

DISASTER PREPAREDNESS FOR PREGNANT WOMEN OF SMOKEY MOUNTAIN

MANILA, PHILIPPINES



January – April 2014

With the support of the Foundation Millennia2025 and Connecting Nurses

Introduction

The Foundation Millennia2025 and Connecting Nurses¹ decided to join their efforts and to create the WeObservatory² on September 2012. Innovative nursing projects are selected and benefit of financial, technical and expert support, and extended visibility at international conferences. Radio Podcast project³ developed by AYNLA is part of the selection in 2013, and aims at providing a platform integrated to social media and micro blogging sites to reach nurses and a broad audience.

Since the country has been afflicted by Haiyan Typhoon, the WeObservatory has been willing to provide exceptional support to Radio Podcast project. After an investigation in local communities, AYNLA has proposed to direct the funds in the high-risk area in Manila, instead of supporting an initiative in Haiyan-afflicted areas because of overwhelming support on those areas.

In this project, Smokey Mountain area is chosen as it is disaster-prone and hard to penetrate. Even the Department of Health admits that they cannot penetrate the area to provide health services. Since 2011, AYNLA is seeing first-hand the situation of the area and joined the UN medical mission in 2011.

To date, AYNLA has identified implementing partners at the ground and started with the leg-work such as meeting with local leaders. AYNLA will be conducting a health mission focused on disaster preparedness and provide pregnant women with emergency kits. AYNLA wants to conduct the health promotion missions on March 8 as an activity to celebrate the International Women's Day.

Apart from the Foundation Millennia2025, AYNLA has invited YPEER Pilipinas as main implementing partner. AYNLA encourages more partners to collaborate in this project.

I. Background

Smokey Mountain is a 2 million ton garbage heap, which served as a waste disposal facility of Metro Manila for over 40 years. The garbage dumpsite was home to huge informal settlers, who scavenged through the garbage to survive. It is estimated that 30,000 people live around the dumpsite. The dump has been closed in 1990 but has continued to leak pollution and toxic substances putting the health of residents at risk. The community was created out of necessity, as they continuously create the most out of what is available in the surrounding, no matter how meager it is.

The apparent risk and vulnerability of the area is furthered by the dangers of typhoon. This place is situated along the low-lying coastal shore that can easily be flooded even with moderate rains. During sustained thunderstorms and typhoons, it becomes terribly encrusted with flood displacing thousands of families. In 2011, Manila region and large part of Luzon Island has been damaged by Typhoon Pedring and Quiel. It resulted to destruction of properties and lost lives specifically affecting disaster-prone areas such as the Smokey Mountain.

While recovering in 2012, Metro Manila has been hit again by an eight-day period of sustained torrential rain and thunderstorms. This has led to about 600 families being forced by the

¹ <http://www.connecting-nurses.com/web/>

² http://www.millennia2015.org/WeObs_Selected_Projects

³ http://www.millennia2015.org/Radio_Podcast_for_Nurses

authorities to move to the evacuation camp.

At the start of 2014, although outside of Metro Manila, there have already been two storms that landed in the country causing damage of properties and piling up death tolls. This is amidst the terror and destruction that Typhoon Haiyan has brought in the country last year.

It was said that sustained winds and massive flooding have become the ‘new normal’ in the Philippines. However, much needs to be done to prepare the community in facing this ‘new normal,’ especially the vulnerable groups and those with special needs.

Pregnant women are considered “at-risk individuals” even if it is considered a normal occurrence among women. Disasters such as typhoon add to the risk of pregnancy complications. It disrupts people’s lives, families, and communities. It can also affect access to needed medical and social services, increase stress, intensify physical work, and expand caregiving duties. Any of these effects may result in poor health outcomes among women of reproductive age, especially pregnant women.

With this new norm, pregnant women in disaster-prone areas should presume the possibilities of typhoons and be prepared in facing such circumstances that may bring threat to the child-bearing process.

II. Objectives

This project aims to empower pregnant women to reduce the risks to their lives and health and to their unborn children and/or newborn and develop coping strategies before the immediate impact of the disaster. Several studies have proven that well-informed and educated mothers could save the lives of a family. Thus, this project, if sustained, will indirectly affect the lives of the whole family.

III. Strategy

Emergency preparedness –an act of anticipatory guidance that provides safety information that addresses common risks and help pregnant women to anticipate problems and to plan options (Giarratano, 2010). It focuses on preparing with resources and procedures for use when a disaster occurs. Being prepared for a major disaster is the most effective way to minimize the damage suffered by the affected population (Banerjee and Gillespie 1994).

Targeting groups with special needs– Disasters have been associated with an increase in maternal risk factors among pregnant women, such as hypertensive disorders and anemia, and poor birth outcomes including preterm birth, low birth weight, and intrauterine growth restriction (Center for Disease Control and Prevention, 2012). Equipping pregnant women with right information and resources reduces their risk for complications and possible deaths.

