGUs initiated the Libreng Sakay scheme by tapping private bus companies to provide transport for health workers and other frontliners. Hospitals, call centers and other business establishments also provided transport support as well as temporary housing to limit exposure to the virus. Bicycles and e-trikes were also used by workers to commute from home to work and back.

The lack of public transportation affected the delivery of farm and fishery produce to mills, warehouses, markets and cold storage facilities. To facilitate the movement of supplies and basic commodities, the DA and BFAR issued food lane accreditation and vehicle passes at Western Visayas Integrated Agricultural Research Center (WESVIARC) in Hamungaya, Jaro, Iloilo City and DA-designated offices in the provinces. It is a one-time application per vehicle for local transporters/shippers of farm and fishery products around Western Visayas. A total of 2,608 food lane conduct passes were issued in March 2020.

**Loss of daily income of drivers and operators who have to comply with quarantine restrictions.** Reduced number of passengers meant less income for drivers and operators. Thus, many refrained from plying their route given that their daily income cannot sustain the expenses for gasoline and vehicle rental. Also hard-hit were tricycle and trisikad/pedicab drivers who had no formal association nor insurance to tide them over.

**Lack of PPEs of drivers/operators enhanced vulnerability to COVID-19 exposure.** The limited supplies of protective gears like facemasks, shields, and gloves could expose the drivers, conductors and operators to the virus. They also have to shoulder the cost of frequent cleaning and sanitizing the vehicles.

**Slow pace of modernizing public utility vehicles, which would have introduced contactless payments through use of cards.** Up until now, there are still old and rundown vehicles plying the streets and no designated areas for pick-up and drop-off.

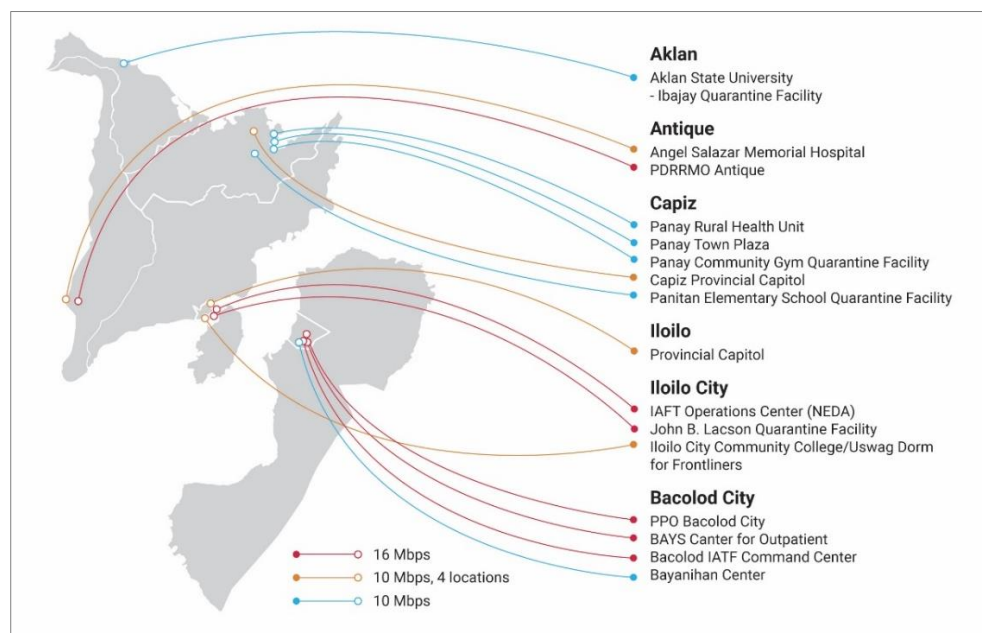
**Absence of schedules and timetables of buses in terminals.** Except for big bus companies, there is no established system for scheduling the departure and arrivals of public transportation. This is essential during the pandemic in order not to crowd the terminals with passengers queuing and getting on and off from vehicles. Bus passenger terminals need to modernize and level up to address long queues especially with the lifting of ECQ and in dealing with New Normal. LGUs should also review their route plans and develop traffic management plans.

## Information and Communications Technology

The importance of connectivity was brought to the fore during the Covid-19 crisis as companies, schools, government, institutions and individuals depend on the reliability of internet connections for the continuity of their operations. Families here and abroad need to stay connected through videos calls, text messaging and emails.

In support to government requirements to respond to COVID-19 crisis, the DICT provided internet connectivity for COVID-19 related centers in the following priority areas:

**Figure 22. Internet Connectivity for COVID-19 Related Centers in Priority Areas**



*Source: Department of Information and Communication Technology VI*

Free WiFi for All (FW4A) was made available in 331 integrated sites in the six provinces of Western Visayas, which are continuously monitored. Also, Government Network (GovNet) operations were provided to 55 agencies in Iloilo City, especially to those with vital roles in the COVID-19 mitigation and prevention such as OCD, PNP, City Hall, Provincial Capitol, DSWD, WVSU-MC, BFP, ICCC, NEDA, DTI, PCG and DILG, which are also constantly monitored, 24/7 operation.

With many government institutions relying on video conferencing to ensure continuity of government operations despite the lockdown, the DICT provided free video conferencing platforms during virtual meetings using Zoom and VidyConnect. Moreover, collaboration with LGUs and other potential partners were usually linked via email or in utilizing social media platforms like Facebook for information.

**Delays in project implementation due to operational problems, safety concerns and border restrictions imposed by LGUs.** Problems were encountered in the speedy implementation of FW4A projects for public hospitals, SUCs and even in the home front in the region because of issues by telecommunication companies during the project implementation especially in the provinces. Lay-out works were hampered because of border restrictions. DICT issued an advisory directed to checkpoint personnel for allowing movement of telecommunication-related goods and workforce including those performing indirect services such as security, technical sales and other support personnel. Likewise, it called for uninterrupted access of linesmen and servicemen to ensure unimpeded delivery of telecommunication services.

Contractors could not implement projects in hospitals due to lack of PPEs for their employees. An online meeting was conducted with the Telecom top executives in Iloilo to address such concern.

In order to ensure confidentiality, authenticity, intensity, security of electronic transactions and documents during COVID-19 crisis, the DICT offered some government offices with one of its core services, the Philippine National Public Key Infrastructure (PNPKI).

**Lack of websites and other support, especially LGUs, hamper effective online communication on COVID-19.** Some LGUs do not have websites posting of COVID-19 updates, information and announcement. They also lack internal IT manpower (MIS Office, IT positions), and, application systems (software) were not in place or are obsolete and needs upgrading.

Online trainings or webinars were initiated by DICT. However, there were no available tools/equipment to be used in the preparation of materials/modules for online training such as recording audio/video, switching presentations during online trainings.

Moreover, DICT Intranet Portal was not deployed to the regional RTF-COVID 19 clusters and there were no collaboration tools in the regional clusters to be used for group online meetings.

**Vulnerability of ICT field personnel to COVID-19.** There were not enough PPEs (facemasks, face shields, gloves) and sanitation and hygienic materials for field workers. At work, worktables were spaced to ensure physical distancing.

## Public Works

At the early stage of the ECQ, there was moratorium in the implementation of road and bridge projects with about 24 percent of the total number of projects put on hold. With the easing of quarantine restrictions, implementation of some public works projects resumed. The following are the major projects completed as of March 2020:

- Concreting of 2-lane local road connecting the towns of Balasan and Carles in Iloilo. This will benefit travellers along Barangays Camambugan and Sulong in Balasan, especially farmers and fisherfolks in northern Iloilo;
- Re-blocking and repair of 2.18-kilometer road along Binalbagan-Isabela Road in Negros Occidental, which connects agricultural areas to markets;
- Construction of 2 flood control structures along Jalaur River for protection of residents of Barangays Tabucan, Barotac Nuevo and Poblacion, Passi City in Iloilo;
- Construction of Bacolod City's Regional Evacuation Center (REC) with maximum capacity of 30 families or 150 individuals. Eight (8) buildings were constructed with accommodation, office, infirmary, laundry and drying area, separate toilet and bath for male and female, pump room, generator room, and materials recovery facility. The REC has its own cistern tank and drainage system.

For areas covered by GCQ, the following essential public and private construction projects are allowed to be implemented despite the risks of COVID-19: sewerage projects, water services facilities projects, digital works, health facilities, priority projects and other similar construction projects related to basic human needs such as but not limited to food production, agriculture, shelter necessary to address housing backlog, energy and communication, among others.

**Border restrictions hindered movement of construction personnel and materials.** Despite guidelines issued to ensure continuity of public works projects, border restrictions imposed by LGUs limit movement of construction personnel and materials. DPWH has instructed no suspension of public works contracts since DBM did not issue any directive to such effect. Guidelines were issued by DPWH for contractors, including manpower and equipment requirement, for continued implementation of infrastructure projects during ECQ. To facilitate ease of mobility of construction workers, the list of contractors, workers and vehicles were submitted by the DPWH to guide border patrols in clearing workers and vehicles at the borders.

**DPWH resources and personnel were utilized to support COVID-19 frontliners.** On top of its regular functions, DPWH provided support to frontliners during the quarantine period. A total of 45 sanitation tents (handwashing and footbaths) for disinfection and sanitation were installed. Daily disinfection/decontamination were conducted for all convergence areas,

including checkpoints, government facilities, schools, markets, hospitals, medical facilities and other public areas in cities and municipalities. Transport support was provided to frontliners and delivery of supplies and materials as well as food packs to medical facilities and constituents of LGUs. Similar support was also provided to evacuation centers utilized as health facilities, emergency operations centers and food hubs.

## Power

**Energy peak demand was reduced but household demand increased.** As of May 6, 2020, the Visayas power grid peak demand was reduced by 14 percent (1,849 MW) as compared to the baseline on March 13, 2020 (2,140 MW) when ECQ was not yet implemented. The Panay and Negros sub-grids, which included Negros Occidental and Negros Oriental, showed a decline of negative 8 percent.

Within the ECQ period, there was an increase in the demand of power especially from April to May 2020. Peak period was at 5:00 PM – 10:00 PM, which would mean more demand in residential loads including intense usage of cooling equipment.

*Table 8. Visayas Power Situation (As of May 6, 2020)*

Grid/ Subgrid	Peak Demand (MW) May 6, 2020	Peak Period	System Condition	2019 Actual Peak Demand	MW Demand Reduction since March 13, 2020
<b>Visayas</b>	1,849.0	5PM-10PM	Normal	2,224	-291
<b>Negros</b>	342.1	5PM-10PM	Normal	363	-27.9
<b>Panay</b>	369.4	5PM-10PM	Normal	441	-30.4

*Source: Department of Energy Visayas Field Office*

**Actual demand for power was within dependable capacity during the ECQ period.** As of May 9, 2020, Panay has a dependable capacity of 622.3 MW or 24.36 percent of the Visayas share, which is 69.27 percent dependable. Negros Occidental has 190.5 MW dependable capacity, or 52.49 percent dependable. It is 7.46 percent of the whole Visayas share. Cebu and Leyte have the highest Visayas share at 36.56 percent and 21.11 percent, respectively.

In terms of actual demand viz-a-viz dependable capacity, there was decrease in actual demand in Panay. The highest demand registered was in January 29, 2020, before ECQ was implemented. The dependable capacity was at 460.9MW with the actual demand at 401 MW. In March 6, 2020, the dependable capacity increased to 638.7 MW but actual demand decreased to 369MW. Forecasted demand for May 2020 for Panay has dependable capacity at 622.3 MW. Panay registered its highest demand in 2019 at 441 MW.

Demand for Negros Occidental is shared with Negros Oriental. In January 29, 2020, Negros Occidental and Negros Oriental have dependable capacities of 224.7 MW and 221.6 MW, respectively. Shared actual demand was posted at 380 MW. In March 6, 2020, the dependable capacity was 168.5 MW for Negros Occidental and 220.2 MW for Negros Oriental. Shared

actual demand was at 342 MW. In May 2020, the forecasted demand for Negros Occidental will have a dependable capacity of 190.5 MW and Negros Oriental with 219.5 MW. The shared highest demand in 2019 was recorded at 373 MW.

**Deferred payment for power distributors and producers.** Power Sector Assets and Liabilities Management (PSALM) Corporation has granted extension of payment for a period of 30 days for distribution utilities and independent power producers. Likewise, a 30-day extension of bills payment was granted to Wholesale Electricity Spot Market participants. Customers of distribution utilities were given a 30-day grace period for payment of household electricity bills. DOE also allowed staggered payments in four equal installments after the ECQ.

**Stringent border restrictions impeded operations of power sector as backliners for COVID-19.** In ensuring power was provided for the continuous operations of frontliners amid the pandemic, power sector workers acted as backliners. However, border restrictions impeded the delivery of energy goods and services. Key personnel to petroleum and power were even barred from entering certain areas due to miscommunication of directives from both national and local agencies. Continued coordination among line agencies and LGUs were made.

Reduced actual office duty and majority of personnel rendered Work from Home. Online meetings were conducted among employees, other agencies and stakeholders. Clients were encouraged to conduct transactions and payments online to restrict direct interaction. For those at work, physical distancing was observed and office premises were sanitized regularly.

## Water Supply

**Increased demand for water due to health and sanitation and other requirements under the New Normal.** Health and sanitation requirements such as handwashing to address the COVID-19 threat will increase demand for water. Water is also needed for urban gardening, which is being advocated to ensure food supply to households. With competing uses, it is imperative to look at the state of the water source especially groundwater and the water system support being provided. The availability of water supply especially in water critical areas is crucial. Low rainfall during dry season and extended drought threaten the continuous water supply of the region. Groundwater is the main source of water for domestic and commercial use and agriculture is also heavily dependent on water. About 75 percent of agriculture activities use groundwater.

In terms of households' access to safe water supply, FHSIS report in 2018 show that about 92.0 percent of the 1.97 million households in Western Visayas have access to Level I, Level II and Level III potable water supply. The remaining 8.0 percent still do not have access to safe water.

The low rainfall during dry season and extended drought threaten the continuous water supply of the region. Studies on water availability and quality were undertaken. The Comprehensive Water Resources Assessment for Major River Basins were conducted by National Water Regulatory Board (NWRB) for Panay River Basin and Jalaur River Basin in 2017 and 2018, respectively. Micro water resources assessment on groundwater availability was also conducted on Suague River in Mina, Iloilo. There were eight operational monitoring wells that were

established in Pavia, San Miguel, Alimodian, Oton, and Iloilo City and four in Bacolod City. Data collection on water level and water quality from these wells was conducted by the NWRB to monitor the trend of groundwater level and quality in the areas. Still there is a need to conduct for other major river basins like Ilog-Hilabangan and Bago River in Negros Occidental so long-term solutions can be found.

**Border restrictions hindered the deployment of technical personnel in maintenance of waterworks systems.** Water utility operators were faced with strict border controls as they deployed their technical personnel and other workers for the operation and maintenance of their waterworks systems. Likewise, it also hampered the flow of supplies, chemicals, pumps, tools, equipment and other instruments or implements used in the day-to-day operation.

The National Water Regulatory Board (NWRB) issued Memorandum Circular No. 01, series of 2020 for Unimpeded/Unhindered Access or Movement of Water Utilities Personnel and Regulators. This was to allow free passage in the conduct of repair and maintenance of water systems provided that proper documentation was presented to the authorities.

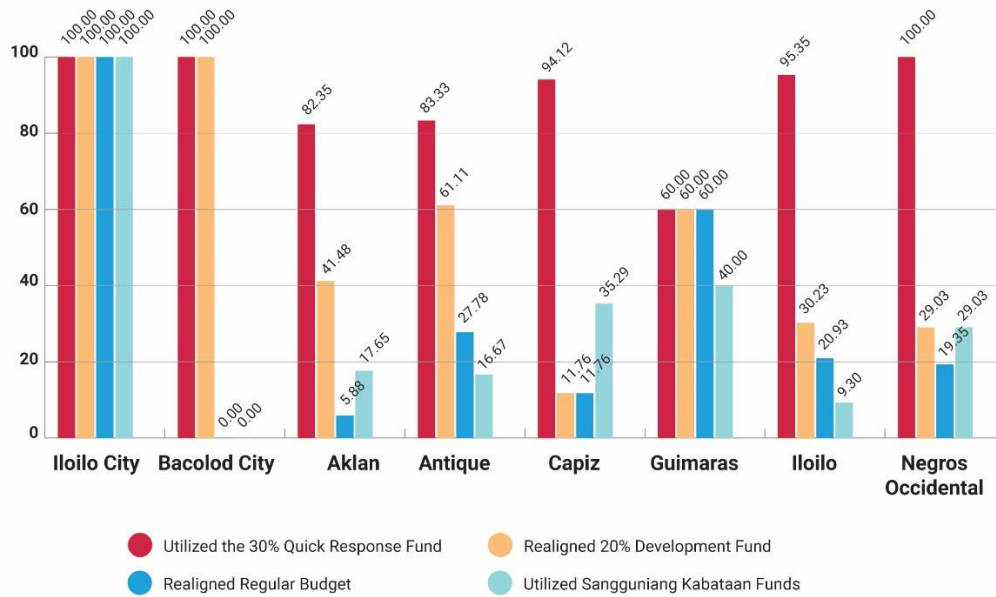
**Steady supply of water and concessions were made by water districts to consumers.** During the ECQ, steady water supply to establishments and individual households was ensured. Water districts, like Metro Iloilo Water District, ensured the steady supply of water to hospitals, quarantine facilities, establishments and households. For areas without water supply within or outside the respective areas of water districts, water tankers were deployed. As actual reading of meters was not conducted, statements of account of consumers were not issued and consumers were provided with 30-day grace period to pay their bills.

## Governance

The Inter-Agency Task Force (IATF) on Emerging Infectious Diseases issued Resolution No. 25 adopting a national government-enabled, local government unit-led, and people-centered response to the COVID-19 health crisis. IATF Resolution No. 25 mandated the local government units (LGUs) to lead the fight against the coronavirus pandemic in their respective areas. As frontliners, LGUs are expected to take on greater role in the COVID-19 pandemic, at the start of the pandemic and until the transition to a New Normal situation. They bear the responsibility of delivering public services, including nationally-funded programs for health and social safety nets, enforcing the community quarantine directives, and maintaining the uninterrupted flow of essential personnel, goods and services in their localities.

**LGUs tapped available sources of funds they could utilize to quickly respond to the crisis.** The funds were utilized for response actions that include purchase of relief goods, PPEs, payment of hazard pay to frontline workers, etc. to mitigate the impact of COVID 19 in their respective communities. Of the 6 provinces and 133 cities and municipalities, 122 utilized their 30 percent quick response funds while some realigned their funds to address COVID-19 concerns. A total of 47 LGUs realigned their 20 percent development fund while 27 realigned their regular budget and 28 utilized funds from their Sangguniang Kabataan (SK) budget.

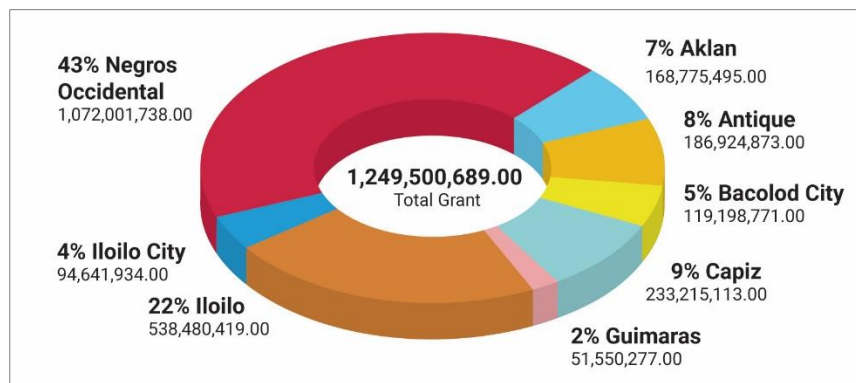
**Figure 23. Percent of LGUs Utilizing Quick Response Funds, and Other Funds for Covid-19 Response**



Source: Department of the Interior and Local Government VI

**National government augmented LGU funds for COVID-19.** Anchored on the emergency measures provided under the Bayanihan to Heal as One Act (RA 11469), budget for social protection programs, projects and services catering to the individuals affected and from the vulnerable sectors, was made available to all cities and municipalities to boost their capacity in immediately responding to the COVID-19 emergency. Pursuant to DBM Local Budget Circular No. 125 (Guidelines for the release and utilization of the Bayanihan Grant to Cities and Municipalities), a total of PhP1.25 Billion was released to all cities and municipalities in the region. The grant is equivalent to the one-month FY 2020 Internal Revenue Allotment share of the cities and municipalities.

**Figure 24. Share of Cities and Municipalities from Bayanihan Grant to Cities and Municipalities, by Province (PhP)**



Source: Department of the Interior and Local Government VI



**Funds under ER1-94 were made available for COVID-19 response efforts.** LGUs hosting independent power producers and power generating companies also benefit from the Energy Regulation Financial Benefits (ERFB) under the ER1-94. Funds that are available for transfer to host LGUs are those funds remitted by independent power producers and power generating companies placed under the trust fund of the Department of Energy. Also, starting 2020, power producers have been remitting shares of ERFB t directly to host LGUs.

**Policy and legislative actions for COVID-19.** To support their response actions to COVID-19, LGUs issued executive orders organizing and mobilizing their respective municipal and barangay task forces for the prevention of COVID-19. They also enacted/ issued COVID-19 related policies, i.e. creation of Municipal Task Force on COVID 19, Activation of Incident Command System (ICS), establishment of municipal health emergency response team (MHERT), cancellation of large-gatherings and other public events, among others.

Work from home (WFH) policy was adopted by all provinces, 14 cities and 109 municipalities to lessen the exposure of their employees to the corona virus. Most of regional line agencies also adopt the WFH policy with skeletal staff physical reporting to the office.

**Organizational Structures were established for COVID-19.** Following the passage of these legislations, structures were organized for LGU-Private Sector-NGA partnership, collaboration and coordination. All provinces, and municipalities and 2,558 barangays have established Task Forces on COVID-19 to serve as venue to discuss the local situation, to coordinate programs and interventions, and to decide on local policies to be adopted. They also established their Incident Management Team in their localities. The incident management system and well trained incident management teams are critical in the management of emergencies, particularly in preventing the spread of COVID-19 virus. As frontliners, the LGUs serve are the implementing arm in enforcing regional and national policies and action plan to combat the disease. Barangay health emergency response teams (BHERTS) are organized in all barangays and are mobilized in the government's campaign to contain the virus .

**Positive impact on peace and order.** One of the positive effects of COVID-19 was on the improvement of the peace and order situation in the region. Crime volume decreased by 70 percent and crime incidence decreased by 11 percent during the first quarter of 2020, except for Negros Occidental whose crime volume increased by 8.8 percent and crime incidence by 8.76 percent. Crime solution efficiency also increased by 8.45 percent, except in the Provinces of Antique and Negros Occidental which decreased by 10.4 and 1.7 percent respectively.

As the government navigates the ongoing COVID 19 pandemic, there are a number of challenges and key issues that government decision-makers should consider to reshape governance and plan for recovery under the New Normal. The following are some issues and concerns that need to be considered to build resilience in governance:

**Existing community quarantine and treatment facilities may not be adequate to accommodate the growing number of LSIs and Repatriates.** There are 316 quarantine facilities with about 6,000 beds established in the region. As of May 3, 2020, the facilities were underutilized at 12.97 percent since many of the suspected and asymptomatic cases were placed

under home quarantine. The region was able to increase the doubling time of positive cases<sup>14</sup> in mid-May of around 9.57 days with critical care utilization rate of less than 30 percent.

