

STORIES OF RESILIENCY

A Final Evaluation Report on Child Protection Support to Children and Families Affected by Typhoon Rai

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Terre des Hommes Netherlands	
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	Acro	nyms	MHPSS	Mental Health and Psychosocial Sup
			OPD	Organization of Persons with Disabi
	BCPC	Barangay Council for the Protection of Children	OSEC	Online Sexual Exploitation of Childre
	BLGU	Barangay Local Government Unit	PDNA	Post-Disaster Needs Assessment
	CB MHPSS	Community-Based Mental Health and Psychosocial Support	PFA	Psychological First Aid
	CCPC	City Council for the Protection of Children	PNP	Philippine National Police
	CEPC	Comprehensive Emergency Plan for Children	PSG	Peer Support Group
	CFS	Child Friendly Space	SFDRR	Sendai Framework for Disaster Risk
	CICL	Children in Conflict with the Law	SK	Sangguniang Kabataan
	CLB	Children's Legal Bureau		Sexual Orientation, Gender Identity,
	СР	Child Protection	SOGIESC	Characteristics
	CoDE	Center for Empowerment and Development of People's Organizations in	TdH NL	Terre des Hommes Netherlands
CoPE	COPE	Eastern Visayas	ТоТ	Training of Trainers
	COVID-19	Coronavirus Disease	WCPD	Women and Children's Protection De
	CPiE	Child Protection in Emergencies	WCPU	Women and Children Protection Uni
	CRA	Child Rights Advocate	WGQ SS	Washington Group Questions Short
	CSO	Civil Society Organization		

- City Social Welfare and Development Office **CSWDO**
- CV **Community Volunteer**
- Department of Education DepEd
- DRR **Disaster Risk Reduction**
- DRRM Disaster Risk Reduction and Management
- Empowerment and Reaffirmation of Paternal Abilities **ERPAT**
- Focus Group Discussion FGD
- Fellowship for Organizing Endeavors FORGE
- IEC Information, Education, and Communication
- KII Key Informant Interview
- LGBTQIA Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual
- LGU Local Government Unit
- Logframe Logical Framework
- Memorandum of Understanding MoU

Final Evaluation Report: Child Protection Support to Children and Families Affected by Typhoon Rai

social Support ith Disabilities of Children

ster Risk Reduction

^r Identity, Gender Expression, and Sex

ection Desk

ction Unit

ns Short Set

Definition of Terms

Child-centered Disaster Risk Reduction

Refers to recognizing and drawing on the rights, needs and capacities of children in reducing risk and enhancing the resilience of communities and nations with the ultimate goal of safeguarding the rights of children relating to disaster risk. It focuses on actively involving children in disaster risk reduction (DRR), both in DRR that is for children, and DRR that is with children while recognizing that children's needs and capacities vary according to multiple factors such as age, gender, geography, and socio-economic status.1

Child Friendly Space

Child Friendly Space (CFS) can be defined as a place designed and operated in a participatory manner, where children affected by disasters induced by natural hazards or armed conflict can be provided with a safe environment, where integrated programming including play, recreation, education, health, and psychosocial support can be delivered and/or information about services/ supports provided. Generally, CFS refers to a relatively short- to medium-term program response and are very often operated from tents and/or temporary structures (i.e., in schools, under a tree or a vacant building). They are usually operated by non-government organizations (NGOs) or governments.²

Child Protection

Child protection refers to prevention and response to violence, exploitation, and abuse of children in all contexts. This includes reaching children who are especially vulnerable to these threats, such as those living without family care, on the streets or in situations of conflict or natural disasters.³

Child Protection in Emergencies

Child protection in emergencies (CPiE) refers to all efforts to prevent and respond to abuse, neglect, exploitation, and violence against children in the aftermath of a disaster. It includes, as a first step, guaranteeing that children receive all the necessary humanitarian assistance that is required for their safety and wellbeing. CPiE prioritizes the fulfillment of certain rights for children in emergencies, namely those that protect children against maltreatment and ensures their survival and wellbeing.⁴

Child Protection Systems

Certain formal and informal structures, functions and capacities that have been assembled to prevent and respond to violence, abuse, neglect, and exploitation of children. A child protection system is generally agreed to be comprised of the following components: human resources, finance, laws and policies, governance, monitoring and data collection as well as protection and response services and care management. It also includes different actors - children, families, communities, those working at subnational or national level and those working internationally. Most important are the relationships and interactions between and among these components and these actors within the system. It is the outcomes of these interactions that comprise the system.⁵

Community-Based Child Protection Mechanism

A community-based child protection mechanism (CBCPM) is a network or group of individuals at community level who work in a coordinated way toward child protection goals. These mechanisms can take the form of a focal point or a group or network of community members with a role in child protection (social workers, teachers, health staff, parents, elders, and other volunteers).6

Mental Health

Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in.⁷

Mental Health and Psychosocial Support

Refers to any type of local or outside support that aims to protect or promote psychosocial well-being or prevent or treat mental disorders. Among humanitarian agencies the term is widely used and serves as a unifying concept that can be used by professionals in various sectors. MHPSS interventions can be implemented in programs for health & nutrition, protection (community-based protection, child protection and SGBV) or education. The term 'MHPSS problems' may cover a wide range of issues including social problems, emotional distress, common mental disorders (such as depression and post-traumatic stress disorder), severe mental disorders (such as psychosis), alcohol and substance abuse, and intellectual or developmental disabilities.⁸

Psychological First Aid

Refers to human, supportive, and practice assistance to fellow human beings who recently suffered exposure to serious stressors, and involves (a)non-intrusive, practical care and support; (b) assessing needs and concerns; (c) helping people to address basic needs such as food and water; (d) listening, but not pressuring people to talk; (e) comforting people and helping them to feel calm; (f) helping people connect to information, services, and social supports; and (g) protecting people from further harm.9

⁸ United Nations High Commissioner for Refugees. (2023). Handbook for Emergencies Fourth Edition. file:///Users/jesusagracemolina/

⁹ World Health Organization. (2013). Psychological first aid: Facilitator's manual for orienting field workers. Geneva: World Health

¹ Hore, K., Gaillard, JC., Johnston, D., & Ronan, K. (2018). Child-Centered Research-into-Action Brief: Child-Centered Disaster Risk Reduction GADRRRES

² United Nations Children's Fund. (n.d.). A Practical Guide for Developing Child Friendly Spaces. https://www.humanitarianresponse.info/ sites/www.humanitarianresponse.info/files/documents/files/a_practical_guide_to_developing_child_friendly_spaces_-_unicef.pdf ³ United Nations Children's Fund. (2022). Child Protection Overview. <u>https://data.unicef.org/topic/child-protection/overview/</u>

⁴ United Nations Children's Fund. (2015). Child Protection in Emergencies: A Toolkit for Practitioners in Pacific Island Countries. Suva: United Nations Children's Fund

⁵ United Nations Children's Fund. (2021). Child Protection Systems Strengthening. New York: United Nations Children's Fund. ⁶ United Nations High Commissioner for Refugees. (2013). Child Protection Issue Brief. Geneva: UNHCR. ⁷ World Health Organization. (2022). Mental Health. <u>https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-</u>

Downloads/Emergency%20handbook.pdf

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Executive Summary

This report presents the results of the outcome evaluation study for the project titled, Child Protection Support to Children and Families Affected by Typhoon Rai, implemented by Terre des Hommes Netherlands (TdH NL), together with its implementing partners, Bidlisiw Foundation, Inc., and the Center for Empowerment and Development of People's Organizations in Eastern Visayas (CoPE). The project was implemented from May to December 2022, with the overall goal of ensuring that children in disaster-affected communities in Cebu Province and Borongan City, Eastern Samar, are protected from child abuse and exploitation.

The evaluation was conducted from January 6 to February 28, 2023. It examined the extent to which the project objectives have been achieved, determined the extent to which the project has had positive impact and benefits among the partnerbeneficiaries, including unintended ones, examined factors about the project design and implementation that can be replicated or improved, and came up with key lessons and recommendations for future programming.

The evaluation study was predominantly qualitative. It has reached a total of 108 project stakeholders (33 from Borongan City, and 74 from Cebu Province) through key informant interviews and focus group discussions among project stakeholders, which include representatives from TdH NL and Implementing Partners (6), children 6-12 years old (26), children 13-17 years (14), barangay and city governments (18), community volunteers (10), youth volunteers and facilitators (17), and parents (17). Twenty eight percent (28%) of the total respondents are males, while 72% are females. Among the child respondents, 42.5% are males and 57.5% are females. Of the 108 project participants, 3 identified themselves as persons with disabilities.

Compared to the project reach, the scope of the evaluation is limited. This is mainly influenced by the limitations in timeframe and resources which limited the evaluation's potential to reach more areas and project participants. Similarly, factors such as availability of data, scheduling conflicts, and language barrier presented a challenge during the evaluation.

KEY FINDINGS

The evaluation revealed that the project was able to contribute to the overall goal of protecting children in disaster-affected and disaster-prone areas in Cebu and Eastern Samar, from abuse and exploitation. By focusing on Child Protection in Emergencies (CPiE) through mental health and psychosocial support (MHPSS), the project helped in addressing some of the gaps in humanitarian action, that put children at greater risk to abuse, neglect, exploitation, and violence, which include the exclusion of children, and their specific needs in response programming and implementation and their lack of access to fundamental protective services, including MHPSS. The project was also able to mobilize community-level and local government support that helped strengthen

community-based child protection mechanisms and promote the development of rights-based policies and programs for children and young people, within and outside the context of emergencies.

The shelter assistance, and the trainings and rollout on MHPSS were considered most essential as they did not only address the immediate needs of children and their families, but also helped in preventing future risks. The ongoing efforts of barangay local government units (BLGUs) were augmented, and more enabling institutional mechanisms were developed for rights-based and community-based child protection programming.

Supported by effective strategies and interventions, the project was able to meet the majority of its desired results, and even exceeded some targets at the output level. 1060 children and 480 parents were reached by the project during the MHPSS rollout. For the shelter assistance, 303 families across Cebu benefitted from shelter repair materials and solar lamps provided by the project, exceeding the target of 285. Meanwhile, the two policy development targets for the City of Borongan- the Children's Code amendment and the development of the Comprehensive Emergency Plan for Children- have already been submitted to the City Legislative Council since October 2022 and undergoing review and deliberation and pending approval.

At the outcome level, the MHPSS sessions contributed to increasing the capacity of children to cope with distress, caused not only by the impacts of Super Typhoon Rai, but by other factors such as the effects of the COVID-19 pandemic, school pressures, and domestic issues. They learned about children's rights, child protection issues, case reporting mechanisms, and exercises and techniques to help them deal with their stressors. The provision of shelter assistance and solar lamps was a great relief for parents and caregivers. These alleviated the cost for shelter repair and supported them in providing protection and restoring safety and stability for their children. While the assistance itself was not adequate for some to fully recover and completely rebuild their houses, they are still grateful and have become more hopeful moving forward. In Borongan City, the MHPSS sessions attended by mothers and fathers in the community helped in reducing parental distress caused by COVID-19, and day-to-day problems. This also led to some improvements in their relationship within the family, and improvement in the way they support their children.

On the part of duty-bearers, the training on CPiE paved the way for some reflections and change in perspectives on how children's needs are being prioritized by the BLGUs during emergencies. The project also increased public awareness on mental health and case referral systems, which encouraged better reporting of child protection and MHPSS cases among children and adults. During the project implementation, 32 cases involving children were referred for specialized mental health and other specific support, while there were 3 among parents. In Borongan City, children and youth were also given the opportunity to engage in child-led initiatives through advocacy campaigns. Policy advocacy and campaigns also enabled duty-bearers to take on a more active role in promoting children's rights and MHPSS, and mainstreaming them in their plans, budget, and legislation.

In terms of efficiency, the project resources are considered adequate, and wellmanaged to meet the desired results. Despite some challenges encountered during the implementation, it did not hamper the completion of activities within the project timeframe and budget. Effective strategies were also employed by partners to optimize resources and reach even more project participants than targeted.

There are also some gains from the project in terms of ensuring child participation and gender mainstreaming. Children were consulted as early as the post-disaster needs assessment phase, and during the project activities. They played a crucial role as facilitators in the implementation of the MHPSS sessions and were also part of the project evaluation. On the other hand, aside from gender data disaggregation, intentional efforts were also done to include women and men in the activities and ensure gender diversity in activities. Meanwhile, disability inclusion is a recognized area for improvement of the project.

In a short time, the project resulted in some positive changes among the project stakeholders, which can serve as foundation for the sustainability of community-based efforts on CPiE through MHPSS in the project areas. At the individual level, the project led to an increase in public awareness on mental health and CPiE. There is a realization on the part of some duty-bearers about their accountability to prioritize child-centered programs, while there is better opportunity created at the level of community to accept and participate in such programs. The involvement of children and youth as participants, volunteers, and advocates during the MHPSS rollout gave them the opportunity to develop their skills and potentials, and gain greater social awareness, which propel their desire to take on a more active role in their communities. This can set the stage for more meaningful civic engagement for young people and children and youth-led initiatives. Lastly, in Borongan City, the project has had far-reaching results in terms of mainstreaming CPiE in the LGU plans and policies. The project paved the way for the enactment of the Borongan City Mental Health Program of 2022 (City Ordinance No. 244), a significant milestone that can help sustain the gains of CPiE efforts through MHPSS. The MHPSS facilitators will also have the potential to serve as Psychological First Aid (PFA) teams and help make MHPSS more accessible to the community, including children, during disasters and emergencies.

The potential for sustainability for some of the gains and outcomes of the project is high. Due to TdH NL's approach of partnering with local organizations such as Bidlisiw Foundation and CoPE, the potential for the latter to continue supporting the same communities for similar or new interventions, whether still supported by TdH NL or not, is high. Learning from the experience of CoPE in Borongan City, policy advocacy has a huge role in sustainability. The institutionalization of community-based MHPSS and the pending approval of the amended Children's Code and Comprehensive Emergency Plan for Children (CECP) of Borongan City are concrete mechanisms that can sustain the outcomes and benefits of the project beyond its project life. Being able to develop the capacities of community volunteers, parents, and children and youth can also contribute to sustainability efforts for the project. Their capacities can be honed continuously, and more opportunities may be created for them to continue to play an active role in awareness raising, and advocacy efforts in their communities.

RECOMMENDATIONS

Leveraging on the gains and lessons from the project implementation, and recognizing their potential for sustainability, the next section presents programmatic recommendations that TdH NL, Bidlisiw Foundation, CoPE, and their partners can consider for future programming, in order for similar interventions to contribute more not only in protecting at-risk children from abuse and exploitation, but also in further strengthening child protection systems and services that will enable children to better access better opportunities to participate meaningfully in society and pursue their full development potential.



Strengthen Child Protection in Emergencies through Disaster Risk Reduction

Recommendations from project stakeholders suggest that strengthening CPiE also involves taking measures to prevent or reduce the potential consequences of hazards to help create a safer and more resilient community for children and their families. This is crucial especially for a country such as the Philippines whose geophysical characteristics and social vulnerabilities make it highly susceptible to the impacts of various hazards, thereby putting its population, especially children, at greater risk.

As such, to strengthen CPiE, there is a need to initiate DRR efforts that mainstream child protection and take actions that contribute to greater resilience, not just of children, but of the broader child protection systems. It requires efforts to ensure child participation in the whole DRR process, while ensuring that everyone with responsibility for children's rights, and within humanitarian and development work, systematically takes action before, during, and after a disaster, to prevent and minimize risks and threats to children that may arise during emergencies.

This also highlights the need for stronger integration of child protection and DRR actions to better address the different risks faced by diverse children, including in emergencies, and ultimately ensure the protection of their rights.

