Philippines

Disability-Inclusive Disaster Risk Reduction (DiDRR) Handbook
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II. Introduction : About this Handbook

The Disability-Inclusive Disaster Risk Reduction (DiDRR) Handbook is an invaluable resource that provides comprehensive guidance to disaster risk reduction (DRR) civil protection professionals. Its primary objective is to ensure the full inclusion of people with disabilities (PWDs) in all stages of DRR efforts. By addressing the critical need for inclusivity, the handbook aims to overcome the challenges faced by PWDs during disaster situations while also emphasizing the significant opportunities for their active participation and empowerment.

The DiDRR Handbook provides DRR practitioners with a wealth of practical insights, tools, and strategies to enhance disability-inclusive approaches. It covers a wide range of topics, including understanding the principles of disability-inclusive DRR, recognizing different types of disabilities, identifying barriers faced by PWDs in disaster situations, and implementing strategies to make DRR more inclusive.

The handbook also emphasizes the importance of meaningful engagement with PWDs and their representative organizations, recognizing their expertise and lived experiences. It highlights the significance of adopting a person-centered approach, promoting equal rights, non-discrimination, and active participation. By implementing the recommendations and resources outlined in the handbook, practitioners can foster empowerment, inclusion, and resilience among PWDs.

The Philippines is amongst the world’s most vulnerable when it comes to natural hazards with regular occurrences of typhoons, floods, drought, earthquakes and volcanic eruptions – all of which are further exacerbated by the adverse impacts of climate change. The Philippines is situated in the Pacific ring of fire, with more than 7,000 islands and 36,000 kilometers coastline.
Over the past decade, the Philippines endured hundreds of natural disaster occurrences, making it among the most disaster-prone countries in the world. In a study conducted by the World Bank in 2008, 50.3 percent of its total land area and 81.3 percent of its population are vulnerable to natural hazards.

One of the most severe disasters to hit the Philippines in recent history is the typhoon Haiyan on November 8, 2013 which struck the Visayas region that caused the death of 7,750 people and with damages amounting to 12.24 billion US dollars. One of the most vulnerable victims – survivors during the disasters are Persons with Disabilities.

Before, Disability-Inclusive Disaster Risk Reduction plans, programs, services and activities were not notifiable during disaster. During the TS Haiyan two of the issues and concerns are disaggregated data on disability and information dissemination. There is a need to improve disaster education such as explaining to people the reality of climate change, types of signals in mixed Tagalog, English or local dialect to understand the term used during disaster. Further, lack of warning signals for persons with deaf or hard of hearing, visual disability, and PWD inclusive - evacuation centers also the problem concerning PWDs during emergencies, However, TS Haiyan marked a big lessons and now in the NDRRMP 2020-2030 we include DiDRR in our priority areas.

Further, Geographical Isolated Disadvantaged Areas (GIDA) is also our challenges but we ensure that the local government unit, the community are equipped before, during and after the disasters and goods are preposition in the strategic areas for immediate response and provision to affected families/individuals.
III. Principles of Disaster Risk Reduction (DRR) and Disability-Inclusive Disaster Risk Reduction (DiDRR)

- Barriers and accessibility
- Reasonable accommodation
- Universal design
- Twin-track approach
- Disability disaggregated data
- Self-representation and meaningful participation

IV. Polices Relevant to Disability-Inclusive Disaster Risk Reduction

1. Convention on the Rights of Persons with Disabilities
   Article II - States Parties shall take, in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.

2. 2030 Agenda and Sustainable Development Goals, 2015. Sendai Framework has complementary reporting on:
   - SDG 1. End poverty in all its forms everywhere
   - SDG 11. Make cities and human settlements inclusive, safe, resilient and sustainable
   - SDG 13. Take urgent action to combat climate change and its impacts

3. Incheon strategy to ‘Make the Right Real’ for persons with disabilities in Asia and the Pacific
   - Goal 7: Ensure disability inclusive disaster preparedness


5. ASEAN Enabling Master Plan 2025

7. 2015 Sendai Framework for Disaster Risk Reduction 2015-2030

8. Republic Act No. 10121, s. 2010 - The Philippine Disaster Risk Reduction and Management Act of 2010


10. Philippine Development Plan 2023-2028

11. Ambisyon Natin 2040- The Life of all Filipinos by 2040 Matatag, Maginhawa at Panatag na Buhay By 2040, Filipinos enjoy a strongly rooted, comfortable, and secure life. In 2040, we will all enjoy a stable and comfortable lifestyle, secure in the knowledge that we have enough for our daily needs and unexpected expenses, that we can plan and prepare for our own and our children’s future. Our family lives together in a place of our own, and we have the freedom to go where we desire, protected and enabled by a clean, efficient, and fair government.