Starting in June, however, the LGUs need to be ready for the influx of a number of locally stranded individuals (LSIs) which included workers and laborers, students and returning residents who got caught in the lockdown in Luzon, along with returning OFWs who were repatriated. LSIs and repatriated OFWs are required to undergo a minimum 14-day quarantine in compliance to the established protocols of the LGUs. As of May 2, all of the six facilities of Iloilo City are being utilized and 30 to 40 percent of beds in quarantine facilities in Bacolod City and Iloilo City are occupied. High utilization rates mean that there is little reserve capacity in case the number of severe/critical cases surge.

As of May 31, there were 7,233 suspected cases in the region but these exponentially increased to 11,934 cases by June 29, 2020<sup>15</sup> which could further strain LGU resources and the capacity of the health system in combatting the pandemic.

**Weak IT capacities of LGUs.** Majority of the LGUs in the region utilized social media as their main platform in disseminating information and other pronouncements related to COVID-19 mitigation in their respective localities. These official pronouncements emanating from official LGU website ensure that the right information are circulated to the constituents, especially when there are known positive cases in the locality. However, most LGUs do not have websites or means to offer internet based services to their constituents or even just for posting important information like COVID-19 updates. They also lack IT manpower which is critical in the delivery of government services under the New Normal, which will be based more on information- and communication technology.

There is growing expectations for the LGUs to better able to deliver devolved public services, especially on health and sanitation. Telecommuting and digital transactions have become viable options for government to perform its mandated functions and for the continuity of its operations amid the pandemic. Having access to reliable wi-fi by government employees and government offices has become a necessity given the need to work from home and to conduct conferences and seminars when quarantines were imposed. (See more discussion in thematic area on infrastructure.)

**Inadequate or lack of training for frontline personnel of agencies and LGU to respond to health emergencies.** The capacities of institutions are inadequate to combat COVID-19 at the lowest level of governance. Although health emergency response teams were already organized in all of the municipalities and barangays of the region, they lack training and understanding of appropriate health protocols in the performance of their functions and most do not have the necessary personal protective gears.

As the government's frontliners in containing the virus at the barangay level, barangay health emergency response teams monitor the arrivals of OFWs or LSIs in their barangays and do

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<sup>14</sup> Duration or number of days it takes for the number of cases to double. Smaller doubling time numbers mean faster outbreaks, thus, larger doubling time numbers are better.

<sup>15</sup> RTF-COVID 19 Situational Report No. 88, RTF-COVID 19, as of May 31, 2020 and Situational Report No. 117 as of 29 June 2020

contact tracing when there are positive cases in their respective area of jurisdiction. However, there are already cases of frontliners infected by the virus because of weak health protocols that made them vulnerable to infections. Appropriate training and orientation should be undertaken to fully equip and empower the frontliners. Also, the government still need to improve its system in disease surveillance and contact tracing.

**Inadequate health protection supplies and equipment for government workforce.** The lack or inadequate protection of government workforce, particularly those doing frontline services make them very vulnerable to contamination. There are cases of government employees that were infected by the virus and as a result some offices were locked down to prevent the spread of the virus. Consequently, the closure of some offices hampered the delivery of government services.

**Lack of comprehensive community database.** Only sixteen (16) LGUs have a comprehensive database or a Community based monitoring system (CBMS). A comprehensive database containing information on residence, demographic characteristics, occupation, if in need of special attention, among others improves LGU-NGA collaboration especially in the speedy identification of beneficiaries for relief operations. The absence of this delays the delivery of government response. LGU-NGA-private sector collaboration is also weak as there are no framework or official of means of collaboration provided.

**Coordination gaps among various level of governance.** In a bid to control the spread of COVID-19 virus in their localities, LGUs imposed restrictions on the entry of persons to their localities. The strict border controls in entry points in land, air and sea have affected the delivery of essential goods and services during the quarantine periods. The late transmittal of information and inadequate coordination among the LGUs and government agencies resulted to delay in the implementation of infrastructure, telecommunications and other projects as well as the free flow of essential goods and services.

Coordination gaps were also observed in the handling of the arrival of LSIs and repatriates with some LGUs complaining the lack of time to prepare their facilities for returning residents. At some point, local chief executives requested a suspension of LSIs and OFWs returning to the region, until effecting testing and the release of test results.

## Cross-Cutting Concerns

### Environment

The various mode of community quarantines implemented in the region for more than two months already<sup>16</sup>, provides an opportunity for the environment to breathe. Travel restrictions led to less vehicles on the road and thus will have minimal emission of greenhouse gases and toxic suspended particles to the environment. Mass gatherings were put on hold, reducing noise pollution. Tourism activities were suspended, which reduced wastes generated by tourists resulting to cleaner beaches and other tourism destinations.

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<sup>16</sup> Implemented in Western Visayas since March 16 to May 31, 2020

On the other hand, actions to respond to the pandemic are not without setbacks. Medical wastes and infectious waste materials increased especially those used in hospitals and households like protective gears, medicines, laboratory test kits, among others. Also, there will be more domestic wastes as online food ordering and shopping increased. With closure of junk shops, no waste recycling is done. The existing waste management facilities may not be enough to cater to the huge volume of wastes from health care facilities and households. The United Nations Environment Program (UNEP) urged governments “to treat waste management, including medical, domestic and other waste as an urgent and essential public service to minimize possible secondary health and environmental effects.”

Managing pollution and sustainable use of natural resources vis-a-vis addressing the threat of future pandemics become even more challenging. Under the New Normal state, the major concerns for the environment are:

1. **The possible spike in air and water pollution after the relaxing of community quarantine rules should be adequately prepared** for by ensuring that pollution prevention and control are in place. The Environment Management Bureau-VI accredited 836 Pollution Control Officers, Trainings and seminars were conducted to capacitate firms, establishments and industries on environmental laws that they need to comply.
2. **Contamination of hazardous wastes.** Critical in this time and even in the New Normal is the safe management of wastes. Medical wastes such as contaminated masks, gloves used or expired medications and other items can easily be mixed with domestic waste. Medical wastes should be treated as hazardous waste and disposed of separately. Currently, the region does not have the facility nor capability to cater to hazardous waste.
3. **Increased demand for water.** With handwashing becoming a norm, demand for water increased. Moreover, urban gardening has been advocated to ensure food supply to households. With competing uses, it is imperative to look at the state of the water source especially groundwater and the water system support being provided. This will require the strengthening of management of watershed areas and resources to support the health and sanitation requirements to address the COVID 19 threat.
4. **Possible emergence and spread of zoonotic infectious diseases.** A study by the School of Earth, Energy & Environmental Sciences at Stanford University<sup>17</sup> has suggested that deforestation could lead to a rise in the occurrence of diseases like COVID-19. Its findings suggest that when forests are cleared for agricultural use, the chances for transmission of zoonotic, or animal-to-human diseases, increase. Thus, the need to prioritize the protection and conservation of natural resources especially in critical ecosystems.
5. **Increased demand for wood and non-wood products** due to the needs for construction materials and by products for health /isolation facilities intended for COVID 19-affected individuals and communities. Thus, the implementation of the National Greening

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<sup>17</sup> Article “Forest Loss could make diseases like COVID-19 more likely, according to study” (Stanford University 2020)

Program (NGP) needs to be continued to ensure the sustainability of supply of forest products.

## Peace and Security Order

One of the positive effects of COVID-19 was on the general improvement of the peace and order situation in the region. Crime volume decreased by 70 percent during the first quarter of 2020 while crime incidence also decreased by 11 percent. Crime solution efficiency also increased by 8.45 percent. All provinces experienced decrease in crime volume and incidence, except for Negros Occidental which posted an increase in crime volume by 8.8 percent and in crime incidence by almost 8.76 percent. Also, all provinces, except Antique and Negros Occidental have increase their crime solution efficiency.

Both uniformed men and women of the Philippine National Police and the Philippine Army personnel were deployed in implementing community quarantines. In particular, the 3<sup>rd</sup> Infantry (Spearhead) Division of the Philippine Army was called upon to assist in the distribution of social amelioration packages and food packs, manned borders and checkpoints and other activities during the quarantine period, while ensuring peace and security in the region, especially in conflict-affected areas. Military vehicles were utilized in relief operations and transportation assistance to the public when public utility vehicles were not allowed to ply their routes as precautionary measure to halt the spread of the virus.

As front liners, military and police personnel are vulnerable to COVID-19. The limited supply of the PPEs has become a problem in the early weeks of the checkpoint operations. In order to secure the safety of its personnel while performing the COVID-19 related tasks, assistance from partner stakeholders was requested in the provision of protective gears.

While providing support to the civilian sector amid the health crisis such as security patrols and information education and communication campaigns in relation to the pandemic, the Army Command, as guardians of peace did not neglect its prime duty to address local insurgency concerns by ensuring that the uncertainty brought by the pandemic will not be capitalized by communist-terrorist groups (CTGs) and Left-Leaning Organizations (LLOs) to further agitate the people and to discredit the government's efforts in addressing the pandemic to push their own political agenda. In response to the request of the LGUs, the 3ID further augmented the number of troops in these conflict-affected to counteract the communist threat.

## Cultural Vitality

One of the crucial factors in in the success or failure of the government's interventions during the pandemic is the prevailing Filipino culture. The collective behavior, values and cultural environment within a particular community during the implementation of the ECQ can either solve or aggravate the situation<sup>18</sup>. Survival is not only defined by preventive and mitigating health measures but also by the attitude, behavior and values of the residents in a particular community

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<sup>18</sup>"Changing Filipino behavior to help fight a public Health Crisis" (Presto 2020)

In the case of Western Visayas, the Filipino *bayanihan* spirit was evident when government, private sectors and the citizens worked hand in hand to fight the pandemic. Ilonggos chose to help each other amid the crisis through innovative and creative actions while promoting positivism. Ingenious and colorful designs of PPEs were created by a group of local fashion designers, generating optimistic vibes among the weary health workers. In coordination with the LGUs, the group of local bakers produced Ilonggo pandesal, which has become part of the relief package distributed to Iloilo City residents during the ECQ. In some parts of the regions, rice and vegetable produced by local farmers were directly purchased by the LGUs and become part of the food packs and relief goods distributed to their respective constituents. State universities and colleges, the private sector groups and cooperatives also rose to the occasion by making washables masks and PPEs that were distributed to health workers and frontliners in the district and provincial hospitals. Public and private higher education and private persons pooled their resources, facilities and expertise to establish a testing center in the region.

Local artists for theatre, film, dance and music used various online multimedia platforms to showcase their work and entertain people while campaigning to raise funds for the frontliners and encourage people to stay at home. Notably, many of these local artists and artisans lost their sources of income during the ECQ. Most of them are independent, freelance, and have no regular income and are dependent on individual projects for a particular period. As such, most are not qualified to benefit from any financial assistance from DOLE, DSWD and DA except for relief goods that are generally distributed by the LGUs as members of the community.

The region is also home to two major indigenous groups, the *Ati* and *Panay Bukidnon*. Notable among the indigenous peoples is the traditional value of ‘respect to the community leader or elders’. This value is handed down through generations and made them more respectful to follow the rules that are rolled out to them by their leader. This same value made the indigenous peoples more abiding to the rules and regulations implemented during the implementation of ECQ. Following the rules of ECQ and of stay-at-home policy, in the same manner of following their community rules set by their leaders, make the indigenous peoples to remain in the safety of their community and less exposed to COVID-19. The downside however, is that, they too are not exempted from losing their income as they are unable to go to the town and earn a living. Moreover, they also have limited access to any online platform and other health facilities.

## Poverty and Vulnerability Reduction

The pandemic has affected the vulnerable groups of the society such as children, women, elderly, persons with disabilities, indigenous peoples, informal settlers, OFWs, farmers, fisherfolks, drivers of public utility vehicles, formal and informal workers and other sectors. This limits their access to livelihood and basic social services such as health, education, food and nutrition, water and sanitation to include information, communication and transportation. The lack of access to livelihood and coping mechanisms could further result to violence against children and women, reproductive health issues, as well as other forms of violence. The situation is still rapidly evolving and global economic developments, international travel restrictions and movement restriction measures throughout the country need to be further assessed in light of their economic impact.

The elderly has the highest direct risk of severe COVID-19 because they are less likely to use online communications and most of them tends to be alone. The children, persons with disabilities, the homeless, the people in institutions (care homes, special needs facilities, prisons, migrant detention centers) will mostly affected by the disrupted health and other services.

Indigenous People (IP) communities are also at risk because most of them are living in extreme poverty and are more likely to suffer negative outcomes from infectious diseases. Many of them are already impacted by malnutrition, pre-existing conditions, and lack of access to quality healthcare, clean and potable water, internet, power, etc. because of their location.

## Gender and Social Inclusivity

Though the ECQ provided opportunity for family to spend quality time together, women are more challenged. While in a work-from-home status, they are expected to provide childcare, with children out-of-school due to closure of schools and remaining lessons for the school year were conducted online. Unpaid work has also increased with heightened care needs of older persons and overwhelmed health services.

Compounded economic impacts are felt especially by women and girls who are generally earning less, saving less, and holding insecure jobs or living close to poverty. As the COVID-19 pandemic deepens economic and social stress coupled with restricted movement and social isolation measures, gender-based violence is increasing exponentially. Many women are being forced to 'lockdown' at home with their abusers at the same time that services to support survivors are being disrupted or made inaccessible

While early reports reveal more men are dying as a result of COVID-19, the health of women generally is adversely impacted through the reallocation of resources and priorities, including sexual and reproductive health services.<sup>19</sup> A study of the University of the Philippines Population Institute (UPPI) and the United Nations Population Fund (UNFPA) revealed that among women 15 to 49 years old, there are about 3.1 million with unmet need for family planning. The Commission on Population and Development warned that with family-planning services impeded due to the nationwide restrictions of movement as well as the reduction of access of women and men to family planning supplies, nearly 2 million women in the Philippines between ages 15 to 49 years old will get pregnant in 2020 or there will be an additional 214,000 unplanned births this year.<sup>20</sup>

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<sup>19</sup> United Nations. *Policy Brief: The Impact of COVID-19 on Women*, April 2020

<sup>20</sup> Commission on Population and Development. *Pandemic may increase live births in PHL to almost 2M With FP efforts hampered, thousands of teens also projected to give birth*, Retrieved June 2020

# III

## Strategic Framework



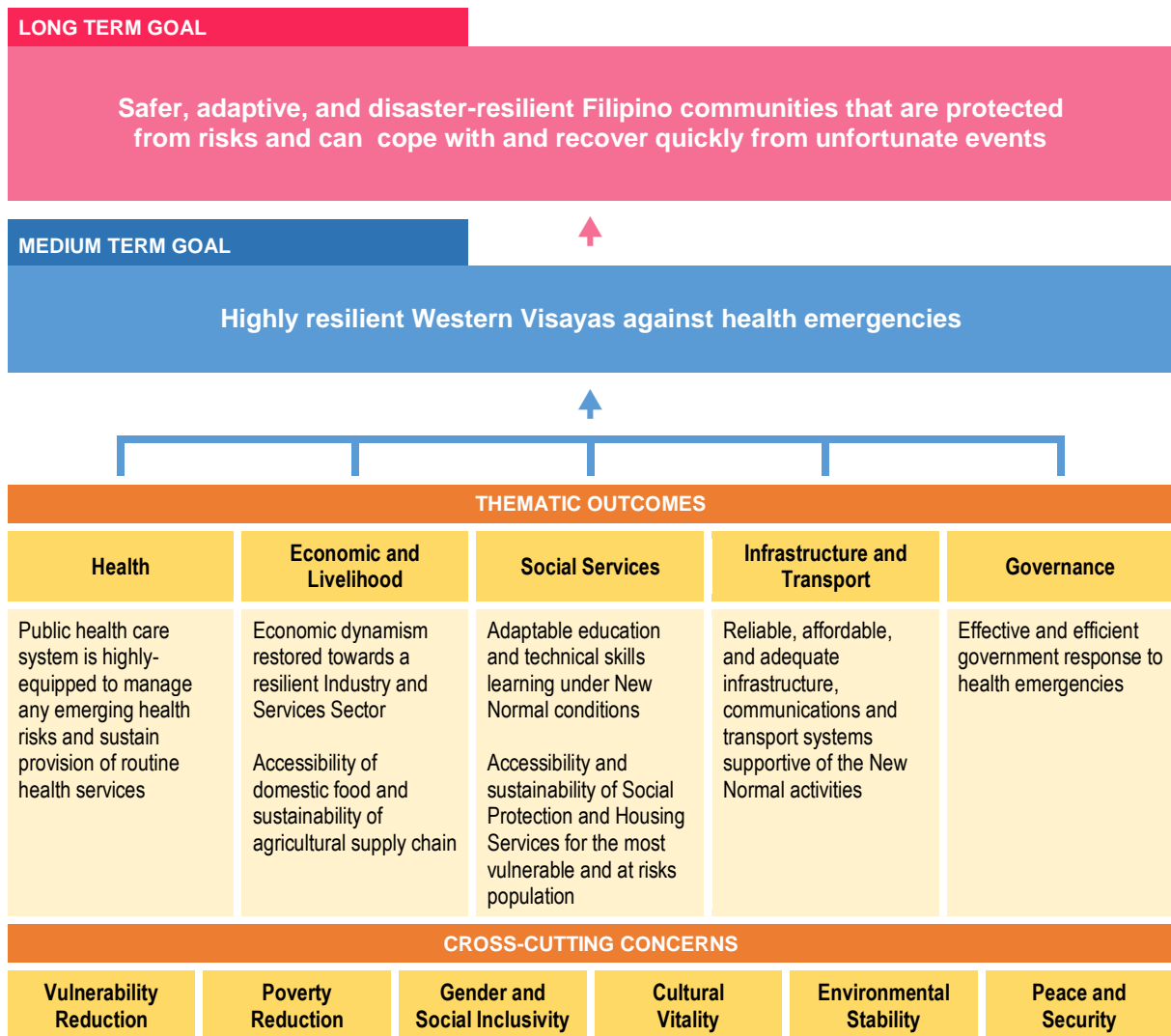


# PART III

## Strategic Framework

The Rehabilitation and Recovery Plan of Western Visayas prescribes the necessary policies, support systems and other strategic interventions for government to better respond and be more resilient during times of health emergencies such as the COVID-19 pandemic, and for the people to be able to adjust to the New Normal situation. It includes programs and projects that will respond to issues and concerns and to operationalize the identified strategies.

*Figure 25. Rehabilitation and Recovery Framework for COVID-19*



## Long-Term Societal Goal

Consistent with the Philippine Development Plan 2017-2022 and the Filipinos' long-term vision articulated in *Ambisyon Natin 2040*, the long term societal goal is to have safer, adaptive and disaster-resilient Filipino communities that are protected from risks and can cope with and recover quickly from unfortunate events.

## Medium-Term Goal

In the medium-term, the aspiration of the people of Western Visayas is for the region's full recovery from the COVID-19 pandemic and to develop and sustain its higher level of resilience against health emergencies.

The medium-term interventions will focus on addressing issues and concerns in the delivery of services in the time of the COVID-19 pandemic in the following thematic areas: health, economic and livelihood, social services, infrastructure and transport, and governance.

The formulation of the Plan was guided by the framework shown above which defines the (a) long-term societal goal, (b) medium-term outcome, (c) the thematic outcomes and (d) the key cross-cutting concerns that should be considered in the rehabilitation and recovery work.

## Thematic Outcomes

The issues identified and enumerated in the earlier section of the Plan were grouped into thematic areas that would help manage and integrate the multitude of interventions and the programs/projects/activities (PPAs) identified to achieve the Plan's development vision. These Thematic Areas also closely correspond to the Key Results Areas that are needed to be achieved during the pandemic and in adapting to the New Normal situation.

The Thematic Areas relate to the key groups of interventions, programs, projects and activities that would help achieve the region's vision. These thematic areas and their outcomes are shown below:

### *Health*

The public health care system is highly-equipped to manage any emerging health risks and sustain provision of routine health services.

### *Economic and Livelihood*

Under Economic and Livelihood, there are two sub-sectors: the Industry and Services and the Agriculture and Fisheries with the following outcomes:

1. Economic dynamism restored towards a resilient Industry and Services Sector; and
2. Accessibility of domestic food and sustainability of agricultural supply chain

### *Social Services*

For social services, there are two sub-sectors: education and training and social protection and housing services with the following outcomes:

1. Adaptable education and technical skills learning under the New Normal conditions;  
and
2. Accessibility and sustainability of Social Protection and Housing Services for the most vulnerable and at risks population

### *Infrastructure and Transport*

The Infrastructure and Transport thematic area covers air, sea and land transportation, information and communication technology, public works, power and water supply. Overall, the outcome for this thematic area is a reliable, affordable and adequate infrastructure and transport systems supportive of the New Normal activities

### *Governance*

For governance, the outcome shall be an effective and efficient government response to health emergencies.

# IV

Scenarios toward the New Normal



## PART IV

# Scenarios toward the New Normal

## Defining the New Normal

While scientists worldwide are pushing forward with efforts to develop vaccines and treatments to slow the COVID-19 pandemic and lessen the disease's damage, there is still no drugs available to the general public for COVID-19 treatment.

In the absence of specific vaccine or treatment, countries took a variety of measures from mass testing, travel/border restrictions to community quarantines in a bid to contain the virus. While these non-pharmaceutical interventions helped in mitigating or suppressing the transmission of infectious disease, the health crisis confronting countries around the world has translated into an economic crisis. This is inevitable considering that part of the response to address the pandemic is to slow down economic activity. Failure to succeed in navigating through this pandemic-induced economic will likely result to social and political crisis.<sup>21</sup>

Despite the lifting of the enhanced community quarantine (ECQ) in the region<sup>22</sup>, where Region VI provinces and highly urbanized cities were categorized as low risk areas, the COVID-19 threat will likely remain. There is a need to find ways to resume social and economic activities at the same time sustain efforts to limit the spread of the virus. In this regard, it is essential to characterize the New Normal and identify the appropriate government interventions and policies that will facilitate transition into the New Normal.

In defining the New Normal, the result of the online survey conducted by the IATF TWG for Anticipatory and Forward Planning (AFP) with various government agencies and private organizations and as well as the online public consultation, was taken into consideration. The online survey was designed to obtain the stakeholders' views on the characterization of the New Normal and the perceived challenges that it will entail. Results of the consultation indicate that the desired New Normal is one that is more resilient and better prepared for emergencies such as the COVID-19 pandemic. Participants also provided inputs for the possible realignment of existing policies, programs, and projects, including possible legislative actions needed to help society adjust to the New Normal.

The World Health Organization outlined six criteria that need to be met before restrictions could be lifted:

1. Transmission is controlled;
2. Health system capacities are in place to detect, test, isolate, and treat every case and trace every contact;

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<sup>21</sup> Addressing the Social and Economic Impact of the COVID-19 Pandemic, NEDA Report, March 19, 2020

<sup>22</sup> IATF-IED Resolution No. 35, May 11, 2020

3. Outbreak risks are minimized in special settings like health facilities and nursing homes;
4. Preventive measures are in place in workplaces, schools, and other places where it's essential for people to go;
5. Importation risks can be managed; and
6. Communities are fully educated, engaged, and empowered to adjust to the “new norm”.

The WHO emphasized that even when restrictions have been lifted, “every country should be implementing a comprehensive set of measures to slow down transmission and save lives, with the aim of reaching a steady state of low-level or no transmission.” Such is the goal of the transition to the New Normal.

## New Normal in Western Visayas

### Health

Until such time that the pandemic is contained, lockdown and physical distancing measures will continue to prevent community spread of COVID-19. These are meant to buy more time to decrease the rate of transmission of the disease and improve further health system capacity to be able to detect more cases, trace their contacts, quarantine potentials, and isolate and treat cases so there will be fewer deaths and more recoveries.