Scale up Community-based MHPSS

Results of the MHPSS sessions implemented under the project reinforce the notion that that even disaster-affected communities, including children and young people, can become active agents in dealing with adversity and protecting and promoting children's overall wellbeing. Aside from the protective and supportive function of the CFS-based MHPSS session among children,

it also led to the development of capacities of children, youth, and adults to become MHPSS facilitators and children's rights advocates.

These gains and the attention directed by the emergency response to the mental health needs of the disaster- affected and disaster-prone populations is an opportunity to scale up community-based MHPSS in future interventions. This approach can help ensure that future MHPSS interventions are part of a more strategic psychosocial and mental health approach, ensure the resilience of children in emergencies and the protective factors in their social and cultural environments, as well as link MHPSS responses to recovery and regular nonhumanitarian response programming. These then contribute to the overall strengthening of the broader child protections systems.

Strengthen Disability Inclusion Mechanisms

While there were efforts to include persons with disabilities, including children, in the project implementation, ensuring their full and meaningful participation was considered a challenge. Recognizing that they are among the most vulnerable in communities and are disproportionately affected by disasters and child protection risks, more systematic and strategic efforts need to be pursued in order for persons with disabilities, especially children, to benefit from similar response interventions in the future.

As such, mainstreaming of disability inclusion in the project development cycle, from project initiation to project evaluation phase, is recommended. This includes strengthening the capacity of implementing organizations in areas related to gathering of disability-specific data, partnership building with organizations of persons with disabilities (OPDs), identification of potential barriers to participation and measures to address, and budgeting for inclusion, among others.



Inclusion of Livelihood Support

The impact of Super Typhoon Rai to affected communities in the project areas also contributed to parental distress and income shortage that limited the affected family's capability to meet their survival and development needs, including that of children. While livelihood support through cash assistance was included in the project, this was mainly done through provision of transportation and meal allowances to training participants from Borongan City.

As such, part of the recommendation for future response programming is the inclusion of livelihood support to affected families. Taking into consideration wide ranging contexts, short-term and/or long-term strategies in livelihoods programming may be taken to address immediate and early recovery needs, as well as to increase the capacity of affected families to fully recover and prepare for future shocks.

Recommendations on Project Management

Aside from the abovementioned programmatic or intervention-level recommendations, recommendations are also offered through the evaluation pertaining to improving the management and monitoring of future and similar projects. These recommendations include:

1. Streamlining of Organizational Workflow and Administrative Procedures to Adapt to Emergency Context

Because the present project development workflow of TdH NL in the Philippines is not yet adapted to an emergency context, some delays in the conduct of activities were noted at the beginning of the project. As such, the streamlining of TdH NL in the Philippines' organizational workflow and administrative procedures is recommended to help address existing and potential barriers to rapid response to crises. Some areas of work that may be considered for this process include disaster information management and communication, resource allocation and funding, partnership and coordination, needs assessment and planning, and standby arrangements and pre-positioning of emergency services. Together with its national and local partners, TdH NL in the Philippines may also pursue efforts to build more flexible grant making and management processes.

2. Establishment of Emergency Response Fund

The implementation of the response project affirmed the importance of having available and dedicated funds for disaster response in TdH NL's covered areas, especially that most ongoing projects often have restricted funding. This is especially important for covered areas in the Philippines which have a high susceptibility to the impact of various hazards. One recommendation from the evaluation is for TdH NL in the Philippines to establish an emergency response fund as a form of risk financing mechanism, that will help it ensure that adequate funds are available to meet its financial needs should a disaster occur in its areas of operation in the country. This can help support efforts to find new ways of funding and delivering humanitarian assistance and improve the speed and quality of assistance.

3. Improvement in Project Performance Monitoring and Reporting

The timeliness and completeness of the submitted reports by partners was considered as one of the areas for improvement for project management. To help address this, structures such as the Project Management Team formed for the project need to be maximized for leveling off on reporting requirements, project progress monitoring, and capacities sharing, including in ensuring that documentation requirements for the projects are adequate.

Part 1: Introduction

1.1. BACKGROUND AND CONTEXT OF THE TYPHOON RAI RESPONSE PROJECT

On December 16, 2021, Super Typhoon Odette (International Name: Rai) made landfall in the Philippines and brought strong winds, massive floods, and landslides affecting 11 out of the country's 17 regions (UN OCHA, 2022). According to the report of the National Disaster Risk Reduction and Management Council (NDRRMC), the typhoon affected around 2.3 million families and caused the death of 406 individuals (2022).

The wrath of the typhoon damaged an estimated 2.1 million houses of which 426,000 were destroyed and caused the displacement of 339,574 persons (inside and outside evacuation centers). The multiple landfalls of the typhoon also adversely affected the livelihood of 533,000 farmers and fisherfolks across the country. The disaster damaged hundreds of thousands of acres of coconut trees and crops and destroyed 8,000 fishing boats (UN OCHA, 2022). It is known as the second costliest typhoon to hit the country next to Super Typhoon Yolanda (International Name: Haiyan). Based on the NDRRMC Report (2022), Super Typhoon Odette resulted in a total of PhP 51.8 billion (US\$1.02 billion) worth of infrastructure, agriculture, and housing damages.

Though not highlighted in national media coverage, the Province of Cebu was one of the hardest hit provinces by the typhoon in Region 7 (Central Visayas).¹⁰ It was placed under a state of calamity due to widespread devastation. A total of 570,260 families from 1,078 barangays were affected in the whole province. The strong winds and torrential rain resulted in 389, 331 damaged houses, 70,748 of which were totally destroyed (NDRRMC, 2022). Basic services and lifelines also suffered from the brunt of the typhoon. Affected communities experienced power outage for months; water interruption; downed communication lines; and class suspension. Damage to infrastructure such as roads and bridges limited people's mobility making it difficult for them to do their economic activities. The wanton destruction also caused distress, anxiety, and fear to many, especially children and youth, which affected their mental health and wellbeing.





¹⁰ IFRC. (2022). Philippines: New data reveals Typhoon Rai wrecked 1.5 million houses. https://www.ifrc.org/press-release/philippines-newdata-reveals-typhoon-rai-wrecked-15-million-houses-0

Eastern Samar is also among the provinces struck by the typhoon in Region 8. Due to its geographical location, the province is a highrisk area to hydrometeorological hazards such as typhoons. Borongan City, the sole city in the province, was not spared from the adverse impact of Super Typhoon Odette. As reported by the NDRRMC (2022), a total of 1, 276 families were affected in the entire city. Although the city did not suffer severe destruction like Cebu, its people had to deal with challenges considering that the pandemic is still ongoing. Apart from physical and economic losses, the city is also confronted with protection risks involving children, women, and other vulnerable sectors. Based on the data from the City Social Welfare and Development Office (CSWDO) and the Philippine National Police-Women and Child Protection Desk (PNP-WCPD), there



are reported cases of teenage pregnancy, sexual abuse (64), physical/emotional/ psychological abuse (63), and prostitution (7). Data also showed that a total of 134 child abuse cases reported in the city need appropriate intervention.¹¹

Considering the compounding effects of Super Typhoon Odette and the COVID-19 pandemic, the financial and human resources of the LGUs at that time were overstretched already. Apart from humanitarian response, the LGUs were also swamped with efforts to curb the spread of the Coronavirus Disease (COVID-19). This situation made it difficult for them to address the immediate needs of affected children and their families, especially those living in poverty.

As one of the most vulnerable groups to disasters, children disproportionately experience the impacts of emergencies and crisis situations especially in developing countries like the Philippines.¹² According to the World Risk Report (2018), 1 out of 4 children in the world lives in an area affected by disasters. The occurrence of disasters endangers the fulfillment of children's rights (e.g., survival, protection, and development) given its direct and indirect impacts on their wellbeing. Due to their physical limitations, children are more at risk of dying or getting injured during emergencies. Further, displacement as well as disruption of education, social structures, and delivery of protective services also expose them to protection risks such as physical and sexual abuse, trafficking, neglect, and child labor. Studies conducted in low-income countries affected by major disaster events such as the

earthquake in Haiti¹³,flooding in Bangladesh¹⁴, and military conflicts in Uganda¹⁵ showed how children are significantly at risk of physical, sexual, and psychological violence.

Findings from the Post-Disaster Needs Assessment (PDNA) conducted by CoPE revealed the vulnerability of children to violence and exploitation in Borongan City as a result of Super Typhoon Odette and the pandemic. Damage to assets and livelihood losses have contributed to the worsening economic condition of impoverished families which forced children and youth to work. Some women and girls work as waitresses in bars and other entertainment establishments while others engage as household helpers. These types of economic activities make females susceptible to violence and sexual abuse. Some are also pressured by their friends which leads to sexual exploitation through pimps when they travel outside of their community.

In response to the impacts of Super Typhoon Rai, Terre des Hommes Netherlands (TdH NL), together with its partners, Bidlisiw Foundation, Inc., and the Center for Empowerment and Development of People's Organizations in Eastern Visayas (CoPE), implemented a project titled, Child Protection Support to Children and Families Affected by Typhoon Rai. The project's overall goal is to ensure that children from disaster-affected areas in Cebu Province and Eastern Samar are protected from all forms of abuse and exploitation. The project sought to contribute to achieving this goal through interventions that reduce the risks of abuse and exploitation among children, and by strengthening the protective factors in the child's environment.

Specifically, the project sought to achieve the following key outcomes:

ide co

Outcome 1. Increased capacity of children to cope with distress, and to identify and understand protection risks, and what support systems are in their communities.



Outcome 2. Strengthened capacity of parents, caregivers, and other family members to support and protect their children.



Outcome 3. Established or strengthened community-based child protection mechanisms.



Outcome 4. Proposed amendments in the Children's Code and development of the Comprehensive Emergency Plan for Children in the Local Government Unit (LGU) of Borongan City.

¹¹ Center for Empowerment and Development of People's Organizations in Eastern Visayas. (2022). Post-Disaster Needs Assessment Report.

¹² Seddighi, H., Salmani, I., Javadi, M. H., & Seddighi, S. (2021). Child Abuse in Natural Disasters and Conflicts: A Systematic Review. Trauma, Violence, & Abuse, 22(1), 176–185.

 ¹³ Flynn-O'Brien, K. T., Rivara, F. P., Weiss, N. S., Lea, V. A., Marcelin, L. H., Vertefeuille, J., & Mercy, J. A. (2016). Prevalence of physical violence against children in Haiti: A national population-based cross-sectional survey. Child abuse & neglect, 51, 154-162.
 ¹⁴ Biswas, A., Rahman, A., Mashreky, S., Rahman, F., & Dalal, K. (2010). Unintentional injuries and parental violence against children during flood: a study in rural Bangladesh. Rural and remote health, 10(1), 1-12.
 ¹⁵ Saile, R., Ertl, V., Neuner, F., & Catani, C. (2014). Does war contribute to family violence against children? Findings from a two-generational multi-informant study in Northern Uganda. Child abuse & neglect, 38(1), 135-146.

Bidlisiw Foundation, Inc. led the project implementation in Cebu Province, and covered a total of 30 barangays across 8 cities and municipalities. The key interventions include: (1) provision of shelter repair assistance; (2) provision of solar lamps; (3) conduct of MHPSS sessions along with the provision of care kits; and (4) Child Protection in Emergencies (CPiE) Training.

On the other hand, CoPE led the implementation in Eastern Samar focusing on 12 barangays in Borongan City. The key project interventions include: (1) Training of Trainers on MHPSS and Psychological First Aid among youth, mothers, and fathers; (2) IEC Development and Launching; (3) MHPSS rollout in the barangays (Project Hangkop); (4) referral for direct psychological interventions; and (5) enactment of child protection- and MHPSS-related legislations such as ordinance on Communitybased Mental Health Program and Delivery System; Amended Children's Code; and Comprehensive Emergency Plan for Children.

The complete list of barangays covered by the project is found in Annex 1.

1.2. OBJECTIVES OF THE OUTCOME EVALUATION

An independent project review was commissioned by TdH NL to determine the project's key results, particularly focusing on significant lessons learned, replicable practices, and coming up with programmatic recommendations that can inform the organization's future programming. The evaluation examined the extent to which the project has brought meaningful results for project beneficiaries and identified key areas that can be replicated in similar contexts.

Specifically, the evaluation sought to:

- Examine the extent to which the project outcomes (objective) have been achieved or were on track;
- Evaluate and identify the extent to which the project has had positive impact and benefits among the partner-beneficiaries;
- Examine any negative results and unintended or unplanned effects of the project among the target beneficiaries and local communities;
- Examine project components, strategies, and activities that can be improved in the ongoing implementation or replicated in other or similar projects; and
- Identify main lessons learned, gaps, and recommendations for the implementation of the project.

1.3. EVALUATION FRAMEWORK

Figure 1 below illustrates the framework that guided the evaluation process. Specifically, the framework presents the data sets that were captured and analyzed in the conduct of the outcome evaluation.

The evaluation analyzed the extent to which the project has brought meaningful results for the project participants in Cebu Province and Borongan City. To realize this, the evaluation looked into the outcome-level results which determined the extent to which the project objectives were met. Further, the evaluation also documented and analyzed first-hand accounts and narratives on the significant changes that the project brought in the lives of project stakeholders to help demonstrate the impact of the interventions.

In addition to the abovementioned, the evaluation also examined the critical influencing factors to the project results which served as basis for identifying lessons learned and recommendations which could inform the future programming of TdH NL and its partners on child protection and humanitarian action.

Guided by the Organization for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) criteria, the outcome evaluation focused on answering questions related to Relevance, Effectiveness, Efficiency, Impact, Sustainability, Lessons Learned and Cross-cutting Concerns (Child and Youth Participation, Gender Mainstreaming, and Disability Inclusion). The key evaluation questions pertaining to these criteria are found in Annex 2.

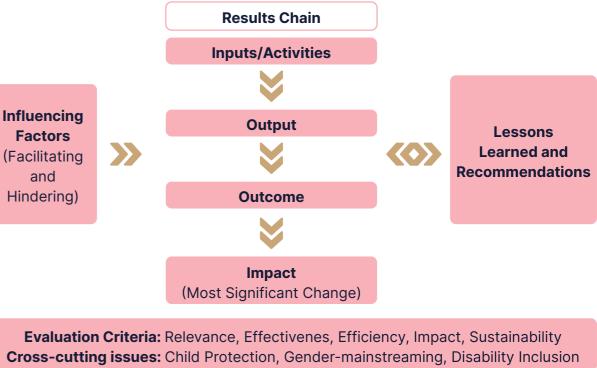


Figure 1: Evaluation Framework

1.4. METHODOLOGY AND REACH

The evaluation was able to reach a total of 108 project participants, 33 of which came from Borongan City in Eastern Samar, and 74 came from areas in Cebu Province, including the municipality of Argao, and the cities of Cebu, Lapu-Lapu, and Mandaue.

Twenty eight percent (28%) of the total respondents are males, while 72% are females. Among the child respondents, 42.5% are males and 57.5% are females. Of the 108 project participants, 3 identified themselves as persons with disabilities. The list of evaluation participants can be found in Annex 3.

Stakeholder Group	Number of Participants
Children (6 to 12 years old)	26
Children (13-17 years old)	14
LGU Representatives	18
Community Volunteers	10
Youth Volunteers/ Facilitators	17
Parents	17
TdH NL and Implementing Partners	6
Total	108

Table 1: Total Number of Evaluation Participants

The collection of primary data was done through key informant interviews (KIIs) and focus group discussions (FGD) from January 26 to February 4, 2023. The team conducted a total of six (6) key informant interviews (See Annex 4. Kll Guide), done remotely and face-to-face, with respondents from TdH NL; implementing partners; and city and barangay LGUs. A total of 13 field-based FGD sessions (See Annexes 5 and 6 for the FGD Guide for child and adult participants) were also conducted involving CSWDO representatives, barangay chairpersons, parents, community volunteers, peer support group (PSG), Sangguniang Kabataan (SK), Child Rights Advocate (CRA), children and youth. Similar to the KIIs, purposive sampling was also used in identifying the target FGD participants.