12. R.A. No. 7277 (Magna Carta for Persons with Disabilities) - An Act providing for the Rehabilitation, Self-Development and Self-Reliance of Persons with Disabilities and their Integration into the Mainstream of Society and for other purposes,”, Approved March 24, 1992 by President Corazon Aquino

13. R.A. No. 10070 (PDAO Law) - An act establishing an institutional mechanism to ensure the implementation of programs and services for persons with disabilities in every province, city and municipality, amending Republic Act No. 7277, Otherwise Known as the “Magna Carta for Disabled Persons”, As Amended, and for Other Purposes, Approved April 6, 2010 by President Gloria Macapagal Arroyo

14. Joint Memorandum Circular No. 02 series of 2021; Guidelines on Camp Coordination and Camp Management and Internally disabled persons protection
V. Purpose of the Handbook

This Handbook is designed to build the capacities of Persons with Disability Affairs Officers / Focal Persons, Social Workers, Local Disaster Risk Reduction and Management Officer (LDRRMO), Persons with Disability, Organization of Persons with Disabilities, and Civil Society Organization.

The Handbook combines conceptual frameworks (theoretical understanding) with practical inquiries (real-world application). This ensures participants grasp the "why" behind the concepts and have the opportunity to put them into practice. The learning experiences are structured, providing participants with a clear roadmap for their learning journey. This helps them stay focused and engaged. Structured learning experiences are designed to trigger reflection and evaluation. Participants are encouraged to think critically about the concepts they learn and how they apply to their own lives. The handbook uses activities that encourage participants to "gain," "be," "do," and "save." This goes beyond simply acquiring knowledge and aims to develop participants' skills, attitudes, and behaviors. The learning process is designed to be active. Participants are not just passive recipients of information; they are actively involved in acquiring, processing, contextualizing, and evaluating it. The handbook helps participants develop decision-making skills by encouraging them to evaluate information and choose a course of action. The sessions prepare participants for the learning process and help them situate themselves within it. This creates a sense of ownership and responsibility for their learning. The handbook provides the structure and tools for meaningful conversations about the subjects. This allows participants to explore the topics in depth and learn from each other's experiences. The handbook encourages participants to delve into practice applications. This ensures that the learning is not just theoretical but can be applied to real-world situations.

There are individual, group exercises, simulation and drills that encourage the participants to actively engage in the learning process and understand and situate themselves. In the exercises the participants' reflect and encourage them to delve deeper into the topics. This ensures the learning experience is not superficial and promotes meaningful exploration.

The learning process basically follows the ADIDS method of instruction for structured learning. ADIDS stands for:

- **Activity**: This is where participants actively engage with the material, be it through hands-on exercises, simulations, or role-playing. A well-designed activity has a clear purpose, defined steps, and instructions concise enough for participants to follow easily.

- **Discussion**: This is where participants reflect on their experiences from the activity and share their insights with each other. A skilled facilitator can guide the discussion to help participants analyze their learning and identify real-world applications.

- **Input and Deepening**: This is where the facilitator provides additional information or resources to expand on the concepts covered in the activity. This can include lectures, readings, or case studies.

- **Synthesis**: This is where the key learning points and takeaways from the module are summarized and emphasized. This helps participants solidify their understanding and retain the core messages of the learning experience.
VI. How to use this Handbook

• The primary users of this Handbook are Persons with Disability Affairs Officers / Focal Persons, Social Workers, Local Disaster Risk Reduction and Management Officer (LDRRMO), who will conduct a similar training for service providers in the future. Secondary users of this training handbook are the Barangay. However, if they roll-out this training to the barangay level, then the LGUs may also be considered as primary users of this training manual.

• The overall objective of this handbook is to develop the competencies knowledge, skills and abilities, and attitudes and values of Persons with Disability Affairs Officers / Focal Persons, Social Workers, Local Disaster Risk Reduction and Management Officer (LDRRMO), and other service providers who are providing services for Persons with Disabilities related to disaster risk reduction.

• The training participants are service providers, especially those directly working and interacting Persons with Disabilities.

• The training manual is designed to be run for 5 days for face-to-face implementation including preliminaries.

• Acronyms and initialisms, together with their meanings, are listed in a table, for your reference.

• A pre- and post-training questionnaire should be administered before and after the training proper, to evaluate whether the training has achieved its objectives and to identify training areas of strengths and for improvement. The pre-training questionnaire will also enable the facilitators/trainers to know the profile of the participants and modify the training design, if needed.

• There are seven (7) modules identified as important in the understanding of the Disability-Inclusive Disaster Risk Reduction (DiDRR). The modules can be used standalone and implemented based on the specific needs of the training participants.

• Each session starts with an activity. Execution of these activities may be modified, as long as the critical learnings or key messages are still achieved.

• There is a learning check activity at the end of each module/session, to assess participant comprehension and to identify their strengths and areas that need more work on for that specific module.

• A critical learnings checklist is provided at the end of every session, as a guide for facilitators, trainers, and resource speakers to assess whether they have covered the important points for each session.
VII. General Notes to the Facilitators and Resource Persons

It is important that the training team composed of facilitators, trainers, and resource speakers, are prepared prior to the training proper. The team of facilitators/trainers and resource speakers should meet beforehand to coordinate and organize the topics and assigned tasks. You should also prepare for your assigned tasks by reading on assigned topics or preparing materials needed for your assigned activity.