Science would play a key role in a post-quarantine scenario. Government will continue to seek a balance between health and economy to fight the COVID-19 pandemic. Decisions whether to place an area under quarantine or allow certain sectors of the economy to open once community quarantine is lifted will be based on scientific evidence. Mobile applications will be utilized in health condition reporting, social distancing, and contact tracing of persons who may have been possibly infected with the COVID-19 virus.

With health inequality and inequity across the rich-poor and urban-rural spectra still prevalent in the country's health system, the disease will disproportionately affect the poor because they are vulnerable in social and economic terms. In the interim, access to COVID-19 services including testing, isolation, and specialized care may be limited in rural and geographically isolated and disadvantaged areas.

Although a science-based response to COVID-19 can be put forward, there is a possibility that the attainment of other health goals and outcomes maybe compromised as attention can easily be shifted and resources diverted to COVID-19 response. To fight COVID-19, the health system needs to be equipped with facilities and/or capabilities to “detect, test, isolate, and treat every case and trace every contact.” This pertains to health surveillance protocols, testing kits and facilities, quarantine and isolation facilities, hospital beds, and contact tracing protocols. All these require equipment, supplies and materials, and especially, trained personnel. Moreover, protocols for the effective management of the return of locally-stranded individuals and returning overseas Filipino workers from areas with high incidence of positive cases should be put in place to avert the possible spread of the virus.

In a post-COVID scenario, there will be increased demand for health services. Even after the COVID-19 is placed under control, health-seeking behavior of Filipinos is expected to improve. This increased demand also implies increased demand for health workers in the country but global demand for health workers is also expected to increase, especially over the short term.

As people work toward accepting this New Normal, the need to continue to focus on personal space and hand hygiene is essential. As COVID-19 testing becomes more widely available, it will be critical to test for active cases often and throughout the population reentering the work force, even in asymptomatic individuals. For suspected and previously confirmed cases, testing for antibodies is also necessary to determine if individuals have developed some level of immunity to the virus.

## Social

The reconfiguration of many establishments in the Industry and Services sectors will result in a number of displaced workers, including overseas Filipino workers (OFWs) who have been repatriated or are expected to be repatriated in view of the lower global demand. As of May 12, the number of OFWs repatriated to the region due to the pandemic, via Metro Manila and Cebu, stood at 300 with more expected in the coming days and weeks.

Social activities will remain limited by the need to practice physical distancing. Wearing of masks and bringing of hand sanitizers and alcohol will be the norm. Frequent washing of hands will continue to be promoted.

Mass gatherings will continue to be restricted or discouraged and areas that become easily crowded will be strictly monitored. This will affect church services which will have to be conducted online or broadcast through television and radio, as before. The Meetings, Innovations, Convention, and Exhibition sector will bear the brunt of this norm as well as for most entertainment activities – cinemas, concerts, sports, etc. Some of these venues have been converted into quarantine or treatment facilities.

Schools will likely remain closed, with the reopening date initially scheduled by the Department of Education on August 24<sup>23</sup>. When school does reopen, class sizes will have to be dramatically reduced. The education sector will then need to reconfigure its mode of delivery so that less time will be spent in the physical classroom. There will also be clamor for more virtual classes which will require support from a reliable digital infrastructure system with strong cybersecurity protection. Learning from home in a school setting will be encouraged especially for pre-school children, with parents as teachers.

Social distancing will be strictly observed. Schools will restrict participation in events like programs, rallies, sports and other events where there are large groups of people and social distancing will be difficult to enforce.

Deaths from COVID-19 will have a ripple effect causing impacts on the mental health and health of surviving family members. Some of the deceased and those confirmed cases may have been

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<sup>23</sup> Press Release "IATF approves the new school opening on August 24, 2020" (DepEd 2020)

the breadwinners in their families. Families cannot visit their family member confined in hospitals and some were not even able to observe usual funeral practices because patients who died of COVID-19 are immediately cremated.

While domestic workers have suffered many kinds of impacts resulting from the pandemic, the reduction of working hours and, in some cases, a loss of jobs, result to fear and uncertainty on how will one survive economically and financially amid a pandemic. Likewise, the sudden changes in everyday life and how to cope with them; the unremitting fear of being infected, the fear of dying from the virus, or the fear that a family member or relative might be infected with COVID-19 and die, and the fear of not being able to receive medical treatment in time are also worrying many Filipinos. Not knowing what will happen in the coming days and adapting to new realities like working from home, temporary unemployment, home-schooling of children, and lack of physical contact with other family members, relatives, friends, colleagues at work, and the huge change in the daily routine of adapting to the “New Normal. When taken as a whole, these worries, uncertainties and fears will impact on one’s mental health.

## Economic and Livelihood Activity

### Macroeconomy

The necessary protection measures that various economies put in place to contain the virus are severely impacting on economic activity. The global economy is expected to be in recession in 2020 as the COVID-19 pandemic continues to spread, significantly slowing down and even halting economic activities in various countries. The International Monetary Fund (IMF) estimates that the current crisis will result in contraction in global economy with a -3.0 percent growth in 2020, (down from 2.9 percent in 2019), assuming that the pandemic diminishes in the second half of the year and strict containment measures are subsequently and gradually lifted. Emerging and developing Asian countries - China, India and ASEAN-5 (Indonesia, Malaysia, Philippines, Singapore and Thailand) will have a -1.0 percent growth in 2020. The IMF’s April projection of contraction of the global economy would mark the steepest downturn since the Great Depression of the 1930s. Although the IMF forecast a partial rebound would follow in 2021, it warned that outcomes could be far worse, depending on the course of the pandemic.<sup>24</sup>

The unprecedented containment efforts taken by governments around the world to stem the spread of the virus are expected to have the most significant immediate impact as these hamper both supply and demand. In particular, shutdowns have disrupted supply chains, layoffs have lowered income, and uncertainty has reduced demand.

These global disruptions, together with the travel restrictions imposed at the end of January, deterioration in business and consumer confidence, and the imposition of the ECQ in Luzon as well as in major areas of Western Visayas (Iloilo, Negros Occidental, Bacolod City, Iloilo City), are estimated to reduce domestic economic growth to 1.0 to 0.0 percent in 2020. Reduced revenues and higher spending due to the crisis are expected to raise the budget deficit to at least five percent of the gross domestic product (GDP) in 2020 with a gradual consolidation in the medium term.

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<sup>24</sup> News Release “Global economic downturn from COVID-19 could be worse than first projected: IMF” (Shalal 2020)



The deterioration of balance sheets of firms and households may lead to tighter lending standards of banks. At the same time, rising risk aversion of investors may significantly drive out capital, which leads to tighter liquidity, limiting the amount of available cash and funds for investment. Foreign portfolio investments have already registered net outflows from the Philippines in the first two months of 2020, a reversal from net inflows in the same period last year.

Trade is seen to slow down, with traders relying more on online processing of trade documents to facilitate seamless movement of cargo. The World Trade Organization estimates that world merchandise trade would fall between 13 percent and 32 percent in 2020 alone. Exports from North America and Asia are expected to be hardest hit, with trade from sectors with complex value chains, such as electronics and automotive products, are expected to decline.

### *Agriculture and Fishery*

With the uncertainty in this health crisis, there may still be a need for the imposition of community quarantines at certain periods, depending on the spread of the virus. This brings to fore the primordial need for food security — that is, food is available, accessible and affordable, and meets the nutritional requirements.

Disruptions in agri-food supply chain are expected to persist, particularly in the transport and logistics system of inputs, machineries and equipment, and farm produce. Movement of people involved in the transport of such inputs and products, technicians, and extension workers will also be limited. Further, with the regulated operations of wet markets, supermarkets, and retail food establishments, the increased reliance on online/digital transactions for food commodities is expected to continue, even in the post-ECQ scenario.

On the production side, there will be an increased demand for modern agricultural machineries and equipment in lieu of manual labor, given the need to limit movement of people. Innovative technologies on processing and packaging need to keep up with the increased demand for processed food with longer shelf life. This also means that there will be higher demand for raw materials to be used for preserving food, e.g., salt, sugar, vinegar.

The pandemic will also cause a shift in consumer preferences for healthier diets, which will increase demand for safe and nutritious food. Health-conscious consumers are selective of the food they eat, preferring to eat fruits and vegetables to boost their immune system against diseases.

The expected reduction in tourism and dine-in services will result in reduced demand for agricultural food items from these establishments. The most affected commodities are expected to be the income-elastic food, like meat and high-value cash crops. On the other hand, there may be higher demand for agro-industrial products like rubber (for making gloves and personal protective equipment), fiber (for making masks, etc.), and raw materials for soap and disinfectants.

## *Industry and Services*

The COVID-19 pandemic caused the temporary suspension of production activities for both goods and services. Initial estimates show that the economy will have zero growth and possibly register a decline as many businesses have stopped operations and find it difficult to cope with the losses.

As the country navigates through the lingering effects of the pandemic, there is a heightened risk of financial insolvency for firms particularly those that have incurred mounting debt, those with large overhead costs, and those with limited or no insurance coverage against losses. In the near term, there will be increased demand among companies, especially from the micro, small, and medium enterprises (MSMEs), for economic assistance such as tax breaks, access to credit subsidies, debt relief, and employment subsidy support, among others, the costs of which will be paid mostly by government.

In the manufacturing sector, production of merchandise goods will favor essential goods particularly food, medicine, medical and pharmaceutical products, and other essential goods mostly related to efforts to contain the outbreak. Equally important is that manufacture of intermediate inputs and raw materials for essential goods will also remain unhampered (e.g., plastic and plastic products, rubber products, chemical products, etc.).

Construction will focus on building quarantine and other health facilities, and rehabilitating existing ones to increase the capacity of the health care system. There may even be increased construction demand in the rural areas, as urban dwellers realize the advantages of less dense areas.

In many service-oriented organizations in the private and public sector, flexible-work arrangements (e.g., work from home) will have to be implemented in accordance with strict social distancing protocols. In many instances, part of the New Normal means working and interacting virtually instead of face-to-face. Workspaces (e.g., factories and office spaces) will need to be re-configured to address the need for physical distancing.

Work protocols in the manufacturing sector will also need to be reconfigured to comply with social distancing. This will mean a mix of staggered work hours and greater dispersion of workspaces.

Sit-down eateries may need to shift to take-out menus. And those that anchor their business model on the ambience of their place will need to re-package their service. The same goes for tourism establishments like hotels and restaurants.

Hygiene protocols will be expected in all establishments, such as the presence of disinfection areas and disinfectants within easy access of everyone. Health checks and temperature scanning will remain the norm. These will mean higher cost of doing business in the near term.

E-commerce will play a big role in the New Normal scenario as businesses and consumers increase the use of online transactions, including the expanded use of cashless payment system and other financial technology platforms. This bodes well for the retail and other business

activities sectors, including information technology and business process management (IT-BPM).

In the transport sector, reduced load factor accompanied by stringent sanitary protocols in all modes of public transportation will be part of the New Normal. Travel restrictions will likely continue for the time being, as demand for tourism and travels, in general, will be relatively low.

### *Science and Technology*

Interest in using advances in medical science will be intensified in the New Normal. Just like the development of COVID-19 testing kits by local scientists, there will be greater efforts to find ways to manage pandemic situations (i.e., ways by which mass testing can be facilitated, design and manufacture of medical equipment that can aid in the treatment of patients such as ventilators, among others). Moreover, there will be increased demand for health-related technologies (i.e., sanitation booths, contact tracing applications, and other researches related to the treatment or response to the pandemic).

With companies, schools, and government agencies implementing work from home arrangements, the use of digital technology will increase significantly. In addition, business transactions such as online retail, online banking, online medical consultations, and digital payments will increasingly become a necessity rather than for convenience. All these need to be supported by a reliable digital infrastructure system with strong cybersecurity protection.

For the production sector, there will be increased demand for automation to complement manual labor in the immediate term. Over the medium term, automated processes may substitute for labor.

## Governance

### *Legal*

The *Bayanihan* to Heal as One Act is a temporary measure and effective only for three months. Meanwhile, the following laws already exist: the Mandatory Reporting of Notifiable Diseases and Health Events of Public Concern Act to address concerns on health, health care workers, and supplies (Republic Act No. 11332); the Price Act (RA 7581 as amended by RA 10623) and the Universally Accessible Cheaper and Quality Medicines Act (RA 9502) on availability of goods and services; the Government Procurement Reform Act (RA 9184) and Government Procurement Policy Board Resolution No. 03-2020 on government procurement during a state of public health emergency; and the Local Government Code (RA 7160) on coordination between national government and local government units. These will need to be reviewed as to whether they provide sufficient latitude for the Executive branch to implement the needed interventions.

The scale and severity of the pandemic has also justified government's restriction of some of people's fundamental freedoms, particularly of movement and of expression. Thus, in crafting

and implementing government responses to this public health threat, careful attention must be given in ensuring that fundamental human rights are continuously upheld.

As the New Normal contemplates increased reliance on technology in people's everyday lives, necessitates striking a balance between data privacy and public health. Furthermore, with the more widespread use of big data analytics, data security and data discrimination concerns are expected to rise. While the Data Privacy Act of 2012 (RA 10173) is in place, it should be assessed if the law is enough to address these valid concerns.

Equally important, is an assessment on the government's ability to protect the people, businesses, and the government itself against cyber-attack and cybercrime.

The legal implications arising from the pandemic also include the treatment of supply contracts affected by supply chain disruption; insurance coverage of epidemic-related damage to business and property; and employment arrangements. In addition, laws on stockpiling of critical materials, which include medicines and devices for life-saving care, will have to be revisited.

### *Political*

The New Normal is characterized by volatility and uncertainty. Thus, there should be more focus in managing multi-dimensional risks arising from public health emergencies like COVID-19. These threats are expected to increase in the coming months when the region becomes more exposed to natural hazards such as typhoons, flooding, drought, among others.

The local government units (LGUs), as frontliners in their respective jurisdictions, are expected to take on a greater role in the COVID-19 pandemic. They bear the responsibility of delivering public services, including nationally-funded programs for health and social safety nets, enforcing the community quarantine directives, and maintaining the uninterrupted flow of essential personnel, goods, and services in their localities. Recent experience shows that LGUs have different resources, institutional capacity, readiness, and leadership and capabilities, among others. Maybe because of this, some have taken control measures to the extreme, being more restrictive than the national government. This posturing may continue unless LGUs are assured that help from the national government will come promptly.

While no one is spared from COVID-19, case fatality rate differs across sectors. At the same time, the imposition of the ECQ has affected families and businesses in different ways. For certain measures, there is a need for targeted delivery. The importance of having a registry containing information on residence, demographic characteristics, occupation, if in need of special attention, etc. Thus, the necessity of accelerating the implementation of the Philippine Identification System was recognized by both the national and local governments.

### **Environment**

In the New Normal, the interrelationship between public health and the environment will be given greater emphasis and importance. One example is the increase in volume of infectious waste materials (e.g., disposable masks) from households and in the number of health care

facilities due to the rising number of COVID-19 patients. Solid wastes from packaging materials will also increase due to the surge in delivery of food and other essential supplies.

Meanwhile, the ECQ has decongested roads, which resulted in relative improvement of air quality particularly in cities. However, air quality may deteriorate post-ECQ, as social distancing becomes the New Normal, since people may opt to use their own vehicles to avoid the inevitable physical contact in public transport such as jeepneys, buses, and trains. Nonetheless, more jeepneys and buses may be allowed to ply roads, provided that necessary mitigating measure are put in place such as dividers to facilitate physical distancing.

Cremation has been the method of disposing the bodies of those who died from COVID-19. There were issues raised on air pollution as protocol for the management of the dead requires the cadaver to be wrapped in plastic to avoid contamination.

As more people will practice handwashing and sanitation in households, workplace, and public places, higher demand for water is inevitable. This will be a challenge during dry season when water is scarce.

There will be greater interest in urban agriculture, given the importance of ensuring steady food supply. The use of idle urban spaces for urban agriculture, backyard/household gardening of edibles, and community farming will increase. Further, localizing the source of produce in urban areas will also help cut down fossil fuel consumption necessary to transport, package, and sell food. Considering the foregoing, we see that the pandemic will spark positive behavioral effects on people, especially on the need to conserve finite natural resources and safeguard the quality of environment and public health.

V

Thematic Strategies  
to Mitigate Losses



## PART V

# Thematic Strategies to Mitigate Losses

## Health

The COVID-19 pandemic exacerbates the long-standing symptoms of a weak and inequitable public health system in the country with its densely populated urban areas, widespread socioeconomic disparities and inept infrastructure.

Like any other regions in the country whose health system had been put to the test, Western Visayas has initially managed to respond adequately to the health crisis. However, with the expected surge of arrival of returning residents to the region, Western Visayas will need to brace for the expected surge of COVID-19 cases. A shortage of hospital beds in regular as well intensive care, mechanical ventilators and masks are among the most pressing issues that the region must respond to as it prepares for the worst case scenario.

## Outcome

Western Visayas Public health care system is highly-equipped to manage any emerging health risks and sustain the provision of routine health services.

## Sub-Outcomes

1. Preventive, curative and rehabilitative capacities of the health care enhanced;
2. Access and availment of services thru ensured health financing improved; and
3. Multi-sectoral capacities to plan and respond to health emergencies strengthened

## Objectives

1. Equip the local health systems and societal capacities in responding to health emergencies thereby reducing COVID-19 mortalities;
2. Remodel delivery of routine health services of local health systems and societal capacities; and
3. Institutionalize local government multi-sectoral plans on preparedness, response, and recovery and rehabilitation

## Targets

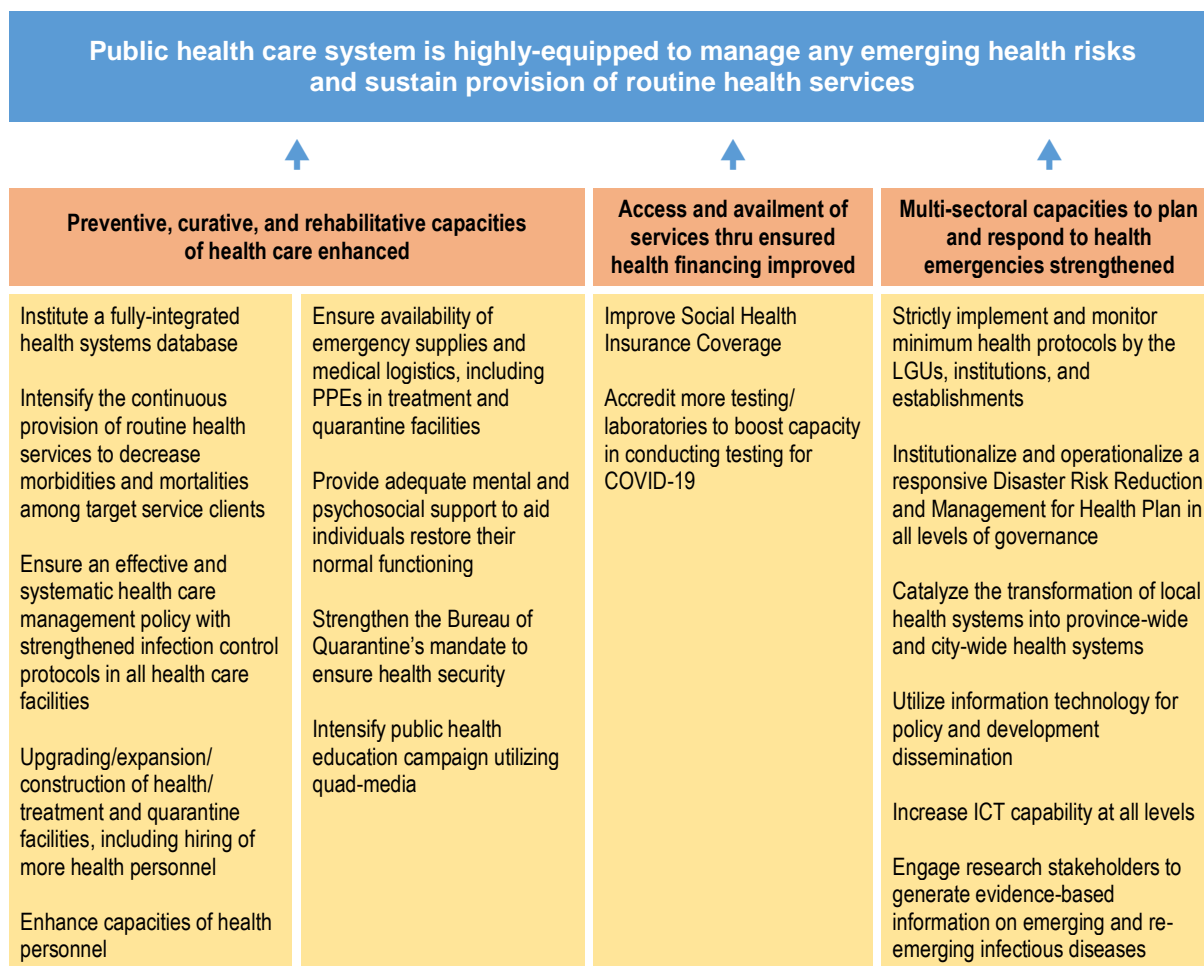
1. At least one (1) laboratory/testing center for COVID-19 established in all provinces and highly urbanized cities;

2. 100 percent of treatment and quarantine facilities meet standard ratio of health professionals;
3. Availability of sufficient emergency supplies and medical logistics, including personal protective equipment (PPEs) for health workers and frontliners in all treatment and quarantine facilities;
4. 100 percent of LGUs implement minimum health protocols on COVID-19, including screening and quarantine protocols;
5. 100 percent of health facilities sustain routine non-COVID health service delivery and health emergency response;
6. Establishment of additional treatment and quarantine facilities, including hospital beds fully equipped with sufficient equipment, medicines and PPEs;
7. 100 percent of provinces and highly urbanized cities establish more crematoriums;
8. 100 percent of LGUs institutionalize a (DRRM-H) plan which includes surge response capability among health facilities;
9. 100 percent of LGUs including health care facilities institutionalize a systematic infection control protocol and health care management policy;
10. 100 percent of cities and municipalities implement Risk-Based Public Health Standards Disease Mitigation and Rehabilitation to include COVID 19;
11. 100 percent of LGUs develop Risk Communication Plan on adopting New Normal disease preventive measures like aggressive physical distancing, better hygiene, self-isolation and health seeking behaviour;
12. 100 percent of LGUs implement a New Normal alternative routine health service delivery system within the context of the Universal Health Care;
13. 100 percent of health workers are capacitated through DOH developed Electronic Self Learning/Modular approaches on alternative routine health service delivery and the latest case management protocols on emerging diseases like COVID 19;
14. 100 percent of LGUs and other health facilities have increased ICT capability through upgrading of equipment needed for virtual video conferences and meetings;
15. 100 percent of all health facilities (public and private) submit timely and accurate health information;
16. 100 percent of households have social health insurance;



17. 100 percent of all health facilities are compliant to licensing and accreditation standards;
18. 100 percent of LGUs have functionalized BHERTS and are maximized to assist in the New Normal home health service delivery model; and
19. 100 percent of commissioned researches on emerging and re-emerging infectious diseases are implemented and research results are disseminated and utilized.

**Figure 26. Thematic Logic Model for Health**



## Strategies

### Sub-Outcome 1: Preventive, curative and rehabilitative capacities of the health care enhanced

**Institute a fully-integrated health systems database.** Delayed health data reporting can result to non-action or uninformed decisions. To improve service delivery, a fully integrated health systems data base from the provincial level down to primary care facilities, with seamless navigation and referral mechanisms between public and private providers, will be established.