Using the KII and FGD results, the team documented relevant narratives from the project participants, highlighting the significant impact of interventions in the lives of the beneficiaries, especially children and youth. Two (2) most significant change stories were developed focusing on the institutionalization of a community-based mental health program and the role of children and youth in enhancing communitybased child protection mechanisms (See Annex 7. Most Significant Change Stories).

In the course of the evaluation, the team also did a review of secondary data to understand TdH NL's interventions and strategies in the provinces of Cebu and Eastern Samar; the context of the project areas; and the gains and challenges of project implementation. Specifically, the team collected and reviewed documents such as project proposal, logical framework, quarterly reports, case stories, LGU resolutions relevant to the project, information, education, and communication (IEC) materials, and other pertinent publications from online sources. The review of these documents allowed the team to have a better grasp of the project components, processes, successes, and challenges that are fundamental in the conduct of the evaluation, including the design of appropriate data collection tools and strategies.

Guided by the evaluation framework presented earlier, the team employed **thematic** content analysis. The information from the desk review notes as well as the KII and FGD transcripts were organized and consolidated using the Microsoft Excel program. Using the consolidated information, inductive coding was carried out by the team to categorize related information and determine relevant concepts and themes under each of the evaluation objectives. Manual coding was done to organize the data sets. In addition, the team also took note of relevant quotations and excerpts from the interviews to further support the analysis process.

1.5 LIMITATIONS OF THE OUTCOME EVALUATION

The discussions below present some limitations and challenges encountered by the evaluation team during data collection. They pertain to data and methodological factors which may have affected the adequacy and diversity of data collected, and the overall quality of the report.

- The evaluation could not present quantitative results based on indicators, particularly for Outcomes 1 and 2 because the means of verification are are based on perception.
- are engaged in economic activities.
- During interviews, the inability of the consultants to speak in Waray and participants, especially when they had to speak in Filipino.

unavailable. As such, evaluation findings pertaining to change or increase in knowledge, attitude, practice, and belief (KAPB) among the project participants

 Due to conflict in schedules with target respondents in Cebu, only six out of seven Klls, and two out of three FGDs with barangay level duty-bearers were conducted in the evaluation. Similarly, there were less participants mobilized coming from children aged 13-17 years old than targeted. There was also a difficulty in mobilizing male participants, especially among adults because they

Cebuano, and their limited understanding may have posed a difficulty on the

Part 2: Evaluation Findings

This section provides a discussion of the project results capturing its achievements vis-a-vis the project targets based on the project Logical Framework (Logframe), and the evaluation criteria, which include Relevance, Effectiveness, Efficiency, Impact, and Sustainability. Key lessons shall also be presented pertaining to the gains and challenges of the project around cross-cutting concerns such as child and youth participation, gender mainstreaming, and disability inclusion.

2.1. RESULTS VS. TARGETS

Overall, the evaluation revealed significant progress in the achievement of outputs targeted within the 8-month project implementation. There was overachievement in some outputs under Outcomes 1 and 2 due to emerging needs in project areas that required the conduct of additional activities (e.g., extension of project interventions in fire-affected areas in Mandaue City, Cebu last November 2022) and scaling up of project reach as enabled by resource complementation and other project strategies.

Under Outcome 2, provision of cash assistance was originally intended to serve as income replacement for families affected by the typhoon in Cebu Province. However, during the re-assessment conducted by Bidlisiw Foundation, shelter support remained to be the top priority based on the needs identified by the project participants. The cash assistance was instead provided to cover transportation and meal allowances of some training participants in Borongan City, thus affecting the

full achievement of Output 2.2.b. For Output 2.3, the underachievement was due to the fact that referrals for specialized support and other service providers is contingent to the need.

Meanwhile, the underachievement for Output 3.1 was due to the difficulty in mobilizing local government and community participants in the activities. While Output 3.2. also recorded an underachievement, it must be noted that the figure merely refers to the number of referral pathways printed into billboards in Cebu. The target was not fully achieved due to the reduction of budget allocation for this output, which resulted from foreign exchange losses. Nevertheless, all 30 covered barangays in Cebu Province, and the 12 barangays in Borongan City were able to enhance and be aware of case referral pathways in their respective communities through the trainings and learnings sessions conducted under the project.



Table 2 summarizes the output-level achie

 and indicators.

Output Indicators

Outcome 1. Increased capacity of children understand protection risks and what supp

Output 1.1. a. Number of boys and girls wh participated in the CFS learning sessions

Output 1.1.b. Number of boys and girls who completed all the CFS learning sessions

Output 1.2.a. Number of boys and girls who received psychosocial support

Output 1.2.b. Number of boys and girls in need who were referred to service provide for specialized mental health support

Outcome 2. Strengthened capacity of pare children.

Output 2.1. Number of parents/caregivers who participated in the learning sessions w can identify at least three protection risks what they can do to support and protect the children.

Output 2.2.a. Number of households who received shelter repair kits

Output 2.2.b. Number of parents/caregiver who participated in the learning sessions v received cash assistance

Output 2.3. Number of parents/caregivers need of support who were referred

Outcome 3. Established or strengthened or mechanisms.

Output 3.1. Number of community member who participated in child protection activiti in their communities

Output 3.2. Number of target barangays o areas with established/ enhanced referral pathway and number of referral pathways integrated in the learning sessions/ commu awareness raising campaign

Table 2 summarizes the output-level achievements of the project vis-a-vis its targets

	Targets	Actual Achievement	% versus targets		
n to cope with distress, and to identify and port systems are in their communities.					
10	1,280	1,060	83%		
10	1,280	1,060	83%		
10	500	552	110%		
ers	0	32	-		
ents/c	caregivers t	to support and j	protect their		
who and heir	250	480	192%		
	285	303	106%		
ers who	250	59	24%		
s in	20	3	15%		
community-based child protection					
ers ties	550	411	75%		
unity	30	25	83%		

Output Indicators	Targets	Actual Achievement	% versus targets
Outcome 4. Proposed amendment in LGU Boron a comprehensive emergency plan for children.	ngan's Chile	dren's Code and	developed
Output 4.1. Number of documents presented to government (Proposed Children's code amendment and Comprehensive Emergency plan for children)	2	2	100%

Table 2: Output Level Achievements Vis-a-Vis Targets and Indicators

2.2. EVALUATION CRITERIA FINDINGS

2.2.1. Relevance

Findings from primary and secondary data revealed that project participants from Cebu Province and Borongan City greatly recognize the importance and appropriateness of the interventions provided by the project through its implementing partners. According to the narratives of both adults and child respondents, the project is a big help to them considering that it was implemented at a time when they really needed help.

In Cebu, many of the respondents consider Super Typhoon Odette as the worst typhoon they had experienced in their life. Its adverse impact on families and communities exacerbated their already difficult condition due



to the ongoing pandemic. The typhoon wreaked havoc causing widespread damage to their livelihoods, properties, and environment. Aside from physical or material impact, the typhoon also caused distress jeopardizing the mental health of many, including children and youth. The project of TdH NL was conceptualized and designed to address the needs of the affected populace focusing on shelter construction and child protection (CP) through mental health and psychosocial support (MHPSS).

Table 3 presents a summary of impacts brought about by Super Typhoon Odette to children and their families according to the project participants.

Physical/ Material	 Loss of life Damage to shelter Damage to school children's access to Damage to school difficult for childrer Losses in livelihood needs of their child Increased prices of families making it n table Lack of access to e sleep and study at Lack of access to w to health risks
Social	 Exacerbation of ch teenage pregnancy Due to livelihood lo that puts children a Some youth and ac as alcohol drinking
Psychosocial	 Fear and disbelief of Demotivation and f uncertainty brough Children feel bored and see their friend Children had to dea school and at home Suicidal thoughts a adverse effects of The distress cause the effects of Typh frustration to their

Table 3: Impacts of Super Typhoon Odette

The impacts presented in the table above clearly show that children undeniably suffer the greatest brunt of disasters and other life-threatening events. The detrimental effects of disasters are manifested in the physical, social, and psychosocial aspects of children's lives which significantly threaten their overall wellbeing and development. As mentioned by the respondents in both areas, the response of the government primarily focused on the provision of relief goods. Government-led interventions aimed at addressing the social and psychosocial impacts of disasters among children and their families remain scarce. This evident situation led the project to prioritize interventions on MHPSS for children given

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made children and their families feel unsafe buildings and facilities adversely affected o education

materials such as modules further made it n to continue with their education

d made it difficult for parents to provide the dren

of commodities aggravated the suffering of more difficult for parents to put food on the

electricity made it difficult for children to night due to mosquitoes

water exposed families, especially children,

nild protection risks (e.g., sexual abuse, y) and gender-based violence osses, some families resort to "easy money" at risk of abuse and exploitation dults resort to maladaptive behaviors such and cockfighting to cope

of the widespread impact of the typhoon feelings of depression due to the

ht about by the pandemic and typhoon

d and anxious because they cannot go out ds

al with stress due to their responsibilities in e

among children and adults resulting from the the typhoon and pandemic

ed by the pandemic prior and worsened by hoon Rai led some parents to direct their

children

that they are highly vulnerable to protection risks such as abuse and exploitation during emergency situations. A representative from TdH NL shared that while CPiE is not yet embedded in the country-level programming of the organization in the Philippines, this project is deemed as an opportunity for them to play a more active role in emergencies through enhancing their expertise and developing more programmatic interventions that will contribute to safeguarding children in the context of humanitarian response.

Prior to the typhoon, TdH NL had already implemented a project called Down to Zero in Cebu Province together with Bidlisiw Foundation and other CSOs, namely Children's Legal Bureau (CLB) and Fellowship for Organizing Endeavors (FORGE). The presence of existing partners helped in the smooth project implementation. On the other hand, while the typhoon had relatively lesser impact in Borongan City, the area was targeted due to its high vulnerability to typhoons as it lies in the Eastern Seaboard where areas are exposed to typhoons and other hydrometeorological hazards.

The representative from Bidlisiw Foundation, along with parents and youth from Cebu, shared that aside from the fact that the massive destruction of the typhoon in the province did not gain nationwide attention, the local government response was also slow and inadequate. Most of the assistance was coming from the private sector. As such, the project was really important in terms of augmenting ongoing response efforts undertaken by different groups. Further, the community volunteers (CVs) and barangay local government unit (BLGU) representatives shared that the project complemented the response of the local government, whose efforts are more focused on provision of food items. They appreciate that the interventions of the project focused on child protection and mental health, as these are areas that are often not prioritized in response efforts.

We always think that the government should respond first. When there are gaps, that's the time we come in. We were able to address the gaps through the response project."

- Bidlisiw Foundation Representative

Respondents from CoPE and Borongan City Social Welfare and Development Office (CSWDO) shared that the effects of the typhoon, along with the ongoing COVID-19 pandemic, led to an increase of reported child protection issues and gender-based violence cases.

In Cebu, a representative from Mandaue CSWDO shared that during normal times, the Mandaue City is already confronted with issues like online sexual abuse and exploitation among children that are exacerbated by disasters such as Super Typhoon Odette. Due to the impact of disasters in livelihood, some families resort to "easy money" that puts children at risk of abuse and exploitation.

To ensure that the interventions address the needs of the affected communities, the implementing partners of TdH NL conducted a post-disaster needs assessment (PDNA) to determine appropriate interventions for the communities affected by the typhoon (See Annex 8. Summary of PDNA Results). CoPE and Bidlisiw Foundation initiated the conduct of KIIs and FGDs to get the perspectives and insights of various stakeholders from the city, municipal, and barangay levels, including children and youth, on their specific and priority needs. Bidlisiw Foundation, together with the CVs, also did house-to-house visits to assess the damage caused by the typhoon to the houses of affected families.

Through the PDNA, CoPE was able to gather information on the immediate and long-term effects of the typhoon amid a pandemic. Respondents included the City Mayor, City Disaster Risk Reduction and Management Officer, City Planning and Development Coordinator, CSWDO, PNP-WCPD, barangay chairperson, teacher, barangay health worker, day care worker, youth and children.¹⁶ A Project Advisory and Management Team composed of various city government departments, academe, CSOs, barangay chairpersons, and representatives from sectoral organizations was also formed by CoPE to ensure an inclusive and responsive approach for the project implementation.¹⁷ CoPE had a series of meetings with the team to discuss the proposal, orient them on the project, and identify appropriate interventions, timelines, as well as the roles and functions to be performed by each stakeholder based on their respective mandates.¹⁸ CoPE consciously engaged all concerned stakeholders from the city and barangay levels throughout the implementation which focused on MHPSS.

family sessions, and also the MHPSS rollout. We were always present."

In Cebu Province, Bidlisiw Foundation initiated an assessment on the impact of the typhoon in their covered areas as early as the first week after it struck the country. By February 2022, it did a re-assessment to take into consideration the changing and emerging needs of the affected communities. Through interviews and house visits, and with the help of CVs, it was able to capture affected communities' situation in terms of their housing condition, government support received, including the situation of children and their families as reflected in Annex 8.

The housing repair assistance and provision of solar lamps were only implemented by Bidlisiw Foundation in Cebu considering the massive damage that the province suffered from the typhoon. Due to strong and gusty winds, many houses were damaged leading to displacement of families. Based on the narratives of parents,

If From the very start, we were there. I was involved when we did the training of trainers, orientation on special laws. We did training on mental health and

- Government Representative, Borongan City

¹⁶ CoPE. (2022). Post-Disaster Needs Assessment Report.

¹⁷ CoPE. (2022). Case Story: The Project Advisory Team.

¹⁸ CoPE. (2002). Second Quarterly Narrative Progress Report.

CVs, and Child Rights Advocate (CRA) members in Cebu, families with totally damaged houses received PhP 10,000 worth of house construction materials while those with partially damaged houses received PhP 5,000 worth of the said materials through the project. Among the materials provided to them included wood, galvanized iron sheet, plywood, cement, hollow blocks, sand, and nails. A BLGU representative from the municipality of Argao emphasized the relevance of the intervention since 100% of the residents in Barangay Poblacion had damages to their houses. Further, mothers from Barangay Looc in Mandaue City expressed that the housing assistance was really relevant because all of them had damaged houses due to the typhoon. Strong winds damaged their roofs and made the walls of their houses collapse.

The recipients of solar lamps from the cities of Cebu, Mandaue, and Lapu-Lapu as well as the municipality of Argao shared that it was very useful for them considering their limited access to electricity making it difficult for children to study and sleep at night due to mosquitoes. The CVs, particularly in Barangay Guba, ensured that the beneficiaries of housing materials will no longer receive solar lamps to reach as many families as possible given the limitations in resources. The families with totally damaged houses and lack electricity at the same time were asked to choose one of the two interventions.

Besides shelter assistance, another major component of the response project is MHPSS. According to both adult and child respondents in Borongan City and Cebu, it was their first time to receive such type of support and they found it very helpful considering the distress and fear that the typhoon and pandemic inflicted on them. In Borongan City, according to the CSWDO representative, the MHPSS intervention prioritized 12 out of 61 barangays with the most number of reported CP-related cases. These barangays have reported cases of child abuse and domestic violence, especially during the pandemic.