VIII. Standard Implementation Flow

Management of Learning (MOL) by host team assigned (25 minutes)

Every module/session starts with management of learning, or a recap of the previous module. This may be facilitated by the learning management team (LMT) or by the host group. It is highly encouraged to employ creative methods and activities for the management of learning.

Session Proper (time varies per module).

The session proper is where resource speakers/subject matter experts discuss the critical learnings for each module. The methodology can vary—lecture, reporting, videos, etc.—depending on the style of the resource speakers/subject matter experts.

Learning Check (15 minutes).

Every module ends with a learning check, to assess the extent of learning of the participants.

Administrative Announcements and Reminders (10 minutes)

The learning management team gives announcements and reminders, which include, but are not limited to, deadlines, attendance, evaluation forms, and host group in-charge of the MOL for the next module.

IX. Target Participants

- Persons with Disability Affairs Officer (PDAO)/Focal Person
- Local Social Welfare and Development Officer (LSWDO)
- Local Disaster Risk Reduction Management Officer (LDRRMO)
- Province/City/Municipal Federation of Persons with Disability Officers
- Province/City/Municipal Federation of Parents/Guardian of Children/Persons with Disability Officers
- Civil Society Organization (CSO)
X. Implementation of the Handbook Training Proper

Module 1: Understanding of Current Situation, Disability and its Types, Social Model and Barriers

Timeline/Period: One (1) Day

General Objectives:

After the completion of this module, the participants will be able to...

1. Better understanding and familiarize themselves the types disabilities and barriers
2. Describe the different barriers faced by person with disabilities and their families
3. Illustrate the process of gathering and disaggregating data of the different classifications of disabilities

Materials Needed: (PowerPoint Presentation, SWOT Analysis Workshop Templates, laptop)

Session 1: SWOT Analysis

In this session the participants are able to identify the strengths, weaknesses, opportunities and threats in terms of your organizations.

Purpose of conducting SWOT Analysis:

- To identify the strengths, weaknesses, opportunities and threats of an entity, person, unit, etc.
- To assess the situation
- To make a plan
- To make strategic decision

Factors of SWOT Analysis:

The internal factors are S and W while the external factors are O and T.

S is the internal component to support and may make positive changes
W is the internal component to obstruct and may make negative changes
O is the external component to support and may make positive changes
T is the external component to obstruct and may make negative changes
Some Ideas to Identify Each Components

● **S** may refer to all kinds of good, potential resources, capacity in the unit we analyze

● **W** may refer to all kinds of bad, not sufficient of resources, capacity in the unit we analyze

● **O** could be identified from external factors which support the current and/or future situation

● **T** could be identified from external factors which are challenging, difficulties for our current and/or future work

Write down answers to the following questions:

**Strengths:**
- What are your advantages?
- What do you do well?
- What unique resources do you have?

**Weaknesses:**
- What could you improve?
- What do you do badly?
- What should you avoid?
- Where do you have fewer resources than others?
- What are others likely to see as your weaknesses?

**Opportunities:**
- What are the good opportunities facing you?
- What are the interesting trends you are aware of?
- Who are your potential allies?

**Threats:**
- What obstacles do you face?
- Does your group have all the required skills for the job?
- Do competitors or opponents already exist?
Session 1: Introduction

It is crucial that service providers are knowledgeable about disability and the types of disability, because it provides a more specific and actual picture of the persons with disabilities depending on their type of disability and facilitates the development of more appropriate and targeted intervention plans and/or programs. This session will discuss the current DOH classification of disabilities, according to the Philippine Registry For Persons with Disabilities Version 4.0, as well as the unique experiences, vulnerabilities, and needs of the different classifications of persons with disabilities.

Session 1: Objectives

After the completion of this session, the participants will be able to

1. Recognize the importance of having a classification of disabilities;
2. Identify the current Department of Health (DOH) classification of disabilities;
3. Analyze the unique experiences, vulnerabilities, and needs of the different classifications of persons with disabilities; and
4. Understand the importance of gathering and disaggregating data of the different types of disabilities.
5. Understand types of disabilities and their barriers faces

Lecture and Discussion

What is Disability - is not solely an individual's impairment but rather a result of the interaction between an individual's impairment and the barriers present in society. It recognizes that disabilities are diverse and can affect individuals in different ways, and that social and environmental barriers often hinder the full inclusion and participation of persons with disabilities. (UNCRPD).

According to the Convention on The Rights of Persons with Disabilities (CRPD):5

Persons with disabilities include those who have long-term physical, psychosocial, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

Disability encompasses a diverse range of impairments and social barriers. It can vary widely in the multiplicity and severity of impairments, as well as how it interacts with barriers to impacts a person’s daily life, requirements, and preferences.