Electronic medical records (EMRs) such as the iClinicSys and iHOMIS for encoding patient's data will be utilized to track and link patient referrals and laboratory testing as well as monitor the supply of available equipment and medicines in primary care facilities and hospitals.

The use of telemedicine for primary care consultations to reduce the number of persons going to hospitals during times of emergencies will also be introduced. At the hospital level, functional Hospital Epidemiology and Surveillance Units (HESU) in all DOH hospitals, Disease Reporting Units (DRUs) and sentinel sites shall be established and made functional. These will be manned by permanent staff trained on disease surveillance and reporting. Medical technologists in these HESUs shall also be trained on specimen collection.

**Intensify the continuous provision of routine health services to decrease morbidities and mortalities of targeted service clients.** During the lockdown/ECQ, limitations in mobility as well as purchasing capability of the people can contribute to health issues such as malnutrition, exacerbation of existing health issues such as hypertension, diabetes and other chronic diseases. This could result to increased risk of mortality among patients with COVID.

To avert the increase in morbidities and mortalities among women, children including vulnerable population (pregnant women, senior citizens, adolescents, immune-compromised individuals), health and nutrition programs will be continuously implemented.

The limited access to family planning services brought about by the ECQ may also result to unplanned pregnancies. Government will continue to ensure quality services for pregnant women to include safe delivery and post-partum and newborn packages.

Access to immunization services for children under one-year old was also limited during the ECQ putting them at higher risk of vaccine preventable diseases such as measles, polio, mumps and pneumonia. This was aggravated by fear of parents of contracting the virus and inadequate access to consultation and treatment considering that most health care facilities have been used for COVID patients. Thus, health care facilities will be equipped with more personnel and equipment to cater to diseases other than COVID. Safety of non-COVID patients will also be assured.

Nutrition programs will be intensified especially in areas with high concentration of the poor and daily wage earners through the promotion of good nutrition, and continuous supplementary feeding. Enhanced collaboration among government, non-government organizations, small- and large-scale businesses shall be promoted for the provision of technical assistance in the commercialization of food and nutrition technologies that are accessible to the public.

Mechanisms to bring routine health services at the household setting especially for population whose movement are restricted, such as the adolescents and elderlies, will lessen their risk of getting infected. These home-based package of services can be the New Normal health care delivery model utilizing the BHERTs and Barangay Health Workers.

Maternal and Child health services will likewise be strengthened by providing more technical assistance in establishing home-based service delivery system. Clients needing specialized care will be referred to the next level health facility as identified in the Health Care Provider Network.

**Ensure an effective and systematic health care management policy with strengthened infection control protocols in all health care facilities.** To effectively manage infectious diseases, increasing the number of fully-equipped isolation rooms and critical care beds, ventilators and related resources for use during a public health emergency in hospitals is vital.

A dedicated regional primary referral center for severe or critical emerging and re-emerging infectious diseases will ensure provision of timely and appropriate care and prevent cross infections among admitted patients. Transport vehicles will be available and occupational safety will be prioritized among health workers by providing them with PPEs.

DOH will provide technical assistance (training, logistic support) to all LGUs on health care waste management to include disposal of infectious wastes, used PPEs and handling of the remains of confirmed COVID clients. Health care personnel, especially those handling the cadavers should be capacitated on the proper management and disposal of the dead to ensure their safety and well-being and minimize the risks of exposure to infection especially the frontliners.

More crematoriums will be established in every province/city to cater to the dead bodies of COVID-19 while ensuring the health and environmental impacts to the local residents will be considered (see discussion at the Environment Cross-cutting concern).

**Upgrading/expansion/construction of health/treatment and quarantine facilities, including hiring of more health personnel.** The DOH will ensure that all treatment and quarantine facilities have enough health professionals, particularly doctors and nurses to accommodate the increasing number of COVID-19 cases of the region. Public and private health and treatment facilities and equipment will be upgraded, and if necessary, the number of COVID-19 dedicated hospital beds will be increased. Every municipality should have at least one standard quarantine facility to accommodate COVID-19 probables and suspects, incoming repatriates and strandeers in their respective localities. Hiring of more health professionals and other frontliners will be prioritized.

**Enhance capacities of health personnel.** COVID 19, as a novel health challenge, caught the health system ill equipped to address issues arising from the pandemic. The systematic and rational improvement of the health system response through building the capacity of health workers starts with capacity assessment for emergency preparedness and response to health-related outbreaks.

Open access training and capability building will be provided for health workers on the latest DOH-developed case management protocols on COVID 19 to include systematic health care management, proper waste handling, disease surveillance and mental and psychosocial support. This also includes capacity enhancement of disease surveillance officers (DSOs) on basic

epidemiology, contact tracing, enhanced SARI/ILI Surveillance, and Reporting and Recording of Notifiable Diseases.

The DOH will include the “Doctor to the Barrios Continuing Professional Education” in its HRH Deployment Program Plan to ensure available pool of epidemiologists in the LGUs. Also, LGUs will be encouraged to send qualified health workers to attend the two-year Field Epidemiology Training Program offered by the DOH.

Health facilities will be capacitated to address Emerging and Re-Emerging International Diseases (EREIDS). There is a need to strictly monitor the response plans of the LGUs and health care facilities to further enhance their capacities in addressing the EREIDS. This will include case detection, reporting and data utilization and functionality of EREIDS, management of infectious diseases and wastes as well as new minimum health standards which will be adopted as New Normal.

An organized and functional Barangay Health Emergency Response Teams (BHERTs) is essential in preventing entry and spread of COVID-19. BHERTs are responsible for tracking of persons with history of local and foreign travel, identification of PUMs and PUIs, informing the MHO of suspected persons, and monitoring and ensuring that PUMs are compliant with the self-quarantine protocols. DOH will capacitate the BHERTs with relevant trainings and continuous updates on COVID-related information to maximize their roles in tracking and monitoring health service targets. DOH will also develop a package health services beyond COVID 19 that can be delivered at the household level.

**Ensure availability of emergency supplies and medical logistics, including PPEs in treatment and quarantine facilities.** Public and private hospitals will ensure the availability and adequacy of supplies, medicines, and other equipment for COVID and non-COVID emergencies. With more number of COVID-19 cases, the more demand for PPEs. Health professionals and other frontliners will be provided with sufficient PPEs and proper orientation on their proper use. Proper donning and doffing procedures must be provided to health care workers before they perform patient care. Health facilities should conduct regular inventory of their PPEs and utilization rate to assess the actual needs and will request in advance the needed supply. Likewise, linkages with the private sectors and other institutions will be done for more donation of PPEs.

**Provide adequate mental and psychosocial support to aid individuals to restore their normal functioning.** Implementation of the Mental Health Program will be strengthened at all levels to minimize the number of people suffering from mental health issues such as anxiety.

Aligned to Inter-Agency Standing Committee (IASC) strategies, the DOH will orient and capacitate responders in psychosocial aspects of COVID-19 response, ensure inter-sectoral pathways in addressing mental and basic needs of people with pre-existing mental conditions and distribute timely information of services.

Mental Health Psycho-Social Support (MHPSS) activities for responders, frontliners, COVID-19 positive patients with their families and those in isolation and quarantine facilities will be

provided through the establishment of community-based mental health care facilities in all provinces, highly urbanized cities and clusters of municipalities. DOH will fully utilize electronic/digital platforms such as social media as opportunities for providing mental health services and in linking them to inter-sectoral referral pathways.

**Strengthen the Bureau of Quarantine’s mandate to ensure health security.** The pandemic has resulted to repatriation of OFWs and locally-stranded individuals to go back to their home provinces through air, land and water transportation facilities. The Bureau of Quarantine will encourage the establishment of quarantine facilities in major ports and airports to ensure security of travelers from public health threats.

**Intensify public health education campaign utilizing the quad-media.** The large volume of information on COVID 19 are available and easily accessible through social media and other electronic platforms. However, in some instances, there are confusing or fake news and opinions posted as valid information but with unreliable sources.

DOH will develop and operationalize Risk Communication Plan utilizing responsive media platforms to encourage aggressive physical distancing, better hygiene, self-isolation, and health-seeking behavior. Budget for health promotion and advocacy will be increased in the provincial, city and municipal levels health budgets in order to operationalize a responsive health promotion plan. Likewise, functional health promotion unit at all LGU levels with adequately manned and trained team composed of dedicated plantilla personnel to perform tasks on planning, media relations and materials development (quad-media) will be established. Health protocols will be adopted in schools, communities, health facilities and workplaces following DOH set standards to provide an enabling environment to support the practice of health promotive behavior.

#### *Sub-Outcome 2: Access and availment of services thru ensured health financing improved*

**Improve Social Health Insurance Coverage.** Underfunded public health programs limit the access of the vulnerable individuals on specialized health care putting them at higher risk of morbidity and mortality.

The Universal Health Care coverage is critical to ensure that women, children, elderly and the most vulnerable and marginalized groups have full opportunity to access health services to include relevant information, prioritized testing or treatment for COVID-19.

To ensure that no one should face financial, geographical, and cultural barriers that prevent access to health care, government will invest more into health preparedness and response to include the procurement of vaccines and medicines and the payment of social insurance premiums.

**Accredit more testing/laboratories to boost capacity in conducting testing for COVID-19.** As the number of COVID cases continue to rise, expanded targeted testing is essential to reduce the transmission rate of the virus. There is a need for more laboratories to start the expanded targeted testing of PUIs/PUMs, especially for the frontliners and health workers. Each province will establish their testing centers to reduce the turn-around time of specimen collection and

examination to ease the pressure in Western Visayas Medical Center in Iloilo which is already handling a large volume of specimens from all over the region.

DOH will fast track the accreditation of other hospitals like the Iloilo Provincial Hospital in Pototan, West Visayas State University Medical Center (WVSUMC) in Iloilo City and Corazon Locsin Montelibano Memorial Regional Hospital (CLMMRH) in Bacolod City to augment the Western Visayas Medical Center. The centers will be equipped with more testing kits, PPEs and medical health personnel, specifically with trained medical technologists that will handle the specimens for testing.

Additional Biosafety Laboratory 2 (BSL2) with Real Time Polymerase Chain Reaction (RT-PCR) testing capacity will be established in DOH hospitals and Level 2 hospitals in all provinces stocked with adequate number of testing kits.

### *Sub-Outcome 3: Multi-sectoral capacities to plan and respond to health emergencies strengthened*

**Strict implementation and monitoring of minimum health protocols by the LGUs, institutions and other establishments.** Wearing of face masks in public places and physical distancing, especially in public transportation, will be the “New Normal of the region to contain the spread of the corona virus. LGUs will intensify enforcement of COVID-19 health protocols with stiffer penalties. Strict enforcement and monitoring on the wearing of masks and physical distancing should be done regularly. Private establishments should strictly follow a set of health hazards, particularly the observance of physical distancing at their respective workplaces, strict observance of physical distancing of at least one meter apart, and constant disinfecting measures in high-traffic and frequently touched areas or spaces. Hand sanitizers and alcohol should also be provided and physical distancing markers should be conspicuously placed within the premises of the establishments.

Continuous sanitation and disinfection of all the offices and adjacent premises will be done. Large or mass gatherings in bars, amusement areas or even in religious activities will be strictly prohibited in quarantine areas. Movement of the vulnerable sectors such as persons below 21 years old, the elderly persons, those with co-morbidities, immuno-deficiencies and other risk factors, persons with disabilities, etc. will be restricted, except for buying essential needs like foods and medicines, seek medical or clinical care, hospital visits and consultations. The PNP will continue to intensify police visibility operations, including the observance of curfew hours, conduct of random checkpoints to encourage the public to continue their cooperation and remain vigilant against the spread of COVID-19.

LGUs will ensure appropriate screening and adherence to quarantine protocols for incoming strandeers/repatriates and other persons entering their localities.

**Institutionalize and operationalize a responsive Disaster Risk Reduction Management for Health (DRRM-H) Plan in all levels of governance.** DRRM-H Plans have been crafted and implemented in some LGUs in the region, but with this devastating pandemic, COVID-19 responsive interventions were not considered in the existing plans.

For the efficient and effective management of emergencies and various health challenges on outbreaks and disasters such as the COVID 19 pandemic, local DRRM-H plans must include Incident Command System and the organization of Inter-Agency Task Forces. Emergency Operations Centers and Temporary Treatment and Monitoring Facilities manned by adequate and trained health emergency response teams will be functionalized including the availability of sufficient health emergency commodities. The plan will also include a supply chain and management system to prevent stock-outs.

It will also contain interventions on strengthening coordination with stakeholders and engagement with communities in linking public health care provision during emergencies. More DOH personnel will be capacitated in responding to any disasters and emergencies. The improvement of the DOH OPCEN working space, provision of ambulance and amenities such as sleeping quarter, kitchen, lockers and mini conference room for discussion and teleconferencing will also be integrated in the Plan. The DRRM-H will be approved, updated, tested and disseminated.

**Catalyze the transformation of local health systems into province-wide and city wide health systems.** The challenge of COVID 19 has greatly overwhelmed the existing health system and for some time, utilized most of the health resources for COVID response. Other health services had to cease, increasing the risks of morbidities that could further burden the health system.

Service delivery network will be expanded to ease the burden of public health system and improve its absorptive capacity to continuously cater to the health needs of the population.

**Utilize Information Technology for policy development and dissemination.** To contain the spread of COVID infection, physical distancing will be aggressively enforced by limiting mass gatherings including meetings and seminars.

Taking advantage of advancements in technology, virtual meetings, conferences and other activities will be conducted to reduce the risk of face-to-face contact. Information technology based platforms and quad-media will be utilized to disseminate and popularize nationally developed government-enabled, local government-led and people-centered sectoral policies for the prevention, detection, isolation and treatment of COVID 19 and the continuity of routine services.

These electronic platforms can also be avenues for inquiries, feedback and monitoring of COVID-related information. LGUs can post their locally adapted policies and best practices for sharing and adoption by other LGUs. Close coordination among government and non-government agencies is crucial in the development, dissemination, and localization of policies as well as in monitoring of implementation and evaluation of results.

**Increase ICT capability at all levels.** Population mobility and gatherings increased the risk for cross infection. To limit these risks, electronic based interventions have to be developed, implemented and institutionalized.

This will entail procurement and upgrading of equipment needed for virtual video conferences and meetings and improvement of DOH VI website to provide updates on COVID-19 and links to other line agencies involved in COVID-19 response.

To strengthen service provision under the New Normal, hiring of human resource for health (HRH) to augment local health systems, innovations such as conduct of online examination, virtual interview of applicants and use of virtual platforms for the conduct of Pre-Deployment Orientation of newly-hired personnel will be introduced starting second half of 2020.

On the other hand, LGUs will also invest on electronic based training facilities that espouse the physical distancing prevention strategies to ensure that health workers continuously receive updates on the delivery of health services. Towards the New Normal, LGUs and other stakeholders will be capacitated in the utilization of digital technology in lieu of the current norms and work culture requiring mass gatherings and face-to-face interaction.

**Engage research stakeholders to generate evidence-based information on Emerging and Re-emerging Infectious Diseases.** COVID-19, being a novel infection, has no established database from which plans can be anchored. Appropriate health response is not timely delivered due to the lack of evidence-based plans. This pandemic is now an enormous challenge for the research community and calls for immediate action to accelerate the research and development process, and develop evidence-informed health-related policies, standards and new norms.

With the said gaps in the availability of local data, the DOH will facilitate and enable the engagement of the stakeholders of the research community in the region to build a more comprehensive database. Further, the DOH will support researches on emerging and re-emerging diseases. The project starts from research agenda-setting to include the new priority research topic, call for proposals to engage a research stakeholder who shall implement the research, and conduct of dissemination and utilization of research results among stakeholders.

### *Policy and Legislative Reforms*

The following proposed policy and legislative reforms for the health sector will be supported:

1. Revisit salient provisions of the NDRRM Act (RA 10121) especially on increasing contingency budget for the management of health-related concerns. The five percent (5%) Local Disaster Risk Reduction and Management Fund (LDRRMF) will be increased to support disaster risk management activities such as, but not limited to, pre-disaster preparedness programs including training, purchasing life-saving rescue equipment, supplies and medicines, for post-disaster activities, and for the payment of premiums on calamity insurance.

Also the Quick Response Fund, which is thirty percent (30%) of the LDRRMF will be increased to cover the relief and recovery programs in areas stricken by health emergencies such as the COVID-19, and other disasters, calamities, epidemics, or complex emergencies.



2. Amend the Magna Carta of Health Workers to increase benefits, specifically on the subsistence allowance for health workers and ensure that these will cover all health workers from the national to local levels. From 1991 to present, public health workers rendering services to hospitals and other health facilities have been receiving a subsistence allowance of PhP50 per day, which is not enough to cover meal expenses. It is proposed that subsistence allowance will be increased from PhP50.00 to PhP 200.00 – PhP 300.00 per day in compliance with the DBM guidelines for meal allowance.
3. Health Facilities to improve their pharmaceutical supply chain management through enhancing their policies on drug management and allocate additional budget for the buffer stocks of their essential medicines and medical supplies
4. Institutionalization of a Health Promotion Unit from the provincial down to municipal level with budget for health promotion and advocacy. To effectively implement health promotion plans, a Unit composed of 2-3 personnel should be established to delegate tasks on planning, media relations and materials development (quad-media).

## Economic and Livelihood

### Agriculture and Fisheries

#### *Outcomes*

Accessibility of domestic food and sustainability of agricultural supply chain ensured.

#### *Objectives*

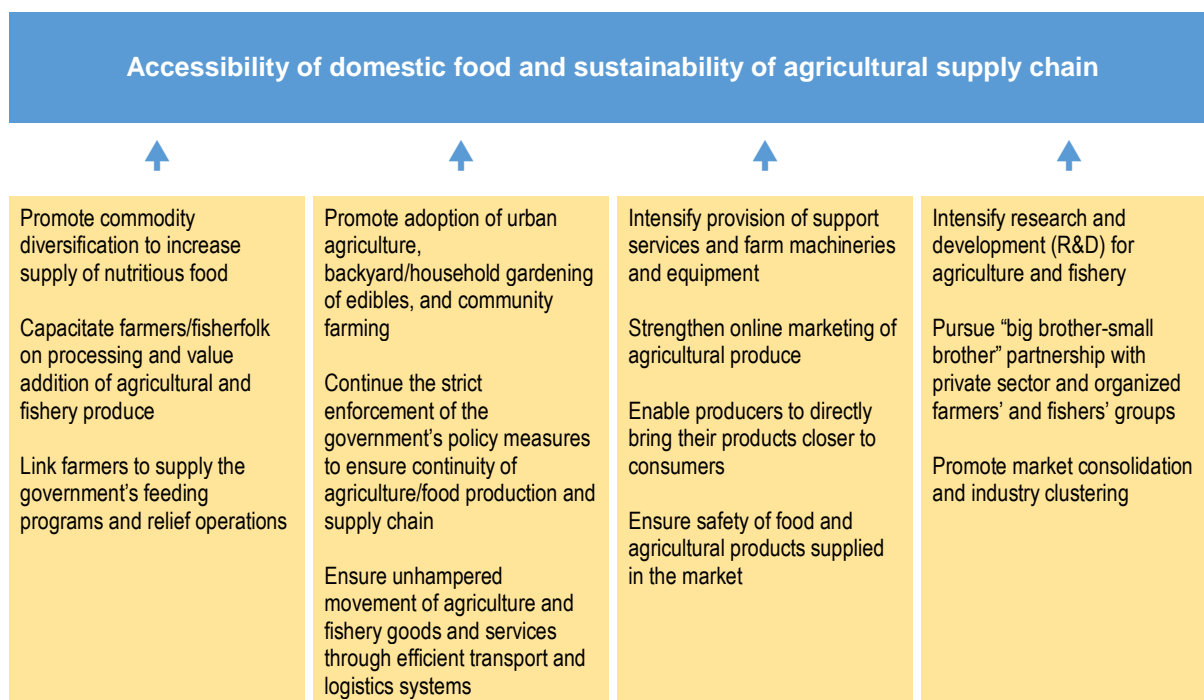
1. Empower farmer and fisherfolks to adapt to the challenges of public health and other emergencies
2. Ensure continuity of agricultural production and supply chain
3. Meet consumer demand for safe and nutritious food

#### *Targets*

1. Maintain sufficiency levels of the following:
  - a. rice sufficiency level of 115%;
  - b. pork sufficiency level of 157%;
  - c. beef sufficiency level of 159%
2. Keep the region free from African Swine Fever and other viral diseases of livestock and poultry;
3. All agri-mover applicants for “Food Pass” cards/stickers assisted;

4. All DA-Operations Center Assistance Hotline operationalized;
5. 11 KADIWA Outlets maintained;
6. At least 95 percent of the targeted farmers and fisherfolks provided with financial subsidy/assistance;
7. 1,167 kilometers of farm-to-market roads constructed

**Figure 27. Thematic Logic Model for Agriculture and Fisheries**



### Strategies

Challenges on both the supply and demand sides arising from changes in producer and consumer behavior need to be addressed to meet the country's food requirements during and after the public health crisis. Policy actions and strategies for 2020 to 2021 will focus on improving the productivity of the sector to meet the demand of the populace and addressing supply chain disruptions. Unhampered movement of A&F goods and services will be ensured through efficient transport and logistics systems. This would involve the construction of better road and transport infrastructures, as well as sufficient and strategically-located facilities such as wholesale food terminals and trading centers, warehouses, cold storage and refrigeration facilities, mobile storage, mobile marketplaces, rolling stores, and foodbanks. Specific strategies include the following:

**Promote commodity diversification to increase supply of nutritious food.** Considering the increased demand for nutritious food in time of the pandemic, farmers will be encouraged to engage in commodity diversification, particularly on crops with high market potential (e.g., fruits and vegetables). Diversification will provide additional income to farmers and help increase the supply of nutritious food to meet the consumers' demand in boosting their immunity and promoting a healthier diet. Programs to support crops diversification (e.g., RCEF-Crops Diversification Program) will be implemented to assist farmers' transition from cultivating single crop into various high-value commodities that are suitable in their locality.

**Capacitate farmers/fisherfolk on processing and value addition of agricultural and fishery produce.** Aside from increasing income through value-addition, processing (e.g., drying, canning) will also help preserve highly perishable agriculture and fishery-products and lessen handling and storage costs to be incurred by farmers/agribusinesses. Implementation of capacity building programs (e.g., DA-ATI and TESDA trainings on agri-processing and packaging) will be intensified to assist farmers/fisherfolk in value-adding activities and provide them with transitional livelihood.

**Link farmers to supply the government's feeding programs and relief operations.** Support services will be provided to farmers to facilitate the marketing and transportation of their produce from the farm to the national and LGUs conducting feeding programs and relief operations. Fresh or processed food products can be supplied by farmers to school children or individuals and families affected by any disaster.

**Promote adoption of urban agriculture, backyard/household gardening of edibles, and community farming.** Urban households and communities will be encouraged to produce fresh and healthy food from their own backyards and spaces, and contribute to ensuring food security. Vacant urban spaces can be utilized for gardening/farming and households will be encouraged to establish backyard 'edible' gardens. Community farming will be promoted especially in schools.

Vertical farming infrastructure could also be one of the technologies that city dwellers and city LGUs could utilize in establishing and sustaining their own urban agriculture systems in the New Normal. The use of vertical farming infrastructure is ideal to kickstart urban agriculture in various cities in the country due to congested and limited space.

Local government units are in a strategic position to perform a catalytic role in promoting urban agriculture by providing opportunities that will make it as a habit among its constituents. And this can be operationalized by mainstreaming urban agriculture in its land-use plan and climate change adaptation formulation process.