Because of the pandemic, the stress of fathers and grandfathers is high. As a result, girl children usually suffer from sexual abuse and become victims of incest. Aside from incest, physical abuse is also evident. Reported cases of CICL also went up such as those children who steal. The number of early pregnancies escalated as well."

- CoPE Representative

The parents from Borongan City said that the project was a big help to the communities. It was named Project Hangkop which means to 'hug' or to 'give comfort'. The MHPSS sessions were conducted not only for children but also for fathers and mothers. Since there is no psychiatrist or psychologist in the city, the project was necessary for the mental health of adults and children who are suffering from distress. It provided a platform for them to process their feelings and overcome stress, especially those experiencing abuse and trauma, through the help of the trained facilitators.

We are thankful that Borongan was selected for the project. Through the MHPSS rollout, we were able to hear the difficulties that parents like us experience. The conversations we had gave them comfort and relief."

The female youth MHPSS facilitators from Borongan City also underscored the relevance of the project especially for children and youth as they are confronted with family problems and experience a lot of stress in school. They need the MHPSS sessions to express their feelings and share their difficulties especially those who have suicidal thoughts already. This is supported by the narratives of CRA in Argao who shared that the MHPSS sessions provided a safe space for children since they did not feel any judgment or discrimination.

In Cebu Province, the MHPSS sessions were conducted mainly for children. Bidlisiw Foundation targeted children who are impoverished, those whose houses were damaged by the typhoon, and children in elderly-headed households. According to the narratives of CRA, CVs, and BLGU representatives, there were many people who felt depressed seeing the impact of the typhoon, especially their damaged houses. Some families live by the meager food assistance coming from different donors, and tarpaulin sheets given to serve as make-shift roofing.

11 Even though life was hard during the pandemic, it was still better compared to before the typhoon happened. The typhoon exacerbated people's suffering." - Government Representative, Barangay Poblacion, Argao, Cebu

Parents from Barangay Looc, Mandaue City noted that the typhoon exposed their children to different risks and these included fear, trauma, and difficulty in sleeping. These risks took a toll on their mental health which also affected their studies. The MHPSS sessions were of great help to the children along with the care kits provided which contain pillow, crayon, paper, coloring book, stress ball, and snacks.

BLGU representatives from Argao and Cebu City articulated that the project complemented their efforts for children. Considering their limited resources, programs for children are not prioritized. The Barangay Council did not have any objections with the interventions of Bidlisiw Foundation because they recognize that this is for the children, and that this is something that the barangay is unable to prioritize.

We cannot implement trainings on child protection since we have a limited Feeding Programs."

- Government Representative, Barangay Poblacion, Argao, Cebu

- Father and MHPSS Facilitator, Borongan City

budget. Aside from the trainings provided by the DILG for newly elected barangay officials, we have very limited opportunities for us to be equipped better in child protection. It would be difficult for the barangay to do this kind of intervention without the help of NGOs such as Bidlisiw Foundation. Right now, the activities of the BCPC are limited to the conduct of Family Day and

We are not able to prioritize children in our programming. In our barangay, we understand that children get affected once their parents have problems. We know for a fact that children must be cared for since they experience more trauma. That is why we appreciate Bidlisiw Foundation's efforts that are focused on children. Because our barangay is confronted with many issues, our priority is to help those who don't have food and those who lost their houses. Addressing the survival needs is our immediate priority."

- Government Representative, Barangay Guba, Cebu City

A representative from Bidlisiw Foundation also shared that the participants of the two-day training on CPiE were very appreciative since almost all of them, including service providers from the local government, have not been able to receive any training on CPiE before. This was supported by the representative from the CSWDO of Mandaue, who was able to attend the CPiE training herself. She said that the capacity building provided by the project to duty-bearers is relevant.

The amendment of Children's Code was included as one of the project interventions in Borongan City since the current version of the code drafted in 2008 is already obsolete. Since CoPE is part of Borongan City Council for the Protection of Children (CCPC), the organization saw that the existing version needs to be updated to incorporate the latest child-related legislations enacted from 2009 onwards to have a clear basis when proposing programs for children.

When providing emergency assistance for children, you cannot just request for support if you don't have any legal basis. We are already encountering issues that the existing code could no longer address. That's why we really need an updated Children's Code."

- CoPE Representative

2.2.2 Effectiveness

The evaluation findings reveal that the interventions implemented under the project contributed to achieving its set objectives. Exceeding some targets, the approaches used by both implementing organizations not only facilitated the achievement of desired results, but also opened some room of potential for sustainability of benefits.

The succeeding discussions present the extent to which the project outcomes had been achieved as a result of the project interventions, approaches, and strategies. It also tackles some outcome-level specific factors that influenced the achievement or nonachievement of the results.





in their communities.

The extent to which the project has been effective in achieving this outcome is demonstrated by the way that the MHPSS rollout in barangays enabled children to learn about children's rights, child protection issues, case reporting mechanisms, and activities and strategies that they can do to help manage their stress. Insights from adult and children respondents in both project areas also reveal that the MHPSS sessions contributed to increasing the capacity of children to cope with distress, caused not only by the impacts of Super Typhoon Odette, but by other factors such as the effects of the COVID-19 pandemic, school pressures, and domestic issues such as dealing with the burdens of doing care work at home among girls, parental pressures on school performance, and poor communication between parents and their children, among others.

	MHPSS Session	
	in Cebu Province	
Pa •	rticipants One group for boys and girls with ages 6-12 years old One group for boys and girls with ages 13-17 years old	Partici • On 13 • On • On
Du •	ration 2 days per participant group for 3 to 4 hours per day	Durati • 1-c pa
Se •	ssions/Topics Covered Day 1 included sessions on mindfulness, progressive muscle relaxation, dance exercises (biodanza), storytelling, and paper boat making. Day 2 included discussions on children's rights, child protection, case reporting/ referral flow, the conduct of activity evaluation, and distribution of care kits.	Sessic • Us an rea bra vis The m based Filipino Psycho
L	Table 4: Overview	of the N

Outcome 1. Increased capacity of children to cope with distress, and to identify and understand protection risks, and what support systems are

MHPSS Session in Borongan City, Eastern Samar

cipants

- ne group for children and youth between ages to 24 years old
- ne group for mothers in the community
- ne group for fathers in the community

tion

-day simultaneous MHPSS sessions involving all articipant groups for 3 to 4 hours

ions/Topics Covered

- sing the framework of Acknowledge, Integrate nd Deliver, it included stress management essions related to identifying individual problems nd concerns, strengths and resources, physical eaction to stress, progressive muscle relaxation, rainstorming solutions, post-stress routine, and isioning activity.
- nanual used to guide the MHPSS session was on the KATATAGAN Resiliency Program for no survivors published by members of the nological Association of the Philippines.

MHPSS Session per Project Area

Children from Barangays Guba, Cebu City and Poblacion, Argao shared that during the MHPSS sessions, they learned about the importance of keeping children safe, children's rights, child protection issues such as child abuse, safeguarding measures, how to handle anxiety, and how to report potential child protection issues to the barangay, police or any responsible adult or person. Some also shared that they learned about the importance of respecting others.

I During the MHPSS session with children, I was happy to see how they learned about children's rights. They were discussing among themselves how children should not be physically abused by their parents."

- Child Rights Advocate, Municipality of Argao, Cebu

In Borongan City, where the majority of the child respondents during the evaluation are MHPSS facilitators themselves, the respondents shared that by facilitating the MHPSS sessions, and through the training and orientations they attended under the project, they learned about the issues and concerns faced by children in their communities. These include sexual abuse and exploitation, especially among girls, being engaged in vices especially among boys, and risks to psychological wellbeing due to the COVID-19 pandemic, pressures in school, domestic issues, and poverty, among others.

During the evaluation, children in Cebu recalled how they enjoyed the games (Balay, Bata, Merkado), activities and exercises (dancing, storytelling, making boats out of paper) they did together during the session. They were happy to meet new friends, appreciated how good the facilitators were, and the delicious meal served during the activities. These learnings and insights also validated the result of the FGD organized by Bidlisiw Foundation among different project stakeholders last December 2022.

The child participants also liked the MHPSS kits they received during the activity, which contained a pillow, a stress ball, coloring book, crayons, puzzle activity, toys, and some snacks. However, since the content of the MHPSS kits are the same for age

groups 6-12 and 13-17, adult and youth volunteer respondents suggested that kits for children with ages 13-17 years old may also include story books (in place of coloring books and materials) to make it more age-appropriate.

In Borongan City, participants shared that the MHPSS sessions provided a venue for them to be oriented on what stress is (e.g., positive, and negative stress), what causes stress, and the effects of long-term stress, and how to manage stress. Through the exercises, and aided by a journal provided in the activity, it gave them the opportunity to open up about their worries and experienced processing their emotions.



invalidating."

Some MHPSS facilitators also shared that the sessions enabled them to be more capable of managing the individual stresses they face in school, at home, as well as those that relate to the impacts of the COVID-19 pandemic such as difficulty in accessing school modules, lack of stable internet connectivity to attend online classes, and the isolation caused by the pandemic lockdown.

One thing I learned in our training is how to categorize the types of stress.

Another strategy that the children learned is through the Traffic Light exercise which lets them reflect on the habits they want to stop, continue, or start doing. According to the respondents, this is helpful especially when reflecting on one's negative coping that you want to change. Others shared that their learnings from the facilitation of MHPSS sessions enabled them to better control their reactions to certain situations, especially when it comes to dealing with disagreements with other family members. One participant who disclosed that she was an adopted child shared that she is now getting more comfortable opening up to her adoptive parents about her struggles. This also validated the results of the FGD organized by CoPE in December 2022, marking the culmination of Project Hangkop. Participants in the FGD noted that through the MHPSS sessions, they were able to reflect on their habits and started shifting their priorities. There has also been a change of behavior among them and their friends to whom they shared tips and techniques in handling stresses.

With the conduct of MHPSS sessions, both organizations were able to organize and equip volunteer MHPSS facilitators, including among children and youth. At the end of the project, a total of 25 CVs were mobilized within Cebu (21 females and 1 male). The Peer Support Group (PSG) members, organized and trained by Bidlisiw Foundation on children's rights awareness prior to the project, were also tapped as youth facilitators for the MHPSS sessions. The PSGs interviewed shared that before the MHPSS roll-outs, they underwent a one-day orientation on the design and flow of the activity, and a refresher on child safeguarding.

It is good to have this activity (MHPSS session) as it gives young people the opportunity to process the stresses they face, which I'm sure they are less able to share with their parents. It is true that sometimes, we would rather share to strangers than to our family members. I myself have had experiences before wherein after I tried sharing, I was told that I'm just being dramatic. It's

- MHPSS Participant, Borongan City

There are types of stress that you can't control, so you have to let it go. There are also those that you can manage. So, it helps to be able to categorize it."

- Child MHPSS Facilitator, Borongan City

We were already trained in child safeguarding prior to the MHPSS activities, so during the orientation, we were just reminded of the do's and don'ts in dealing with different types of children "

- PSG Member and Volunteer MHPSS Facilitator, Cebu City

The orientation, as well as the guidance provided by Bidlisiw Foundation staff during the rollout enabled them to successfully facilitate the session.

Meanwhile, a total of 70 CP/MHPSS advocates or Psychological First Aiders (PFA) were mobilized within Borongan City (32 children and youth, and 20 fathers, and 28 mothers). Prior to the MHPSS rollout, they underwent a two-day Training of Trainers (ToT) on MHPSS and a two-day orientation on Children's Rights and Child Protection, including child safeguarding measures for both volunteer facilitators and participants. The trainers were organized in three clusters, with each one covering 4 barangays during the roll-out.

While the MHPSS session was implemented in the context of post-typhoon response, particularly in Cebu, the experiences and learnings that the children gained have the potential to contribute to children's increased capacity to manage future risks in their mental and psychosocial wellbeing. This is especially so in the case of children and youth advocates who were trained by both organizations, as they can serve as instruments to spread child protection awareness and offer MHPSS support to their peers in school and in the community.

As young leaders, they have the potential to influence their peers. They have knowledge about their rights, about child protection, about their values as youth. This exposure (to the program) will have a positive effect. "

- Government Representative, Borongan City

Outcome 2. Strengthened capacity of parents, caregivers, and other family members to support and protect their children.

In Cebu, the project had been effective in meeting this outcome mainly through the provision of shelter repair kits. At the end of the project, a total of 183 families with partially damaged houses, and 102 with totally damaged houses received assistance in the form of housing repair materials. Depending on how each family prioritized the materials for repair, the assistance allowed the recipient families to replace their houses' roof, walls or restore at least one room in the house where the family, including children, can safely and comfortably take shelter. Aside from shelter repair kits, solar powered lamps were also provided by Bidlisiw Foundation through the project to 164 families across the province.

According to Bidlisiw Foundation and TdH NL, both housing materials and solar lamps helped the families to survive rainy days and dark nights. Children and their families were provided with a safe house to live and sleep in, reducing the potential for other risks such exposure to communicable diseases, and abuses and exploitation, especially among women and girls. In-school children had the chance to study comfortably at night, especially during months without electricity.

11 (shelter assistance) was a great help. Our children are able to sleep comfortably."

On average, the worth of shelter repair materials given to each family with a partially damaged house is PhP 5,000, and PhP 10,000 for totally damaged house. Bidlisiw Foundation admits that compared to the scale of damage, and the increasing cost of housing materials, the assistance may not be adequate. Some of the CVs, BLGU officials, and recipients of the assistance agree, but they are still grateful because it still greatly reduced the cost of what they would have to spend if they were to shoulder the full cost of the repair on their own. It was a great relief for parents, especially that typhoon assistance from LGUs is often limited to the provision of food packs.

Beyond the physical restoration of their houses, the shelter assistance also restored the recipients' sense of security, and hope moving forward. In Lapu-Lapu City, recipients who were interviewed shared that they are happy because the assistance has given them a fresh start. Although they have not yet fully recovered, the assistance unburdened them with some of their problems after the typhoon.

rebuild our house. Our hopes had really been restored."

To improve the effectiveness of the assistance, some respondents suggest that similar interventions in the future may include assistance for construction labor cost, especially for urban-based recipients. Some shared that it took time for them to undertake the repairs since their husbands are busy with work and can only do construction work during their free time. Some also needed to hire construction workers to rebuild their houses and lacked the means to do so. Urban-based CVs expressed the same, noting that having families who could not afford to provide a counterpart for the labor cost could not be helped, especially for families who have barely enough even for their food.

In Borongan City, CoPE focused their interventions under this outcome on the conduct of MHPSS sessions among parents, parallel to what was conducted among children. This recognized the fact that parents too, experience distress, and need to be supported for them to be able to provide adequate support and protection to

- Female beneficiary, Barangay Looc, Lapu-Lapu City

Upon seeing what was left of our house after typhoon Odette, and we had no source of income at that time, we were really devastated. We were anxious about how we will fix our house. But with the help of Bidlisiw, we were able to

- Youth Volunteer and Beneficiary, Barangay Poblacion, Argao

their children. As noted previously, there were 20 mothers and 20 fathers trained to become MHPSS facilitators across the 12 barangays in Borongan. For the barangay rollout, parents experiencing difficulties in coping with mental and emotional stresses from their marriages, and in rearing children with risk of committing gender-based violence were prioritized to be part of the sessions.

According to CoPE, the MHPSS sessions enabled parents to strengthen their capacity to manage their own stresses, as well as support their children in managing their stresses. This has led to improvement in the quality of their relationship with other family members, especially their spouses and their children.

These were affirmed by the sharing from parents during the evaluation who shared that through the MHPSS sessions, they learned how to control their emotions, and be more patient with their children. They have become more conscious about not getting angry easily, and becoming calmer and encouraging. Some shared that because of this, they noticed that their children are also listening to them better.