The following are the ten (10) types of disability per Department of Health (DOH) Administrative Order Number 2013-0005-B Further Amendment to Administrative Order No. 2013-0005-A dated November 6, 2019 entitled “Amendment to Administrative Order No. 2013-0005,
1. **Deaf or Hard of Hearing** - refers to people with hearing loss, implies little or no hearing/ranging from mild to severe. Hearing loss, also known as hearing impairment, means the complete or partial loss of the ability to hear from one or both ears with 26 dB or greater hearing threshold, averaged at frequencies’ 0.5, 1, 2, 4 kilohertz.

2. **Intellectual Disability** - a significantly reduced ability to understand new or complex information and to learn and apply new skills.

3. **Learning Disability** - persons who, although normal in sensory, emotional and intellectual abilities, exhibit disorders in perception, listening, thinking, reading, writing, spelling, and arithmetic.

4. **Mental Disability** - disability resulting from organic brain syndrome and or mental illness (psychotic or non-psychotic disorder)

5. **Physical Disability** - is a restriction of ability due to any physical impairment that affects a person’s mobility, function, endurance or stamina to sustain prolonged physical ability, dexterity to perform tasks skillfully and quality of life. Causes may be hereditary or acquired from trauma, infection, surgical or medical condition and include the following disorders, namely: (1) Musculoskeletal or orthopedic disorders (2) Neurological disorders (3) Cardiopulmonary disorders (4) Pediatric and congenital disorders

6. **Psychosocial Disability** - any acquired behavioral, cognitive, emotional or social impairment that limits one or more activities necessary to effective interpersonal transactions and other civilizing process or activities to daily living such as but not limited to deviancy or anti-social behavior.

7. **Speech and Language Impairment** - mean one or more speech/language disorders of voice, articulation, rhythm and/or the receptive and expressive processes of language.

8. **Visual Disability** - A person with visual disability (Impairment) is one who has impairment of visual functioning even after treatment and/or standard refractive correction, and has visual acuity in the better eye of less than (6/18 for low vision and 3/60 for blind), or a visual field of less than 10 degrees from the point of fixation. A certain level of visual impairment is defined as legal blindness. One is legally blind when your best corrected central visual acuity in your better eye is 6/60 on worse or your side vision is 20 degrees or less in the better eye.

9. **Cancer (RA 11215)** - Cancer refers to a genetic term for a large group of diseases that can affect any part of the body. Other terms used are malignant tumors and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs;

10. **Rare Disease (RA10747)** - refers to disorders such as inherited metabolic disorders and other diseases with similar rare occurrence as recognized by the DOH upon recommendation of the NIH but excluding catastrophic (i.e., life threatening, seriously debilitating, or serious and chronic) forms of more frequently occurring disease.
Session 3: Type of Barriers (Physical, Attitudinal, Communication/Information and Institutional/Systemic Barriers)

Session 2: Introduction

In this session service providers are knowledgeable about types of barriers faced by persons with disabilities; it provides a more specific and actual picture of the persons with disabilities depending on their type of disability vis a vis types of barriers. This session will discuss each barrier and present examples as service providers more understand the barriers faced by persons with disabilities. By addressing these barriers, service providers can help to create a more inclusive society where people with disabilities can fully participate in all aspects of life.

Session 2: Objectives

After the completion of this session, the participants will be able to

1. Describe the barriers that persons with disabilities face to participants/partners stakeholders
2. Better understanding and familiarity with the various types of barriers faced by individuals with disabilities

Discussion/Lecture

Barriers to the full participation and exercise of human rights of persons with disabilities

A. Environmental/Physical

Structures in the environment that prevent access to equipment, buildings, transportation, etc.

B. Institutional/Systemic

1. Policies, practices and activities that exclude persons with disabilities
2. Lack of awareness on how to assist and interact with persons with disabilities

C. Technology and Information

1. Lack of relevant assistive technology and inaccessible formats of information

D. Attitudinal

Negative perceptions toward people with disabilities. This includes stigma, exclusion, misconceptions, and lack of awareness related to persons with disabilities especially those with non-apparent disabilities
Session 4: Inclusion/Universal Design and Accessibility

Session 3: Introduction

It is crucial that service providers, persons with disability and organizations of persons with disability (OPD) are knowledgeable and understand universal design, accessibility and inclusion.

Session 3: Objectives

1. Better understanding of importance of universal design, inclusion and accessibility
2. Be familiar on the seven (7) universal design

Session 3: Discussion/Lecture

What is Accessibility?

Accessibility is one of the eight principles that enable the rights affirmed in the CRPD. In Article 9 of the CRPD, accessibility is defined as ensuring that persons with disabilities has access to and can safely and seamlessly use the physical environment, public transportation, services, knowledge, and information and communications.

Accessibility is about ensuring that barriers are removed to enable equal access and participation for everyone. DiDRR efforts are vital. Here are some examples:

1. Participation in planning: Accessible DiDRR measures are inclusive of persons with disabilities and their requirements in decision-making processes and response strategies.

