

NETWORK FORMATION IN THE TIME OF THE PANDEMIC

THE EXPERIENCE OF THE CITIZEN'S URGENT RESPONSE TO END COVID-19 (CURE COVID)

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Abstract

The outbreak of the COVID-19 pandemic in the Philippines and the imposition of various levels of lockdowns since 16 March 2020 resulted in the loss of already limited income of many Filipinos and an exponential increase in the number of communities and people needing assistance.

The pandemic, the prolonged lockdown and health protocols limiting people's mobility and gathering, and the ensuing economic and health problems required new forms of community engagement and mobilization. Using exploratory case study as research methodology, this paper focuses on the experience of the Citizen's Urgent Response to End COVID-19 (CURE COVID) in creating and sustaining a network of community organizations, groups, and individuals aimed at building social solidarity in the time of the pandemic.

Keywords: COVID-19 pandemic, network building, militarized response, social solidarity, social media

Introduction

From 15 March 2020 up to this writing (February 2021), the National Capital Region has been under varying degrees of lockdown due to the COVID-19 pandemic. The lockdown under such names as Enhanced Community Quarantine, General Community Quarantine, and their modified versions limited people's mobility, required the

observance of health protocols such as the use of face masks, frequent handwashing, physical distancing, and set limits on people getting together. Police and military personnel were mobilized to make sure that these prohibitions and safety protocols were observed. Under these circumstances, organizing and mobilizing communities to respond to the pandemic created new challenges.

This paper aims principally to document the experience of CURE COVID as a network of community and development organizations, groups, and individuals to address concerns related to the COVID-19 pandemic under conditions of lockdown, limited government assistance, and state repression; and to draw lessons from network-building in the time of the pandemic. More specifically, it will:

1. relate the network's formation;
2. share the relief activities of the CURE COVID network and its campaigns against repression and harassment that accompanied the lockdown protocols;
3. describe the media/public briefings of the network as a means to pursue a participatory response to COVID-19 and discuss, through grassroots perspectives, the health, economic, and education crises brought about by the pandemic; and
4. draw insights from the experiences of CURE COVID in network building in the time of a pandemic.

The paper adopts an exploratory case study methodology as it provides an initial documentation and analysis of the case of CURE COVID as a network established in response to the challenges of the pandemic.

The framework of networking as a strategy for broadening the reach and impact of organizations and individuals is used in analyzing the experience of the CURE COVID network. Networking is defined as “a matter of creating useful linkages, both within and among communities, organizations, and societies, in order to mobilize resources and achieve various goals” (Maiese, 2005). It is...

an important component of community organizing. This requires that diverse members of the population build relationships, share resources, and work together in an organized way for social change... It is a matter of forging connections with other individuals or groups who face similar problems and issues and want to work together toward solutions. These social connections allow individuals, groups, and organizations to find allies, access tools, share practical wisdom, and build collaborative strategies. Networking thus helps those working for social change to share resources and information, devise an agenda, and engage in collective action within their society. (Maiese, 2005)

The idea of networking is made particularly potent by the context of the COVID-19 pandemic, which prescribed home quarantine, physical distancing, and the wearing of masks as the main strategies for managing the transmission of the virus. The isolation that these health protocols imposed on individuals intensified further the need for a sense of community and togetherness, consequently activating social media networks as the primary means of communication and network-building among Filipino citizens.

Certainly, an important impetus for CURE COVID's networking strategy was the democratic and democratizing potential of social media. While hotly debated and critiqued as it opens up the public sphere to a multiplicity of voices at the same time that it fosters social fragmentation and a "networked individualism" (Wellman, cited in Loader & Mercea, 2011, p. 762), social media networking remains a potent avenue for vibrant critical discourse. This is especially true in the Philippines where, less than two months into an ill-managed and severely militarized pandemic response, ABS-CBN, one of only two of the biggest media corporations in the country lost its media franchise in what is widely perceived as an orchestrated shutdown by the Philippine Congress on a network that has sustained a famously critical stance against the Duterte administration. This crackdown on press freedom necessitated further the activation of alternative media outfits and the harnessing of social media networks as a mobilization strategy to reach and to consolidate communities fragmented by quarantine protocols. Such a strategy "foreground[s] the empowerment of prospective participants by harnessing the collaborative capacity of social media" toward "a more participatory political culture" (Loader & Mercea, 2011, pp. 762, 764) amid an increasingly repressive and intolerant state.

