

# Emergency Plan of Action (EPoA) Philippines: Cotabato Earthquake

<b>DREF Operation n°</b>	<b>MDRPH036</b>	<b>Glide n°:</b>	<b><a href="#">EQ-2019-000129-PHL</a></b>
<b>Date of issue:</b>	<b>30 October 2019</b>	<b>Expected timeframe:</b>	<b>4 months</b>
		<b>Expected end date:</b>	<b>28 February 2020</b>
<b>Category allocated to the of the disaster or crisis: Yellow</b>			
<b>DREF allocated: CHF 223,467</b>			
<b>Total number of people affected:</b>	<b>2.69 million<sup>1</sup></b>	<b>Number of people to be assisted:</b>	<b>7,500</b>
<b>Provinces affected:</b>	<b>Bukidnon, Cotabato, Davao del Sur, Sarangani, South Cotabato, Zamboanga del Norte, Leyte, Misamis Oriental</b>	<b>Provinces/Regions targeted:</b>	<b>Cotabato and Davao del Sur</b>
<b>Host National Society presence (n° of volunteers, staff, branches):</b> Philippine Red Cross (PRC) is the nation's largest humanitarian organization and works through 104 chapters covering all administrative districts and major cities in the country. PRC has more than 1,700 staff at national headquarters and chapter levels, and approximately two million volunteers and supporters, of whom some 500,000 are active volunteers. At the chapter level a programme called Red Cross 143 is established that sees volunteers trained, equipped and in place at the community (barangay) level - enhancing the overall capacity of the National Society to prepare for and respond to disaster situations.			
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> PRC is working with the International Federation of Red Cross and Red Crescent Societies (IFRC) in this operation. PRC and IFRC will coordinate with ICRC on issues and movement in Mindanao areas.			
<b>Other partner organizations actively involved in the operation:</b> Government of Philippines such as Philippine Institute of Volcanology and Seismology (PHILVOCS), National Disaster Risk Reduction and Management Council (NDRRMC), Department of Health (DOH), Department of Education (DepEd), Department of Energy (DOE), Armed Forces of the Philippines (AFP)			

## A. Situation analysis

### Description of the disaster

On Tuesday 29 October 2019, a series of strong earthquakes struck Tulan, North Cotabato, Mindanao. The first earthquake was recorded at 9:04am (local time) at magnitude 6.6 and 7km deep. The second significant earthquake was recorded at 10:42am, 6.1 magnitude and 9km deep. As of 7:20pm on 29 October 2019, there had been 129 earthquakes recorded by [PHILVOCS](#). PHILVOCS reports that the strongest intensity was intensity VII (destructive), and damage and aftershocks were expected. Summaries of the intensity recorded are as follows:

#### Reported intensities are:

Intensity VII - Tulan & Makilala, Cotabato; Kidapawan City; Malungon, Sarangani  
 Intensity VI - Davao City; Koronadal City; Cagayan de Oro City  
 Intensity V - Tampakan, Surallah and Tupi, South Cotabato; Alabel, Sarangani  
 Intensity IV - General Santos City; Kalilangan, Bukidnon  
 Intensity III - Sergio Osmeña Sr., Zamboanga del Norte; Zamboanga City; Dipolog City; Molave, Zamboanga del Norte; Talakag, Bukidnon  
 Intensity I - Camiguin, Mambajao

*For reference purposes, please see the Philippine Institute of Volcanology and Seismology (PHIVOLCS) Earthquake Intensity Scale through this [PEIS](#) link.*

<sup>1</sup> According to Pacific Disaster Centre ([PDC](#)), the total population exposed from the earthquake is estimated at 2.69 million people in 100-km radius.

This is the same area where on the 16 October 2019, an earthquake struck 6.3 magnitude and 15km deep, approximately 22km southeast of Tulunan town.

This earthquake killed seven people and injured 215 people in Regions XI, XII and BARMM. The earthquake affected 7,303 families (35,481 people), As of 27 October 2019, the National Disaster Risk Reduction and Management Council (NDRRMC) reported that 936 families (4,604 people) were still being served in three evacuation centres while 407 families (2,035 people) are served outside the evacuation centres.

This second earthquake on the 29 October 2019 in the same area has added more trauma and fatigue to many people who were affected by the first earthquake of 16 October 2019. There are unconfirmed media reports of up to six casualties, injuries due to falling masonry, as well as residents with damaged houses that are now fearful to return indoors. Rains in some of the areas have made their situation worse making it more difficult for people who are staying outside their houses.



Some of the infrastructure were damage by the earthquake including schools and public buildings on 29 October 2019. (Photo: PRC)

According to the latest situation report issued by the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre), five people have been killed, 394 injured and two people remain missing. More than 8,000 people (8,405) have been displaced, of which 4,900 living in outside areas, and 3,505 residing in evacuation centres.

There has been damage to infrastructure in various areas in Mindanao – with at least 133 buildings damaged (Source: AHA Centre) however the full scale yet to determined; as there has been disruptions to power and communications networks following the earthquake which is hindering reporting of impact. In Davao City, all classes in public and private schools; from kindergarten to post-graduate studies have been suspended.