I am happy because the MHPSS session helped our family. I can apply my learnings with my children, and was able to help them overcome their stresses from the pandemic, and the past typhoon."

- Parent, Borongan City

While more difficult to mobilize compared to women, the importance of targeting men or fathers in the community was noted during the evaluation. In Borongan City, where the MHPSS sessions targeted a specific group for fathers, some facilitators shared that it opened their eyes to the struggles and pressures that men try to bear on their own, e.g., sexual rejections, and financial and work stresses related to social expectations of them to be the breadwinner in the family. Lacking the opportunity to access mental health support, they are more predisposed to engage in negative coping mechanisms such as drinking alcohol, and gambling, among others. As such, involving more men in the community is seen as an opportunity to support parents and family to be more capable of providing support to children.

Cutcome 3. Established or strengthened community-based child protection mechanisms.

Both Bidlisiw Foundation and CoPE were able to mobilize various stakeholders in the local government and communities to contribute to strengthening the communitybased child protection mechanisms in each barangay, especially during disasters and emergency situations. Aside from the community volunteers and advocates organized and trained on children's rights, child protection and MHPSS, other LGU representatives, first responders, and community leaders were also trained on Child Protection in Emergencies (CPiE).

According to Bidlisiw Foundation, the CPiE training was highly relevant for stakeholders in Cebu, as most of them have not been able to attend a similar training before. There were six sessions of CPiE training conducted across Cebu, involving the Barangay Council for the Protection of Children (BCPC), Family Affairs, Gender and Development, Disaster Risk Reduction and Management (DRRM), Youth Council (Sangguniang Kabataan), and the Department of Education (DepEd).¹⁹ Community volunteers and parent leaders also participated in the training. One separate session was conducted among emergency rescue responders from the different private rescue groups in Cebu City.²⁰ This led to the creation of the Victim-Survivor-Community Referral Pathway (See Annex 8) which provides information on where children and their communities can report child protection cases. The referral pathway was developed into 1.2×1.2 Sintra billboards and were distributed to the barangays who participated and completed the CPiE workshops.²¹

In the FGD organized by Bidlisiw Foundation last December 2022, barangay LGU representatives shared that through the CPiE training, they realized that their emergency programs need to be sensitive to the needs of children, including MHPSS, as disasters and emergency situations impact children's mental health. They said they also enhanced their knowledge on child protection laws, and in handling child protection cases through the case referral pathway.²²

According to Bidlisiw Foundation, the CPiE training also emphasized the importance of establishing Child Friendly Space (CFS) in evacuation centers. Thus, the training enabled the LGUs to reflect on the condition of evacuation centers during emergencies that can make children vulnerable to protection risks. For example, they were asked to reflect on whether the evacuation center is safe from other hazards such as landslides, or if they are well-lit.

11 They themselves reflected on their shortcomings. We influenced them day routine of children while in the evacuation center."

In Borongan City, support to the strengthening of community-based child protection mechanisms were done through capacity building, advocacy campaigns and policy influencing initiated by CoPE. The MHPSS facilitators trained under the project are already being organized as child protection and MHPSS advocates who can also serve as Psychological First Aiders (PFAs) in their respective barangays. Even beyond the project, these teams can support their communities in awareness raising, case reporting and referrals, and providing MHPSS support.

(duty-bearers). We showed them how important it is to have child- sensitive programs in evacuation centers, and how important it is to restore the day-to-

- Bidlisiw Foundation Representative

¹⁹ Bidlisiw Foundation. (2023). Fourth Quarterly Narrative Progress Report. 20 Ibid ²¹ Ibid

²² Bidlisiw Foundation. (2022). Activity Report: FGD with project recipients.

We expect that they will serve as a Psychological First Aider team in their respective barangays. This can make MHPSS accessible to communities- that they have somewhere or someone to go to before their mental issues worsen. They are the team who will listen and offer comfort."

- CoPE Representative

CoPE, through its partnership with the City Government of Borongan, covered barangay LGUs, and the children and youth advocates trained in the project, implemented some advocacy campaign activities that promote children's rights and protection among local duty-bearers and raise public awareness on mental health.

Similar to Bidlisiw Foundation, CoPE also provided the barangays with plywoodsized Case Referral Flow Chart (See Annex 9), containing information such as what child protection cases need to be reported, to whom they can report, and the services available in relation to reported cases. PNP and Women and Children Protection Unit (WCPU) hotline numbers were also included in the flow chart. The case referral flow chart was formed through CoPE's other project (Girls Advocacy Alliance) with TdH NL and was enhanced to include referrals for mental health concerns through inputs from the Project Management Team. The 12 covered barangays committed to ensuring that the flow chart is displayed in conspicuous location/s in the barangay.²³

For both Cebu areas and Borongan City, there is no hotline number yet that is solely dedicated for receiving verbal and electronic child protection referrals (child line). A TdH NL representative noted that this can be one of the considerations for improvement in future projects.

CoPE tapped some local social media influencers within the province and in Borongan City to provide technical support to the project's children and youth advocates in developing advocacy campaign materials and help promote mental health awareness targeting young people and the general public. The resulting advocacy campaign materials include videos on debunking mental health biases, and poster-type IEC materials, among others, which were also launched during the observance of World Mental Health Awareness in October 2022. According to CoPE, this proved to be effective in scaling up the reach of the campaigns for a short period of time, and at a minimal cost.²⁴

Further, during the 1st City Government of Borongan Children's Congress, duty bearers from national government agencies, city departments, and civil society expressed their commitment to promoting children's rights in the city. This reinforces the lobbying work being done by CoPE in relation to the amendment of the LGU's Children's Code and the development of its Comprehensive Emergency Plan for Children (CEPC).



Outcome 4. Proposed amendment in LGU Borongan's Children's Code and developed a Comprehensive Emergency Plan for Children.

With CoPE's strong advocacy and influencing work in the provincial government of Eastern Samar and the City of Borongan, it was able to position itself strategically for the project to effect policy changes that can provide institutional and programmatic support to child-centered programming in the city. Serving as CSO representative during the crafting of the Executive Legislative Agenda (ELA) of the province and Borongan City last in August and September 2022, it was able to initiate the prioritization of the amendment of the City of Borongan's Children's Code, Gender and Development Code, and the development of the City of Borongan's CEPC. Through the same activity, it was also able to promote the mainstreaming of MHPSS which has now led to the enactment of Borongan City's Community-based Mental Health Program and Delivery System through City Ordinance No. 244, as another positive outcome of the project.

As per reporting, the proposed amendment to the city's Children's Code is undergoing a series of public hearings and deliberations. The code reinforces the commitment of the city government of Borongan to work towards the achievement of children's rights and becoming a child-friendly city. On the other hand, the LGU's draft CEPC has been submitted to the City Legislative Council through the Committee on Women and Children. The latter shall serve as a policy guidance for the protection and immediate recovery of disaster-affected children, and pregnant and lactating women, focusing ultimately in protecting them from violence, abuse, neglect and exploitation during disaster and emergency situations. The draft CEPC incorporates in its provisions the prioritization of children with disabilities in emergencies, implementation of gender-responsive standards during response, and education continuity.

According to CoPE, there are still some challenges to be addressed with these new and proposed policies, especially on the level of execution. However, they still serve as a huge development at the level of policy, and making the duty-bearers more accountable in providing broader support for initiatives that upholds the rights of children in the city of Borongan, particularly those who are most at-risk to disasters, and different forms of child abuse and exploitation.

²⁵ City Legislative Council of Borongan. (2023). Draft Ordinance on Children's Code. ²⁶ City Legislative Council of Borongan. (2023). Draft Ordinance on Comprehensive Emergency Plan for Children. 27 Ihid

²³ CoPE. (2023). Fourth Quarterly Narrative Progress Report. ²⁴ CoPE. (2022). Third Quarterly Narrative Progress Report.

2.2.3. Efficiency

Overall, the project resources are considered to be adequate and well-managed to meet the desired project results. The project funds are also considered to be properly allocated between CoPE and Bidlisiw Foundation, taking into consideration the type of interventions that each organization had to implement. According to TdH NL, at the end of the project, the allocated implementation budget (Euros 106, 900) was utilized at 99.86%. If converted to Philippine peso, this budget allocation is considered fully utilized due to the difference resulting from foreign exchange rate used. According to TdH NL, Bidlisiw Foundation and CoPE's familiarity with its financial systems and procedures is one of the factors that facilitated the efficient use of resources.

Factors such as the national elections, weather disturbances, and scheduling conflict led to some delays and adjustments in the conduct of some activities based on quarterly targets. Bidlisiw Foundation noted some procedural delays in relation to contracting with TdH NL at the beginning of the project resulting in some of their planned activities in Cebu to be pushed to the next quarter.²⁸ However, these did not negatively impact the ability of the partners to complete all target activities within the project period.

While all target activities were conducted within eight months, narratives from some respondents also suggest that it may be too short to enable necessary follow through activities, monitoring work, and the assessment of the project impact.

In terms of human resources, both implementing partners shared that in actuality, there were more staff within their organizations who were working for the project than what was included in the budget. With Bidlisiw Foundation, more human resources were required mostly due to the bigger scope of implementation across Cebu Province– both in terms of geographic coverage and type of interventions. With CoPE, it was partly due to the enthusiastic response to the project by the LGUs, which demanded more strategic actions from the organization through the project. Despite these challenges, both organizations were able to implement effective strategies that mobilized other financial and technical support for the project, enabling them to reach even more project participants, while working within existing project funds. Bidlisiw Foundation was able to mobilize a total of 25 community volunteers who supported the project in the conduct of activities such as needs assessment and validation, coordination of activities, logistics arrangement, and monitoring, especially in remote barangays in Cebu.

Forged partnership with LGUs also paved for better optimization of project resources through counter parting between partners. Through CoPE's strong influence and organizing work with the city and barangay LGUs in Borongan, it was able to initiate the formation of a Project Management Team (PMT) composed of representatives from the 12 covered barangays and the city government. This enabled more efficient coordination, and collective decision-making for and monitoring of the project. Facilitated through this body, CoPE mobilized technical support from the CSWDO to serve as resource person during the ToT on MHPSS, and support during the rollout activities. CSWDO also facilitated the provision of free venues for activities when possible. Because of the financial counterpart committed by their 12 partner BLGUs, CoPE was able to increase the number of children and youth facilitators for the MHPSS sessions from 20 to 36 (i.e., 3 instead of 2 per barangay). The BLGUs also covered the food packs provided to the attendees of MHPSS sessions,²⁹ and transportation in other activities. In Cebu, counterpart was also provided by BLGUs during the conduct of CPiE workshops by covering their transportation cost, while Bidlisiw Foundation covered the food cost.

2.2.4. Impact

While the project was relatively short, it resulted in some positive changes among the project stakeholders. At the individual level, the project led to broader awareness on mental health and CPiE, more active civic engagement for children and youth, as well as other members of the community, and deeper appreciation of duty-bearers on CPiE. At the institutional level, the project led to developments in policy within Borongan City LGU, enhancing its programs and policies for children to be more responsive to the fulfillment of children's rights, and particularly making MHPSS more accessible to its constituents.

These changes are meaningful, not only because they brought improvement in the lives of the project participants, or certain government-mandated bodies, but ultimately, these have the potential to propel better, more significant changes at the family, community, and institutional levels to ensure that children in emergencies will be protected from abuse and exploitation. There are no negative impacts cited by the respondents which resulted from the project.

The succeeding section presents further discussions on the impacts that resulted from the project.

Increased Awareness about Mental Health and Child Protection in Emergencies

Through the MHPSS sessions and CPiE training, the project stakeholders have increased their awareness on mental health, especially in the context of child protection in emergencies. This enabled local duty bearers to reflect on and evaluate existing programs and policies, and see how these can address the risks that children and their families face before, during and after an emergency. For example, barangay officials from Cebu, who attended the CPiE training, realized

²⁸ Bidlisiw Foundation. (2022). Second Quarterly Narrative Progress Report.

²⁹ CoPE. (2022). Fourth Quarter Narrative Progress Report

that aside from providing generic emergency food packs, they also need to ensure that they are able to address other needs, such as that of children, and women in evacuation centers. They realized how important it is to ensure that their interventions are responsive to the varying needs of those affected by disasters.

11 The program of Bidlisiw Foundation has a big impact. They taught us about activities for children during emergencies. It really made me realize that we can also allocate funds for child protection programs, even if it's a small amount. Admittedly, the barangay council has not been prioritizing childcentered programs, so the project really opened my eyes to this."

- Government Representative, Barangay Guba, Cebu City

In Barangay Poblacion, Argao, a representative from the barangay council also shared that their programs on children are only limited to feeding programs and family day celebration. Seeing the impact of the MHPSS session among children, she said that the barangay may be able to allocate some funds for similar activities in the future.

In an FGD with barangay officials from Borongan City, duty bearers shared that their awareness of the needs and situation of children during emergencies led them to prioritize more responsive programs for children. For example, some BCPCs became more focused on monitoring children who are in conflict with the law (CICL) and children at-risk. In Barangay Sta. Fe, the barangay chairperson shared that besides the SK representative, she now encourages other youth leaders and children with ages 15-17 years old to recommend programs and activities that they think will be beneficial for children- whether those activities involve children, their parents, or the whole community.

We cannot expect a better future if we do not invest our time and attention. We need to help children and young people. We should not expect them to learn on their own because they also look up to us adults."

- Government Representative, Barangay Guba, Cebu City

The strategic approaches used by CoPE in implementing the project activities resulted in greater public awareness about mental health, and how it impacts children's wellbeing. More people in the communities have had better appreciation about mental health.

This is "a first" in Borongan. I learned that mental health is not only for those who have mental health concerns. It is important that each one in the family is aware of this, so that they can better support each other with their worries and concerns. Children especially need support. In their young age, they may carry some burdens in their families- from household chores, taking care of their siblings, and other household concerns."

- Government Representative, Barangay Guba, Cebu City

The development of trained PFAs has a huge potential to sustain this impact, encourage more people in communities to talk about mental health, that can eventually lead to acceptance that can break the stigma against mental health and people with mental health conditions.

Opportunity for Meaningful Civic Engagement, especially among Young People

Aside from awareness raising, the project provided children, youth, and other members of the community for civic engagement. Community volunteers, youth volunteers, children and parent advocates all shared that the experience they gained as volunteers and MHPSS facilitators, helping those who were affected by Super Typhoon Odette, was equally rewarding for them. They saw how important their role was and this encourages them to continue their work even beyond the project.

One PSG member, whose house had been damaged by the typhoon, shared that facilitating the MHPSS sessions also helped her in her own healing process. CRA members in Argao, on the other hand, were more inspired to advocate for children's rights and protection, seeing how Bidlisiw Foundation's activity became a "comfort zone" for children affected by the typhoon.

same amount of happiness they brought on to us."

As these volunteers engage in the project activities, they become more socially aware. With the skills and experience they gained through the project, and other efforts of Bidlisiw Foundation and CoPE, they have the potential to take on more active roles in their community.

This is similarly so for the trained parent advocates from Borongan City. They expressed happiness because the project became an instrument for them to help children and parents in their respective barangays to cope with stress and prevent them from being depressed. One respondent shared that her experience in the project increased their knowledge on child protection and reinforced the value of volunteerism.

to me as a parent, and a survivor of abuse."

11 The youth need the child rights advocates. The MHPSS strengthened our determination to help young people like us. It was the first time those children experienced it, and it helped in processing their "trauma" from Odette. The amount of happiness we saw among those children during the MHPSS, is the

- Child Rights Advocate, Argao, Cebu

My knowledge (about child protection) was enhanced, and I realized the importance of volunteerism. I am happy. This experience has been a huge help

-MHPSS Facilitator, Borongan City

The project helped the trained facilitators in the barangays to learn more about themselves and improve their confidence. Their participation became an opportunity for self-growth. From being too focused with work or family, they now mingle and interact confidently with other people.