Indeed, despite the limits of social media democracy, it remains clear that...

the most obvious impact of social media upon democratic politics has been its disruptive capacity for traditional political practices and institutions. Divisions have become blurred, for example, between mainstream news media increasingly reliant upon political blogs and citizens-user content. (Loader & Mercea 2011, p. 762)

In order to unpack how the CURE COVID network capitalized on “user-generated democracy” enabled by the social media platform, this paper gathers data primarily from document review, participant observation, and data analytics. The authors form part of the CURE COVID network and are volunteer members of its Public Briefing Team, the group in charge of organizing the network’s online briefings. The writers’ participation in the network enabled their engagement with grassroots communities even in the time of the pandemic.

As Law (2020) discusses in his article, “Doing community engagement differently in the time of the pandemic,” universities and academics have had to “think outside the box” in order to teach, research, and engage with their students and other communities because of the restrictions imposed by the health crisis. For the writers, who collaborated in this network and the writing of this paper from each one’s own disciplinary strengths—Development Studies, Literary and Media Studies, and Business Administration—the engagement has been a multifold practice: ethical, political, intellectual, and academic. Law writes, “Through engagement...academics and researchers will be able to produce relevant knowledge and resources the world needs in response to the uncertain time” (p. 1).

In this spirit, the network’s public media briefings were conducted through Zoom and Facebook—the social media website of choice in the Philippines because it can be accessed for free in the region. Using the Facebook Insights tool, data from 16 March 2020 (the creation of the CURE COVID Facebook Page) to 07 October 2020 (the date of the last regular online briefing before a brief hiatus) was extracted from the page insights on 06 February 2021. The paper examines this data using Pearson’s correlation coefficient to determine trends and draw insights from them to substantiate a descriptive and diagnostic analysis.

The formation of the network

Prior to the formation of the CURE COVID network, civil society organizations, people's organizations, labor unions, student organizations, churches, and many other civic groups and individuals had banded together initially to extend direct help in the form of relief goods to people and communities most vulnerable to the pandemic and the resulting economic hardships brought by the lockdown.¹ Picking up quickly on these broadening efforts, as early as 17 March 2020, the Citizen's Urgent Response to End COVID-19 (CURE COVID) acted as a coordinating platform to bring together various groups and individuals.

The CURE COVID Facebook Page describes the network in Filipino:

isang people's initiative ng iba't ibang komunidad at sektor bilang tugon sa pandemyang COVID-19 at sa epekto nito sa kalusugan at kabuhayan ng mga nasabing komunidad at sektor. Isinasabuhay ng CURE COVID ang panawagang batayang serbisyong panlipunan para sa lahat at walang dapat maiiwan na di protektado mula sa sakit at sa mga hakbang para arestuhin ang pagkalat nito. Naglulunsad ang CURE COVID ng information drive, mga community-based initiatives para mapalakas ang kapasidad pangkalusugan, at adbokasiya para sa mga interes at kagalingan ng mamamayan.

a people's initiative by various communities and sectors in response to the COVID-19 pandemic and its effects on the health and livelihood of these communities and sectors. CURE COVID translates into practice its calls for basic social services for all, for no one to be left without protection from the virus, and for steps to be taken to arrest its spread. It launches information drives, community-based initiatives to strengthen health capacity, and advocacies for the interest and welfare of the people.

The first online network meeting was held on 30 April 2020. Attended by 61 individuals representing 14 organizations, and including people across multiple sectors—development workers, artists, teachers, educators, legal professionals, health care workers, and public personalities—the meeting adopted the framework of a comprehensive, effective, humane, and participatory approach to COVID-19 and a seven-point agenda comprising of demands for free mass testing, assiduous

contact tracing, free quarantine facilities, full support to frontline health workers, assured free or subsidized treatment for COVID-19 patients, increased and timely social protection and amelioration programs, a comprehensive and calibrated post-lockdown plan, and respect for and protection of civil liberties and human rights at all times (see Appendix).