Some of the provinces, such as, Davao Del Sur are already under a state of calamity from the previous earthquake of the 16 October 2019. NDRRMC have issued a [combined report](#) for 16 October and 29 October 2019 earthquakes. The summary of the report is as follows:

- Seven dead and 215 injured
- 7,303 families (35,481 individuals) affected in 127 barangays
- Three evacuation centers – 936 families (4,604 individuals) are taking emergency shelter
- 407 families (2,035 individuals) are in open area
- Damaged: 7,089 houses are damaged (1,312 houses fully and 5,777 partially)
- Total: 538 schools affected (10 fully and 528 partially)
- Health: 45 affected (two fully and 43 partially)
- Other public infrastructures are also damaged such as roads, bridges and shopping mahal

Assessments continue, including in the hard to reach areas, and will reveal more information on the impact earthquake across the provinces. The figures on damages and casualties are expected to increase.

## Summary of the current response

### Overview of Host National Society Response Action

The operations centre (OpCen) at the PRC national headquarters (NHQ) continues to collect information – from the Chapters and Red Cross 143 volunteers in the areas – and issues disaster incident updates. Communications teams are also posting updates and photos of the situation on [Facebook](#) and [Twitter](#).

PRC Chapters activated their initial response, such as, first aid and welfare services, coordination and rapid assessment. PRC is coordinating with the NDRRMC OpCen for possible response cluster activation. Local chapters are also coordinating with their Municipal, and Provincial DRRMCs.

Response Team such as RCAT 143, NDRT's and other specialized PRC personnel's such as Relief, Shelter, WASH, Health and Welfare were alerted and are now on standby for possible deployment.

Summary of the ongoing PRC response so far:

Chapter/Province	Actions taken
Cotabato City/Maguindanao	<ul style="list-style-type: none"> <li>• A PRC ambulance is roving the area for wounded patients</li> <li>• Chapter is also assisting the ongoing evacuation</li> </ul>
Davao City (Davao del Sur)	<ul style="list-style-type: none"> <li>• A welfare desk has been set up at the Chapter</li> <li>• Two FA stations mobilised</li> <li>• Chapter has activated RCAT and Search-and-Rescue Team for assessment</li> <li>• 6 people were provided with first aid and supported the transportation of one person</li> <li>• Hot meals served to 20 people</li> </ul>
General Santos	<ul style="list-style-type: none"> <li>• The Chapter has mobilized its ambulance team and has deployed RCAT volunteers to schools, malls, and hospitals</li> </ul>
North Cotabato	<ul style="list-style-type: none"> <li>• A welfare desk has been set up at the Chapter</li> <li>• One FA station mobilised</li> <li>• The Chapter has also mobilized a team for assessment</li> <li>• RC143 and RCY Volunteers have been activated to assist the affected people</li> </ul>
South Cotabato	<ul style="list-style-type: none"> <li>• The Chapter has deployed ambulance and manpower</li> <li>• A service vehicle was also deployed to assess damages</li> <li>• Monitored the blood pressure of 20 people and supported the transportation of one person</li> </ul>
Sultan Kudarat	<ul style="list-style-type: none"> <li>• Provided psychosocial support to 38 teachers in Nueva Vida National High School</li> </ul>
Manpower Mobilized	<ul style="list-style-type: none"> <li>• Assessment Team: 15 personnel</li> <li>• Welfare Team: 15 personnel</li> <li>• First Aid Team: 20 Personnel</li> </ul>
NFI's	<ul style="list-style-type: none"> <li>• PRC are mobilising 900 sets of NFIs to be dispatched from disaster preparedness stocks.</li> </ul>
Coordination	<ul style="list-style-type: none"> <li>• Ongoing Coordination with the local government unit, schools and other stakeholders in barangay, municipal, provincial and national level.</li> <li>• PRC also coordinated with the RCRC Movement</li> </ul>

### Overview of Red Cross Red Crescent Movement actions in-country

PRC maintains close coordination with in-country Movement partners and continues to provide updates. PRC is leading the overall response operation. In addition to the IFRC, there are presence of significant number of Movement partners in the country; the International Committee of the Red Cross (ICRC), American Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross, Japanese Red Cross Society, The Netherlands Red Cross and Spanish Red Cross.

The IFRC country office is supporting PRC in disseminating updates to Movement partners with in-country presence and coordinating with the Asia Pacific Regional Office (APRO) in Kuala Lumpur in accordance with the IFRC Secretariat's Emergency Response Framework. IFRC country office is also coordinating with PNSs and remains in close contact with ICRC on any security-related considerations.



PRC chapters have deployed local assets and services right after the earthquake happened. In Sultan Kudarat, the chapter set up a welfare desks to support the affected population on 29 October 2019. **(Photo: PRC)**

### Overview of non-RCRC actors' actions in country

#### Coordination with the authorities

Republic Act 10072 (Philippine Red Cross Act of 2010) recognizes PRC as an independent, autonomous, non-governmental organization auxiliary to the authorities of the republic of the Philippines in the humanitarian field. As an

auxiliary to the public authorities, PRC maintains a strong relationship and collaboration with (i) NDRRMC; (ii) provincial, municipal and barangay (village) disaster risk reduction and management councils; and (iii) local government units defined in the Disaster Risk Reduction and Management Act. The National Society also coordinates with Department of Social Welfare and Development (DSWD), Department of Health (DoH), and other government ministries/departments.