2. Safety and Evacuation: Accessibility in warning systems may include visual alerts, auditory signals, tactile notifications, and other assistive technologies to make sure that persons with disabilities receive alerts and warnings. Accessible infrastructure and evacuation procedures, such as accessible transportation and evacuation routes enables safe evacuation during emergencies.

3. Accessible shelters: Emergency shelters must be accessible, including wheelchair accessibility, accessible bathroom facilities, clear and visible wayfinding, and appropriate lighting.

4. Information and Communication: Accessible information and communication considers requirements of persons with disabilities and guarantees that they receive timely warnings and relevant information in all phases of DiDRR. Some examples of accessible communication formats are Braille, sign language, audio description, and easy-to-read materials.
What is Universal Design?

**Universal Design** is an approach to designing products, environments, and systems that are usable by the widest possible range of people, regardless of their age, ability, or socioeconomic status in society.

Module 2: Understanding of International, Regional, National and Local Policies on Disability and Disaster Risk Reduction (DRR Framework)

**Half-Day Activity**

**Introduction**

In this module the participants will be oriented on the existing related International, Regional and National Policies on Disaster Risk Reduction (DRR) and Disability-Inclusive Disaster Risk Reduction (DiDRR)

**Objectives**

1. Better understanding of key international, regional and national legal instruments
2. Be able to define DRR
3. Understand how DRR have evolved
4. Understand the relationship between disability and disaster risk
5. Be familiar with key global and regional frameworks
6. Be aware of key principles of disability inclusive DRR (DiDRR)

**Discussion**

A. International Framework

**1. United Nation Convention on the Rights of Persons with Disabilities UNCRPD**

The Convention on the Rights of Persons with Disabilities (CRPD) was adopted on 13 December 2006 by the United Nations General Assembly and entered into force on 3 May 2008. The CRPD is an international treaty to promote, protect and ensure full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities. 186 countries and regions have ratified CRPD and it is legally-binding among them

**Article 11**: Situations of risk and humanitarian emergencies States Parties shall take, in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.

The Sendai Framework for Disaster Risk Reduction (SFDRR) 2015-2030 was adopted at the Third United Nations World Conference on Disaster Risk Reduction (WCDRR), in March 2015, in Sendai, Japan, with a significant presence of persons with disabilities and their representative organizations.

(Para. V) 36 (a)

(iii) Persons with disabilities and their organizations are critical in the assessment of disaster risk and in designing and implementing plans tailored to specific requirements, taking into consideration, inter alia, the principles of universal design.

Priority 1: Understanding disaster risk
- Engage persons with disabilities who are critical in assessment

Priority 2: Strengthening disaster risk governance
- Work with persons with disabilities in designing & implementing policies & practices
  - Inclusive decision-making based on disability-disaggregated data

Priority 3: Investing in disaster risk reduction for resilience
- Make physical infrastructures and information accessible

Priority 4: Enhancing disaster preparedness for effective response, and to «Build Back Better» in recovery, rehabilitation and reconstruction
- Empower persons with disabilities to publicly lead universally accessible approaches

3. Sustainable Development group (SDG)

The 2030 Agenda for Sustainable Development is a universal call for action to end poverty, protect the planet, and ensure that by 2030 all people on the planet will enjoy peace and prosperity. It was adopted by 193 member states at the United Nations in 2015. The 2030 Agenda includes the Sustainable Development Goals (SDGs), which contain 17 goals, 169 targets, and 248 indicators that provide a "blueprint to achieve a better and more sustainable future for all.” Putting people at the centre of sustainable development, the SDGs address social inclusion as core for policy development through its principle to “leave no one behind. Disability is referenced in various parts of the SDGs, specifically relating to education, growth and employment, inequality, accessibility of human settlements, as well as data collection and monitoring of the SDGs.

B. Regional
- Incheon Strategy
- Jakarta Declaration
- ASEAN Enabling Master Plan 2025

C. National
- RA 7277 Magna Carta for Persons with Disability
- RA 10070 PDAO Law
- Republic Act No. 10121, s. 2010-The Philippine Disaster Risk Reduction and Management Act of 2010
- National Disaster Risk Reduction Management Plan 2020-2030
- Philippine Development Plan 2023-2028 (Outcome 4: Natural, health, climate, and other human-induced hazards mitigated)
- Ambisyon Natin 2040- The Life of all Filipinos by 2020 Matatag, Maginhawa at Panatag na Buhay 2040

Module 3: Understanding of Disaster Risk Reduction (DRR) and Disability-Inclusive Disaster Risk Reduction (DiDRR)

Half-Day Activity

A. What is Disaster Risk Reduction (DRR)?

Disaster Risk Reduction (DRR) is aimed at preventing new disaster risk, reducing existing risk, and managing residual risk through the systematic efforts to identify, assess, and reduce the causal factors of disasters. It involves policy development and intervention to improve preparedness, prevention, response and recovery. It also includes people recognizing what risks they face, and preparing and practicing to respond to disasters.