It was during this meeting that the suggestion for holding media/public briefings was made and adopted. However, true to its commitment to pursuing a “comprehensive” and “participatory” approach to COVID-19, formations in CURE COVID network still persisted with various on-ground relief operations and multi-platform information dissemination and campaigning. The public briefings became a means to present these grassroots efforts as counter-narratives to the state’s dominant discourse about the pandemic—a matter to be discussed further in this paper.

Relief assistance to communities and groups²

After the first COVID case in the Philippines was confirmed on 30 January 2020, it was not until March 12, almost two weeks and 51 more cases later, that President Rodrigo Duterte announced a partial lockdown in Metro Manila starting midnight of 15 March 2020. This announcement gave communities less than three days to prepare for the hard restrictions on mobility, including almost total work stoppage and the disallowance of public commute. Mass panic spread as people struggled to find means to stockpile food, to secure money and resources, or to return home to their provinces or travel where they would be more likely to survive the lockdown.

During this time, churches, people’s organizations, and private groups and individuals immediately acted to provide relief to vulnerable communities and sectors. In NCR, with its dense population of almost 13 million people congested in massive urban communities that made viral transmission especially dangerous, it was not until 01 June 2020 that a General Community Quarantine (GCQ) was put in place to allow partial resumption of work.

By March 17, the CURE COVID network had begun to operate, consolidating efforts of individual organizations through their social media page and launching a series of information campaigns.

The relief arm of the National Council of Churches in the Philippines (NCCP), *Damayang Simbahan sa Panahon ng Disaster* or DAMBANA, was particularly quick to respond, giving relief and assistance from 15 March 2020, the day before the implementation of the ECQ. They reasoned, from their years of experience as emergency responders, that there were two things the millions of poor and daily wage earners were certain to experience during the quarantine: the uncertainty of food supply and the certainty of hunger. Knowing relief from the government would not be swift and that food packs, when they did arrive, would only last for three to four days, DAMBANA wrote of giving relief in their unpublished report:

What the organizations and individuals gave are not alms, but an apportionment from the resources received and freely given without expecting any return, not even a plaque of appreciation. They generously give because it is their expression of solidarity with no patronage string attached, nor a notion of indebtedness.

The prohibition on travel, the absence of public transportation, and the sudden closure of workplaces and schools resulted in the dislocation and displacement of many people in NCR and even in other urban areas. Hence, displaced workers, drivers, and students were the immediate beneficiaries of relief operations.

On April 16, Public Utility Vehicle (PUV) drivers in Cubao received food and hygiene packs from DAMBANA. Each food pack contained five kilos of rice, one kilo of fish, one kilo of mung beans, one liter of cooking oil, one kilo of sugar, half kilo of salt, and three canned goods, while each of the hygiene kits had two pieces of bath soap (60 grams), one laundry soap bar (300 grams), three sachets of toothpaste, one roll of tissue paper, and one bottle of chlorine (350 ml).

Progressive political groups were also quick to assist vulnerable communities at the onset of the lockdown. *Tulong Anakpawis* of the Anakpawis Party-list provided immediate food assistance of 100 kilos of rice, chicken meat, and *longganisa* to around 90 displaced construction workers in Parañaque who had lost their jobs and had not received any relief from the Department of Labor and Employment (DOLE) or the Department of Social Welfare and Development (DSWD). Displaced public transportation drivers were helped by the Southern Tagalog Serve the People Corps and by the Gabriela Women's Party

in Marikina. Displaced workers were assisted in accessing government assistance through hotlines set up in NCR by Defend Jobs Philippines and in Region XI by Kilusang Mayo Uno (KMU). Later in May, the Kontra Gutom arm of KMU also distributed food packs to 200 stranded workers in Turbina, Calamba.

Students who were stranded when the schools suddenly closed were also immediately identified for relief. The University of the Philippines' workers union helped *lumad* children in the *bakwit* school in Diliman, while in Baguio City and Benguet, the Serve the People Brigade Cordillera Disaster Response Network delivered food relief to 628 families and 61 stranded students.