PHIVOLCS continues to monitor seismic events and issues earthquake information and real-time updates. The NDRRMC is coordinating with the city, provincial, municipal, and barangay disaster risk reduction and management councils and issued situation reports. [NDRRMC](#) continues to release advisory on earthquake information.

### **Inter-agency coordination**

At country level, PRC and IFRC are observers to, and participate in, meetings of the Humanitarian Country Team (HCT) held both during disasters and non-emergency times. PRC and IFRC are involved in relevant government-led cluster information sharing, planning, and analysis at all levels while IFRC supports PRC coordination efforts through representation in other relevant clusters as required.

IFRC is co-leader of the Shelter Cluster with government lead agency Department of Social Welfare and Development (DSWD). The IFRC coordination focal point in country is coordinating with OCHA and sector partners on inter-agency rapid needs assessments in the affected areas. [CRS](#) and [Caritas Philippines](#) will do a joint initial rapid assessment starting 30 October 2019 in the Tulunan – Kidapawan areas.

## **Needs analysis, targeting, scenario planning and risk assessment**

### **Needs analysis**

As mentioned, rapid needs assessments continue and will provide more information on the impact of the earthquake. However, based on secondary data and information from PRC chapters, immediate needs have been identified to include food, emergency shelter, health (including PSS), essential household items, water, sanitation and hygiene. Summary of immediate needs are outlined below:

### **Shelter**

The earthquake has damaged or destroyed infrastructure, and there will be a need to support those families whose houses have been displaced with immediate shelter solutions. Many are currently staying in open areas exposed to the monsoon rains, and in evacuation centres, as their houses are not habitable or are in unsafe areas. Depending on the results the assessments, there might be a need to consider medium term shelter solutions such as distribution of conditional cash, materials and technical assistance.



Residents of Brgy. Ilomavis, Kidapawan City prefer to camp outside as aftershocks continue to shake North Cotabato following the Oct. 29 earthquake. (Photo: PNA)

### **Livelihoods and basic needs**

The earthquake has disrupted the daily lives of the affected population, and there will be a need for multipurpose cash grants to support the survival threshold for meeting other immediate household and food needs. Depending on the feasibility of the assistance, and market system functionality, other modalities for cash assistance might need to be considered. There will also be a need to provide hot meals for the families that have been displaced; and are staying in evacuation centres.

### **Health**

The earthquake has put pressure on already stretched public health systems. There will be hospitals and health facilities without adequate supplies and human resources to cater to all the patients in need of services, and a risk that facilities could become overwhelmed. Due to the threats of aftershocks, DOH has deployed a team and mobilized resources to provide additional medical assistance in Cotabato. Immediate First Aid (FA) and Psychosocial Support (PSS) including Psychological First Aid (PFA) to the affected population is the most needed service at this point of time; with many already traumatized from the previous earthquake and the continuous threats of disease, including a re-emergence of polio and previous outbreaks of measles. It has been reported that families are sleeping in open areas due to the fear of aftershocks, and not feeling safe to return to their homes. There will be a pivotal need to provide affected population and the volunteers deployed with holistic PSS. Due to the poor living conditions and sub-optimal immunization coverage in these areas, the risk of rapid and massive spread of vaccine preventable diseases, especially Measles, Polio, Paediatric TB etc. has also been elevated. This will impact the most vulnerable young children below five years of age.

Diseases like dengue fever and other water and food borne diseases can also impact a large number of population due to collapsed structures and lack of sanitation, sewage and safe drinking facilities in the evacuation centres as well in the communities.

### Water, sanitation and hygiene (WASH)

The earthquake has disrupted access to water supply and sanitation facilities. There will be a need to mobilize water treatment units to provide safe drinking water to families that have been displaced and are staying in evacuation centres; as well as temporary sanitation facilities. Due to the sudden nature of the earthquake, families at evacuation centre can be expected to require basic hygiene items, and key hygiene messages.

### Temporary learning spaces

As some schools have been damaged and others will be used as evacuation centres there will be a need to provide the schools with temporary learning spaces.

### Social profile of Cotabato

North Cotabato is geographically located at the southernmost part of Cotabato Province. North Cotabato has the highest magnitude of poor population among the provinces in SOCCSKSARGEN, with 615,923, followed by South Cotabato with 411,404, Sultan Kudarat with 393,833, and Sarangani with 233,164. Cotabato City has a poor population of 62,325 with a poverty incidence of 25.6 per cent, based on latest PSA data. Davao del Sur has a poverty incidence of 10.7 per cent, based on the latest PSA data. Secondary data can be accessed in [HDX](#).

### Estimated disaggregated data for population targeted

PRC always ensures that its responses and programmes are aligned with its own as well as IFRC's commitment to take into account gender and diversity, for example, putting focus on and targeting women/child-headed households, pregnant or lactating women, and men, women and children made vulnerable by disasters; families with persons with disability, elderly, those suffering from chronic illnesses, families with children under five years old, families that have not received any or sufficient assistance from the government or other organizations, those belonging to the socially vulnerable families and those who lack relevant resources to cope with the basic humanitarian needs on their own.