Disaster Risk Reduction (DRR) is now recognized as significant to all elements of society and a basic important knowledge on what to understand and do in terms of disaster. This owes to the fact that the Philippines geographical position makes it very prone to disaster risk. Coupled with climate change-related hazards that make disaster risk reduction even more crucial.
A serious disruption of the functioning of a community or a society involving widespread human, material, economic or environmental losses and impacts, which exceeds the ability of the affected community or society to cope using its own resources. Disasters are often described as a result of the combination of: the exposure to a hazard; the conditions of vulnerability that are present; and insufficient capacity or measures to reduce or cope with the potential negative consequences. Disaster impacts may include loss of life, injury, disease and other negative effects on human, physical, mental and social well-being, together with damage to property, destruction of assets, loss of services, social and economic disruption and environmental degradation (RA 10121)\(^2\)

B. Understanding of National Disaster Risk Reduction and Management Plan (2020-2030)

B. Understanding of National Disaster Risk Reduction and Management Plan (2020-2030)

The Updated National Disaster Risk Reduction and Management Plan of the Philippines

Resilience Vision: Safer, adaptive and disaster-resilient Filipino communities toward sustainable development

<table>
<thead>
<tr>
<th>Prevention and Mitigation</th>
<th>Preparedness</th>
<th>Response and Early Recovery</th>
<th>Rehabilitation and Recovery</th>
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<tr>
<td>Outcome 1: Improved access, understanding and use of updated risk information and research</td>
<td>Outcome 9: Enhanced risk awareness and risk-informed decisions and actions of governments and communities</td>
<td>Outcome 13: Well-established disaster management organizations with well-trained workforce and volunteers</td>
<td>Outcome 16: Clear policy directions for rehabilitation and recovery</td>
</tr>
<tr>
<td>Outcome 2: Implemented risk-centered national, subnational, and sectoral policies, plans, and budget</td>
<td>Outcome 10: Increased institutional capacity of National and Local DRRM Councils and Offices</td>
<td>Outcome 14: Appropriate early actions are provided to communities</td>
<td>Outcome 17: Sustainable and socially-inclusive income sources for households are made available and stability of economic activities is restored</td>
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<td>Outcome 3: Increased structural integrity of housing, building and critical infrastructure</td>
<td>Outcome 11: Strengthened partnership and coordination among all key actors and stakeholders</td>
<td>Outcome 15: Access, reliable and timely information management</td>
<td>Outcome 18: Agricultural production is restored or increased and support services for farmers, fishers, and laborers are made accessible</td>
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<td>Outcome 4: Institutionalized timely, responsive, context- and culture-specific early warning systems, reaching the last mile</td>
<td>Outcome 12: Implemented comprehensive and mutually reinforcing national and local preparedness and response plans, policies, and system</td>
<td>Outcome 16: Affected communities are provided with gender-responsive, and conflict- and culturally-sensitive basic necessities and services</td>
<td>Outcome 19: Affected individuals, families and communities have access to responsive, appropriate and adequate education, health, and social protection services</td>
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<td>Outcome 5: Communities have access to effective, responsive and inclusive social protection, risk financing, and insurance mechanisms</td>
<td>Outcome 7: Disaster-resilient livelihoods and businesses</td>
<td>Outcome 17: Implemented an integrated system for early recovery</td>
<td>Outcome 20: Disaster resilient standards and infrastructure are observed during rehabilitation and recovery</td>
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<td>Outcome 6: Natural resources and ecosystem integrity are improved and sustained</td>
<td>Outcome 8: Disaster resilient human settlements</td>
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23 outcomes, 50 outputs, 206 activities

locally-grounded and contextualised, globally aligned and responsive

C. What is Disaster Risk Management?

The systematic process of using administrative directives, organizations, and operational skills and capacities to implement strategies, policies and improved coping capacities in order to lessen the adverse impacts of hazards and the possibility of disaster (RA 10121)\(^3\)

D. What is Disability-Inclusive Disaster Risk Reduction?

“DiDRR” is about ensuring that perspectives of persons with disabilities are included in all phases of Disaster Risk Reduction (DRR) Management - before, during, and after disaster.
Module 4: Mapping and Registry of Resources/Networking

Half-Day

Introduction

In this module it is important for service providers to have a registry, map, location of persons with disabilities for easy monitoring and provision of assistance. Registry of stakeholders, and network is equally important to easy access for services, partnership and help needed.

Objectives

● Understand the importance of Mapping, Registry of Resources and Networking

Discussion

Discuss and explain the following;

A. Disaggregated Data
B. Registry of Stakeholders
C. Networking
D. Capacity of Stakeholders
E. Location of Person with Disabilities (spot map)
F. Risk Mapping / Assessment
Module 5: Evacuation/Simulation Drill

(1 and Half Day)

A. Handling /Assisting Different Types of Disability

Introduction

It is very important for service providers, persons with disabilities, and organizations of persons with disabilities to be ready and knowledgeable on handling/assisting persons with disabilities during disasters per type of disabilities. This is because persons with disabilities are often more vulnerable to the effects of disasters, and they may need specialized assistance to evacuate safely and to access essential services.