Assistance was also extended to urban and rural poor communities, indigenous peoples, persons with disabilities (PWDs), senior citizens, solo parents, and political prisoners. Sagip Kanayunan and Tulong Anakpawis, the relief arms of peasant organizations, provided assistance to 2,689 families from 25 March to 23 April 2020. The total amount of PhP306,400.00 solicited during this period was used to distribute 2,094 relief packs and serve 595 hot meals in rural communities in Isabela, Cagayan, Bulacan, Bataan, Cavite, Rizal, Sorsogon, and Camarines Sur.

NCCP also provided food packs for the Community Kitchen of Sitio San Roque in Quezon City: several cavans of rice, trays of eggs, dried fish, mung beans, salt, sugar, canned food, and cooking oil. Hygiene kits containing bath soap, detergent, rubbing alcohol, disinfectant cleaning solutions, and face masks were also distributed. In addition, cash donations were given to families whose homes had been demolished and were living along the railroad tracks in Sampaloc, Manila through Bayang Matulungin volunteers.

Fisherfolk organization PAMALAKAYA and environment network Kalikasan collaborated to provide 250 food packs to members of the Alyansa ng mga Mandaragat sa Bacoor in Cavite. Each pack contained eight kilos of rice, half a kilo of eggplant, a piece of *puso ng saging* (banana heart), two pieces of bitter melon, a fourth of squash, five pieces of banana, and a bundle of string beans.

The relief arm of the Alliance of Concerned Teachers (ACT), Tulong Guro, gathered sufficient donations from its members to provide assistance of cooked food or vegetable packs to over 350 urban poor families

in Quezon City and Tondo. It also extended assistance to the *bakwit* school of *lumad* students, stranded construction workers in the Ateneo de Manila University, and street dwellers in Quezon City.

Assistance to frontline workers in hospitals, checkpoints, and barangays was also another area of relief work. Tulong Guro distributed to 16 hospitals in five Metro Manila cities personal protection equipment or PPEs (1,306), N95 masks (1,172), surgical face masks (2,040), face shields (1,316), surgical gloves (2,700 pairs), ten gallons of alcohol, 192 bottles of mineral water, and 120 rolls of tissue paper. They also donated to six barangay checkpoints face shields, face masks, bottles of water, and supplies of alcohol. Tulong Guro also donated seven units of pulse oxymeters to San Lazaro Hospital. Meanwhile, Tulong Kabataan of the Kabataan Party-list donated face shields to barangay health workers in four barangays in Manila. In Central Luzon, the Central Luzon Disaster Response Network (CLDRN) extended food assistance to vulnerable communities and PPEs to frontline workers in all provinces of the region.

In Baguio, the Health for the People Brigade distributed at least 195 sets of PPEs to personnel of two police checkpoints, and to health workers, volunteers, and other frontline workers in seven barangays. Packs of Vitamin C were also distributed to 17 families and 63 packs of multivitamins to high-risk individuals such as the elderly, children, and persons with medical conditions.

Striving to provide not only economic assistance but also informational campaigns to keep communities clean and safe, COURAGE, the organization of government workers, apart from setting up a community kitchen in Brgy. Batasan Hills in Quezon City, distributed 1,000 bars of soap and launched a Bayanihang Paglilinis in a barangay in Navotas on 11 and 15 May 2020.

Damayang Migrante also held several missions from 01 to 10 May 2020 to distribute hygiene kits and pocket wifi to stranded Overseas Filipino Workers (OFWs) in Manila and Pasay.

Campaigns against repression and harassment

The response of the President and Commander-in-Chief of the Armed Forces of the Philippines, Duterte, and his administration to the COVID-19 pandemic can be described as akin to his infamous “Drug

War”: treating a health issue as a peace and order issue. Curato (2021) describes this succinctly:

The police were among the most visible front-liners enforcing curfew and social distancing policies with punitive measures. Protesters were dispersed and arrested with the police wearing full battle gear. Military tanks were deployed in Cebu City to communicate strict lockdown policies. A little over a month since Manila went on lockdown, over 30,000 people were arrested for breaking quarantine restrictions. Cases of police brutality surfaced. Some violators were locked in dog cages while others were made to sit under the sun. The tone from the top guarantees impunity for the state’s security forces. “Shoot them dead” was the president’s order for violators, just like the “permission to kill” in the drug war.