Inter-agency collaboration and streamlined processes will be needed for more efficient assistance to investors pursuing urban agriculture, particularly those utilizing hydroponics and aeroponics. The DA, in partnership with the LGUs, should intensify promotion of urban agriculture through the establishment of community gardens in barangays with vacant areas where they can plant, propagate, and produce their own vegetable requirements. The community gardens may also

serve not only as source of food and livelihood, but also as additional income for those who will sell their surplus.

**Continue the strict enforcement of government’s policy measures to ensure continuity of agriculture/food production and supply chain.** The current policies on ensuring unrestricted movement of agricultural and fishery products, including farm machineries and workers and addressing overpricing will continue to be strictly enforced. This covers simplified procedures for accreditation of “foodlanes” truckers/suppliers, listed of allowed food supplies, and exemption of all farming and fishery activities from planting to trading.

**Ensure unhampered movement of agriculture and fishery goods and services through efficient transport and logistics systems.** This would involve the construction of better road and transport infrastructures, as well as sufficient and strategically-located facilities such as wholesale food terminals and trading centers, warehouses, cold storage and refrigeration facilities, mobile storage, mobile marketplaces, rolling stores, and foodbanks. To establish such facilities, various modalities will be adopted (e.g., government-led, public-private partnership [PPP], joint ventures, etc.) involving national government agencies, LGUs, and the private sector, consistent with the whole-of-society approach.

**Intensify provision of support services and farm machineries and equipment.** The government will increase its subsidy, assistance, and support services for farmers, fisherfolk, and enterprises in the form of inputs, credit and insurance, and capacity building. Provision of farm machineries and equipment, in lieu of manual labor, will also be intensified, given the need to limit movement of people and sustained practice of social distancing even after the lifting of the enhanced community quarantine. Machine pooling and custom-hiring will be encouraged to meet the increased demand for mechanized farm operations. The Department of Agriculture (DA) will continue to provide financial assistance through the new DA-ACPC Expanded SURE Aid and Recovery Project or SURE COVID–19 credit program. This will allow marginalized small farmers and fishers including agri-fishery based micro and small enterprises whose incomes were affected by the community quarantine to borrow a non-collateralized loan at 0 percent interest. They also considered frontliners as they battle against the COVID-19 while playing a crucial role in ensuring the availability of food supply. Providing financial support is a way of helping agri-fishery MSEs and small farmers and fishers recover from their losses for them to continue their agri-fishery activities and contribute to sustained food production.

**Strengthen online marketing system for agricultural produce.** Supermarkets and retail food establishments will be encouraged to establish online or digital channels for transactions and delivery services. In areas where food and groceries delivery are not available, an online service delivery system, where buyers send a list of items to buy to a “pabili” service provider, may be explored as an option. Parallel to this, a registry system for online sellers or deliveries will be established to monitor and regulate the movement of people engaged in such transactions. Investments on ICT infrastructure will also be boosted to meet the surge for online transactions and the consumers’ expectations for quality and competent digital connectivity.

**Enable producers to directly bring their products closer to consumers.** Innovative means to bring farmers produce nearer to the consumers shall be facilitated like the “KADIWA ni ANI at

KITA” program of the DA. The program is direct marketing of major agricultural goods at reasonably low prices to help poor Filipino households. The DA in partnership with LGUs will not only be providing affordable and nutritious food, but also keeping farmers and fisherfolk afloat during the time of crisis. KADIWA NI ANI AT KITA is available in three variants: Kadiwa on Wheels, Kadiwa Retail, and Kadiwa Online which are tailored-fit depending on the customers’ requirements. Involved national government agencies and LGUs are encouraged to provide avenues or facilitate for farmers to bring their products physically closer or directly to the consumers while ensuring the prevention of the spread of the disease.

**Ensure safety of food and agricultural products supplied in the market.** Changes in consumer preferences such as the increased demand for safe and nutritious food would require strict enforcement of food safety laws, regulations, standards, and sanitation protocols. Regular sanitation of wet markets, slaughterhouses, dressing plants, warehouses, trading centers, fish ports or fish landing centers, and other related establishments should be done, especially at the LGU level. In support of such interventions, the processes of the Food and Drug Administration (FDA) on certification and roll out of developed technologies and products will be streamlined. Also, information, education, and communication (IEC) campaigns on food safety measures and healthy dietary habits must be intensified.

**Intensify research and development (R&D) for agriculture and fishery.** The government should intensify support for public research institutions and state universities and colleges on R&D programs for commercialization of safe, nutritious, medicinal or therapeutic, and well-packaged agri-food products. Partnerships and joint projects by DA, DOST, and DTI should be explored for the development of agri-food processed products with improved nutritional content and longer shelf-life.

**Pursue “big brother-small brother” partnership with private sector and organized farmers’ and fishers’ groups.** “Big brother-small brother” strategy will be pursued where mentorship and support will be established between large and better established agri-industrial, agri-fishery farmers and producers and small farmers, fisherfolk cooperatives and federations. The DA, BFAR, and PCA and the High-Value Crops Development Program will raise the level in partnering with big agribusiness firms, small and medium enterprises, and organized farmers’ and fishers’ to develop more innovative and competitive agri-fishery production and export products with emphasis on diversified and expanded value chain from farms and fishponds to processing.

**Promote market consolidation and industry clustering.** Cluster farming and market consolidation will be pursued to provide farmers and fisherfolks better access to markets, pricing information, technical and financial support, production inputs and supply chain networks. Small farm holdings shall adopt production schedules for identified crops which can be produced, harvested, consolidated to obtain higher volume and delivered in bulk at reduced cost and therefore higher farm income. Farmer groups can take advantage of current efforts under the DA-PRDP (Department of Agriculture – Philippine Rural Development Program) which provides key infrastructure, facilities technology and information to raise incomes, productivity and competitiveness benefiting farmers and fisherfolks in targeted areas. There is also the Sugar

Block Farming Project (SBFP) being implemented by the Department of Agrarian Reform (DAR) in partnership with the Sugar Regulatory Administration (SRA).

### *Policy and Legislative Reforms*

1. Passage of LGU ordinance institutionalizing, developing, and promoting urban agriculture, including mainstreaming urban agriculture in the local climate change action plan and comprehensive land use plan.
2. Policy mandating national and local governments to purchase produce from local farmers or producers for relief and school feeding programs.
3. Enhance incentives for e-Commerce and/or online marketing to encourage agriculture and fishery stakeholders to engage in digital technology

LGU ordinances enforcing strict guidelines in the issuance of sanitation permits for food establishments.

## Industry and Services

### *Outcome*

The resulting economic and financial dilemma brought about by the COVID-19 pandemic, especially during the quarantine period, has brought to the fore the vulnerability of the Industry and Services sector. The sector was especially hard hit resulting to economic and opportunity losses due to lockdowns and disruption of supply chains, changes in product priorities and preferences of consumers, higher production and delivery costs due to more stringent biosafety regulations, and lower workforce productivity because of new workplace protocols.

Western Visayas will pursue committed approaches that would enable it to navigate the pandemic and thrive in the New Normal. It will endeavor to synergize the programs, projects and activities of tourism, trade and industry with that of science, technology and innovation (STI) and financial services. This would lead to restored dynamism in the Industry and Services sector and a regional economy that is resilient from health emergencies.

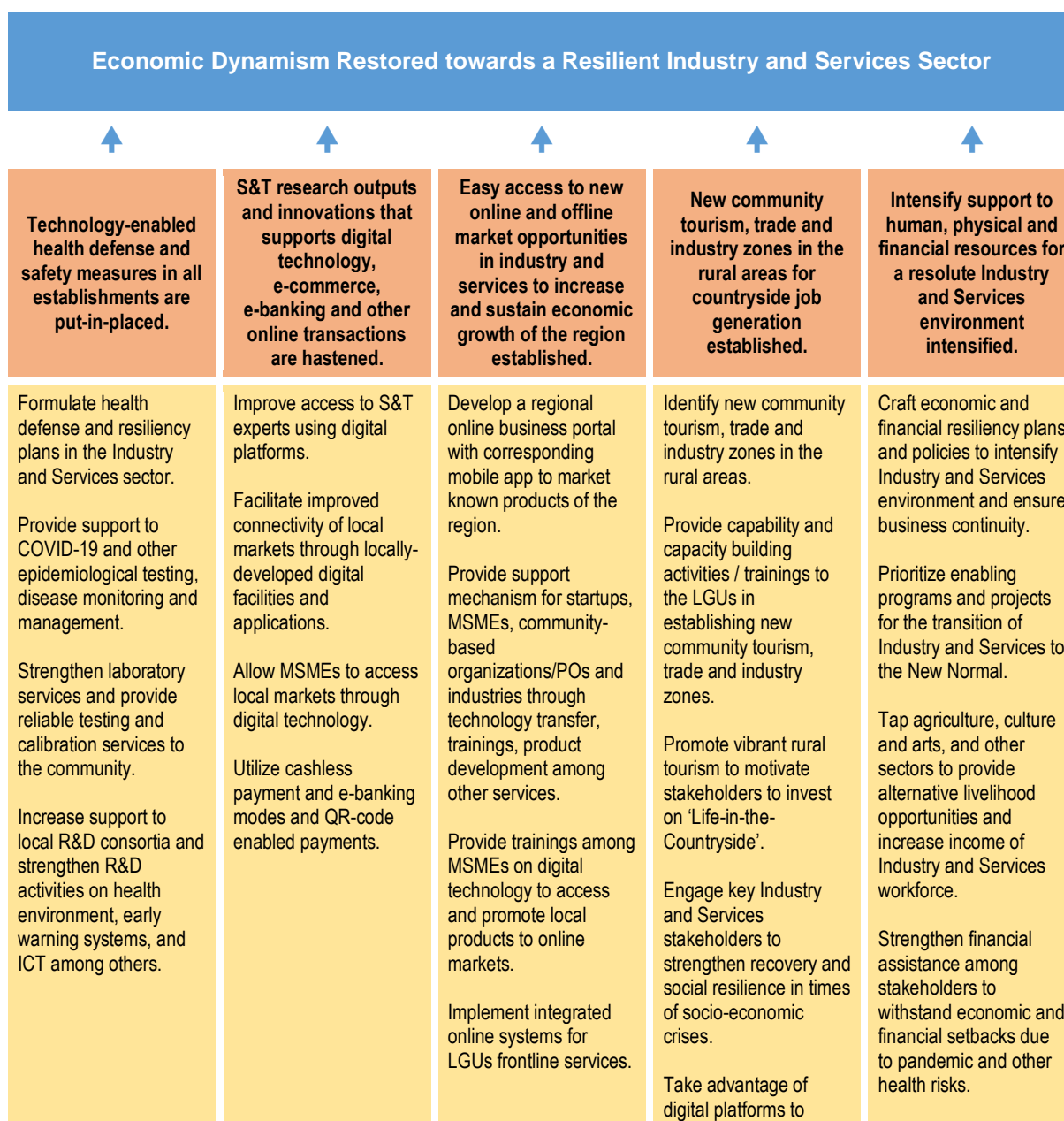
Toward this end, the details of strategies for the recovery of the Industry and Services sector are presented in the strategic framework as shown in Figure 26.

### *Objectives*

1. Establish technology-enabled health defense and safety measures in all establishments;
2. Fast track S&T research outputs and innovations that support digital technology, e-commerce, e-banking and other online transactions;

3. Facilitate easy access to new online and offline market opportunities in Industry and Services sector;
4. Establish new community tourism, trade and industry zones in the rural areas for countryside job generation; and,
5. Intensify support to human, physical and financial resources for a resolute Industry and Services environment.

**Figure 28. Thematic Logic Model for Industry and Services**



			create new tourism and cultural products.	Provide appropriate and adequate employment assistance to pandemic and crises-affected workforce.
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## Targets

1. 100% of MSMEs in tourism, trade and industry are fully operational;
2. 100% of establishments in the region formulated and implemented an Economic and Financial Resiliency Plan;
3. 100% of establishments put-in-place technology-enabled health defense and safety measures;
4. At least one (1) regional online business portal with corresponding mobile app that can market all known goods and services of the region established; and,
5. At least one (1) new community tourism, trade or industry zone in a rural area per province is identified and established

## Strategies

### *Establish technology-enabled health defense and safety measures in all establishments*

**Formulate health defense and resiliency plans in the Industry and Services sector.** MSMEs and all establishments will be required to formulate their respective Health Defense and Resiliency Plans (HDRP) in the application and renewal of business permits. DOH, DOT, DTI and DOST will collaborate to come up with a training module and conduct trainings on the formulation of HDRP that will facilitate appropriate response and actions for the recovery of the Industry and Services sector from any health threats such as COVID-19 and other viral and infectious diseases.

**Provide support to COVID-19 testing and other epidemiological testing, disease monitoring and management.** The DOST will take the lead in ensuring the distribution of Specimen Collection Booths (SCBs), promotion of UP-NIH/DOST testing kits, Feasibility Analysis of Syndromic Surveillance using Spatio-Temporal Epidemiological Modeler for Early Detection of Diseases (FASSSTER), TANOD COVID and other contact tracing applications.

**Strengthen laboratory services and provide reliable testing and calibration services to the community.** The setting-up and maintenance of a One-Stop Shop Laboratory for global competitiveness will be strengthen to include the provision of reliable testing and calibration services that are needed for the health and safety measures of all stakeholders in the region. OneLab involves the establishment of a referral system that will primarily integrate laboratories with the DOST system and eventually foster partnership with laboratories from the private sectors.



**Increase support to local R&D consortia and strengthen R&D activities on health environment, early warning systems, and ICT among others.** Continued collaboration with R&D consortia such as the Western Visayas Health Consortium (WVHRDC) and Western Visayas Consortium for Industry, Energy and Emerging Technology Research and Development (WVCIEEERD) will be pursued in order to implement necessary and appropriate interventions on health environment for the MSMEs, early warning systems, and ICTs. The region will likewise push for the increase of investments on R&D to support S&T innovations. Aside from responding to health and safety threats, the R&D will endeavor to prepare and equip the Industry and Services sector to be ready for the New Normal as well as the Fourth Industrial Revolution (FIRe).

*S&T research outputs and innovations that support digital technology, e-commerce, e-banking and other online transactions are hastened.*

**Improve access to S&T experts using digital platforms.** Through OneExpert and iTEACH, stakeholders will be given direct access to S&T experts who could assist in the enhancement of knowledge and skills of stakeholders on digital technology, e-commerce, e-banking and other online transactions.

OneExpert is an interactive web-based nationwide pool of S&T experts intended to provide technical advice and consultancy services to Filipinos anywhere in the country. On the other hand, the implementation of Improving Technology-Enhanced Activities for Creative Honing or iTEACH is intended to enhance the economic and financial resiliency of the Industry and Services sector.

**Facilitate improved connectivity of local markets through locally-developed digital facilities and applications.** Collaboration between DOST and DICT will be enhanced in order to upgrade internet connections up to 100Mbps Plan for the region. S&T innovations in the region will focus on developing local digital facilities and applications to increase accessibility of local markets to various available goods and services within and outside the region.

**Allow MSMEs to access local markets through digital technology.** The traditional way of buying and selling goods is time and energy consuming and buyers and sellers are exposed to various health and safety risks. To avoid face-to-face transactions, online marketing is preferred by most consumers. OneStore is a DOST-initiated platform that will make available online the various products of DOST-assisted MSMEs. OneStore allows door-to-door delivery and online payments, and products are easily and readily accessible, thus reducing costs on travel, materials, marketing, distribution and trade. Through mobile phones, emails and other ICTs, digital technology brings the MSMEs and their goods and services closer to the local market.

Another online platform developed in the region is “One Aklan Want Aklan”, which is developed by an MSME to assist producers in digital selling. In coordination with the DTI-VI and the Provincial Government of Aklan, this platform has evolved from just serving the food MSMEs but also those in the gifts and wearables sector.

Another initiative are the OTOP Hubs which are physical stores established under DTI OTOP Next Generation program that provides marketing assistance to MSMEs who have undergone product development and marketing support through market promotion and linkages.

**Utilize cashless payment and e-banking modes and QRcode-enabled payments.** The Economic and Financial Literacy Centers (EFLCs) of the Bangko Sentral ng Pilipinas (BSP) will intensify the information dissemination on cashless payments. BSP, in collaboration with private companies and banks, will conduct appropriate orientations and trainings to the LGUs and various stakeholders particularly on the basic applications of various e-banking modes and QRcode-enabled payments such as PayMaya and G-Cash.

*Easy access to new online and offline market opportunities in Industry and Services to increase and sustain economic growth of the region established.*

**Develop a regional online business portal with corresponding mobile app to market known products of the region.** Western Visayas will push for the synergy of DOT, DTI and DOST, including the banking and financial services sector, in developing a regional online business portal that can market the various goods and services available in the region. This synergy will embark on investing for a Big Data Technology, a software-utility that is designed to analyze, process and extract the region's information from an extremely complex and large data sets which the traditional data procession software could never deal with. Big Data Technology will promote soft and hard products of the region through centralized data banking system of all regional information. These include essential information of the trade and industry priority clusters, major tourist destinations, tourism circuit routes and packages; cultural and heritage information; arts, sports and entertainment industry; health and wellness industry; IT-BPM facilities; and available education offerings and degree programs of the region's top performing state colleges and universities.

**Provide support mechanism for startups, MSMEs, community-based organizations/POs and industries through technology transfer, trainings, product development among other services.** S&T services will contribute to the revival of the economic activities and livelihood in the region through digital transformation so that MSMEs can operate within the confines of physical distancing, changing consumer preferences, and supply chain disruptions. DOST, in coordination with DTI, will ensure the implementation of Small Enterprise Technology Upgrading Program (SETUP) iFund and the GIA program in order to rebuild consumer and business confidence. Innovative start-ups will be supported through the DOST-Technology Business Incubators (TBIs) and Innovation Centers.

**Provide trainings among MSMEs on digital technology to access and promote local products to online markets.** DTI will implement various trainings such as Online Entrepreneurship Training to K-to-12 and young entrepreneurs and the capacity development programs such as a reboot of Ctrl Biz Online Platforms (i.e. webinars and virtual sessions), cluster-focused mentoring and counseling, and radio programs. The Reboot Package for online MSMEs will include: a) internet/solutions/starter kit with free website development; b) marketing (free advertising support), discounted shipping/delivery costs; c) access to soft loans/financial assistance; and d) on-boarding to e-commerce platforms.

**Implement integrated online systems for LGUs frontline services.** In collaboration with DICT, integrated online systems for LGUs frontline services will be implemented. The iBPLS program will improve the ease-of-doing business in the LGUs particularly in the issuances of various permits on business, building, occupancy and sanitation including the processing of barangay clearances. Other DICT initiatives and assistance to the LGUs will be discussed further in the Infrastructure Sector.

*New community tourism, trade and industry zones in the rural areas for countryside job generation established.*

**Identify new community tourism, trade and industry zones in rural areas.** LGUs will be encouraged to identify potential community tourism, trade and industry zones in the rural areas. This will motivate people, particularly young and business driven entrepreneurs to invest on micro and small enterprises close to their hometowns. The establishment of new sites for economic activities opens new doors for job generation to the regions professionals and highly-skilled workers in the countryside, so as to decongest the urban centers.

**Provide capability and capacity building activities/trainings to the LGUs in establishing new community tourism, trade and industry zones.** This is another synergy option for DOT, DTI and DOST, in collaboration with the LGUs, in creating new centers of community-tourism, trade and industry zones in potential rural areas that will have a spread effect of socio-economic development growth in its surrounding towns. There is a growing demand on rural and agro-tourism in the international market, thus, the region can take advantage on this demand and offer various rural and agro-tourism circuit routes for all tourists. This will also paved the way for the acceleration of business opportunities and livelihood, not only for the region's agricultural produce, but also for all artists and artisans, who are displaced and have lost income in the time of pandemic. Expand coverage of DOST's iTEACH to provide appropriate capability and capacity building activities to the LGUs and the workforce of key economic drivers of Industry and Services sector.

**Promote vibrant rural tourism to motivate stakeholders to invest on 'Life-in-the-Countryside'.** Strong involvement of all the municipal, city and provincial tourism offices, local culture and arts councils (LCAC), knowledge development centers (KDCs) on culture and the arts, will be fostered to create a vibrant rural tourism through varied offerings of culture-based products in the countryside. Adopting the 'culture-based economy (CBE) approach of community development'<sup>25</sup> in the region will attract young entrepreneurs to invest in the culture assets of the potential rural areas, thereby providing a stable, secure and comfortable life in the countryside.

**Engage key Industry and Services stakeholders to strengthen recovery and social resilience in times of socio-economic crises.** DOT will expedite the crafting of a COVID-19 Mitigation and Recovery Plan for Tourism. On the other hand, DTI will facilitate the efficient functioning of the supply chain involving DA, DAR, BFAR and DOST. BSP will also cascade the new guidelines on banking systems and processes in accordance to the required economic and financial resiliency conditions in the New Normal environment.

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<sup>25</sup>Culture-based Economy (CBE): A Saemaul (New Village) Development Approach for the Philippines (Andong and Park 2016)

**Take advantage of digital platforms to create new tourism and cultural products.** Health crises such as the COVID-19 pandemic and other future infectious diseases restrict travel and hamper mobility but it will not totally cripple the tourism sector. The region's experience on COVID-19 pandemic paved the way for the development of digital content that enabled tourists to enjoy their dream destinations even at the comfort of their own homes. Museums offered virtual tours, libraries catered to online subscriptions and performances have been shown online, not only to entertain people during the Stay-At-Home period but to also to raise funds for various causes such as providing financial assistance to displaced artists and technical personnel. These artists and workers lost their income due to cancellation of shows and productions. In addition, performances screened online helped in alleviating the stress and other mental health problems of the people during lockdowns. DOT, along with local tourism councils and local artists, could also explore developing new tourism products rooted on the region's rich culture, arts and heritage.

*Support to human, physical and financial resources for a resolute Industry and Services' environment intensified.*

**Craft economic and financial resiliency plans (EFRPs) and policies to intensify Industry and Services environment and ensure business continuity.** All MSMEs will formulate their respective EFRPs. LGUs and DTI will be encouraged to make this a pre-requisite in the application and renewal of business permits. LGUs will be enjoined to pass necessary executive orders or local ordinances to the crafting and implementation of EFRPs. BSP and other government financial institutions (GFIs), in coordination with NEDA, will be tapped to provide the necessary training on the formulation of the EFRPs among the MSMEs.

**Prioritize enabling programs and projects for the transition of Industry and Services to the New Normal.** DTI will establish and maintain the *Negosyo Centers* as Recovery Centers for MSMEs. *Negosyo Serbisyo sa Barangay* will be strengthened and Livelihood Seeding Kits will be provided. Shared Service Facility and One-Town-One-Product Next Generation (OTOP Next Gen) will be enhanced to enable restoration of economic dynamism in the region. Stakeholders will be encouraged to participate on various digital marketing events. Other priority programs and projects to be implemented by DTI are: Industry Cluster Enhancement Program, SME Development Program to promote entrepreneurship, Consumer Protection Program and Consumer Education and Advocacy Program.

**Tap agriculture, culture and arts, and other sectors to provide alternative livelihood opportunities and increase income of Industry and Services workforce.** DTI and DOT will tap other sectors such agriculture, culture and arts, and other sub-sectors in order maximize the available livelihood opportunities in the region that will contribute to the income increase and universal welfare of Industry and Services workforce.

**Strengthen financial assistance among stakeholders to withstand economic and financial setbacks due to pandemic and other health risks.** BangkoSentral Financial Institutions (BSFIs) will be strengthened through the issuance of various policies and guidelines among BSFIs to protect human, physical and financial assets to withstand economic and financial challenges brought about by COVID-19 and other future infectious diseases and safety risks.