Objectives

1. Use appropriate language or action on handling /assisting persons with disabilities
2. Demonstrate capacity on proper handling/assisting persons with disabilities during rescue and evacuation
3. Understand needs of persons with disabilities during disasters

Discussion/Simulation/Drills

Simulation/Drills will be conducted with the participation of the following persons with disabilities.

A.1 Persons with Physical Disability
A.2 Psychosocial Disability
A.3 Deaf or Hard of Hearing
A.4 Person with Visual Disability

Module 6: Action/Re-Entry Planning

Introduction

Participants prepare a Re-Entry/action plan based on the results of the training. incorporate all the learnings

Objectives

- To have comprehensive re entry/action plan apply all the learnings gain from the training
- To have a guide on the cascading and conduct of training to respective areas
Discussion

All participants will prepare an action/re-entry plan incorporating all the learnings through the workshop. Re-entry templates will be provided.

Module 7: Monitoring / Evaluation and Reporting

(3 hours)

Introduction

Monitoring and evaluation of DiDRR plans and activities is very crucial to check the status, gaps and issues and concerns to fill in the gaps and re-plan.

Here are some of the benefits of monitoring and evaluation of DiDRR plans and activities:

- It helps to ensure that the plans and activities are on track and that they are achieving their intended outcomes.
- It helps to identify any gaps or issues in the plans and activities so that they can be addressed.
- It helps to assess the impact of the plans and activities so that they can be improved.
- It helps to build accountability for the implementation of the plans and activities.

Monitoring and evaluation should be an ongoing process throughout the implementation of the DiDRR plans and activities. It should be conducted at regular intervals so that any problems can be identified and addressed early. The results of the monitoring and evaluation should be used to improve the plans and activities and to ensure that they are effective in reducing the risks of disasters for people with disabilities.

Here are some of the key components of monitoring and evaluation of DiDRR plans and activities:

- Setting clear goals and objectives: The first step in monitoring and evaluation is to set clear goals and objectives for the plans and activities. This will help to ensure that the monitoring and evaluation is focused on the right things.
- Collecting data: The next step is to collect data on the implementation of the plans and activities. This data can be collected through surveys, interviews, focus groups, and other methods.
- Analyzing the data: Once the data has been collected, it needs to be analyzed to identify any gaps or issues. The analysis should also be used to assess the impact of the plans and activities.
- Reporting the results: The final step is to report the results of the monitoring and evaluation to the stakeholders. This will help to ensure that the stakeholders are aware of the progress of the plans and activities and that they can provide feedback.

Monitoring and evaluation is an essential part of DiDRR planning and implementation. By monitoring and evaluating the plans and activities, we can ensure that they are effective in reducing the risks of disasters for people with disabilities.

**Objectives**

1. Understand and familiarize importance of monitoring, evaluation and reporting
2. To have uniform template on monitoring and reporting

**Discussion**

Monitoring, Evaluation and reporting templates will be presented and discussed for uniformity and ensure the implementation of action plans are monitored, evaluated and reported.

**XI. List of Sensitivity Activity/Energizer**

**1. Meal in the Dark**

Prepare some snacks for the participants to eat with a blindfold. This activity may be done during the session proper or during their scheduled snack time.

Materials Needed: (Blindfold and Snacks)

**Processing Questions**

Ask the following guide questions after the activity:

- How was the activity—was it easy or difficult? What made you say so?
- What were your thoughts while eating with a blindfold?
- What are your insights and realizations after the activity?
- How can you apply your learnings from this activity to your personal and professional lives?

**2. Simulation (Experiencing Disability)**

Simulating various kinds of disabilities (blindfold participants, sensory processing disorders, try walking from one area to another with their thighs or legs taped/strapped together)
Materials Needed: (different materials for different disabilities)

- Gloves
- Blindfold
- White Cane
- Masking tape

Processing Questions Ask the following guide questions after the activity:

- How was the activity?
- How did you feel about simulating a person with a disability?
- What did you feel while walking around? What barriers did you experience?
- How will your interaction with persons with disabilities change after the experience?
- What did you need to be able to cope?
- What barriers (social, physical, attitudinal, and others) can your local government address concerning persons with disabilities?
- What particular auxiliary services can be made available for those in your community?