People’s organizations, churches, groups, and individuals providing relief and economic assistance during the pandemic were not spared from harassment and attacks. Some members of the Serve the People Brigade and Health for the People Brigade who were at the forefront of relief work in Baguio and Benguet were attacked through social media, because affiliate groups such as the Cordillera Peoples Alliance (CPA) and Anakbayan Cordillera had been vocal in critiquing and recommending alternative grassroots strategies to the government’s pandemic response, particularly emphasizing the call for medical solutions and economic aid in lieu of militaristic approaches to the crisis.

Harassment was not limited to online red-tagging of critical groups and relief efforts. On 30 April 2020, Jory Porquia, a long-time activist and coordinator for the progressive mass organization Bayan Muna, who was in the midst of setting up feeding programs for vulnerable communities in Iloilo City during the pandemic, was shot to death inside his house (Bajo, 2020).

The crackdown on critical and dissenting voices furthermore resulted in systematic efforts to stifle or discredit media organizations and the free press. As previously mentioned, on 04 May 2020, the congressional franchise of one of the largest television networks in the country, ABS-CBN, expired and was subsequently denied renewal on 10 July 2020. On social media, troll farms plagued citizens’ campaigns for mass testing, government transparency in the use of funds, government accountability

in the delivery of economic aid, and accuracy in the monitoring and reporting of COVID-19 statistics. By 03 July 2020, the President had signed the Anti-Terrorism Act of 2020 (Republic Act No. 11479), which had been vigorously protested against by citizens, lawmakers, lawyers, and even some of its own authors for its too-broad definition of “terrorism” and unconstitutional authorization of illegal detention of suspected “terrorists.”

CURE COVID participated in online protests to demand an end to the militaristic solutions being implemented to manage the transmission of the virus and called on the government to treat the COVID-19 pandemic as a primarily health and social crisis rather than a peace and order problem. The hashtags #SolusyongMedikalHindiMilitar and #TulongHindiKulong were some of the messages used online. Network members also joined the first large physical protest action since the March 2020 lockdown: the Independence Day mobilization on 12 June 2020 held in the University of the Philippines Diliman. Renamed as a Grand Mañanita, this was a protest against the railroading of the severely problematic and unconstitutional Anti-Terrorism Bill and the blatant disregard of lockdown protocols by then Philippine National Police-National Capital Region Chief Maj. Gen. Debold Sinas (Gonzales, 2020). Petitioners to the Supreme Court questioning the constitutionality of the Anti-Terrorism Act when it was adopted and came into law also included members of the network. Members also joined the motorcade on July 18 from Makati to Sgt. Esguerra St. in Quezon City to protest the closure of ABS-CBN (ANC 24/7, 2020).

Public briefings for information dissemination

To address the escalating disinformation and misinformation online, from 08 May until 07 October 2020, the CURE COVID network conducted weekly public briefings to disseminate timely and relevant information regarding issues at the time of the COVID pandemic. These public briefings were conducted via online platforms, such as Zoom and Facebook livestream, to enable a wider audience to view and access the briefings.

The briefings featured marginalized voices from the grassroots and frontlines to provide counter-narratives to the predominant state discourse on the pandemic. It also focused on topics that covered the range of medical, economic, political, and sociocultural issues that needed to be addressed in the pandemic response, including health concerns, economic questions, statistical nuancing, school policies, social discrimination, and so forth.

After the 07 October 2020 briefing, the network decided to discontinue the regular schedule and instead hold public briefings as the need arose.

To evaluate the extent to which the public briefings had served their purpose to provide timely and relevant information on COVID-19 issues, the CURE COVID page’s metrics on video views, reach, and engagements, as well as the coverage of major news outlets on the public briefings, were gathered and analyzed.

From May until October, a total of 27 public briefings were conducted. All were livestreamed on Facebook except for the public briefing on 27 May 2020 titled “*Anyare sa ayuda?*” This briefing was livestreamed on the personal Facebook Page of one of CURE COVID-19 network’s members. Since the Facebook Page Insights data for the said briefing cannot be obtained, the said briefing was not included in the data analysis. A complete list of the public briefings, together with the details and a short description for each, may be found in Table 1.