For this DREF operation, PRC will focus on targeting the most vulnerable families who are staying at the evacuation centres considering that they are more vulnerable to the elements. These groups will be considered according to the level of impact. In case more needs identified from the continuous assessment, PRC might consider changing its targeting and would include people who are not displaced.

Once beneficiaries are identified and verified, each will be provided with a PRC beneficiary card with their and family members' names. The card will form the basis for official recognition of bearers as beneficiaries of the PRC and during implementation, PRC volunteers will again validate the beneficiaries' names on the cards where they are listed in distribution sheets. Upon receipt of any item or assistance, beneficiaries will sign award sheets or participating lists. With these records and validation process, cases of double-assistance or double-counting can be eliminated. PRC plans to utilize Red Rose for managing distribution records, including individual registration by sex and age disaggregated data.

Category	Estimated % of target group	% female	% male
Young children (under 5 years)	10.6%	5.5%	5.1%
Children (5-19yrs)	30.9%	15.9%	15%
Adults (20-49 yrs)	42.7%	21.8%	21
Elderly (>50 yrs)	15.8%	7.4%	8.3%
People with disabilities	14%		

### Scenario planning

Depending on the outcome of further rapid assessments which are currently being conducted, possible future scenarios are as follows:

Scenario	Humanitarian consequence	Potential Response
Limited damage and response remain within local government capacity	-	No further action

Increased damage reports confirmed. Families are displaced for a protracted period with a corresponding increase in needs requiring an increase in the DREF allocation.	Higher number of families. Short term displacement. Short term impacts on sectors.	Scale up DREF
Further increased damage reports with longer terms impacts confirmed	High number of families affected. Longer term displacement. High number of houses destroyed and damaged. Impact on livelihoods sector/markets. Impact on education sector. Impact on health sector.	Scale up to Emergency Appeal

### Operation Risk Assessment

Possible operational risks are shown below:

- Some areas are yet to be accessed. Hence, the full scale of the response has yet to be determined.
- After shocks are expected. This is the second significant earthquake in the same area – the first being 16 Oct in which 7,089 damaged houses; 1,312 totally damaged and 5,777 partially damaged.
- The Philippines is currently in the monsoon season with higher precipitation and winds.
- in the wider island there is already a response to the polio outbreak in the neighbouring province of Lanao del Sur. Recognizing that polio is introduced through fecal-oral transmission, and the expected impact of the earthquakes on water and sanitation infrastructure, this would likely increase the risks related to this outbreak as well.
- Security and access for PRCS and IFRC

### Feasibility and delivery capacity

This DREF operation will be carried out by two PRC Chapters, North Cotabato and Davao Del Sur. North Cotabato chapter is categorized as “Category E” and Davao Del Sur is “Category D”. These classification shows that chapters are needed special fund to support from NHQ since they are unable to generate fund locally which implies that the chapter can cover basic operational costs and therefore requires additional support from the NHQ. In addition, support from other chapters to undertake assessments and implementation of operation activities. Additional support will be needed in terms of management, technical, implementation from the NHQ. If needed, IFRC and other Movement partners are welcome to provide support.

## B. Operational strategy

### Overall Operational objective

This DREF operation aims to meet the immediate needs of the most vulnerable of the affected population in Cotabato and Davao del Sur due to the earthquakes. Total of 7,500 people will be supported with health, WASH and welfare services; and 900 families, with unconditional multi-purpose grants, shelter and household items.

### Proposed strategy

The operational strategy under this DREF operation includes the following interventions:

- Conduct rapid disaster assessment and needs analysis (RDANA) in collaboration with government and other humanitarian organisations. This will inform the identification of the caseloads, with consideration of gender, diversity and disability in the activities planned.
- Distribution of unconditional multipurpose cash grants. This will be done via a pre-identified financial service provider (FSP). The cash transfer value will be based on the minimum expenditure basket (MEB). This will be preceded by a rapid market assessment to support the feasibility of using cash; and inform in more detail the implementation of this response option.
- Distribution of shelter and household items, comprising blankets, sleeping mats and tarpaulins. Since there are adequate relief items available – which are being released from the warehouse – this DREF will replenish the mobilized items. NHQ response teams will be mobilized on rotations to support the distribution process; and will be assisted by PRC volunteers. Technical guidance will be also provided “on the spot” to raise awareness of safe shelter practices when repairing damaged houses etc.
- Establish and operationalise mass water treatment, storage and transport modules (SETA, LMS) to provide the affected population with drinking water. This will be accompanied by temporary sanitation and shower facilities (separate for men and women); and handwashing infrastructures.