Collaboration of BSP and Bankers Association in the region, will be established to implement a region-wide rules and regulations on physical distancing and, ensure adequacy of cash supply, and implement mutually-acceptable banking hours to adjust with the New Normal. BSP will also remind the BSFIs to employ multi-layered security defense strategies against cyber-attacks and continuously roll-out information security awareness campaigns to their employees, clients and other relevant stakeholders.

Lending and credit support of business sectors, particularly MSMEs. (i.e. SB Corporation's P3) including support to farmers and fisher folks (i.e. DA's SURE Assistance Program) will be provided. Appropriate actions for loan restructuring will be implemented alongside the provision of grants and loan facilities for LGUs to support funding of their PPAs. Insurance coverages to all stakeholders will be enhanced and lending programs for government employees will be strengthened.

In terms of tourism stakeholders, DOT will ensure to provide the immediate needs of tourists and stakeholders during pandemic and to provide market incentives and support for businesses and destinations to access domestic and international tourists

**Provide appropriate and adequate employment assistance to pandemic and crises-affected workforce.** Based on the lessons learned during the COVID-19 pandemic, necessary measures to assist employment should be pursued in the region. This includes the provision of cash-for-work programs (i.e. DOLE's TUPAD), capacity building and livelihood programs to be provided by DOT, DTI and DSWD to affected workforce. Skills retooling training programs for displaced workers and other skills enhancement programs for workers will be implemented.

Recruitment activities such as job fairs and other job search or placement activities will be conducted by DOLE in cooperation with DTI, DOT, DOST and LGUs. It is also high time that government should formulate necessary policies and programs to implement a Government Internship Program to motivate displaced workers and the unemployed /underemployed individuals to apply for jobs in government offices. The internship program will help prepare the person with the necessary skills and knowledge in order to get a permanent job.

### *Policy and Legislative Reforms*

The following are the policy and legislative reforms for Industry and Service sector of the region:

#### *Region-Specific Policy and Legislative Reforms*

1. Requirement of an Economic and Financial Resiliency Plan (EFRP) for MSMEs applying or renewing their business permits.
2. Formulation of a Health Defense and Resiliency Plan (HDRP) for all local government units.

3. Adoption and utilization of digital technology such as Big Data Technology or other database system platforms among DTI, DOT, and DOST for easy collaboration and coordination.

#### *National Policy and Legislative Reforms*

1. Revisit the Data Privacy Act of 2012 (RA 10173) to strengthen safeguards to avoid data privacy breaches particularly to prevent bank phishing scams and other online fraudulent transactions.
2. Passage of a law that will allow flexibility, shifting and refocusing of production of manufacturers for products or goods that are needed in times of pandemic. Based on experience, manufacturers cannot easily shift and refocus their production on the type of goods that are urgently needed in time of pandemic. There is no existing law in the Philippines that allows manufacturers to immediately shift production in time of crises unlike other countries that enables manufacturers to be flexible and shift production within 24 hours.

## Social Services

Responses to the COVID-19 pandemic under the social services sector cover the education and training, social protection and housing services. Education covers basic education, higher education and vocational technology training.

#### *Outcomes*

1. Adaptable education and technical skills learning under the New Normal conditions.
2. Accessibility and sustainability of Social Protection and Housing Services for the most vulnerable and at risks population.

#### *Sub-outcomes on Education and Training*

1. Adverse effects of COVID-19 on learners, teachers and the education system minimized;
2. Innovative ways on basic and higher education adopted;
3. Operation of basic and higher education sustained; and,
4. TVET programs supportive of transition to New Normal.

### *Sub-outcomes on Social Protection and Housing Services*

1. Vulnerable groups' protection needs enhanced/sustained;
2. Health and safety of vulnerable groups protected;
3. Emergency/financial programs accessed; and
4. Housing related needs of vulnerable sectors responded.

### *Objectives*

#### *Education and Training*

1. Ensure continuous operation of basic and higher education services through on-site and off-site delivery mode;
2. Upgrade competencies of teaching personnel on the new teaching modalities;
3. Capacitate learners, parents/guardians on the access of learning resources adopting the New Normal scheme;
4. Institutionalize online/ technology-based policies, systems and processes based on national standards and guidelines;
5. Minimize the adverse effects of COVID-19 on learners, teachers and the education system/learning institutions;
6. Ensure the readiness of learning institutions and their ancillary facilities for the requirements of the New Normal;
7. Develop innovative and flexible Technical Education and Skills Development (TESD) regulatory programs that are adapted to the new environment;
8. Design and implement innovative and accessible TESP Programs to meet the needs and requirements of target clientele and partners; and,
9. Strengthen institutional capacity of TESDA employees to be responsive and adaptable to all forms of crisis, especially in this COVID-19 pandemic.

#### *Social Protection and Housing Services*

1. Ensure the equal access of the most vulnerable and at risk people (poor, women, children, PWDs, elderly, IPs, urban poor, formal and informal workers, informal settlers, OFWs, housing sector, etc.) to assistance, services, and right information and protect them against stigma and discrimination.

## Targets

### Education and Training

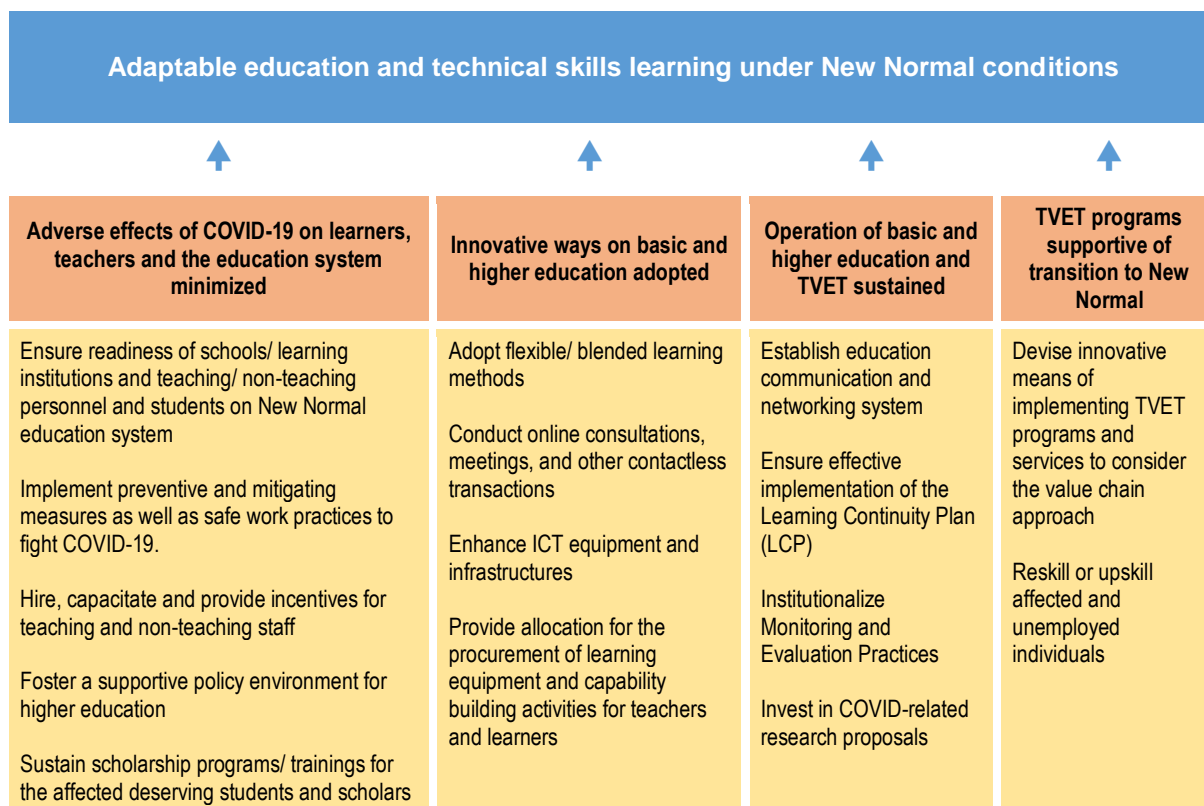
1. 100% of teaching personnel on basic and higher education capacitated on the new teaching/flexible modes;
2. 100% of learning institutions adapted the flexible/blended learning modes;
3. 100% of learners, parents/guardian have access to learning resources;
4. All schools/institutions have established functional handwashing facilities according to health emergency standards;
5. All schools/learning institutions/HEIs personnel and students strictly observe proper physical distancing and wearing of masks;
6. All HEIs have adequate water and sanitation facilities including PPEs (that may include thermal scanners, CCTVs, drones);
7. All HEIs fully implemented E-enrollment system;
8. All students adopting face-to-face instruction/online virtual learning completed the program requirements;
9. At least 90% of HEI students provided with mental health program;
10. All HEIs have improved internet/WiFi connectivity from their current capacity;
11. At least 50% of public and private HEIs have conducted COVID-related research proposals
12. Six (6) training for learning facilitators in flexible learning delivery conducted;
13. Twenty-four (24) e-Learning materials (for flexible/or eLearning delivery) developed;
14. Twenty (20) learning facilitators trained in agriculture through online/flexible learning mode and “learning through experience”;
15. Twenty-four (24) partnership/convergence arrangements with concerned LGUs, agencies, and the private sector established;
16. Six (6) Competency-Based Learning Materials (CBLMs) inventories conducted;
17. Twenty-four (24) CBLMs converted into flexible/On-Line Learning Materials; and
18. Twelve (12) TESDA Technology Institutions installed with ICT facilities.



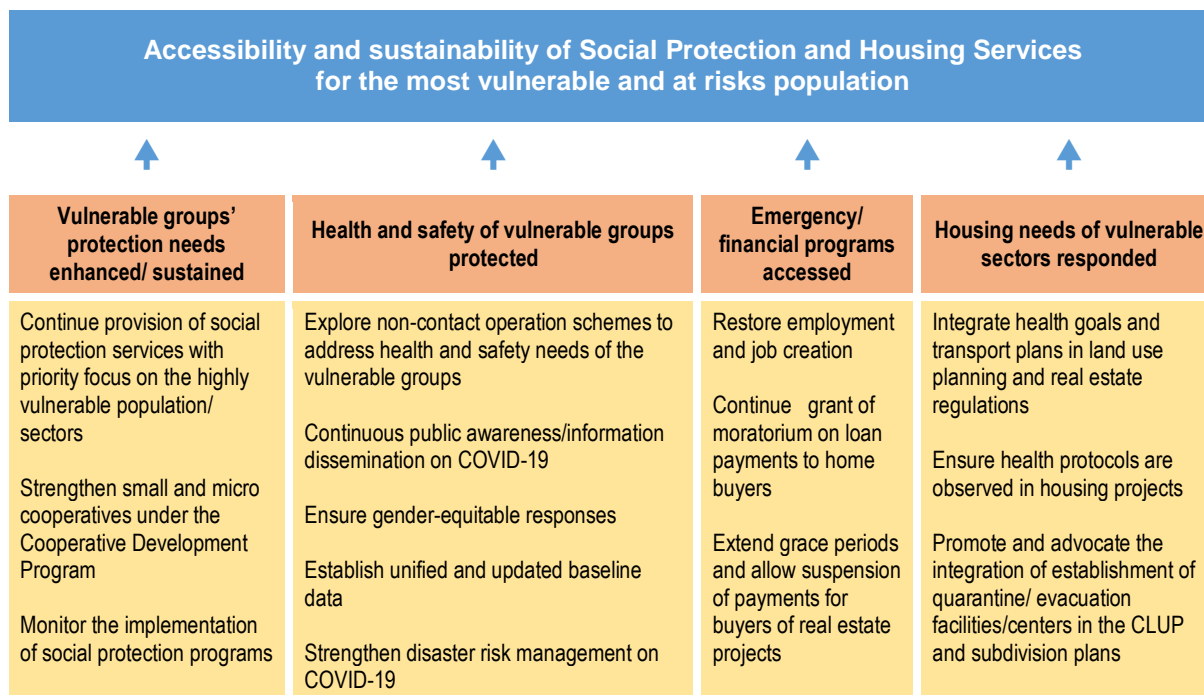
### *Social Protection and Housing Services*

1. 322,313 Pantawid Pamilya households provided with conditional cash grants;
2. 365,908 indigent senior citizens provided with social pension every semester;
3. 193,922 children in Child Development Centers and Supervised Neighborhood Plays provided with supplementary feeding;
4. 26,629 families provided with Livelihood Assistance Grant (6,129 families in 2020 and 20,500 families in 2021);
5. 35,100 individuals and families provided with both psychosocial services and monetary assistance through Assistance to Individuals in Crisis Situation;
6. 5,000 newly graduated nurses or those seeking first employment after graduation provided with jobs;
7. 15,000 nursing assistants, primarily from returning unemployed OFWs hired;
8. 939,000 TUPAD beneficiaries provided with cash assistance;
9. At least 75% formal and informal workers provided with LGU Emergency Employment Assistance Program (LEAP);
10. At least 75% wage and salary workers in private establishments' cash assistance provided;
11. 100% of freelancers, gig workers, project-based workers provided with one-time assistance of PhP 5,000;
12. 100% of micro and small cooperatives' officers provided with online capability building programs;
13. All agencies and LGUs implemented the Regional Contingency Plan on COVID-19;
14. National Identification System operationalized and implemented;
15. 100% of updated/enhanced Local Shelter Plans starting 2020 include the provision of healthy and adequate homes and spaces; and
16. 100% of updated/enhanced Comprehensive Land Use Plans (CLUPs) starting 2020 integrated public health goals and Transport Route Plans

**Figure 29. Thematic Logic Model for Education and Training**



**Figure 30. Thematic Logic Model for Social Protection and Housing Services**



## Strategies for Education and Training

### Sub-Outcome 1: Adverse effects of COVID-19 on learners, teachers and the education system minimized

**Ensure readiness of schools/learning institutions, teaching/non-teaching personnel and students on New Normal education system.** School facilities will be improved corresponding to the established health protocols in time of the pandemic. Health protection materials and supplies will be provided at all times in schools and offices. Rapid testing will be conducted to all teaching and non-teaching personnel as preventive measures against COVID-19. Online platforms will be primarily utilized to limit physical contact in the conduct of workshops and conferences.

For schools and learning institutions which may adopt the physical or face-to-face learning scheme, classrooms will be redesigned prior to school opening. Based on the standard size of classrooms, the number of learners will be limited to 20-25 for lecture classes and 15 for laboratory classes to maintain physical distancing. Vacant rooms, conference/meeting halls and audio visual rooms will be maximized for lecture and laboratory activities. Each classroom will be provided with functional washing facilities and improved toilet amenities.

The number of learning resources (LRs) online/offline to support the delivery of the essential learning competencies will be increased. Online and confidential psycho-social support/therapy and psychological first-aid will be provided for free to students and teachers in both private and public HEIs. This is highly needed as some students and teachers are in need of psycho-social guidance due to extreme stress caused by the abrupt disruption of their normal daily routine.

Values education is essential for individual's personal development and will be re-integrated in the education curriculum, especially in basic education, to address proliferation of teenage crimes, suicides, violence, bullying, drugs and promiscuous behavior among teenagers. By reintegrating values in the curricula, good manners and right conduct will be taught including the value of family, love of country, solidarity, as well as understanding the political, cultural and religious differences. Emphasis on human rights, gender and development, mental health, protection of the minority, environmental conservation will be also highlighted. Cleanliness and proper health hygiene and sanitation practices will be reinforced as preventive measures against illnesses and viral contamination.

**Implement preventive and mitigating measures as well as safe work practices to fight COVID-19.** Each office/unit will ensure the health and safety of its respective workplace, including employees' security. The use of alternative work scheme/arrangement of skeletal force in the office and work-from-home arrangement will be put in place. Teaching and non-teaching staff will be encouraged to follow the New Normal practices like physical distancing, provision of sanitation and disinfectants, wearing of masks and personal protective equipment to prevent work exposures, etc. Sanitation and wash facilities will also be installed near the entrance gates of schools. Proper waste management, collection, storage, transfer or elimination of wastes will be strictly implemented. Teaching personnel will train their learners/students on proper hand washing and safe management of drinking water to avoid potential water contamination.

**Hire, capacitate and provide incentives for teaching and non-teaching staff.** DepEd and CHED will fast track the hiring of additional teachers to address the lack of teachers/instructors of schools/learning institutions. Faculty and staff, especially in the private education will be provided incentives under the Wage Subsidy Program and the DOLE-CAMP to address the “no work, no salary” scheme of some private institutions. Personnel working from home will be provided with internet devices and communication allowance.

Teaching personnel will be capacitated on online technology to enable them to adjust to new modes of learning. Webinar activities for continuous professional development of teaching personnel will be conducted and regulated. Non-teaching personnel in schools, regional office and school divisions will also be trained on how to use ICT devices and utilize the existing and to be implemented online system for online transactions.

**Foster a supportive policy environment for higher education.** State policies down to regional and local laws and regulations should be reviewed and assessed if they are adequate to support programs and activities geared toward the improvement of the educational system to make it more resilient in times of pandemics. Existing courses will be reviewed and if necessary, new courses will be developed to ensure their relevance in time of COVID-19 pandemic.

**Sustain scholarship programs/trainings for the affected deserving students and scholars.** Provision of free tuition fees for SUCs and local universities and colleges (LUCs) will be sustained. DSWD will update its list of 4Ps beneficiaries to accommodate more poor but deserving students. CHED and TESDA will ensure that funds for the scholarship and training programs are released before the opening of the CY 2020-2021. The Universal Access to Quality Tertiary Education Act (UAQTEA), program which provides free tuition and other school fees in SUCs, LUCs and state-run technical vocational institutions (STVIs) will be sustained. Tertiary Education Subsidy and Student Loan Program (TES-SLP) and Unified Student Financial Assistance System for Tertiary Education (UniFAST) will be strengthened.

#### *Sub-Outcome 2: Innovative ways in basic and higher education adopted*

**Adopt flexible/blended learning methods.** Structured or staggered size of classes with flexible learning methods will be adopted when face to face interaction is limited. Necessary adjustments in the curriculum and alignment of learning materials will be done coupled with relevant support to teachers and parents. Shifting of classes will be adopted depending on the needs. In remote areas, the use of take-home reading methods or conduct of physical classes maybe adopted but with a very limited number of students per class. The schedule of classes can be arranged to maintain physical distancing and students may not physically report to class all at once.

For online or e-learning method, the use of modules containing materials and tasks that students can work on in their homes will be provided.

Students who cannot afford gadgets like laptops, smartphones, and a stable internet connection can use alternative procedures. Radio and television medium will be used for the delivery of lessons, especially to far-flung areas. For those without TV and radio sets, students can instead

avail of the learning modules from their respective local government units. Whatever mode of learning which will work for the learners will be used. The barangay officials will implement preventive and mitigating measures and safe work practices against COVID-19.

**Conduct online consultations, meetings, and other contactless transactions.** Seminars, training and technical assistance, electronic disbursement process, psychological assessment and evaluation of personnel, validation and monitoring, and coaching will be conducted online. Appropriate learning materials will be developed for webinars. Application and processing of enrolment, scholarship availments/grants, request, processing and releasing of graduation requirements (request for diploma and transcript) on HEIs will be done electronically. Monitoring and provision of demand-driven technical assistance on the different learning modalities will be done online.

The DepEd and the CHED will communicate to all concerned agencies and local government units about the priorities of the education sector in the New Normal. Co-curricular and extra-curricular activities (to include sports) that require mass gathering and physical contact will be restricted except those that could be conducted online and will allow physical distancing. These online activities will be regulated and monitored to ensure quality and effectiveness in learning acquisition. The education sector will focus on teaching-learning delivery to comply with the minimum learning competencies required.

The conduct of online courses can reduce the face-to-face contact among learners. Massive Open Online Courses (MOOCs) will be strengthened. The MOOCs aim to inspire, rekindle and sustain teacher's passion for teaching and improve their core competencies. Education agencies should collaborate with the private sector and professional organizations to increase the number of accredited online courses for Continuing Professional Development.

**Enhance ICT equipment and infrastructures.** In order to efficiently deliver education services, ICT equipment in the offices for online services will be upgraded. In schools and universities, ICT infrastructures will be expanded. Schools will be provided with functional ICT equipment and internet connectivity for learners, teachers, school heads and non-teaching personnel.

DepEd and CHED will coordinate with DICT to ensure wifi connections in public places in order to improve students' and teachers' access to internet.

**Provide allocation for the procurement of learning equipment and capability building activities for teachers and learners.** Additional allocation will be provided for the development of learning materials and modules, for training and capability building activities on blended or flexible learning classes in order to competently prepare teachers for alternative modes of teaching in anticipation of abrupt disruptions in regular school operations.

Procurement of learning equipment for teachers such as gadgets, laptops and the like will be given priority. Radios will be provided to poor households in far flung areas who do not have access to electricity to ensure continuous and quality education for their children.

### *Sub-Outcome 3: Operation of basic and higher education sustained*

**Establish education communication and networking system.** The flow of accurate and reliable information on a timely manner is essential in ensuring that the COVID-19 rehabilitation and recovery efforts are properly disseminated through quad media. The education sector's New Normal plans and guidelines will be communicated mainly through the issuances of official communications that will be posted in the agencies' official websites. COVID updates, office memoranda, advisories including the changes and New Normal strategies will be disseminated online through the conduct of virtual press conferences, online dialogues, and other online media.

The DepEd and the CHED, including the teachers of HEIs who were capacitated on the medical, social, and psychological impacts of the virus will provide orientation and information drives on COVID-19 to their students. Easy-to-understand and catchy information and education communication materials will be disseminated online through the schools' official websites or student publications and social media and will be continuously posted in strategic areas of the schools. Feedback mechanism will be put in place at the community level so that comments and suggestions for improvement can be generated.

**Ensure effective implementation of the Learning Continuity Plan (LCP).** The LCP contains, among others, health safety measures to guide learners, teachers and personnel in time of COVID-19. Upon its approval, this will be properly disseminated and effectively implemented. The DepEd and the CHED, will partner with other agencies and stakeholders in creating and maintaining a learning management platform for flexible learning with teachers and students for them to easily adopt to the New Normal situation.

**Institutionalize online monitoring and evaluation practices.** Management decisions and policy recommendations will be based on existing web-based system and electronic data. The DepEd's Regional Monitoring, Evaluation, and Adjustment (RMEA) and Division Monitoring, Evaluation, and Adjustment (DMEA) technology will be utilized by all its offices in the submission of their accomplishments every quarter instead of face-to-face practice. Accomplishments will be based on the online expenditure matrix of each office using Program Management Information System of DepEd. Presentations of accomplishments and adjustment of plans will be conducted online.

**Invest in COVID-related research proposals.** The CHED will promote the conduct of research programs and encourage HEIs, especially the SUCs to undertake COVID-related research proposals and funds will be provided for this purpose. Data gathering, surveys, focus group discussions, research presentations, conferences and the like will be conducted on-line using various platforms/applications. DepEd will update the regional and division basic education research agenda that will prioritize the New Normal research topics. Action research interventions will focus on teaching-learning issues and problems. Approved research proposals will be funded through the grant facility of the Policy Research Program or the Basic Education Research Fund (BERF).