Table 1
Complete List of CURE COVID Public Briefings from 08 May to 07 October 2020

Topic	Date	Panelists
<p>Are we really flattening the curve?</p> <p>Description: A discussion on the projected continuous increase of COVID-19 cases.</p>	08 May 2020	<ul style="list-style-type: none"> • Julie Caguiat, MD (Coalition for People’s Right to Health) • Felix P. Muga III, PhD (Ateneo de Manila Math Department) • Judy M. Taguiwalo, PhD (Former DSWD Secretary)
<p>Are we ready to lift the ECQ?</p> <p>Description: A discussion of the risks of easing quarantine protocols.</p>	12 May 2020	<ul style="list-style-type: none"> • Joshua Danac (Scientists Unite Against COVID-19) • Paul Quintos (UP NCPAG) • Thadz Ifurung (DEFEND Jobs PH)
<p>Will our “new normal” be a better normal?</p> <p>Description: A discussion on the state of the economy at the time of the pandemic.</p>	15 May 2020	<ul style="list-style-type: none"> • Prof. Joseph Lim (Department of Economics, Ateneo de Manila University) • Rosario Guzman (Head Researcher, IBON Foundation) • Atty. Terry Ridon (Former Chairperson, Presidential Commission on the Urban Poor)

Balik trabaho blues	20 May 2020	<ul style="list-style-type: none"> • Atty. Sonny Matula (Federation of Free Workers) • Debbie Faigmani (Drug, Food and Allied Workers Federation) • Nadia de Leon (Institute for Occupational Health and Safety) • Sandy Hachasco (Malayang Alyansa ng Bus Employees at Laborers)
Description: A discussion on the risks brought by COVID-19 on health and job security for workers.		
Balik eskwela: Handa na ba tayo?	22 May 2020	<ul style="list-style-type: none"> • Rep. Sarah Elago (Kabataan Partylist) • Prof. Michael Tan (Former Chancellor, UP Diliman) • Raymond Basilio (Secretary General, Alliance of Concerned Teachers) • Dr. Cynthia Cuayo-Juico (Pediatrician, Manila Doctors Hospital)
Description: An evaluation of how unprepared the education sector was for the reopening of classes due to lack of government assistance.		
Anyare sa ayuda?	27 May 2020	<ul style="list-style-type: none"> • JC Punongbayan (UP School of Economics) • Malou Turalde (Former DSWD Undersecretary) • Sonny Africa (Executive Director, IBON Foundation)
Description: A discussion on the lack of relief and financial assistance from the government.		
GCQ: Bahala na, kanya-kanya na ba?	29 May 2020	<ul style="list-style-type: none"> • Brgy. Kagawad Libby Dipon (Brgy. Kagawad, Brgy. IVC, Marikina) • Ricky Indicio (Kadamay San Roque) • Brgy. Kagawad Phil Tiozon (Brgy. Kagawad, Tondo, Manila) • Katrina Stuart Santiago (People for Accountable Governance & Sustainable Action)
Description: A discussion of the experiences of different barangays on the government's dismal relief efforts.		
Online blended learning: Kaya na ba?	03 June 2020	<ul style="list-style-type: none"> • Prof. Mercedes Arzadon (UP College of Education) • Roel Mape (Grade 5 Science teacher in QC) • Ninay Festin-Tan (Parent) • KJ Catequista (Parent)
Description: A discussion on the issues of remote learning setups necessitated by the health policies on community quarantines and physical distancing.		