XII. Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>DRR</td>
<td>Disaster Risk Reduction</td>
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<tr>
<td>DiDRR</td>
<td>Disability-Inclusive Disaster Risk Reduction</td>
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<tr>
<td>LDRRMO</td>
<td>Local Disaster Risk Reduction Management Officer</td>
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<tr>
<td>LGU</td>
<td>Local Government Unit</td>
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<tr>
<td>DOH</td>
<td>Department of Health</td>
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<td>DSWD</td>
<td>Department of Social Welfare and Development</td>
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<td>NCDA</td>
<td>National Committee on Disability Affairs</td>
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<td>NCSC</td>
<td>National Commission of Senior Citizens</td>
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<td>OCD</td>
<td>Office of Civil Defense</td>
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<td>PDAO</td>
<td>Persons with Disability Affairs Office</td>
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<tr>
<td>CSO</td>
<td>Civil Society Organization</td>
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<tr>
<td>ADIDS</td>
<td>Activity, Discussion, Input, Deepening, Synthesis</td>
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### XII. Definition of terms

| **Disaster Preparedness** | The knowledge and capacities developed by governments, professional response and recovery organizations, communities and individuals to effectively anticipate, respond to, and recover from, the impacts of likely, imminent or current hazard events or conditions. Preparedness action is carried out within the context of disaster risk reduction and management with the aim of averting disaster. At the same time, preparedness aims to build the capacities needed to efficiently manage all types of emergencies and achieve orderly transitions from response to sustained recovery. Preparedness is based on a sound analysis of disaster risk and good linkages with early warning systems, and includes such activities as contingency planning, stockpiling of equipment and supplies, the development of arrangements for coordination, evacuation and public information, and associated training and field exercises. These must be supported by formal institutional, legal, and budgetary capacities (RA 10121). |
| **Disaster Prevention** | The outright avoidance of adverse impacts of hazards and related disasters. It expresses the concept and intention to completely avoid potential adverse impacts through action taken in advance such as construction of dams or embankments that eliminate flood risks, land-use regulations that do not permit any settlement in high risk zones, and seismic engineering designs that ensure the survival and function of a critical building in any likely earthquake (RA 10121). |
| **Disaster Response** | The provision of emergency services and public assistance during or immediately after a disaster in order to save lives, reduce health impacts, ensure public safety and meet the basic subsistence needs of the people affected. Disaster response is predominantly focused on immediate and short-term needs and is sometimes called “disaster relief” (RA 10121). Refers to the implementation of specific activities to control further spread of infection, outbreaks, or epidemics and to prevent reoccurrence. It includes verification, contact tracing, rapid risk assessment, case measures, treatment of patients, risk communication, conduct of prevention activities, and rehabilitation and reintegration; includes the imposition of minimum public health standards including, but not limited to, movement restrictions, partial or complete closure of schools and businesses, imposition of quarantine in specific geographic areas and international or domestic travel restrictions, construction of facilities for the quarantine of health and emergency front liners, and the prepositioning and distribution of personal protective equipment for health workers (RA 11332) Potential disaster losses in lives, health status, livelihood, assets and services, which could occur to a particular community or a society over some specified future time period (RA 10121). |
XIV. Re-Entry Action Plan

(Name of Agency)
Re-Entry Action Plan
Disability-Inclusive Disaster Risk Reduction (DIDRR)

Objective: __________________________________________________________

<table>
<thead>
<tr>
<th>No</th>
<th>Activities</th>
<th>Responsible Office/Personnel</th>
<th>Date of Implementation</th>
<th>Proposed Budget</th>
<th>Expected Results</th>
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Prepared by: ____________________________  Noted by: ____________________________  Approved by: ____________________________

________________________  ____________________________  ____________________________
Focal  Immediate Supervisor  Local Chief Executive
XV. References

1. Philippines Development Plan 2023-2028  
2. National Disaster Risk Reduction and Management Plan (NDRRMP) – 2020 to 2030  
3. Third Country Training Program (TCTP) Resource Speaker PowerPoint Materials
4. UN ESCAP E-Learning Course
5. Yakkum Emergency Unit (YEU)  https://www.yeu.or.id
6. Department of Health (DOH) Philippine Registry For Persons with Disabilities Version 4.0
7. Compilation of Japan sample videos on the conduct of DiDRR Drills
8. 7 Principles of Universal Design  https://univer-saldesign.ie/what-is-universal-design/the-7-principles/#p1
9. LevelUp (level-up.cc)- How-To: Preparing Sessions Using ADIDS (level-up.cc) Resources  
   for the global digital safety training community.
10. DSWD Draft Auxiliary Manual \
The UN ESCAP’s E-Learning Tool, “It is Our Responsibility,” focuses on incorporating disability perspectives to all phases of Disaster Risk Reduction (DRR). It promotes awareness of Disability-inclusive Disaster Risk Reduction (DiDRR) and urges the involvement of the whole society for the benefit of all. Over the 7 modules, the course offers fresh insights on disability and provides actionable recommendations for inclusive DRR practices. The tool targets DRR policy makers and professionals at all levels to develop and implement disability-inclusive policies with the meaningful participation of organizations of persons with disabilities. Course takers will receive an ESCAP certificate.
Characters Monthian (left) and Keiko (right) from the DiDRR E-Learning Tool

Screenshot of Module 2 of the DiDRR E-Learning Tool showing characters Monthian (left) and Keiko (right), as well as accessibility features of the tool, which includes voice over functionality.