- Distribution of hygiene related items, comprising hygiene kits, jerry cans for water storage and mosquito nets. This be accompanied by health and hygiene promotion conducted by RCAT134 volunteers focused on epidemic prevention focusing on vector borne diseases, and safe water storage and utilization. They will be equipped with information, communication and education (IEC) materials).
- Establish and operationalise an emergency medical unit (EMU) for a period of three months – the DREF will also replenish the supplies used; and support the cost of PRC volunteers who will work on rotation to provide 24-7 services. The EMU has the capacity to serve at least 102 patients. FA services will also be provided; and FA kits distributed at family and chapter level.
- Establish and operationalize welfare desks at evacuation centres; as well as provide PSS services to the affected population. The welfare desks will support (i) restoring family links; (ii) tracing; (iii) psychosocial support; (iv) critical incident stress management; (v) guidance and counselling; (vi) inquiry and communications; (vii) contact of relatives; and (viii) referral. Temporary learning centres will also be established to support children whose schools have been closed following the earthquake.

This DREF contributes to the overall PRC plan of action for their response to the earthquakes. The operation will be implemented within four months and is expected be completed by 29 February 2020.

## **Support Services**

### **Human resources**

All relief activities will be implemented by the utilizing existing staff and Red Cross 143 volunteers, Red Cross Action Teams (RCAT134) and NDRT from other Chapters. The operation will cover insurance, vaccination and visibility costs for volunteers supporting the response efforts. IFRC Philippines country office will support PRC in providing technical and support service staff as required to ensure accountability and compliance with regards to the operation.

In addition, provision has been made for regional disaster response team (RDRT) who will be mobilized based on technical support requirements of the National Society once the operation is being implemented; and conditional to security clearance being received

### **Communication**

PRC communications team will ensure that Red Cross response efforts are effectively communicated amongst its key public audiences in a timely manner. PRC staff and volunteers across the country are actively contributing to institutional communications through its own social media networks. A composite team of PRC and IFRC communications officers will work together to generate high quality photos, video clips and news stories for use across IFRC and PRC multimedia platforms. Mobile messaging groups (via Facebook Messenger) was set up between PRC's operations centre, DMS, deployed assessment teams, PRC and IFRC communications focal persons to share real-time information and data from responders on the ground and vice versa.

### **Information technology and telecommunications**

The DREF operation will cover costs of mobile phone credits and internet cards for the chapters involved. PRC will ensure that staff and volunteers involved in the operation are accessible via mobile phones. Where necessary, satellite phones will be made available. The chapter will have enough computer software and hardware capacity, and support for the operational requirements.

### **Security**

The National Society's security framework will apply to PRC staff and volunteers throughout. All PRC staff and chapter volunteers are encouraged and will be supported to complete IFRC Stay Safe e-learning courses. Where the presence of personnel under IFRC Security responsibility is approved, the IFRC security framework, including the IFRC Philippines country Security Regulations and contingency plans are applicable to those personnel. An area specific Security Risk Assessment will be conducted for the operational area; risk mitigation measures will be identified and implemented This will include security briefings for all IFRC personnel, movement monitoring for Field travel and availability of safety equipment. Specific guidance on immediate actions in the event of an earthquake / aftershock will be disseminated. Due to the heightened risk of Polio and Measles, IFRC personnel have been vaccinated. Coordination with the ICRC and implementing PNS will be observed through regular information-sharing in accordance with the existing and agreed MVT arrangements. IFRC will coordinate with PRC to identify and support additional safety and security needs.

### **Community engagement and accountability (CEA)**

Community engagement and accountability and feedback/response mechanisms will be integrated into the operation to ensure that affected populations have direct access to information on the nature and scope of services provided by PRC, together with processes that will enable community participation and ease of providing feedback and giving responses. A Barangay Recovery Committee (BaReCoM) will be formed to support community engagement as they are

direct representatives from their own communities. The community can directly provide feedback to the BaReCoM members, which are essential for continuous improvements of the programme implementation. BaReCoM is composed of at least 10 community representatives – barangay/purok officials, representative of all sectors in the community such as farmers, elderly group, women’s group, persons with disabilities, health workers, etc.

#### **Planning, monitoring, evaluation and reporting (PMER)**

Reporting on the operation will be carried out in accordance with the IFRC reporting standards. Regular updates will be issued during the operation’s timeframe with a final report issued within three months after the end of the operation. The operation team will have technical PMER capacity and additional technical support is provided through IFRC APRO PMER team. The operation monitoring teams will conduct field visits as needed. This will help identify and, where possible and necessary, resolve any issues. Necessary tools and templates for regular data collection and reporting will be adopted from existing PMER resources. A lessons learnt workshop will be conducted at the end of the operation to inform best practices in future response conducted by PRC.

#### **Administration and finance**

The IFRC provides the necessary operational support for review, validation of budgets, bank transfers, and technical assistance to PRC on procedures for justification of expenditures, including the review and validation of invoices. PRC is accustomed to and competent in delivering these financial procedures to the required standards.

#### **Logistics and supply chain**

Logistics activities aim to effectively manage the supply chain, including procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation’s requirements and aligned to IFRC’s logistics standards, processes and procedures. Logistics support for this operation is being provided through the strong capacity of the PRC logistics built over the last years, supported by an experienced IFRC country office logistics team.