#### *Sub-Outcome 4: TVET programs supportive of transition to New Normal*

**Devise innovative means of implementing TVET programs and services to consider the value chain approach.** Flexible and dynamic approaches will be adopted in the technical education and skills development regulatory programs, utilizing ICT or online modes in the processing of applications, inspection, validation, authentication, verification and issuance of certifications and compliance audit. TESDA programs shall focus on strengthening collaborations with concerned government agencies, LGUs and other stakeholders. Partnership in support of the Bayanihan Act shall be pursued along with the development of Enterprise-based Training Guidelines compliant to COVID-19 precautionary measures to include production of PPEs (e.g. face masks, face shields, protective body suits, goggles, hand sanitizer and surface disinfectants) through training-cum-production programs. Trainings for learning facilitators in online/blended training mode, "learning by experience", will be implemented. An inventory of TESDA Technology Institutions (TTIs), that can implement training programs on health-related qualifications shall also be facilitated.

**Reskill or upskill affected and unemployed individuals.** TVET can cater to students who will be affected or will drop out from school, including reskilling or upskilling those who have become unemployed due to work stoppage. Development of skills necessary for the adjustment to structural changes due to the COVID-19 pandemic will be facilitated. The acquisition and development of foundational cognitive and socio-emotional skills will be continued to improve the employability of TVET scholars. These skills such as empathy and resilience have become increasingly valued in the current circumstances. Moreover, investment in learning technology and digital skills of TVET instructors and students can ensure lifelong access to learning opportunities and future workforce adaptability. TESDA will partner with SUCs and private sector in reskilling or upskilling the learners with collaborative learning opportunities for them to be more productive. Displaced or temporarily closed MSMEs can partner with the private sector like shifting to other businesses (when necessary) to recoup their losses during the quarantine periods (See more discussion in thematic area on Industry and Services).

#### *Strategies for Social Protection and Housing Services*

##### *Sub-Outcome 1: Vulnerable groups' protection needs enhanced/ sustained*

**Continue the provision of social protection services with priority focus on the highly vulnerable population/sectors.** The COVID-19 outbreak affects all segments of the population, especially the vulnerable sectors (women, children, elderly, PWDs, informal workers, OFWs, IPs, farmers, fisherfolks, informal settlers, etc.) Social protection programs will be sustained and enhanced to reduce the vulnerabilities of these individuals and families. DSWD will sustain and enhance their SAP, 4Ps, assistance to individuals in crisis situation and social pensions for the indigent senior citizens. Supplementary feeding for children will be continuously provided to all child development centers and supervised neighborhood plays. DOLE and OWWA will continue to provide the displaced/disadvantaged workers/OFWs like the Tulong Panghanapbuhay sa ating Displaced/Disadvantaged Workers (TUPAD), LGU Emergency Employment Assistance Program (LEAP), Wage Subsidy Program, Nurses for Occupational Safety and Health (NOSH) Program, CAMP, DOLE-AKAP, Balik Manggawa Project and assistance to workers in private establishments. Shelter and other agencies will enhance the emergency loan assistance to their members.

**Strengthen small and micro cooperatives under the Cooperative Development Program.**

Capability building programs for officers of micro and small cooperatives that include handholding services, such as mentoring, training, coaching, inquiry, provision of legal opinions, etc., will be conducted online. These also include the preparation of IEC materials, designing of modules and training and access to insurance/financial services and coordination and monitoring of cooperatives involved in financial inclusion.

**Monitor the implementation of social protection programs.** Social sector agencies will ensure that the targets, strategies and proposed programs and projects they committed to the Regional Recovery Plan (RRP) are properly implemented. Proposed programs, projects and activities with possible funding from each respective agency will be effectively implemented. The Regional Development Council (RDC) VI through its sectoral committees shall monitor the progress of the region towards achieving the RRP objectives and targets based on the framework of this Plan. Contingency Plans on COVID-19 of agencies and LGUs will also be monitored to ensure the attainment of targets and PPAs reflected therein.

*Sub-Outcome 2: Health and safety of vulnerable groups protected*

**Explore non-contact operation schemes to address health and safety needs of the vulnerable groups.** Health and safety measures like physical distancing while providing basic community services will be adopted. Private sectors, LGUs, housing associations, etc. will strictly implement and monitor the observance of home quarantine and/or lockdown measures and curfew hours within the boundaries of their localities, subdivisions and settlements. The use of common areas, community facilities, parks and playgrounds and other open spaces to prevent convergence, sports activities, and other mass gatherings will be temporarily closed/suspended. Availability of water services, security, street and vicinity lights, cleaning of streets, garbage collection and disposal and disinfection of common laundry areas and other facilities will be regularly done.

**Continuous public awareness/information dissemination on COVID-19.** Accurate and timely information will be disseminated to all sectors and communities, especially the indigenous peoples who are mostly in geographically-isolated and disadvantaged areas (GIDAs). This will facilitate their access to government's services like health services, livelihood and social assistance. Relevant information is also needed on how they can cope with the anxiety and stress associated with the prospect of becoming infected by the disease. Government will support and ensure that their cultural practices are respected and proper management of the dead is observed especially for those who died due to COVID-19.

**Ensure gender-equitable responses.** The government will provide adequate support, including childcare, health services and other social support and protections for vital frontline responders. Benefits, privileges and other basic needs of women and girls need to be prioritized to mitigate the impact of the outbreak, recover and build resilience for future shocks. Family-friendly policies to protect employees, reduce stress, and support improved child and family well-being will be implemented. Sex, age and disability data disaggregation, as well as other key indicators,



must be prioritized in all data collection, analyses and reporting to have a more in-depth analysis of the COVID-19 impact on public health, social and economic outcomes.

**Establish unified and updated baseline data.** There is an urgent need to implement the National Identification System by the Philippine Statistics Agency (PSA) that will promote seamless service delivery of basic social services to target beneficiaries. There should be convergence of services among public and private sectors in the updating of data to ensure that the intended targeted victims or constituents will be assisted at the right time. Guidelines and implementing scheme will be strictly implemented to avoid duplication of beneficiaries and delay in the program implementation.

**Strengthen disaster risk management on COVID-19.** The Office of the Civil Defense (OCD) as chairperson of the Regional Disaster Risk Reduction and Management Council Regional Task Force (RDRRMC-RTF) on COVID-19 in coordination with Local Disaster Risk Reduction and Management Councils (DRRMCs) will ensure that Contingency Plan of the region on COVID-19 will be strictly implemented by the agencies and LGUs. The RDRRMC-RTF will coordinate with its member-agencies to take measures in responding to COVID-related concerns including revised standards and procedures for humanitarian assistance, water and sanitation, disaster management, and other health measures. Operation centers will closely monitor, consolidate and report all COVID-related incidents and ensure prompt coordination with concerned agencies and offices. Allocation for disaster management to cover priority areas will be increased. Risk information will be shared to local communities to engage them in response operation.

### *Sub-Outcome 3: Emergency/ financial programs accessed*

**Restore employment and job creation.** Occupational safety and health of the affected workers will be ensured before they can go back to work. DOLE will tap economic zones and local governments for job creation. LGUs will provide additional funding for new projects and businesses like the barangay-based livelihood and employment opportunities to consider gender-responsive approaches in collaboration with the private sector.

**Continue grant of moratorium on loan payments to homebuyers.** Key shelter agencies (NHA, SHFC, NHMFC and HDMF) will continue to grant moratorium to their members/beneficiaries until the lifting of community quarantines in their areas. NHA will suspend its collection of amortization or lease payments from residential account holders in all their existing projects. Housing loan and other loan options will be enhanced to provide more members of better services.

**Extend grace periods and allow suspension of payments for buyers of real estate projects.** Grace period will be granted to buyers of unit in a subdivision or condominium project or any other similar real estate development registered with DHSUD. In the event of failure to pay any installment payment becoming due and demandable during quarantine period, no interest, penalties, fees or other charges arising therefrom shall be incurred or charged to the buyer.

Thirty days after the lifting of the quarantine period, the accumulated installment payments shall be payable within the succeeding six months, without prejudice to any other period or option

that may be mutually agreed upon by the buyer and developer. There will be no additional interest charges throughout the suspension period.

#### *Sub-Outcome 4: Housing needs of vulnerable sectors responded*

**Integrate health goals and transport route plans in land use planning and real estate regulations.** DHSUD will require the integration of facilities that are adequately-sized (based on post-COVID standards), well-ventilated and considerate of physical distancing that can be used to house victims of disasters, pandemic and other similar situations. The same requirements will be required for community projects.

On permits, registration and licensing of housing projects, a non-negotiable standard on primary or secondary road widths, setbacks or easements, etc. will be imposed in real estates. These will be designed to achieve natural or enforced ventilation among adjacent or contiguous structures to institutionalize social and environmental distancing.

Local Public Transport Route Plans (LPTRPs) promoting transit-oriented development, locational guidelines and standards for transport terminals will be integrated in the CLUPs.

All CLUPs and Zoning Ordinances that are not compliant with hazard and health standards will be disapproved, or must be revised with dispatch. LGUs which promote or stimulate unjustified variances or defy openly these standards to advance their vested interests, will be investigated, and dealt with accordingly. The LGUs should also examine and evaluate the clarity, quality and comprehensiveness of public health goals and policies as integrated in their CLUPs. Given the occurrence of COVID-19, DHSUD should conduct deeper urban development studies to analyze the relationship of health and other planning sectors, the setting of goals, policy development, and the implementation process.

**Ensure health protocols are observed in housing projects.** To ensure increased access to sanitation, setting up of wash stations at high foot traffic area using drums, installation of plastic walls on interface areas like sari-sari stores and provision of temporary shelters for those living in congested houses will be implemented.

Condominium corporations will lay stricter measures on the occupants of condominium projects and encourage them to self-quarantine or do mandatory temperature check especially when they have history of travel or have been exposed to infected persons.

**Promote and advocate the integration of establishment of quarantine/evacuation facilities/centers in the CLUP and subdivision plans.** With the increasing COVID-19 cases, it is expected that there will be overcapacity of hospitals in the region. Aside from the existing quarantine/ evacuation facilities, private sectors will be tapped to construct more facilities to house the probables and suspects of COVID-19. These centers will be inspected by the DOH, DPWH and other concerned agencies following the guidelines on appropriate distancing of beds, adequate space, proper ventilation, availability of hand washing facilities and adequate water, and presence of toilets in every room. The establishment of these centers/facilities will be integrated in the CLUPs and subdivision plans.

## *Policy and Legislative Reforms*

The following policy and legislative reforms will be supported:

1. Amendment of COA Circular No. 2012-001 prescribing the desired guidelines and documentary requirements for government transactions to “explicitly include the acceptance of the electronic signature on signed documents in lieu of the submission of original copies”. COA to issue guidelines allowing electronic signature in accountable forms and on obligation request slip, disbursement vouchers and other documents needed for disbursement process.
2. Amendment of DepEd Order No. 21, s. 2018 (Implementing Guidelines on the Allocation and Utilization of the Human Resource Development Funds for Personnel in Schools and Learning Centers) and DepEd Order No. 28, s. 2018 (Guidelines on the Utilization of the Human Resource Training and Development Fund). The amendment shall consider the purchase of internet modem and payment of internet connection, cable TV, satellite TV, and subscription/enrolment to online courses being provided by various learning groups and institutions as eligible expenses.
3. Amendment of DepEd Order No. 15, s. 2017 on the Guidelines on the Allocation of Funds for Venue, Meals and Snacks, and Room Accommodation for Official Activities Organized and Conducted by the DepEd. This will consider the requirements of physical distancing in budget allocation, such as extended number of days of the activity due to limited number of participants that can be accommodated in a day.
4. Amendment of DepEd Order No. 35, s. 2016 – on The Learning Action Cell (LAC) as a K to 12 Basic Education Program School-Based Continuing Professional Development Strategy for the Improvement of Teaching and Learning. This is to include a specific provision of conducting LAC sessions using the online platform delivery mode and/or blended learning and if necessary, the development of LAC modules for teachers and school heads who have difficulty in the internet connectivity. It is also recommended to provide a standardized monitoring and evaluation tool in the conduct of LAC sessions online.
5. Amendment of Republic Act No. 10912 – Continuing Professional Development (CPD) Act of 2016. The Professional Regulatory Commission (PRC), as the major accrediting agency of all CPD providers, should publish the list of accredited online professional development providers to prevent unscrupulous and unaccredited learning facilities from persuading teachers to enroll in short course/seminar/trainings. The PRC must also provide clear guidelines in the grant and transfer of credit units earned from online learning processes and activities.
6. Policy review of DepEd Order 16, s 2017 or the Research Management Guidelines (RMG) to consider the following provisions: a) the approved Basic Education Research

Fund (BERF) funds will be downloaded to the school divisions as part of the regional office management of funds, b) allow online submission of documents instead of hardcopies c) Downloading of funds to schools divisions with approved BERF qualifiers and; d) using electronic copies of research documents in processing research funding at the school level.

7. Guidelines on the provision of ICT infrastructure and communication allowance in all government levels especially those who deliver online services.
8. Moratorium on the implementation of CHED issuances on Student Internship Program in the Philippines (SIPP), Student Internship Abroad Program (SIAP), International Educational Tour (IET) and local off- campus programs during the pandemic.
9. Policy to consider public health risks in land use planning. Separate parameters on public health risks such as pandemics/epidemics will be taken into consideration in the analysis of planning environment to facilitate integration in land use and shelter planning process.
10. Guidelines for location of vital facilities (e.g. quarantine/isolation areas, crematorium, health facilities) should be developed and considered in land use plans to mitigate the negative impacts of epidemics/disease outbreaks in the community.

In addition, guidelines and urban design recommendations for sanitation, hygiene and public health should be developed and promoted.

11. Local shelter planning should consider provision of healthy and adequate homes and spaces to the informal settlers, who are considered as one of the most vulnerable population during the outbreak. This includes review of the existing design of houses taking into consideration the distances between housing units and the average floor area per person.
12. Policies will be developed to ensure that local shelter plans are disaster-/disease-resilient and should be harmonized/synergized/ integrated with land use plans to ensure that residents of planned resettlement/settlement areas will have access to basic socio-economic services.

## Infrastructure and Transport

COVID-19 had a major impact on the transportation sector as all passenger land and sea transport services were suspended during the period. International and local flights were also cancelled but on a staggered basis. The New Normal requires setting up of stringent health safety protocols, which would entail revising the operations manual and procedures of the infrastructure and transportation agencies to respond to this changing norms. Addressing the limited logistics brought about by border restrictions is of importance particularly on public works, power and water repair and maintenance. The important role of digital infrastructure in the New Normal was also brought to fore as means of communication were mostly through video conferencing,

text messages, and, social media. Connectivity to all and in bolstering internet speed to allow for faster and better communications became a paramount concern.

Handwashing becoming a norm and urban gardening being promoted to ensure food supply to households, it is imperative to look at the state of the water source and the water system support being provided. Aside from water, the sector considered the need of the region to have adequate power supply to respond to the need of health institutions, quarantine facilities and households.

For the region to be ready to take on the challenges of the New Normal, it must have a reliable, affordable and adequate infrastructure and transportation system.

### *Outcome*

Reliable, affordable and adequate infrastructure and transportation systems supportive of the New Normal activities.

### *Objectives*

1. Ensure safe, secure, efficient, reliable transport support to passengers and cargoes especially basic necessities.
2. Provide stable and efficient internet and mobile services to adequately respond to the increased demand under the New Normal situation
3. Provide safe working environment in the resumption of public works, including power and water.

### *Targets*

#### *Transport*

1. 100% of long-staying cargoes/vessels at port facilities discharged
2. 100% of public transport (jeepneys, taxis, bus) and ports (sea and air) in operation at reduced capacity
3. 100% of public transport (jeepneys, taxis, bus) and ports (sea and air) in operation follow protocol for New Normal

#### *Information and Communications Technology*

1. 100% of LGUs and NGAs with upgraded internet connection of up to 100Mbps plan
2. 63 hospitals with 10Mbps bandwidth
3. 76 SUCs (main and campuses) with 10Mbps bandwidth
4. 100% of LGUs and NGAs subscribed to video conferencing platform
5. 100% of LGUs with websites
6. 100% of LGUs adopting online payments/mobile payments

## Public Works, Power and Water

1. 82% of backlogs responded during resumption or lifting of community quarantine
2. 100% of projects completed until 2023
3. 100% of contractors, subcontractors, concessionaires comply with health protocol and safety measures imposed in the New Normal
4. Actual demand within the level of dependable capacity of 622.3MW for Panay and 190.5MW for Negros Occidental
5. 16 water bodies monitored
6. 1 groundwater assessment conducted in Negros Occidental

**Figure 31. Thematic Logic Model for Infrastructure and Transport**



## Strategies

### *Ensure safe, secure, efficient transport support to passengers and cargoes*

**Ensure the immediate and efficient resumption of port and airport operations upon the lifting of community quarantines.** The region must prepare for the entry of more vessels, ensuring the efficient discharging and loading of cargoes at the port upon the lifting of ECQ. Port operations and security procedures will be enhanced with the provision of additional manpower in order to respond to increased shipcalls, rolling cargoes and passengers after quarantine protocols. Health advisories issued by the Bureau of Quarantine will be strictly adhered to, especially by personnel involved in ship's loading and discharging of cargoes. Port patrol will be conducted by PPA, together with Philippine Coast Guard, to monitor vessel's crew and advise all shipping companies of the protocols. Information drive to all shippers and consignees on the new protocol will be conducted.

**Ensure smooth interzonal and intrazonal movement of people and goods.** The unhampered movement of all types of cargoes by land, air, or sea within and across areas placed under any form of community quarantine will be ensured. Workers in the logistics sector, such as cargo, trucking, courier delivery and port operations will be allowed to transit across areas placed under any form of community quarantine, provided that necessary measures will be put in place to observe established health protocols. All LGUs will strictly abide with national policy as approved by the Inter-Agency Task Force to ease movement of essential goods.

**Establish crisis communication management system among exporters, importers, and the government to ensure seamless movement of cargoes.** The initial confusion related to exemptions on the movement of cargo during the ECQ highlighted the need for the establishment of a crisis communication management system that will specify the protocols and procedures in critical or emergency situations. A registry or database of importers and traders needs to be developed for the easy issuance of permits and passes. An integrated website that tracks real time information on cargo release, availability of supply, production, and inventory could also be explored between the national government, LGUs, and the private sector.

**Redesign facilities in ports, airports and bus terminals to ensure physical distancing and observance of quarantine protocols.** Temporary facilities will be constructed for queuing of passengers. Seating arrangement will have to be modified and walk/buffer fences, wash basins/foot baths and additional chairs will be provided. Ports and airports will properly cordon embarking and disembarking passengers. Ports will provide covered walkway from gangway to exit gate of about 80 lineal meter in length. There will be designated vehicle lanes for queueing, pavement markings, road signages and gate booths will be put in place. Booths for the guards handling the queues will have to be secured.

Procedures that need to be implemented by the Bureau of Customs or Bureau of Quarantine should be coordinated with PPA and CAAP as early as in the planning stage and not just at the implementation stage. This includes provision of space for installation of x-ray machines and other infrastructure support.

**Establish stricter protocols in airports, ports and bus terminals to include handling of persons suspected of having infectious diseases.** This will include temperature checks in terminals and mandatory wearing of masks. The implementation of requiring arriving passengers to electronically fill out a Health Declaration Form in airports and seaports will be revived. The established general airport and port operations manuals and procedures will be updated to adopt to the New Normal conditions. This will include protocols on how to address cases of stranded passengers within airport and port premises during sudden declaration of lockdowns.

Each ports and airports, and if necessary, bus terminals should provide proper isolation room following quarantine guidelines for persons suspected of having infectious diseases. Supplies, equipment in place and the number of persons that can be served in each isolation room will be determined. With COVID-19 pandemic a health issue, there is a need to hire additional medical staff to address measures needed for COVID-19. Also, cleaners and additional security guards will be hired and existing security plan will be revised to enhance security measures.

**Provide schedules of trips and timetables of public conveyances (buses and jeepneys) in strategic areas.** Buses' comings and goings should be timed so as not to crowd the terminals with passengers queuing in getting on and off the bus. Bus/jeepney passenger terminals need to modernize and level up to address long queues especially with the lifting of ECQ and in dealing with New Normal. Pick-up points around the city where passengers are allowed to get on and off buses and jeepneys shall be designated to limit the number of people waiting at the roadside. Make available online the transportation guidelines and availability post-ECQ for guidance of general public.

**Expedite components of the PUV Modernization Program (PUVMP) on Regulatory Reform and Industry Consolidation,** particularly on changing the business model for public transport regulation, along with industry consolidation or the strategic merging of smaller transport industry players to form into a consortium, either by forming cooperatives or corporations. A database for drivers/conductors and operators will be created in the region. The database will also be helpful especially in times of crisis where subsidy and/or alternative source of income can be provided. Also, make transparent the social protection programs for drivers affected by COVID-19 in the region, if any, similar to NCR where the names of drivers and amount provided are posted in the LTFRB website.

**Need to review route plans and develop traffic management plans.** Part of the PUVMP is for LGUs to submit to LTFRB their Local Public Transport Plan, which includes the route plans within 2020. It should consider the demand for the New Normal, especially the effect of physical distancing in determining the design of public transport, appropriate mode, quantity and service characteristics while following the hierarchy of roads and modes of transportation.



*Provide stable and efficient internet and mobile services to adequately respond to the increased demand under the New Normal situation*

**Fast-track the implementation of programs for ICT-enabled government to ensure greater public reach and safer, protected and reliable ICT.** Office operations under the New Normal will rely heavily on information and communications technology for contactless transactions. Regional line agencies, government corporations, and local government units need to shift to electronic and paperless systems, zero-contact policies, online transactions, and new channels for service delivery. Ports and airports as well as distribution utilities and independent power producers are encouraged to adopt online transactions including online payments. To facilitate this shift, the DICT needs to fast-track the entry of new players and quickly pursue programs such as Digital Government, Digital Work Force, Digital Classrooms, Digital Medicine, among others. The national government will invest in ICT to enable remote government operations, strengthen existing online platforms, and allow access to justice while practicing physical distancing (e.g., tele-hearings, e-filing systems). To support physical distancing measures, rules, regulations, and requirements of DBM, GPPB, COA and the CSC must be reviewed, and where applicable, revised to allow electronic transactions, alternative work arrangements, and procurement of off-the-shelf software<sup>27</sup> in the government. Safeguards against cybercrimes and data privacy breach must also be enhanced.

**Upgrade the existing internet connections of up to 100Mbps plan of the LGUs.** This will bolster the speed of the internet necessary in the New Normal, considering the need for real time connections. With video conferencing becoming one of the medium of communication, monthly subscription to video conferencing platform can cater to at least 100 participants and 10 hours cloud meeting.

**Implement online (integrated) systems for LGUs frontline services.** Online transactions will include business permits, building permits, occupancy permit, barangay clearance, sanitary permits. Online systems will also be implemented for contactless and paperless transactions. LGU officers and employees can work from home with clients able to access and transact online. Adopt online or mobile payments. This would entail to include such system in the terms of reference and collaborate with ePayment providers such as GCash, Paypal, Pay Maya, etc.)

LGU personnel will be trained on website development and maintenance with DICT providing free web hosting and domain name. Key personnel will be introduced in the use of digital signatures (PNPKI) for security of documents and employees who signs the documents for submission online.

**Support educational and entrepreneurial learnings through online training/webinars.** The digitaljobsPH project of the DICT can provide free technical trainings to workers and MSMEs affected by ECQ. The technical trainings or webinars aim to provide alternative learning opportunities for the working population whose livelihoods were disrupted by the COVID-19 threat. Encouraged the participation of MSMEs from affected sectors in order to boost skills development during the hiatus.

Necessary ICT tools should be acquired to enable online training, meetings, and other initiatives (wide range video conference camera, video and image creations/editing tools, mic, etc.) and

upgrading of devices. Google Suite Collaboration tools will be provided to the regional clusters. These could be in the form of Chat/Google Hangouts, meet for video and voice conferencing for up to 250 participants per call, Google drive, Presentation builder, Professional surveys builder, Shared Notes, Microsoft 365 Collaboration Tools.