Programs and Policy Changes

In the City of Borongan, the project has had far-reaching results in terms of mainstreaming CPiE in the LGU plans and policies. Aside from the progress in the amendment of the Borongan City Children's Code and the development of CEPC, one unintended result of the project is the enactment of the Borongan City Mental Health Program of 2022 (City Ordinance No. 244) on October 5, 2022. This is a significant milestone that sustains the gains of the project in Borongan City, thereby supporting CPiE efforts through MHPSS.

Borongan City Mental Health Program of 2022 (See Annex 10)

- Provides the legal basis for the adoption of an integrated and comprehensive approach to the development of the city's Mental Health Care Delivery System, particularly among vulnerable groups including children and youth.
- Serves as the basis for the creation of a City Mental Health Board as the policy-making body; and Executive Committee to lead program implementation. Children and youth are represented in both through the Federation of Youth Councils.
- Shifting from hospital-based to community-based mental health service • delivery, it shall facilitate the formation and equipping of Barangay Mental Health Teams, the setting up of Barangay Mental Wellness Hub, and the development of Barangay Mental Health program in all barangays in Borongan City.
- Mandates the establishment of a comprehensive and integrated Mental Health Program in Schools benefitting children and youth. School-based programs shall include awareness raising initiative on mental health, establishment of and capacity building for peer support groups, and capacity building on MHPSS for teachers.

At the barangay level, all 12 covered barangays had also expressed their commitment to recognize and organize the trained MHPSS facilitators under the project to be part of the barangay's Psychological First Aid (PFA) team. Moving forward, the CSWDO of Borongan has been assigned to coordinate and facilitate the submission of the Resolution of Acceptance from each of the barangay, and will further be supported by an Executive Order coming from the city Mayor.

The strong LGU engagement and influencing work of CoPE led to the forging of stronger partnership with the City Government of Borongan beyond the project scope. During the project period, CoPE represented the CSOs of Borongan City and the Province of Eastern Samar Government in the crafting of their Executive

-Legislative Agenda (ELA) last August 9-11 for the Provincial Government and September 16-19 for the City Government of Borongan.³⁰ The organization will continue to be a CSO representative in the formulation of city's ELA for the next 3 years of governance by the newly elected city officials, opening up a wide opportunity for mental health program promotion and inclusion.³¹

2.2.5. Sustainability

The journey of the project stakeholders during the eight-month project implementation enabled them to institute and/ or identify potential mechanisms for sustainability to continue the gains and accomplishments in the covered areas. These sustainability mechanisms are related to policy changes, partnership with local government, involvement of community volunteers, and sustained awareness raising and capacity building.

Institutionalization of MHPSS and child protection programs through policy development

Prior to project implementation, the covered areas have limited knowledge of mental health. However, seeing the positive impact of the project, particularly the MHPSS sessions, people, especially the local government gained a great appreciation of mental health programs which led to its institutionalization, particularly in Borongan City. City Ordinance No. 244, also known as the Borongan Mental Health Program of 2022, was enacted which will help ensure regular allocation of resources for the implementation of mental health-related programs even after the project completion and regardless of change in government leadership.

As mentioned earlier, City Ordinance No. 244 supports the adoption of an integrated and comprehensive approach to the development of the City Mental Health Care Delivery System to provide appropriate services and interventions. Considering the shift from a hospital-based approach to a community-based approach, specific interventions at the barangay level are also supported by the ordinance such as the crafting of a barangay mental program, capacitating barangay mental health teams, and establishment of barangay mental wellness hubs for counseling (City Legislative Council of Borongan, 2022: 5).³²

Apart from the policy on mental health, the project also initiated the amendment and development of child-related policies which will also play a crucial role in sustaining the gains in the city. CoPE initiated the amendment of Borongan City Children's Code to integrate recent child-related laws which will better inform child-related planning and budgeting. This is also the "mother" legal document

³⁰ CoPE. (2022). Third Quarterly Narrative Progress Report.

³¹ Ibid ³² City Legislative Council of Borongan. (2022). City Ordinance No. 244. An Ordinance Providing for a Community-based Mental Health Program and Delivery System in Borongan City.

for child programming in the city which will ensure that duty bearers serve the best interest of children by protecting their rights in planning and decision-making processes. Further, an Ordinance on Comprehensive Emergency Plan for Children was also drafted through the support of the project. This legal document also institutionalizes child protection programming in the city government in the context of disasters and emergencies.³³

At the barangay level, the initiative of CoPE to craft the Resolution of Acceptance in the 12 covered barangays for the trained children, youth, mothers, and fathers to be recognized as MHPSS/ PFA teams also contributes to sustainability. It is envisioned that these teams will be provided with financial support from the Barangay DRRM Fund and will team up with the Barangay DRRM Committee during emergency response and early recovery. They will provide MHPSS and stress management intervention to distressed individuals in times of disaster.

Involvement of community volunteers

Learning from the experience of Bidlisiw Foundation, one that needs to be sustained and replicated, and has the potential to be so is the involvement of adult and youth volunteers from the communities. It is good to tap on the organic and genuine concern of people to their communities. This is especially so for young people such as the PSG and CRA whose ideals and high energy for civic engagement can really be put to positive use. The laudable leadership skills, passion, and commitment of these young people were evident not only during the response project but also in the previous projects of Bidlisiw Foundation and its partners. These



gualities should be continuously harnessed for the youth to sustain its role as catalysts of change should similar projects be implemented in the future.

Sustaining the involvement of community volunteers is also essential to support community-led and community-based child protection networks that can be mobilized before, during, or after a disaster. Community volunteers like the trained facilitators in Borongan City play an important role in continuing the information dissemination on MHPSS, child protection, and the referral flow in the barangays.

Sustained awareness raising and capacity building

Sustained awareness raising and capacity building is another critical mechanism that should be considered for sustainability. To maximize the project gains, majority of project participants in Cebu and Borongan City expressed the need to sustain awareness raising and information dissemination efforts on MHPSS and referral systems developed under the project, including the maintenance of the IEC materials (e.g., sintra boards and flow charts).

The CVs in Cebu also articulated that instilling behavioral changes among children and adults is a process and may not be achieved overnight or in a single activity. As such, continued support for children and their families is necessary. There should be more than one MHPSS session to ensure follow through and sustain support. Further, peer-to-peer approach is also deemed as an effective approach for awareness raising, especially among children based on the experience of the PSG, CRA, and youth facilitators. Since they are of the same age, it is easy for them to open up and express themselves.

In Borongan City, CoPE tapped local social media influencers and content creators to help sustain their awareness raising efforts on mental health.³⁴ This initiative is considered a good practice since it is effective in reaching out to a greater audience given the rampant use of digital technology among children and youth. Specifically, CoPE engaged the 1st Runner-up of Ms. Pintados-Leyte and groups of local influencers in the city for advocating child protection and popularizing mental health within and outside the project areas.³⁵

The implementing partners also emphasized the need to strengthen capacity building interventions to achieve sustainability. Given that the project is short, the knowledge and skills of the LGUs, volunteers, and other relevant stakeholders still need to be enhanced for them to sustain and build on the project gains moving forward. Capacity building activities on CPiE and MHPSS are necessary to continuously equip the duty-bearers and implementing partners in performing their roles and responsibilities in relation to child protection.

CoPE also shared the need for trained facilitators to be further capacitated to become Champions of Change. Organizing efforts and other capacity building activities are necessary for them to influence and hold duty bearers such as the barangay council and the city government more accountable.³⁶

35 Ibid

³³ City Legislative Council of Borongan. (n.d.). An Ordinance Providing a Comprehensive Emergency Program for Children in the City Government of Borongan, Eastern Samar

³⁴ CoPE. (2022). Third Quarterly Narrative Report.

³⁶ CoPE. (2022). Fourth Quarterly Narrative Report.

2.2.6. Cross-cutting Concerns: Child and Youth Participation, **Disability Inclusion and Gender Mainstreaming**

Child and Youth Participation

The Tdh NL project provided an enabling environment for the participation of children and youth in the covered areas. Considering that Bidlisiw Foundation and CoPE have expertise and a good track record in working with and for the children, they made conscious efforts to ensure the active involvement of the latter throughout the project implementation. In fact, the representative from TdH NL shared that one of the concrete gains of the project is the strong participation of children and youth.

In Borongan City, CoPE engaged children and youth in the whole project implementation phase, from the project design stage until evaluation. During the PDNA, 16 children and 14 youth were invited to participate in KIIs and FGDs to identify priority needs and protection issues affecting their sector that the project could potentially address. Specifically, CoPE asked the girls and boys with questions related to their specific needs, including protection needs; access to basic services; income generating activities that they engage in; significant safety and security concerns affecting them; and their coping mechanisms. When the project kicked off, child and youth participants were actively engaged in the series of project activities involving training, workshops, and rollout sessions. Based on the narratives of children and youth themselves, they were trained as facilitators on MHPSS and PFA together with adults. To further support their role as facilitators, they were also oriented on child protection, relevant CP laws, and referral flow. They also participated in team building sessions to plan and discuss their roles and assignments for the rollout sessions. In the actual MHPSS rollout, 32 young facilitators were clustered into groups to handle stress management sessions for their fellow children and youth.

Children and youth also played an active role in advocacy to promote mental health awareness. A workshop on IEC development and production was organized by the project for them. They were able to produce IEC materials from the workshop and these outputs were launched in October in commemoration of World Mental Health Day. The first-ever Child Congress in Borongan City was also held during the celebration of Children's Month, and it gathered more than 500 children across the city. The congress became instrumental in the selection of child representatives who will participate in local development and investment planning.³⁷ Before the project concluded, the children and youth were also involved in an evaluation activity to assess the implementation process and approach as well as discuss areas for improvement.

CoPE also implemented child safeguarding mechanisms to support the participation of young people. CoPE secured consent from the parents of minors who attended project-related activities outside their respective barangays. Insurance with oneyear duration was also provided for participants below 18 years old. Further, all staff involved in the project implementation were provided with Child Safeguarding Policy orientation. CoPE also regularly reviewed the Project Risk Assessment to ensure the safety and security of the participants, especially children and youth.³⁸

In Cebu Province, Bidlisiw Foundation closely engaged the PSG, an existing youth organization, in the implementation of MHPSS sessions. The PSG members were consulted on the flow of the MHPSS sessions through which they also offered some suggestions. They also helped in identifying the contents of the care kits to be provided for children and youth after the sessions. During the actual MHPSS sessions in the barangays, the members of PSG, together with some staff from Bidlisiw Foundation, also served as facilitators.

After the conduct of MHPSS sessions, the project team, along with the PSG facilitators, initiated briefing and debriefing sessions to assess the team's overall performance. Such feedbacking sessions enabled the youth to identify challenges and areas for improvement, especially in the facilitation and preparatory work.³⁹

Apart from PSG, the Child Rights Advocate (CRA) in Barangay Poblacion, Argao was also involved by Bidlisiw Foundation in the course of project implementation. The CRA is an organization established by CLB in 2019 that aims to raise awareness on the rights and responsibilities of children and youth. According to the CRA members, they were involved in the implementation of all interventions provided by Bidlisiw Foundation in their municipality which include housing repair assistance, provision of solar lamps, and conduct of MHPSS sessions

For the housing repair assistance, the CRA was involved in identifying the potential beneficiaries, canvassing and purchasing of housing materials, and monitoring the status of the repaired or reconstructed houses. Also, two of the interviewed CRA members became recipients of the aforesaid assistance.

the status of the reconstructed houses."

I, myself, became the focal person of Bidlisiw Foundation for contacting those who were affected by the typhoon, especially children and youth. I was tasked to identify the CRA members with damaged houses since we were greatly affected by the disaster. I also became a recipient of the housing materials. We (CRA) helped BIDLISIW FOUNDATION in the implementation. We had an ocular inspection of damaged houses. We helped in canvassing and purchasing the needed housing materials. Also, we did monitoring and provided updates on

- Child Rights Advocate, Argao, Cebu

³⁸ CoPE. (2022). Second Quarterly Narrative Report.

³⁹ Bidlisiw Foundation. (2022). Third Quarterly Narrative Report.

³⁷ CoPE. (2023). Case Story: Leap.

In addition to their involvement in the provision of material assistance, the CRA also helped in mobilizing participants for the MHPSS sessions. They did house-tohouse visits to identify children and youth who will join the activity. Further, they also served as co-facilitators of the PSG and Bidlisiw Foundation during the actual MHPSS sessions.

Gender Mainstreaming

The process and approach that the project employed in Cebu Province and Borongan City also contributed to addressing exclusion based on gender. Each implementing partner had efforts that contributed to providing an inclusive environment for the participation of girls, women, and individuals with diverse sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC). In Borongan ity, CoPE targeted women as among the facilitators for the MHPSS sessions. A total of 28 mothers across the covered barangays participated in the ToT on MHPSS and PFA. The ToT equipped the mothers with knowledge and skills in handling stress management sessions for their fellow women. In addition to females, the ToT also involved males, particularly 20 fathers. The involvement of fathers is part of CoPE's advocacy to organize males to fight against violence since they are among the perpetrators of abuse. While males generally remain private and quiet when it comes to their emotions, the project provided a platform for them to demonstrate openness and be comfortable in verbalizing their feelings. This somehow helped in breaking the gender stereotype about men being tough, composed, and inexpressive. This is supported by the sharing of Mandaue CSWDO who expressed the importance of engaging males such as the Empowerment and Reaffirmation of Paternal Abilities (ERPAT)⁴⁰ members.

Males are longing for more capability training. If they are prioritized, they will have a better chance to express themselves. They can voice out and share ideas. And they can have more time to reflect for themselves."

- Government Representative, Mandaue City, Cebu

CoPE also articulated that the majority of the members of the Project Advisory and Management Team are males. Although this is the case, women members remained strong and were very expressive with their ideas during meetings and discussions. A representative from the lesbian, gay, bisexual, transgender, queer, intersex, and asexual (LGBTQIA+) sector also sits in the said team. Also, only 3 of the 12 barangay chairpersons involved in the project are females. While the number is small, these female barangay chairpersons were among the most active and were always present in the project activities. A representative from Bidlisiw Foundation articulated that community and youth volunteers have prior training on gender diversity and inclusion. Aside from this, during the conduct of MHPSS sessions, the organization ensured that facilitators were diverse enough so that participants would feel comfortable to approach and talk to them. During the interviews in the cities and municipalities covered by Bidlisiw Foundation, it was also noted that most of the community and youth volunteers are females. Of the 25 CVs across the project areas in the province, only 4 are males. Considering the very significant role that CVs played in the entire implementation phase, this high number of female CVs contributed to the meaningful participation of women in the project.

Tdh NL and its implementing partners also shared that they were conscious of gathering gender-disaggregated data in the project activities. Such data and information are evident in the submitted quarterly narrative progress reports. A respondent from CoPE also mentioned that the organization revised its attendance sheet to make it gender- and disability-inclusive. CoPE included information such as gender preference and type of impairment. During the project activities, CoPE explained such information to the participants for them to be able to input the necessary data correctly.

Disability Inclusion

Disability inclusion is one of the areas for improvement for the project. Both CoPE and Bidlisiw Foundation need to enhance their capacity to ensure full and meaningful inclusion of persons with disabilities, particularly children with disabilities in programming and implementation of emergency interventions in the future. Activities and materials also need to be adapted to the needs of participants with impairment. In terms of programming, an inclusion budget is also imperative to support accessibility mechanisms for future activities. While disability inclusion is identified as an area for improvement, efforts to help address barriers to inclusion of persons with disabilities were still evident among the implementing partners.