The main supply chain strategy to meet immediate operational needs is to release required relief items for 900HH, including blankets, sleeping mats, hygiene parcels, jerry cans and tarpaulins from PRC existing prepositioned stocks. IFRC CO is supporting PRC to mobilize and transport needed equipment’s and relief items to the affected areas. The items released to meet immediate needs will be replenished by the IFRC following IFRC standard procurement procedures. Items with the local specification to meet local cultural context will be replenished locally by the IFRC CO logistics team whereas IFRC standard relief items, such as hygiene parcels, jerry cans and tarpaulins will be replenished internationally by IFRC Asia Pacific Operation Logistics, Procurement and supply Chain Management (OLPSCM) department based in Kuala Lumpur Malaysia. Existing warehouse capacity of the PRC is enough to meet planned operational needs and at this stage there is no need to rent additional warehouse space. Strong PRC fleet will be providing the primary transport support for this operation. IFRC CO will extend its fleet support by making its vehicles available for this operation as and if required. IFRC AP OLPSCM will provide technical support to PCS and IFRC Philippines County Office as needed.









## Health

**People targeted: 7,500**

Male: 3,800

Female: 3,700

**Requirements (CHF): 25,009**

Sector	Need analysis	Assistance planned and population to be assisted
Health	<ul style="list-style-type: none"> <li>- Minor damage to the health facilities in the affected areas was reported</li> <li>- One of the hospitals reported major damage to an extent that 102 patients were evacuated and now looking out for emergency medical unit support</li> <li>- There are people in need of immediate first aid, stabilization support and transportation to a nearby health facility.</li> <li>- There are losses of lives and some people are in extreme shock due to loss of dear ones and some due to a narrow escape. These people need immediate PFA and some PSS in the later stage.</li> </ul>	<ul style="list-style-type: none"> <li>- Provide rapid medical management of injuries and diseases through PRC chapter and Welfare Desks – at evacuation centres.</li> <li>- Five (5) communities approximately 7,500 people in the severely affected areas in Kotabato (Bual, Bagontapay, Magsaysay and Columbia) will be provided with immediate medical and PSS assistance.</li> <li>- Psychosocial support services like psychological first aid will be provided to children and most vulnerable segments of the population</li> <li>- 900 families will be provided with mosquito nets (part of the standard non-food item package)</li> <li>- At least 102 patients (with possibilities of expansion), will be treated in emergency medical unit, put up and maintained by PRC.</li> </ul>

**Risk analysis:** There are risk of overwhelmed health facility and health facilities affected by the earthquake. This will put pressure on the already weak public health system in the most affected areas. There will be hospitals and health facilities without adequate supplies and human resources to cater to all the patients in need of services. Due to the poor living condition and sub-optimal immunization coverage in these areas, rapid and massive spread of vaccine preventable diseases, especially Measles, Polio, Paediatric TB etc. is a big risk. This will impact the most vulnerable young children below five years of age. Diseases like dengue fever and other water and food borne diseases can also impact a large number of populations, due to collapsed structures and lack of sanitation, sewage and safe drinking facilities in the evacuation centres as well in the communities.

**Programme standards/benchmarks:** Sphere, Epidemic Control for Volunteers Toolkit, Psychosocial Support in Emergencies Guidelines, WHO SPEED guidelines, CBS guideline and UNICEF/WHO Standards as per local DOH guidelines.

P&B Output Code	<b>Health Outcome 1: The immediate risks to the health of affected populations are reduced</b>	<i>7,500 people reached through NS emergency health management programmes</i>																
	<b>Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines</b>	<i>Two health assessments carried (part of RDANA)</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP021	Conduct an initial assessment on health status of the affected population as part of RDANA		x															
									<i>250 people provided with first aid</i>									







AP030	Identify, validate and finalized beneficiary lists for the distribution of hygiene kits (one per family) to 900 families (link to the distribution of non-food items)		x	x													
AP030	Post distribution monitoring of the hygiene kits				x												



## Protection, Gender and Inclusion

People targeted: 7,500

Male:3,800

Female:3,700

Requirements (CHF): 5,325

Sector	Need analysis	Assistance planned and population to be assisted
PGI	<ul style="list-style-type: none"> <li>- The initial assessment will focus on key PGI areas and identify needs in terms of all PGI elements</li> <li>- Different studies including the IFRC-led SGBV research shows that sexual and gender-based violence increases by almost 30% during and after a disaster.</li> <li>- It is important that the distribution and targeting are inclusive, diversity-friendly, non-exploitative and sensitive to the needs of the most vulnerable population subsets, including women and girl children</li> <li>- The operation needs to integrate a 'do no harm' approach into all aspects of planning and programming. PRC will capture sex and age disaggregated data for the purpose of accountability to communities, to analyse who is directly benefitting and who is not benefitting from services; and to understanding the number and specific vulnerabilities of females to males based on their gender roles and age (i.e. to understand if a higher proportion of women, children or men are made vulnerable) and to provide age- and sex-appropriate clothing, hygiene materials and healthcare.</li> <li>- Two Schools in the operation area, reported to be collapsed and these children will require Temporary Learning Centre facility for continued education, until the school facilities are functional, again.</li> </ul>	<ul style="list-style-type: none"> <li>- All the people assisted in either relief phase and through any sectoral interventions, must include PGI lenses, especially in beneficiary selection, delivery of interventions, monitoring and reporting.</li> <li>- As part of this operation 7,500 people with either messages or interventions in relation to PGI</li> <li>- Two Temporary Learning Centre will accommodate at least 400 children to ensure that their education is not hampered by the earthquake, collapsed infrastructure and displacement.</li> </ul>