Intranet Portal will be provided in the region in order to facilitate central access to internal information about DICT. Through the portal, regional cluster employees can access internal systems such as: Document Tracking System (DocTraks), Electronic Official Receipt (eOR), Electronic Procurement System (eProcurement), Legal Management Information System (LMIS)

**Provide special reduced internet rates for students and faculty to support the promotion of digital and alternative learning.** Request telecommunications companies to offer special reduced rates for internet services for students and faculty at least for the next six (6) months to one (1) year. This is to ensure their access to various online education platforms created by educational institutions as a response to ECQ and COVID-19.

**Strengthen infrastructure and regulation of online financial services.** Given the increased demand for online financial services, the relevant infrastructure and regulatory oversight need to be strengthened, including closer monitoring of cybersecurity plans. The EGov Pay Facility may be expanded to enable ordinary citizens to securely transact with government online. Government transfers can be facilitated through the use of e-money. The adoption of national quick response (QR) code this year is also expected to enhance interoperability of payment systems. Encourage financial institutions to invest in digital infrastructure and implement better cybersecurity measures and regulations for consumers and merchants/establishments.

*Provide safe working environment in the implementation of public works, including energy and water sector*

**Ensure the resumption of programs and projects that will further improve the connectivity of the region to other areas of the country.** Major roads and bridge projects will be continued including flyover projects, circumferential and by-pass roads, road and bridge widening projects and the mega bridge project connecting Iloilo and Guimaras. Airport projects in Kalibo, San Jose, Caticlan, Roxas and Iloilo as well as port projects in Dumangas, Iloilo City, Caticlan, and Bacolod City will be pursued. To this end, concerned agencies will establish guidelines that will allow the immediate resumption of implementation of projects despite the restrictions that may be imposed due to the imposition of community quarantines.

**Ensure the unhampered movement of materials and backliners/workforce in providing construction and response services.** Backliners such as personnel/utility workers involved in the construction, telecommunication, energy and water sector should be allowed to unhampered movement across borders for the maintenance, repair, rehabilitation, and the resumption of any interrupted construction, installation, or commissioning of infrastructures. Also allowed are those performing indirect services such as security, technical sales and other support personnel; as well as supervisors of contracted companies who will conduct on-site periodic inspection visits of PPAs, onsite facilities and workers and their compliance to health protocols. Contractors will provide PPEs and other sanitation and hygienic supplies for workers, especially those

entering sites like hospitals, schools, offices. This would mean provision of enough supply of disinfectants, face masks, gloves & other PPEs.

**Expand passenger areas in ports, airports and bus terminals to comply with requirements for the New Normal distancing.** Modify the passenger terminal buildings to address the New Normal. Passenger physical distancing will increase seating areas inside the passenger terminals and floor area by at least 50%. Port passenger's terminal buildings will be expanded to accommodate at least 500 passengers at a time.

**Observance of relevant executive orders, department orders, memorandum circulars and guidelines on the New Normal,** such as but not limited to:

- LTFRB Memorandum Circular No. 2020-017 dated May 1, 2020: Guidelines for Public Transportation for Areas under General Community Quarantine, which includes allowed passenger capacities of public transportation, especially of buses and jeepneys, that must be carried out. Penalize operators that do not follow safety and health protocols and other provisions for the New Normal.
- DPWH Department Order No. 39, series of 2020: Revised Construction Safety Guidelines for the Implementation of Infrastructure Projects During the COVID-19 Public Health Crisis, repealing Department Order No. 35, series of 2020. Some of the salient features are: for construction personnel shall undergo quarantine for 14 days prior to deployment or undergo any FDA-approved COVID-19 test; employees shall be housed in their respective quarters for the entire duration of the project covered by the ECQ, MECQ, GCQ and MGCQ; and, monitoring and enforcement shall be done by heads of concerned DPWH Implementing Office for DPWH-implemented projects. Quarantine protocol that will be implemented will be issued by DPWH for projects implemented by region, while LGUs will issue their own quarantine protocol to monitor LGUs-implemented projects.
- CAAP's Area-VI Operational Procedures for New Normal Operations which outlined the generally accepted measures during the course of COVID-19 pandemic, covering vehicles entering the airport, entry to terminal for passengers, visitors, airport employees, office for transport security, check-in counters, final check/pre-departure area, arrival area, arrival concourse, ramp entrances, airlines/CAAP personnel/general aviation personnel. It also addressed measures in passenger waiting area, cargo terminal building, food handlers, pasalubong outlets/gift shops and administrative unit, filing of flight plans, and cleaning and disinfecting. Moreover, lengthen the hours of operation to accommodate more flights on regulated timetable.

If necessary, IEC to disseminate and orient drivers and operators, shipping vessels, ports and airports shall be conducted. This is for the information on COVID-19 and the importance of safety and health protocols being called for in the New Normal.

**Implement austerity measures to lessen operational costs,** since port and airport operations were disrupted and revenues dropped. This would entail deferring implementation of PPAs that

are unnecessary or can be delayed for later years. Advanced canvassing of all possible suppliers especially for projects nearing completion. Grant extension of time for projects that were greatly affected by ECQ, as long as contractors submit their reasons, which will be deliberated for consideration.

**Revisit the project designs of infrastructure projects (school buildings, evacuation centers, hospitals) to respond to requirements of the New Normal.** There is a need to provide funding for the construction and enhancement of road and transport projects to ensure unhampered movement of agriculture and fishery goods and services and access for people. Moving forward, the New Normal will prompt the redesign of public construction projects like school buildings, public markets, office buildings, and socialized housing projects.

**Continuously monitor sufficiency of power and water supply to ensure uninterrupted supply in the region.** There should be an accounting of all areas that have no or problematic power and water connections and ensure that supply is delivered. Expedite the installation of free water connections to unconnected households and repair works upon resumption. Also, ease the payment of energy and water bills on household budgets to allow time for recovery after the quarantine period.

**Ensure sustainability of water supply for domestic, agricultural and commercial and health purposes.** Identify potential water source, explore possible water recycling of wastewater development and implementation of water conservation management plan. There should be a constant monitoring of water sources and reservoirs. Funds should be provided for the construction of small water impounding structures that will serve the communities and National Greening Program plantations. Comprehensive water assessment of major river basins especially Ilog-Hilabangan, Bago River should be conducted. Since groundwater is the main source for domestic and commercial use, a groundwater management plan should be prepared. Moreover, monitoring wells should be established in water stressed cities/municipalities. Lastly, intensity IEC on water conservation and management so people will be reminded of its importance and scarcity.

In addition, the development and implementation of the National Roadmap for Water Security should be supported. The ongoing preparation of the roadmap should be able to incorporate the possible impacts of future epidemic/pandemic and climate change/variability to address the impending water crisis.

### *Policy and Legislative Reforms*

1. The provision of social protection and benefits to drivers and conductors in times of pandemic.
2. Review policies and procedures pertaining to border control to ease restrictions for transport of construction materials and aggregates, energy and water-related materials and equipment.

3. Institutionalize parameters to be met and complied with in order to allow airplanes and seacrafts to dock or land in the region.
4. Support the passage of the Internet Transactions Bill (House Bill [HB] 6122), which seeks to strengthen the protection of personal data and consumers in online payments and transactions.
5. Enact the creation of an Independent Economic or Financial Regulator for Water Supply and Sanitation to harmonize the regulatory practices, processes, fees, and standards on water supply and sanitation while addressing the overlapping functions or jurisdictions of existing regulatory entities

## Governance

### *Outcome*

Effective and efficient government response to health emergencies.

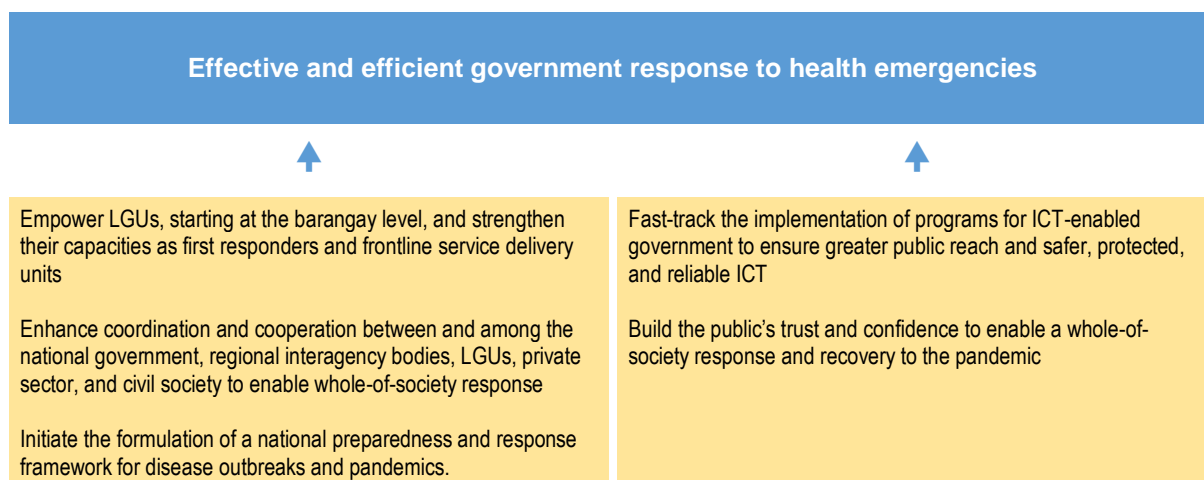
### *Objectives*

1. Empower the LGUs, and strengthen their capacity as first responders and frontliners in the delivery of government programs, projects and activities in times of health emergencies.
2. Adopt measures that will ensure the continuous delivery government service while observing minimal health precautionary measures to contain the spread of the disease.
3. Enhance the coordination and cooperation between and among the national government, LGUs, the private sector, and civil society to address public health emergencies.

### *Targets*

1. 100% of LGUs trained and capacitated on health crisis management and health surveillance
2. 100% of NGAs and LGUs capacitated and able to provide their services online on their own website
3. 100% of NGAs and LGUs with service continuity plan adaptive to COVID-19 and other health emergencies
4. 100% of Regional and LGU DRRM plans adopted or updated

*Figure 32. Thematic Logic Model for Governance*



### Strategies

**Empower LGUs, starting at the barangay level, and strengthen their capacities as first responders and frontline service delivery units.** LGUs will prepare transition plans for implementing the Supreme Court ruling in the Mandanas case, which, upon its rollout, will provide greater access by LGUs to funds for devolved services. Guidelines on the use of the Internal Revenue Allotment for development projects will also be revisited by concerned agencies such as COA, DBM, DILG and DOF to facilitate investments in community health programs and facilities.

To ensure preparedness and response actions to health risks, local disaster risk reduction and management (DRRM) plans will be amended to include public health emergencies. Capacities of LGUs as first responders and frontline service delivery units will be strengthened through trainings on crisis management and on disease surveillance and contact tracing, among others. There should also be strategic stockpiling of medical equipment and supplies, adequate storage and logistics facilities, strengthened emergency evacuation systems, and maintenance of mobile and field hospitals with at least level 2 capacity across the region.

The implementation of the Ease of Doing Business and Efficient Government Service Delivery Act of 2018 (EODB-EGSD or RA 11032) will be expedited to cover the extension of the validity of permits and other authorizations expiring within the period of State of National Emergency, the reduction in the number of signatories and requirements, and the facilitation of online processing and payments, among others.

**Enhance coordination and cooperation between and among the national government, regional interagency bodies, LGUs, private sector, and civil society to enable whole-of-**

**society response.** For better interoperability, various levels of government must address coordination gaps. Measures to allow continuous flow of food, health services, and other essential goods and services should be established, mindful of cross-border logistics as well as rules and regulations issued at the national level and the varying capacity levels across LGUs. Efficient communication flow from the national and regional inter-agency task forces to LGUs should be established to ensure the effective implementation of directives and policies from the national government by the LGUs.

As registries of beneficiaries of programs and projects become crucial in this New Normal, the Philippine Identification System (PhilSys) must be fast-tracked by increasing registration kits. The conduct of the community-based monitoring system (CBMS), as provided for by the CBMS Act (RA 11315), will be advanced. The LGUs need to invest in data generation and banking to be utilized during emergencies. This will help ensure that LGUs have regularly updated community lists. Given that the LGUs financial capacity maybe limited, the national government shall assist through the NGAs in the providing some of the equipment and technical support.

**Initiate the formulation of preparedness and response framework for disease outbreaks and pandemics.** There is a need to harmonize existing DRRM and Crisis Management Frameworks. This entails revisions to the implementing rules and regulations (IRR) of the Philippine DRRM Act of 2010 (RA 10121) to explicitly identify public health emergencies such as pandemics in the definition of disaster events. To enhance forward and anticipatory planning, the government must also conduct ex-post evaluation of the various interventions under ECQ and GCQ to mine lessons learned, share best practices across different agencies and LGUs, and influence future policies. The national government agencies and local government units shall develop their sector specific plans and guidelines on the operationalization of the risk-based public health standards for Covid-19 mitigation. Existing data infrastructure in the National DRRM Operations Center as well the full implementation of the CBMS by the LGUs and capacity for public service continuity planning must be improved. Anticipating future outbreaks, the Commission on Audit (COA), with the assistance of the Government Procurement Policy Board, needs to clarify and revise, as necessary, its existing regulations for procurement activities relating to strategic stockpiling for health emergencies.

**Fast-track the implementation of programs for ICT-enabled government to ensure greater public reach and safer, protected, and reliable ICT.** NGAs, GOCCs, and LGUs need to shift to electronic and paperless systems, zero-contact policies, online transactions, and new channels for service delivery.

To facilitate this shift, the Department of Information and Communications Technology (DICT) needs to quickly pursue programs such as Digital Government, Digital Work Force, Digital Classrooms, Digital Medicine, among others. The national government will invest in ICT infrastructure to improve connectivity of government offices to enable remote government operations, strengthen existing online platforms, and allow access to justice while practicing physical distancing (e.g., tele-hearings, e-filing systems). Due to the shift to ICT governance, safeguards against cybercrimes and data privacy must also be enhanced. In response to the need to secure the integrity of documents and information over digital networks, the DICT will encourage the public to avail of digital certificates under the Philippine National Public Key

Infrastructure (PNPKI) to expedite and secure online work transactions. The private telecommunications providers must also be involved in improving internet speed, telecommunications signal and reach all throughout the region.

To support physical distancing measures, rules, regulations, and requirements of the Department of Budget and Management, the Government Procurement Policy Board, Commission on Audit and the Civil Service Commission will be reviewed, and where applicable, revised to allow electronic transactions, alternative work arrangements, and procurement in the government. The CSC is currently on the Development of Alternative Learning and Development (L&D) Modes which includes; Distance Learning Programs, Webinars, and Blended Learning for civil servants.

To support this shift to ICT enabled government, the LGUs shall capacitate themselves by hiring ICT personnel, availing of ICT trainings and equipment provided by the national government, establishing their own facilities and procuring their own equipment as well as establishing their own websites and developing their own internet based services for their constituents that are complimentary with that of the national government and other LGUs.

**Build the public’s trust and confidence to enable a whole-of-society response and recovery to the pandemic.** With increased uncertainties as part of the New Normal, the government needs to properly communicate risks and guarantee transparency to citizens. A whole-of-government and whole-of-society National Values Formation Program initiated by the government must be implemented to address the anticipated changes in behavior and level of social trust. Trust in institutions must be cultivated by ensuring that our public officials exemplify the highest standards of service, integrity, ethics, and professionalism.

Protocols for information management and reporting will be adopted by the national government and LGUs. To facilitate the reporting to the public, an online dashboard will be put-up and maintained to bring the locus of control over the situation to the individual and the community. While the government must be seen as taking action comprehensively and as one, it must also be conveyed that, with the right information and resources, individuals can have significant control of the situation. The dashboard will serve as a platform to elicit support and cooperation from the rest of the society. An online platform is also convenient as this could be accessed on demand. Since most RLAs and LGUs reach the general public and their constituents through social media sites (such as Facebook), links to official/verified Facebook pages, if available should be provided.

### *Policy and Legislative Reforms*

1. Institutionalize a national preparedness and response framework for pandemics and all-hazards, including the creation of Medical Reserve Corps, Stockpiling of Strategic and Critical Materials, and Emergency Medical Services System.
2. Amend the Labor Code and the Telecommuting Act of 2018 (RA 11165) to formally establish alternative work schemes such as compressed work week or flexi-schedule, and to extend telecommuting options to employees in the public sector.



3. Revision of the Synchronized Local Planning and Budgeting Policies to include mechanisms for the government to realign funds should there be pandemics and disease outbreak
4. Review and propose amendments on the Local Government Code focusing on the capacity of LGUs to provide for personnel services specifically on the devolved functions from national government agencies like the DOH and DA, among others.
5. Fast-track the law lowering the age of retirement from 60 to 56
6. Rationalize the existence of so many councils that require the attention and attendance of LGUs during meetings
7. Issuance of guidelines in the implementation of the DICT Intranet portal
8. Support the passage of the Internet Transactions Bill (House Bill [HB] 6122), which seeks to strengthen the protection of personal data and consumers in online payments and transactions.

# VI

## Investment Requirements



## PART VI

# Investment Requirements

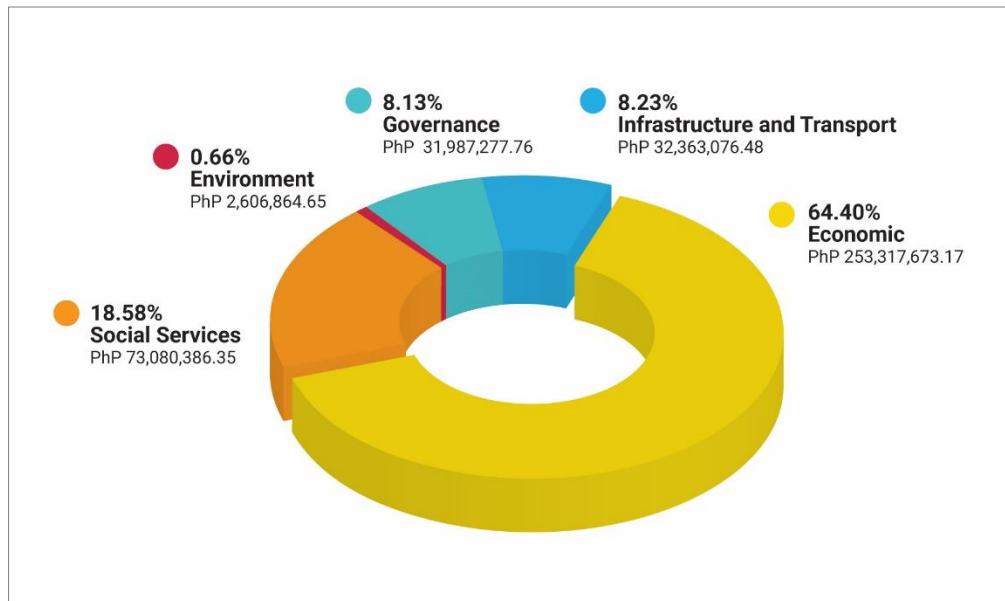
## Proposed Programs, Projects and Activities

The Regional Recovery Plan 2020-2023 would require a total investment requirement of PhP 393.355 billion. By thematic area, the economic sector would require the largest allocation of PhP 253.318 billion or 64.40 percent of the total, which include the Agriculture and Fisheries and Industry and Services sectors.

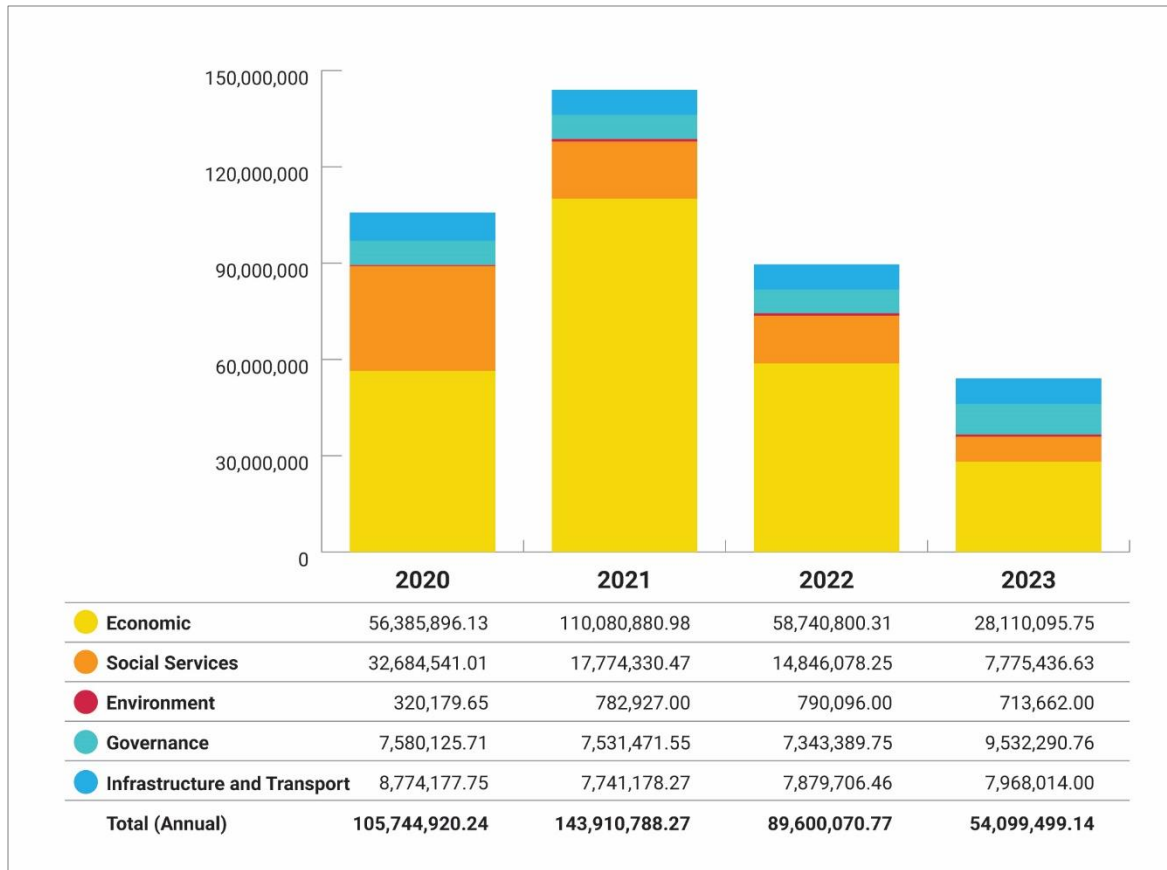
The Social Services thematic area has the second biggest investment requirement at PhP 73.080 billion or 18.58 percent covering the following sectors of health, education and training, social protection and housing. A total of PhP 32.363 billion is allocated for infrastructure and transport (8.23 %), PhP 31.987 billion for governance (8.13%), and PhP2.607 billion for environment (0.66 %).

The funds will be sourced from the regular and re-aligned budgets of the regional line agencies and local government units.

**Figure 33. Investment Requirements for COVID-19 by Sector, CY 2020-2023, in Thousand Pesos (PhP '000)**



**Figure 34. Investment Requirements by Sector per Year, CY 2020-2023, in Thousand Pesos (PhP '000)**







REPUBLIC OF THE PHILIPPINES

NATIONAL ECONOMIC AND DEVELOPMENT AUTHORITY  
REGION VI – WESTERN VISAYAS