Community Partnership – Partnership is at the heart of each successful effort in the community. No single player can successfully tackle challenges by themselves alone. Partnership with the existing local leaders and social networks is an important step for acceptance by the community. It also maximizes the effectiveness of the program by tapping and integrating local resources and also provides efficient and smoother implementation of the activities by banking on collective efficacy.

IV. Project Site

It is estimated that 30,000 people lived around the Smokey Mountain. Community leaders have revealed that 80% of the community derived their income from waste recycling directly or indirectly, earning approximately 200 pesos (US \$3.50) per day.

The Government ordered the closure of Smokey Mountain dumpsite in the 90s. Former President Corazon Aquino approved a concept plan in 1992 for the National Housing Authority to transform the area into a portside community, including a social housing project for Smokey Mountain communities. To date, twenty one medium-rise housing buildings have been constructed and the communities have been able to move into their new homes. While the new housing program has greatly improved living conditions for some in the area, there is a great concern regarding the exposure of the communities residing in Smokey Mountain to the remaining mountain of waste adjacent to the social housing complex and providing alternative employment opportunities to those who have relied on wastes as source of livelihood.

The garbage heap (*photo credits to the owners*)



Community surrounding the Smokey Mountain (*photo credits to the owners*)



The mountain in the picture is the previous Smokey Mountain, which has been abandoned. It is now surrounded with the housing programs for the community people.



Despite several attempts to provide a decent shelter to the resident of Smokey Mountain, a lot of people still prefer to live by the mountain because scavenging is their main source of living.



Back area of the Smokey Mountain, which is lying along the shore.

V. Activities

There will be three phases for this project, which will enable us to strategically and effectively deliver information by identifying gaps and analyzing the community dynamics. The proposed activities are independent from each other but it is important to note that these will help the project be well-grounded and to take off smoothly.

A. Situation Analysis

- *Preliminary Review of Data Sources.* It contains the needed information related to pregnant mothers such as demographics, health status and health service utilization. Moreover, conducting initial assessment will help us understand the dynamics in the community by identifying existing programs, structural support, social network, and leadership.
- *Focus group discussion.* FGDs will help us obtain preliminary information such as their level of awareness on disaster, health seeking behavior and self-care activities. It will also validate information gathered during secondary data sources.
- *Stakeholders Consultation.* This is to define roles of each stakeholder on the conduct activities:
 - Barangay officials
 - Existing NGOs operating in the area (such as JCI, Gawad Kalinga, etc.)
 - With special focus to the youth organizations and SK officials

B. Health/Nursing Mission

- *Information and Education on Disaster Preparedness.* Raising awareness and motivating women to take action begins with educating women and families to assess their personal and community risks for disaster as well as to know what steps to take that will lessen the impact of disaster during pregnancy.
- *Provision of Humanitarian Kits.* The kit will include clean towels, maternal pads, etc.

C. Monitoring and Evaluation

- *Pre and post test questionnaire.* Pre-test and post-test questionnaires will determine how well they understand the information provided.
- *Follow-up visit.* The post-activity monitoring, which shall be conducted weeks after the health mission, will gauge how effective the conducted activity is. It will also help us identify the areas need to be improved and reinforced.

VI. Log Frame

Activities	Indicators	Subactivities	Timeline												
			Jan		Feb				Mar						
			3rd	4th	1st	2nd	3rd	4th	1st	2nd	3rd	4th			
Community Mapping	Strategy Paper	Preliminary Review of Data Sources	x												
	Minutes of Discussion / Attendance	Courtesy call and initial meeting with community leaders in the community		x											
	Minutes of Discussion / Attendance	Stakeholders consultative discussion				x	x								
	Summary of discussions	Focus Group Discussion					X								
	Final Program	Finalize agenda and outreach plans							x						
Health Mission and Distribution of Kits	itemized list	Finalize listing of kits				x									
	Inventory report	Purchasing of Dignity Kit contents					x	x							
		Packaging and warehousing						x	x						
	Documentation	Conduct of Health Mission and Kit Distribution									x				
Monitoring and Evaluation	Results	Pre-test and post-test									x				
		Post activity follow-up assessment										x			
	Final report	Final Report Submission												x	

VII. Budget Plan

TOTAL GRANT – Foundation Millennia2025 : € 1,500.00 (USD 2,000)

ACTIVITIES	ESTIMATED COST (Php)	ESTIMATED COST (USD 1=45Php)
Community Mapping	10,000	222
Health Mission and Distribution of Kits	70,000	1,556
Monitoring, Evaluation and Reporting	5,000	111
Contingency fund	5,000	111
TOTAL	Php 90,000	USD 2,000