**Risk analysis:** *The PGI risks are cross cutting in nature. The program people often overlook the softer issues in relation to inclusiveness, protection and gender sensitivity while undertaking community-based relief activities or doing the same in a camp environment.*

**Program standards/benchmarks:** [IFRC minimum standards for protection, gender and inclusion in emergencies](#), SGBV guidelines of the Philippines Red Cross, Child Protection Policy of IFRC, Code of Conduct etc.





	reduce potential risk on journey and destination via the virtual volunteer and information drives																	
AP036	Referral to other welfare agencies and established clear referral pathways	x	x	x	x													
AP036	Legal assistance for documentation, protection and options for legal migration thru partnership with consular assistance team	x	x	x	x													
AP036	Mapping and engaging with migrant organizations relevant for work.	x	x	x	x													
<b>P&amp;B Output Code</b>	<b>Migration Output 1.3: “Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster”</b>	<i>4 welfare desks providing RFL services in the disaster affected areas.</i>																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP083	Set up welfare desk and support trained volunteers for activities including RFL, tracing, inquiry, communication with their families and referral	x	x	x	x													

## Strategies for Implementation

### Requirements (CHF)

<b>P&amp;B Output Code</b>	<b>S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform.</b>	<i># NS branches that are well functioning.</i>																
	<b>Output S1.1.4: National Societies have effective and motivated volunteers who are protected</b>	<i>100 % volunteers insured.</i>																
	Activities planned	Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP040	Visibility of the NS is ensured throughout the operation	x	x	x	x													
AP040	Ensure that volunteers are insured	x	x															
AP040	Provide complete briefings on volunteers’ roles and the risks they face	x	x															
<b>P&amp;B Output Code</b>	<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>	<i>Effective and coordinated international disaster response ensured.</i>																
	<b>Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained</b>	<i>1 RDRT deployed in the country.</i>																
	Activities planned	Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP046	Initial operational start up support implemented by IFRC for the host national society and participating national societies and other common services	x	x	x														
AP046	Deployment of RDRT		x															
<b>P&amp;B</b>		<i>2 methods established to share information with communities about what is happening in the operation.</i>																

<b>Output Code</b>	<b>Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved</b>	<i>100% complaints and feedback received responded to by the NS.</i>															
	Activities planned Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP084	Communicate and engage with communities on social media (Facebook and Twitter).	x	x	x	x												
AP084	CEA awareness sessions for the staff and volunteers are conducted	x	x														
AP084	Client satisfaction survey			x	x												
<b>P&amp;B Output Code</b>	<b>Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability standards</b>	<i>Logistics department provides constant support to the National Society's logistics unit for replenishment and other procurements.</i>															
	Activities planned Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP050	IFRC country office's logistics department provides constant support to the National Society's logistics unit for replenishment and other procurements	x	x	x	x												
<b>P&amp;B Output Code</b>	<b>Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.</b>	<i>IFRC and NS are visible, trusted and effective advocates on humanitarian issues.</i>															
	<b>Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues</b>	<i>10 communications materials produced (social media, media articles, interviews, etc.) to share information about the operation.</i>															
	Activities planned Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP053	Communications work of the PRC is supported by the IFRC country office and regional office in Kuala Lumpur	x	x	x	x												
AP053	Produce communications products related to the operation	x	x	x	x												
<b>P&amp;B Output Code</b>	<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>	<i>2 of post-distribution visits to affected communities. 1 lesson learnt workshop will be conducted.</i>															
	Activities planned Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP055	Assessment of needs, capacities and gaps as part of continuous surveillance, validation and pockets of maximum needs from with the areas of operation.	x															
AP055	Identification of community participation modalities in programme design and implementation	x															
AP055	Post community information generation session monitoring visits to affected communities	x	x	x	x												
AP055	Lessons learned workshop for DREF operation				x												
<b>P&amp;B Output Code</b>	<b>Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders</b>	<i>100% of financial reporting respecting the IFRC procedures.</i>															
	Activities planned Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16



## Funding Requirements

International Federation of Red Cross and Red Crescent Societies

*all amounts in  
Swiss Francs  
(CHF)*

### DREF OPERATION

MDRPH036 PHILIPPINES COTABATO EQ OPERATION

31/10/2019

#### Budget by Resource

Budget Group	Budget
Shelter - Relief	34,740
Clothing & Textiles	3,960
Water, Sanitation & Hygiene	21,800
Medical & First Aid	6,923
Teaching Materials	3,000
Utensils & Tools	3,600
Other Supplies & Services	5,000
Cash Disbursement	54,450
<b>Relief items, Construction, Supplies</b>	<b>133,473</b>
Distribution & Monitoring	4,000
Transport & Vehicles Costs	3,400
Logistics Services	7,856
<b>Logistics, Transport &amp; Storage</b>	<b>15,256</b>
International Staff	4,000
National Society Staff	24,000
Volunteers	18,100
<b>Personnel</b>	<b>46,100</b>
Workshops & Training	5,000
<b>Workshops &amp; Training</b>	<b>5,000</b>
Travel	7,000
Information & Public Relations	2,400
Office Costs	300
Communications	300
<b>General Expenditure</b>	<b>10,000</b>
DIRECT COSTS	209,829
INDIRECT COSTS	13,639
<b>TOTAL BUDGET</b>	<b>223,467</b>