<p>Are we helping our MSMEs enough?</p> <p>Description: A discussion on how the pandemic has affected micro, small, and medium-sized businesses, even resulting in the closure of some.</p>	<p>05 June 2020</p>	<ul style="list-style-type: none"> • Alex Aquino (Responsible Investment for Solidarity and Empowerment) • Waya Araos-Wijangco (Restaurant and school owner) • Jose Lapira (Lily Pad Digital Solutions) • Raia dela Peña (Sinag Publishing and Printing Services)
<p><i>Paano na ang ibang pasyente?</i></p> <p>Description: A discussion on how patients other than those infected by COVID-19 were affected by quarantine policies and the hospitals' being at near-full capacity.</p>	<p>10 June 2020</p>	<ul style="list-style-type: none"> • Dr. Pauly Jean B. Rosell-Ubia (Former DOH Secretary) • Prof. Edward V. Deveza (Chair, Tahanan ng Pag-asa) • Patricia Santos (Researcher, mother of six-month old son) • Victoria Lavado (Relative of a patient with heart and renal illness)
<p>Explaining COVID-19's confusing numbers</p> <p>Description: An assessment of the inaccuracy of the data being released by the Department of Health (DOH) on COVID-19 cases.</p>	<p>17 June 2020</p>	<ul style="list-style-type: none"> • Prof. Lex Muga (Math Department, Ateneo de Manila University) • Joshua Miguel Danac (Science Research Specialist, University of the Philippines) • Dr. Joshua San Pedro (Coalition for the People's Right to Health)
<p>Where are we 100 days into the lockdown?</p> <p>Description: An assessment of the government efforts after 100 days of community lockdown.</p>	<p>24 June 2020</p>	<ul style="list-style-type: none"> • Dr. Giovanni Tapang (Dean, UP College of Science) • Dr. Gene Nisperos (UP College of Medicine) • Sonny Africa (Executive Director, IBON Foundation)
<p><i>Balik-Pasada</i></p> <p>Description: A discussion on the difficulties of the public transportation sector due to the government's lack of support.</p>	<p>01 July 2020</p>	<ul style="list-style-type: none"> • Dr. Emmanuel Luna (Social Scientist, UP National Center for Transportation Studies) • Mody Floranda (Pagkakaisa ng mga Samahan ng mga Tsuper at Operator Nationwide - PISTON) • Sandy Hachasco (Head Convenor, Malayang Alyansa ng Bus Employees at Laborers)

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| <p>The case for mass testing</p> <p>Description: A discussion on what mass testing is and how it would help in containing the spread of COVID-19.</p> | <p>08 July 2020</p> | <ul style="list-style-type: none"> • Dr. Joshua San Pedro (Co-convenor, Coalition for the People's Right to Health) • Joanna Concepcion (Chairperson, Migrante International) • Jang Monte Hernandez (Secretary General, Gabriela Women's Party) • Debbie Faigmani (Secretary General, Drug and Food Alliance-Kilusang Mayo Uno) • Atty. Melanie Pinlac (Vice Chairperson, NUPL-NCR) |
| <p><i>Kumusta ang mga bagong bayani?</i></p> <p>Description: A discussion on how overseas workers were dealing with the pandemic away from their families.</p> | <p>15 July 2020</p> | <ul style="list-style-type: none"> • Dolores Balladares Pelaez (Migrante-Hong Kong) • Marlon Gatdula (Migrante-Kingdom of Saudi Arabia) • Alex Aquino (Chairperson, CARD HK Foundation) • Atty. Edwin dela Cruz (President, International Seafarers Action Center) |
| <p>#SONApanoNA COVID response?</p> <p>Description: A discussion on the ineffectiveness of the government's militaristic approach toward handling COVID-19.</p> | <p>22 July 2020</p> | <ul style="list-style-type: none"> • Dr. Joshua San Pedro (Coalition for People's Right to Health) • Prof. Michael Tan (Former Chancellor, UP Diliman) • Dr. Edelina dela Paz, MD (Health Alliance for Democracy) • Assoc. Prof. Ma. Corazon Jimenez-Tan (CSWCD, UP Diliman) |
| <p>#SONAkinig tayo. Anong napala natin?</p> <p>Description: An assessment of the president's report in his 2020 State of the Nation Address (SONA).</p> | <p>29 July 2020</p> | <ul style="list-style-type: none"> • Prof. Carl Ramota (UP Manila Social Science Department) • Dr. Lopao Medina (UP College of Medicine) • Aling Marie Dinglasan (Aling Marie FB Page) • Prof. Judy Taguiwalo (CURE COVID Spokesperson) |
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<p>Do we need a timeout or a game change?</p> <p>Description: A discussion on how hospitals were being overwhelmed by the continuous increase in COVID-19 cases.</p>	<p>05 August 2020</p>	<ul style="list-style-type: none"> • Maristela Abenojar, RN (Filipino Nurses United) • Rep. Carlos Zarate (Bayan Muna Partylist) • Dr. Oliver Gimenez, MD (Community Medicine Practitioners & Advocates Assoc.) • Julie Caguait, MD (CURE COVID Spokesperson)
<p><i>Dapang-dapang ekonomiya: Paano tayong makakabangon?</i></p> <p>Description: An evaluation of how the government was spending its budget towards COVID-19 response.</p>	<p>12 August 2020</p>	<ul style="list-style-type: none"> • Noel Leyco (President, Pamantasan ng Lungsod ng Maynila) • Kenneth Abante (Citizens' Budget Tracker) • Liza Maza (Former Lead Convenor, National Anti-Poverty Commission) • Eleanor de Guzman (Human Rights Secretary, Kilusang Mayo Uno)
<p>Preparing for the Oct. 5 School Opening</p> <p>Description: A discussion on calls for a safe, quality, and accessible education for everyone in the time of pandemic.</p>	<p>19 August 2020</p>	<ul style="list-style-type: none"> • Raymond Basilio (Secretary General, Alliance of Concerned Teachers) • Joel Pablo Salud (Journalist, Author, Parent) • Dr. Cynthia Cuayo-Juico (Pediatrician, Manila Doctors Hospital) • Wilfredo Rodriguez (President, National Parent-Teachers' Association) • Rep. France Castro (ACT Teachers Party-list) • Cong. Alfred Vargas (Reactor) • Cong. Precious Hipolito-Castelo (Reactor) • Coun. Winnie Castelo (Reactor)