CoPE had initiated efforts to include the disability sector in the project interventions. The data gathering tool that the organization used for the conduct of PDNA included questions focusing on the protection needs of persons with disabilities. The disability sector was also represented in the Project Advisory and Management Team, and this became an opportunity for persons with disabilities to have a voice in decision-making processes. The president of the persons with disability sector expressed gratitude to CoPE since the project became a venue to raise people's awareness on persons with disabilities. Based on her narratives, disability-related rights were incorporated to the amendments made in the Borongan City Children's Code.

⁴⁰ Empowerment and Reaffirmation of Paternal Abilities (ERPAT) is one of the programs implemented by the Department of Social Welfare and Development (DSWD) of the Philippine Government that aims to develop the capacity of fathers to accomplish their roles and responsibilities at home and in the society. It is one of the parenting interventions of DSWD which provides training on child-rearing, behavioral management of children, gender sensitivity and appreciation of partnership with their spouses, establishment of support networks of fathers in the community, and active participation and involvement in community projects, among others. Participants to the trainings include biological fathers (solo fathers, returning migrants/Overseas Filipinos (OFs), released prisoners, or persons with disabilities), adoptive and foster fathers, guardians, or caretakers.

Based on the data from CoPE, 3 female adults from the disability sector were trained as facilitators on MHPSS.⁴¹ These trained facilitators were tasked to roll out MHPSS in their own sector. Both adult and youth facilitators shared that persons with disabilities were among the participants of the rollout sessions. They were able to handle persons with disabilities such as those with mobility, hearing, and speech impairments. A stroke patient was also one of the participants. Further, the MHPSS rollout became a venue for persons with disabilities to come out of their shell and socialize with others.

Because of this project, persons with disabilities, especially in my barangay (Cabong), are already involved. When the Barangay Chairperson holds an assembly or gathering in the community, persons with disability are included in the participants. That's how the project left an impact on us. We were given importance. The awareness of people about us has increased."

- Government Representative, Mandaue City, Cebu

Similar to CoPE, Bidlisiw Foundation was also able to involve children with disabilities in the MHPSS sessions particularly in the City of Naga. According to the PSG members, they were able to facilitate sessions for children with hearing impairment. With support from the parents of those children, the facilitators were able to handle the sessions well. This experience also motivated the project team to continue promoting inclusion and unity amid diversity. A total of 20 children with disabilities (e.g., deaf-mute and autism) from the covered areas of the project were involved in the MHPSS sessions.

Further, Bidlisiw Foundation also provided an orientation to 16 volunteers on the use of the PFA Tool and the Washington Group Questions Short Set on Functioning (WGQ SS). The WGQ SS is used to identify persons with disabilities. It evaluates whether a person has difficulty performing activities such as walking, seeing, hearing, cognition, self-care, and communication.

Part 3: Influencing Factors and Key Lessons Learned

The narratives and experiences of project stakeholders have presented significant lessons from the eight-month implementation in Cebu Province and Borongan City. Looking at the project gains and accomplishments, the interventions related to child protection, mental health, and housing have successfully contributed to achieving the trust of TdH NL and its partners, which is to safequard children from abuse and exploitation in the context of emergencies. Despite the challenges, the project brought meaningful impacts in the lives of individuals from the local government, civil society, and communities.

Various factors have influenced the achievement of the project goals and targets. Adult and child respondents shared facilitating factors that contributed to smooth project implementation as well as hindering factors that posed challenges to the project stakeholders.

FACILITATING FACTORS

Strong partnership with local government

The experience of CoPE in Borongan City points to the importance of effective engagement and influencing work with the local government, which led the short project to effect policy changes in the city. One of CoPE's good practices in implementing programs and projects is the securing of Memorandum of Understanding (MoU) with the local government of its covered areas. Also, having a clear Joint Implementation Plan between CoPE and its partner LGU paved the way for the former to easily gain commitment and secure funding from the LGU to facilitate project implementation. Based on CoPE's experience in the project, the formation of the Project Advisory and Management Team provided a venue to facilitate an inclusive approach and foster strong collaboration. Apart from CSOs and academe, the team is comprised of different city local government offices and agencies such as the CSWDO, PNP-WCPD, City DRRM Office, City Mayor's Office, City Government Operations Office, DepEd, as well as barangay captains. The presence of this team enabled innovations and pooling of expertise and resources that contributed to successful project implementation.

Considering the expertise and track record of CoPE in development work including child protection, it was able to influence the planning and programming of Borongan City LGU even before the project implementation. For example, in the development of the CLUP and the Executive- Legislative Agenda, CoPE was engaged by the city government which provided the opportunity for the former to mainstream their advocacy on child protection in the plans and programs of the latter. CoPE is greatly driven to liaise and partner with the local government since it recognizes the

⁴¹ CoPE. (2022). Second Quarterly Narrative Report

fundamental role of good governance in achieving sustainability of any project or intervention related to child protection.

Resource sharing

The initiative of the local government at the barangay and city levels to provide additional resources also contributed to the successful implementation of the project. According to CoPE, their partner city and barangay LGUs were able to provide support such as food, transportation, and venue for the implementation of project activities. The resources from the LGUs had complemented the available resources of the project given the sudden increase of commodity prices, including the cost of fuel and transportation.42

Specifically, the city government provided a venue for the meetings of the Project Advisory and Management Team, while the barangay LGU provided food packs and transportation to the participants of the rollout sessions. This was affirmed by parents who shared that the barangay LGU of Maypangdan gave food packs which contain rice, canned goods, coffee, and sugar to the participants. The food packs helped in encouraging community members to participate. In addition to the said support, the barangay LGUs also assisted in mobilizing participants as well as provided a sound system and venue with chairs and tables for the MHPSS rollout sessions.43

In Cebu City, the barangay LGU of Guba provided nails to the beneficiaries of housing materials given by Bidlisiw Foundation. According to the CVs, such assistance was really appreciated considering that the affected families and the project itself had limited resources.

Presence of volunteers

The presence of community and youth volunteers greatly helped Bidlisiw Foundation in the implementation of the project. Considering the wide scope of Bidlisiw Foundation in Cebu Province, the volunteers from the different barangays played a vital role in the successful implementation of the project since it augmented the workforce to meet the targets. The presence of volunteers as additional workforce also enabled Bidlisiw Foundation to direct more funds to the project beneficiaries.

The involvement of youth volunteers, particularly PSG and CRA, enabled the project to conduct activities simultaneously even if the areas covered were far from each other. The PSG members primarily helped in the facilitation of MHPSS sessions for children. Prior to project implementation, PSG was already active and was trained by Bidlisiw Foundation to help in awareness raising on children's rights and child protection concerns. Because of this, it had been easy to mobilize them as youth volunteers for the MHPSS sessions in which they served as facilitators.

The CRA also helped in co-facilitating the MHPSS sessions particularly in the municipality of Argao. In addition to facilitation, the CRA members helped in locating and identifying families from far-flung areas referred by CLB. These youth volunteers communicated directly to the project team for updates and feedback.⁴⁴

The active participation of youth volunteers made them sincerely feel that they are part of the project. Aside from belongingness, it also provided a venue for them to strengthen their understanding on the importance of active citizenship by helping vulnerable communities in times of disaster.

Besides youth volunteers, the project also closely engaged CVs who are mostly women. In Cebu, the CVs were tapped by Bidlisiw Foundation to assist in communitybased project implementation processes such as the conduct of house-to-house visits to assess and validate damage to shelter among potential beneficiaries. The house-tohouse visits are guided by the list provided by Bidlisiw Foundation. They also assessed the needs of children within the families affected and accompanied beneficiaries to go to suppliers to procure the housing materials. Further, the CVs were also instrumental in ensuring that the housing materials are used for their purpose, by conducting monitoring visits to the beneficiaries. This is important because some beneficiaries had the tendency to sell the materials they received or those that were not used.

Apart from the provision of housing assistance, the CVs also assisted in identifying potential participants for the MHPSS sessions. In Naga City, the CVs had the initiative to invite children with disabilities since they are the most in need of MHPSS sessions.⁴⁵ One CV in Lapu-Lapu City also shared that she was able to facilitate the MHPSS sessions and assisted in the distribution of care kits.

Consultative Approach of Implementing Partners

Both implementing partners employed a consultative and inclusive implementation approach which also contributed to achieving the project targets. Bidlisiw Foundation and CoPE initiated regular coordination which allowed project participants from the city, municipal, and barangay levels to express their urgent concerns and needs.

As mentioned previously, CoPE initiated the formation of the Project Advisory and Management Team composed of key project stakeholders, which provided a venue to plan and discuss issues that need to be addressed. The members of the team were consulted and informed on the project design, activities, and budget.

The CSWDO also shared the importance of constant communication during the project implementation, and one of the platforms utilized was an online chat group. According to her, a chat group was created for easy access and delivery of information and feedback. The chat group was created after the ToT for facilitators from the barangays

⁴² CoPE. (2022). Third Quarterly Narrative Progress Report.

⁴³ CoPE. (2022). Fourth Quarterly Narrative Progress Report.

⁴⁴ Bidlisiw Foundation. (2022). Second Quarterly Narrative Progress Report.

⁴⁵ Bidlisiw Foundation. (2022). Third Quarterly Narrative Progress Report.

to communicate their concerns and issues (e.g., tasking for the rollout and cases of abuse) easily and regularly. There is a dedicated chat group for each group of facilitators (i.e., mothers, fathers, and youth). The chat groups are still active even after the project implementation.

In Cebu, the effective consultation initiated by Bidlisiw Foundation, with the help of CVS, was also recognized by the project participants. The experienced staff of Bidlisiw Foundation in emergency response enabled the project to make needs-based intervention and avoid duplication. In the provision of housing materials, Bidlisiw Foundation allowed the beneficiaries themselves to identify and prioritize the materials they wanted to purchase. Further, planning and feedbacking sessions with youth volunteers were also initiated to ensure the smooth facilitation of MHPSS sessions.

Support from TdH NL and Implementing Partners

Project stakeholders from Cebu and Borongan City also identified the support from TdH NL and its partners as contributory to successful project implementation.

A representative from Bidlisiw Foundation expressed that TdH's capacity to fund emergency response is also an enabling factor because it is rare for donors of development projects to allocate funding for emergency response purposes. The organization appreciates TdH NL's flexibility on their funding which enabled the implementation of interventions that are really needed by affected families and communities. This is important considering that an emergency occurring within project implementation is highly likely for countries such as the Philippines, which is very prone to disasters.

Even though Bidlisiw Foundation's existing projects with TdH NL are non-emergency related, TdH NL has always been responsive to support the organization in implementing response interventions during emergencies. Aside from Super Typhoon Odette, TdH NL also responded during the Bohol Earthquake in 2013. Further, TdH NL had the most comprehensive response program for Super Typhoon Odette compared to other donors of Bidlisiw Foundation.

CoPE also appreciates the guidance given by TdH NL to implementing partners to fulfill the monthly reportorial requirements of the project. Templates were provided which made it easy for CoPE and Bidlisiw Foundation to prepare their reports and other relevant documents.

The project participants from the barangays also commended the capacity building interventions provided by both implementing partners. Adult and youth facilitators in Borongan City appreciate the ToT which equipped them to run the sessions during the rollout confidently. The trainings and workshops initiated by CoPE made the facilitators competent, which was crucial in getting the trust of the participants during the MHPSS protection-related trainings conducted by Bidlisiw Foundation which helped them in performing their role in the project.

HINDERING FACTORS

Unresponsiveness of some LGUs

One of the common challenges that confronted the project implementers relates to the unresponsiveness of some LGUs. A representative from Bidlisiw Foundation shared that some local government offices tend to give less priority to interventions that offer soft skills, such as capacity building, and favors those that offer material assistance. Even though Bidlisiw Foundation clearly targets who should attend in activities in their communication letters, some LGUs would still send personnel who will less likely apply the learnings they will gain in their work. Personnel attending the activities also change all the time. This limits the reach and potential impact of interventions, particularly in terms of capacity development and influencing. This concern was also affirmed by the sharing of the city and barangay LGU representatives who suggested that Barangay Chairpersons should assign a permanent representative (e.g., First Councilor) if they cannot join the project activities.

The unresponsiveness of some BLGUs was also experienced by CVs and youth facilitators in Cebu who shared that those who did not show interest in the project provided minimal to zero support to the activities. The PSG members shared that in Barangay Mambaling, the BLGU did not provide a conducive space with tables and chairs for them to hold the MHPSS session. Given the situation, they had to pull out from the area the following day.

Limited knowledge and skills in handling participants with disabilities

Youth facilitators in Cebu expressed difficulty handling children with disabilities (e.g., deaf-mute) in the MHPSS sessions. The team was not informed ahead of time regarding their participation in the said activity. Also, the facilitators have no training or experience in running sessions for persons with disabilities. It was fortunate that these children were accompanied by their parents who served as interpreters and carers throughout the session.

Low participation of males in the MHPSS rollout

Project stakeholders in Borongan City noted that only a few male participants were able to join the project activities, particularly the MHPSS sessions. The adult facilitators and the CSWDO representative mentioned that the participation of males was low during the rollout since most of them are not comfortable in expressing themselves while some are also busy with work. Males often resort to alcohol drinking and cockfighting to manage stress as mentioned by youth facilitators and some barangay LGU representatives.

sessions. In Cebu, the community volunteers also expressed appreciation to the child



Stigma on mental health

The stigma on mental health is another challenge faced by the implementing partners, particularly CoPE. During the MHPSS rollout, inviting participants was difficult in some barangays considering the negative perception of people regarding activities concerning mental health. According to the narratives of the parents and LGU representatives, some were hesitant to join the activity because they feared that others might perceive them as crazy.

The SK representative also shared that because of stigma, some parents do not acknowledge their children's emotions and mental health concerns. When children try to approach their parents to communicate their problems, instead of hearing comforting words, the latter usually get mad and tell the former that they are just being dramatic.

Conflicting Schedules

In Borongan City, project stakeholders conveyed that challenges related to conflicting schedules also confronted them. Due to the resumption of face-to-face classes and election period, the conduct of some project activities was postponed. Specifically, the schedule of rollout in the barangays was moved to the third quarter. Some BLGU representatives also expressed that it was challenging for the children to manage their time, given that they had to go to school during weekdays, and attend project activities on weekends.

The CSWDO representative also shared that the disability sector representative was not able to participate in some project activities because the schedule coincided with the celebration of the persons with disability month in October.

Part 4: Conclusions and Recommendations

The project results, as revealed by the evaluation findings, suggest that the project was able to contribute to the overall goal of protecting children in disaster-affected and disaster-prone areas in Cebu and Eastern Samar, from abuse and exploitation. By focusing on CPiE through MHPSS, it helped in addressing some of the gaps in humanitarian action that place children at greater risk to abuse, neglect, exploitation, and violence. These gaps include the exclusion of children, and their specific needs in response programming and implementation, which further cuts



them off from accessing fundamental services, including access to MHPSS. Putting children's rights at the center, the project interventions also supported parents and caregivers under mental and psychosocial pressures to access shelter assistance and MHPSS that helped them to offer better protection, and a sense of security and stability to their children moving forward.

By supporting the development and strengthening of community-based child protection mechanisms through training and capacity development, the project was further able to contribute to this goal by raising public awareness on children's rights, child protection issues, mental health, and case referral mechanisms among various stakeholders, including duty-bearers and first responders. Through policy advocacy, and campaigns, enabling local government policies are set in place which are instrumental not only in sustaining the gains and outcomes of the project, but ultimately, in making duty-bearers more accountable to their constituents in ensuring the development of rights-based policies and programs for children and young people, within and outside the context of emergencies.