## Reference documents



Click here for:

- [Information bulletin](#)
- [Previous Appeals and updates](#)

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## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives,**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



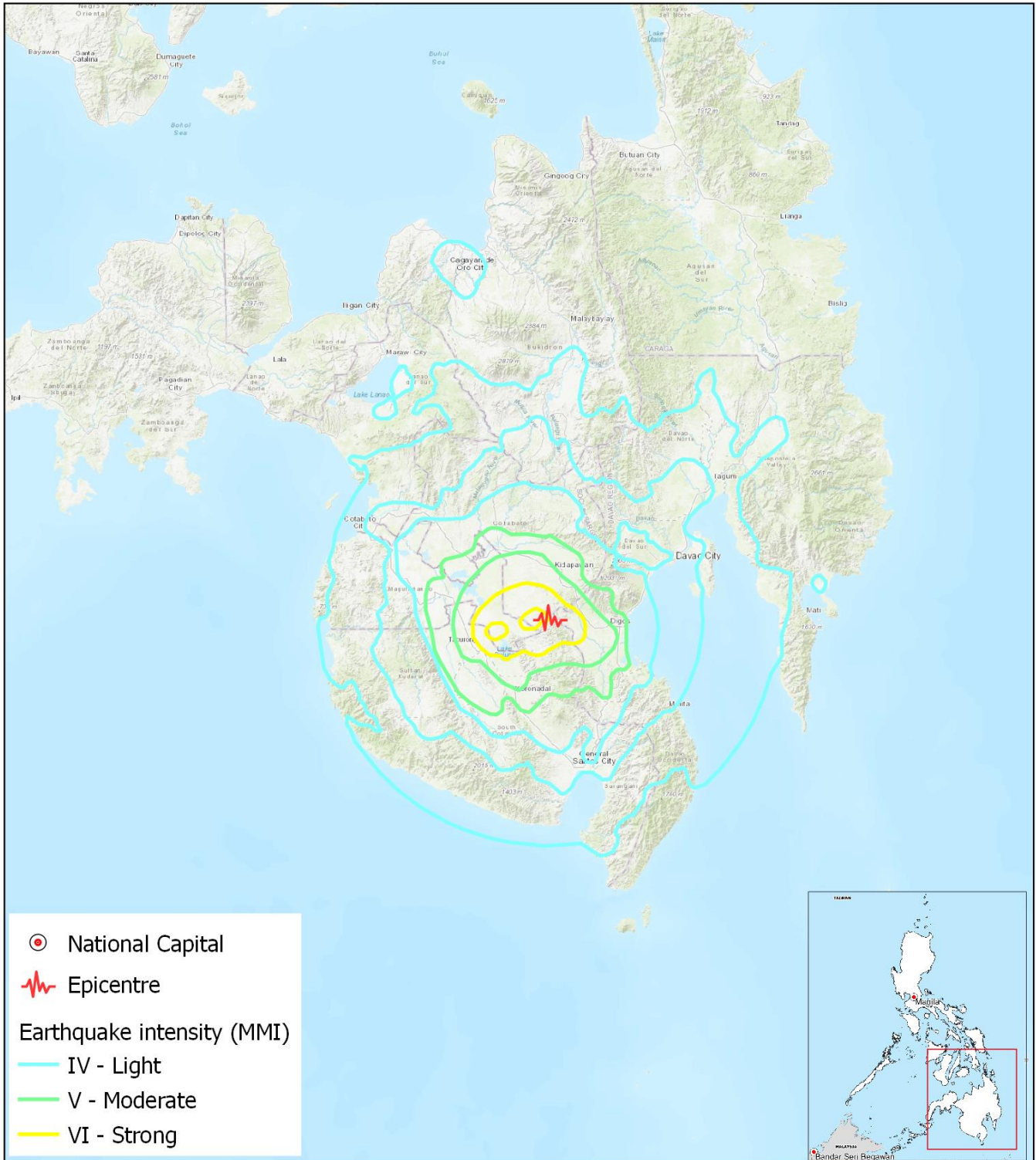
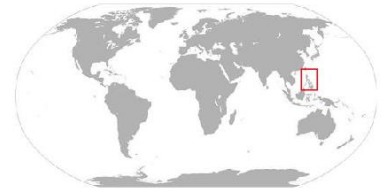
Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.

**Philippines: Cotabato, Mindanao Earthquake:  
Disaster Relief Emergency Fund**

30 October 2019



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of territory or its authorities. Map data sources: OCHA, OSM Contributors, GDACS, ICRC, IFRC, USGS