Leveraging on the gains and lessons from the project implementation, and recognizing their potential for sustainability, the next section presents programmatic recommendations that TdH NL, Bidlisiw Foundation, CoPE, and their partners can consider for future programming, in order for similar interventions to contribute more not only in protecting at-risk children from abuse and exploitation, but also in enabling them to access better opportunities to participate meaningfully in society and pursue their full development potential.

The recommendations are derived primarily from the data gathered from the interviews and reports but are presented within the context of broader themes and agenda on child protection, risk reduction, and humanitarian action.

STRENGTHEN CHILD PROTECTION IN EMERGENCIES AND DISASTER RISK REDUCTION

Disasters can heighten the vulnerability of children in various ways and can lead to an increased risk of neglect, separation, abandonment, abuse, exploitation, and multiple forms of violence, threatening their rights to protection.⁴⁶ Narratives from children and youth on the impact of Super Typhoon Rai point to the exacerbation of pre-existing risks and threats experienced by children, including those due to the COVID-19 pandemic. Meanwhile, insights from adult and youth respondents suggest that protecting children from the risk of abuse and violence also entail reducing the risk of impacts of various hazards they are exposed to. Specifically, they recommended future programs to include capacity building on disaster preparedness and emergency planning for LGU officials, and family-level disaster preparedness for at-risk families.

This shows that strengthening child protection, especially during emergencies, also involves taking measures to prevent or reduce the potential consequences of hazards to help create a safer and more resilient community for children and their families. This also highlights the need for stronger integration of child protection and DRR actions to better address the different risks faced by diverse children, including in emergencies, and ultimately ensure the protection of their rights. This is crucial especially for a country such as the Philippines whose geophysical characteristics and social vulnerabilities make it highly susceptible to the impacts of various hazards, thereby putting its population, especially children, at greater risk. As of 2022, the country was ranked first in the World Risk Index Report for having the highest disaster risk among 193 countries.47

To strengthen CPiE, there is a need to initiate DRR efforts that mainstream child protection and take actions that contribute to greater resilience, not just of children, but of the broader child protection systems. Future interventions may support, among others:

 Child-centered DRR initiatives that uphold children's rights to participation in the whole DRR cycle (i.e., assessment of risk and needs, including during emergencies, identification, and implementation actions to address those risks, and monitoring & evaluation).

- (Republic Act 10821), among others.
- concerns, and ensure that child protection and DRR are included in the
- during emergencies. committees.
- Youth-led DRR and peer support initiatives.

Effective integration of DRR with child protection means that everyone with responsibility for children's rights, and within humanitarian and development work, systematically takes action before during and after an emergency, to prevent and minimize risks and threats to children that may arise during emergencies.⁴⁸ This can help prevent the reduction of child protection issues arising during emergencies, their complexity and severity, which can lead to better protection and development outcomes for children and young people.

SCALE UP COMMUNITY-BASED MHPSS

MHPSS has a critical role in creating and supporting conditions for children's optimal development and wellbeing in emergencies.49 This was shown by the results of the project to the extent that the MHPSS sessions provided a child-friendly space for children in typhoon-affected communities and those in adverse circumstances to gather for play, selfexpression, and learning. In Borongan City, the conduct of MHPSS among mothers and fathers also helped in promoting the wellbeing of caregivers who are also affected by disasters. With family as the primary resource for care and protection of children, access to MHPSS for caregivers also helps in enabling them to provide children with a sense of safety, stability, and normalcy.⁵⁰ The intervention also led to the development of capacities of children, youth, and adults to become MHPSS facilitators and children's rights advocates.

 Capacity building of duty bearers at all levels and other relevant stakeholders on DRR and CPiE, including training on the Philippine Disaster Risk Reduction Act of 2010 (Republic Act 10121) and Children's Emergency Relief and Protection Act

Advocacy and influencing among duty bearers to develop risk-informed DRR plans and contingency plans that address child protection and safeguarding government's annual investment, development and other sectoral plans. Streamlining and promoting case management and referral systems, especially

Representation of children and youth, and relevant child protection actors in DRR



⁴⁹ United Nations Children's Fund. (2018). Operational Guidelines on Community-based Mental Health and Psychosocial Support in

⁴⁶ United Nations Children's Fund. (2013). Disaster Risk Reduction and Child Protection. https://www.preventionweb.net/publication/ disaster-risk-reduction-and-child-protection

⁷ Atwii, F., Sandvik, K., Kirch, I., Paragi, b., Radtke, K., Schneider, S., & Weller, D. (2022). World Risk Report 2022. Berlin: Bündnis Entwicklung Hilft and Ruhr University Bochum - Institute for International Law of Peace and Armed Conflict (IFHV)

⁴⁸ Save the Children. (n.d.). Child Protection in Emergencies and Disaster Risk Reduction. https://resourcecentre.savethechildren.net/pdf/ CPWG+CPiE++DRR+Final+draft.docx

Humanitarian Settings: Three-tiered support for children and families (Field Test Version): New York: United Nations Children's Fund. ⁵⁰ Ihid

With the benefits of the MHPSS sessions, most of the respondents across all stakeholder groups recommended for it to be sustained to include more children, youth, families, and community members. Specifically, the project stakeholders suggested the involvement of more children and their parents, including children with disabilities and those who are at the risk of being in conflict with the law, and are experiencing abuse and exploitation. Another recommendation is to scale up the MHPSS sessions from communities to schools. According to the girls and boys interviewed, school-based MHPSS sessions have the potential to involve more children and youth, and target those who suffer from distress due to academic pressures, and bullying. The potential to develop child protection advocates is also high among in-school children and youth, reinforcing the approach already taken by the project in organizing and capacitating children and youth volunteers that promoted their participation in child protection action.

Future interventions can leverage on these gains and the attention directed by the emergency response to the mental health needs of the disaster-affected and disaster-prone populations to scale up efforts in community-based mental health and psychosocial support (CB MHPSS). Strengthening CB MHPSS reinforces the understanding that even disaster-affected communities, including children and young people, can become active agents in dealing with adversity and protecting and promoting children's overall wellbeing, as such they should be meaningfully involved in all stages of MHPSS efforts.⁵¹ It can help ensure that MHPSS interventions are part of a more strategic psychosocial and mental health approach with the aim of building on existing individual and community resources, capacities, and resilience.52

Entry points for the strengthening of CB MHPSS can include strengthening of care and protective environment for the benefit of all children and families through capacity building and multi-stakeholder collaboration among governments, civil society, professional and other service providers; taking concrete actions to include the most vulnerable children and families in existing and new support and services, intensifying peer support activities, and enabling children and youth led actions.

Pursuing efforts to strengthen CB MHPSS supports the overall strengthening of the broader child protection systems by ensuring not just the resilience of children in emergencies, but also the protective factors in their social and cultural environments. It also helps in linking MHPSS response to recovery and regular, non-humanitarian response programming.⁵³

STRENGTHEN DISABILITY INCLUSION MECHANISMS

It was recognized in both project areas that persons with disabilities, including children, are among the most vulnerable in communities and are disproportionately affected by disasters and child protection risks, compared to other children without disabilities. As discussed in the findings, efforts to include the disability sector in the project structures and mechanisms and involve children with disabilities during the MHPSS sessions were done but ensuring their full and meaningful participation in the project was considered as one of the challenges during the project implementation. Aside from the need for volunteer facilitators to be more equipped in facilitating disability-inclusive MHPSS sessions, the implementing partners also need to have more systematic disability-inclusion strategies for the project.

Specifically, there is a need to better mainstream disability inclusion in the project development cycle. Some specific disability inclusion strategies that TdH NL and its partners can do and strengthen in future interventions include:

- 1. Gathering disability-specific data during project initiation or needs assessment, and initiate partnership with organizations of persons with disabilities (OPDs). 2. Orient the project team on disability inclusion, and identify barriers to participation (e.g., physical, institutional, attitudinal, and information barriers)
- that persons with disabilities may experience in the project, and make sure these are addressed during implementation.
- 3. Include disability inclusion budget to address the cost required to set in place accessibility measures, including budget for carers and personal assistants, and reasonable accommodation.
- 4. Collect disability-disaggregated data for project planning and monitoring and include persons with disabilities and their organizations in the project evaluation.

Source: Bruijn et al. (2012), Christian Blind Mission (2012), & Global Facility for Disaster Risk Reduction and Recovery & World Bank Group (2017)

Aside from children with disabilities, inclusion strategies must also include the identification and inclusion of other vulnerable children such as children in poorer households, children in solo parent-headed households, and children without parental care, among others.

INCLUSION OF LIVELIHOOD SUPPORT

Disasters can have a devastating impact on people's food security and livelihoods, increasing the affected population's socio-economic vulnerability, diminishing their capacities to recover from crises and prepare for future shocks.⁵⁴ The impact of Super

⁵⁴ International Federation of the Red Cross and Red Crescent Societies. (2023). Food Security and Livelihoods. https://www.ifrc.org/our-

⁵¹ Inter-Agency Standing Committee (n.d.). Community-based Approaches to MHPSS Programmes: A Guidance Note.

⁵² United Nations Children's Fund. (2018). Operational Guidelines on Community-based Mental Health and Psychosocial Support in Humanitarian Settings: Three-tiered support for children and families (Field Test Version): New York: United Nations Children's Fund. 53 Ibid

work/disasters-climate-and-crises/food-security-and-livelihoods

Typhoon Rai in Cebu areas and in Borongan City showed how it led to losses among farmers and fisherfolks, while daily laborers in urban communities were unable to work regularly due to long-term power interruption. This then resulted in parental distress, and income shortage that limited the affected family's capability to meet their survival and development needs, including that of children. It was also highlighted that this led some children to stop school to work and help their parents earn a living, thereby making them more prone to abuse and exploitation.

This was further reinforced by respondents from the government, community volunteers and community members who recommended the inclusion of livelihood support in future and similar project interventions. Specifically, they suggested livelihood interventions that may be related to provision of farm inputs, livestock raising, and recycling, among others.

While livelihood support through cash assistance was included in the project, this was mainly done through provision of transportation and meal allowances to training participants from Borongan City. As such, for future programming, TdH NL in the Philippines and its implementing partners may consider livelihoods programming and support, taking into consideration wide ranging contexts including sudden onset disasters (e.g. earthquakes, typhoons and floods), slow onset or chronic disasters (e.g. drought), and complex emergencies where populations suffer the effects of a disaster caused by natural hazards, alongside others.⁵⁵ Short-term strategies may be done through emergency employment schemes and cash transfer mechanisms (e.g., programs on cash for work, food for work, farming support, and cash grant for small businesses); while long-term strategies must focus on ensuring sustainability of livelihood and jobs (e.g. learning of new skills and setting up of business networks).⁵⁶

To maximize the protective effects of livelihood programs among children, it is advisable to work with child protection actors in understanding the context of the community and addressing the potential risk that the livelihood programs present to children and their families. It is important to ensure the inclusion of households where children are particularly at risk, including the provision of safety-net measures such as unconditional cash transfers or food distributions for households that cannot benefit from work programs, such as people with disabilities or with caring responsibilities. There is also a need to be aware of traditional stereotypes around appropriate work for particular genders or groups, as the program seeks to enable beneficiaries to have a choice of what kind of work to do and to have equal access to the most economically promising activities.⁵⁷

INCLUSION OF LIVELIHOOD SUPPORT

Aside from the abovementioned programmatic or intervention-level recommendations, some respondents also shared recommendations pertaining to improving the management and monitoring of future and similar projects. These recommendations include:

1. Streamline organizational workflow and administrative procedures to adapt to emergency context

Donors and humanitarian actors have long strived to find ways to reduce the lag time between the onset of a disaster and the delivery of humanitarian assistance. In the context of the Super Typhoon Rai response project, sharing from the Project Management Team noted a delay in the planned start of the project, from April to May 2022. As noted under the Efficiency section, this partly led to some key activities to be pushed to the next quarter.

One of the factors that contributed to this is that the present project development workflow of TdH NL in the Philippines is not yet adapted to an emergency context. As such, one recommendation from the evaluation is for TdH NL in the Philippines to streamline its organizational workflow and administrative procedures to address existing and potential barriers to rapid response to crises. Areas of work that may be taken into consideration include disaster information management and communication, resource allocation and funding, partnership and coordination, needs assessment and planning, and standby arrangements and pre-positioning of emergency services.⁵⁸ Together with its national and local partners, TdH NL in the Philippines may also pursue efforts to build more flexible grant making and management processes.

2. Establishment of an Emergency Response Fund in TdH NL-supported projects

As previously mentioned, the implementing partners consider it as an enabling factor in the project partnership that TdH NL in the Philippines can mobilize emergency funds for disasters affecting its covered communities such as with Super Typhoon Rai. Access to emergency funds enables TdH NL and its implementing partners to respond to the needs of affected partner communities during disasters and emergency situations, especially in the context of ongoing projects with restricted funding. This is important for a country such as the Philippines where, as mentioned earlier, many areas, including Eastern Samar and Cebu provinces, have high susceptibility to the impacts of various hazards.

⁵⁵ International Federation of the Red Cross and Red Crescent Societies. (2010). IFRC Guidelines for Livelihoods Programming. ⁵⁶ International Federation of the Red Cross and Red Crescent Societies. (2010). IFRC Guidelines for Livelihoods Programming; International

Labor Organization (ILO). (2023). Livelihood Recovery. https://www.ilo.org/manila/info/WCMS_396269/lang--en/index.htm ⁵⁷ Viva. (2022). Livelihood programmes: Integrating child protection. <u>https://childreninemergencies.org/2019/01/14/integrating-child-</u> protection-livelihoods-programmes/

⁵⁸ Fabre, C. (2017). Financing Preparedness: World Humanitarian Summit Putting Policy into Practice. OECD: Paris.

One recommendation resulting from the evaluation is for TDH NL to explore risk financing mechanisms that will help ensure that adequate funds are available to meet its financial needs should a disaster occur in its areas of operation in the Philippines. Such financing can be established internally through the accumulation of funds set aside for future use or obtained externally through pre-arranged credit facilities.⁵⁹ Specifically, it was recommended that TdH NL in the Philippines pursue the establishment of an emergency response fund that can be utilized for purposes such as preparing for an early response and relief operation, preparing local partners for early action, and funding social protection mechanisms for the most vulnerable population during crisis, among others.

This can help support efforts to find new ways of funding and delivering humanitarian assistance and improve the speed and quality of assistance.⁶⁰

3. Improvement in project monitoring and reporting, including tracking and monitoring of referred cases involving the project participants

The implementing partners both noted that they did not encounter any major difficulties in meeting the reporting requirements of the project. However, on the part of TdH NL in the Philippines, the timeliness and completeness of the submitted reports by partners, such as activity and monthly reports, is one area for improvement of the project. To help address this, the Project Management Team formed for the project needs to be maximized for leveling off on reporting requirements, project progress monitoring, and capacities sharing, including in ensuring that documentation requirements for the projects are adequate. TdH NL in the Philippines also suggested for partners to have a systematic way of tracking and monitoring referred cases involving the project participants to better assess the effectiveness of the case referral systems.

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Part 6: Annexes

Annex 1. List of Barangays covered by the Project Annex 2. Key Evaluation Questions Annex 3. List of Evaluation Participants Annex 4. Kll Guide Annex 5. FGD Guide for Child Participants Annex 6. FGD Guide for Adult Participants **Annex 7.** Most Significant Change Stories Annex 8. Summary of PDNA Results Annex 9. Victim-Survivor-Community Referral Annex 10. Case Referral Flow Chart Annex 11. Borongan City Mental Health Program of 2022

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