<p>Overcoming stigma and discrimination in the time of COVID-19</p>	<p>26 August 2020</p>	<ul style="list-style-type: none"> • Bibeth Orteza (Actor, Writer, Director) • Lita Malundras (Community daycare teacher) • Dr. Reggie Pamugas (Vice-Chairperson, Health Action for Human Rights) • Kristine Tomanan, RN (Asst. Prof., UP Manila College of Nursing)
<p>Description: A discussion on how COVID-19 patients, frontline workers, and their families cope with stigma and discrimination.</p>		
<p>Coping with COVID from private lives to public concerns</p>	<p>02 September 2020</p>	<ul style="list-style-type: none"> • Iza Calzado (Actor, COVID-19 survivor) • Ron Magbuhos (Development worker, documentary filmmaker, COVID-19 survivor) • Casey Cruz (Spokesperson, Bayan-ST, daughter of frontliner who died of COVID-19) • Dr. Joshua San Pedro (Coalition for People’s Right to Health)
<p>Description: A discussion on the struggles and experiences of COVID-19 survivors from being infected with the virus.</p>		
<p>Quo Vadis, PhilHealth?: Exploring alternatives to the failing health insurance system</p>	<p>09 September 2020</p>	<ul style="list-style-type: none"> • Prof. Michael Tan (Medical anthropologist, Former UP Diliman Chancellor) • Prof. Reginald Vallejos (SUKI spokesperson, Coordinator/Head, Development Studies Program, UP Manila) • Ramon Paterno, MD (Member, Universal Health Care Study Group, UP Manila) • Albert Pascual (Secretary-General, Health Alliance for Democracy)
<p>Description: A discussion on the inefficiencies of the current Philippine Health Insurance Corporation (PhilHealth).</p>		
<p>2021 health budget at COVID-19 stimulus package: <i>Sapat na ba para sa new normal?</i></p>	<p>16 September 2020</p>	<ul style="list-style-type: none"> • Sonny Africa (Executive Director, IBON Foundation) • Rep. Stella Quimbo (2nd District, Marikina City) • Robert Mendoza (National President, Alliance of Health Workers)
<p>Description: An evaluation of the pending proposals on the health budget and the Bayanihan to Recover as One Act, or Bayanihan 2, stimulus package.</p>		

<p>Dissecting the SC decision denying the mandamus petition for mass testing</p> <p>Description: A discussion of the implications of the denial of the mandamus petition for mass testing.</p>	<p>23 September 2020</p>	<ul style="list-style-type: none"> • Atty. Theodore Te (Free Legal Assistance Group) • Dr. Joshua San Pedro (Coalition for People’s Right to Health) • Atty. Melanie Pinlac (National Union of People’s Lawyers - NCR) • Rey Valmores-Salinas (Bahaghari spokesperson, Molecular biologist and petitioner)
<p>COVID-19 in our jails</p> <p>Description: A discussion on the mishandling of COVID cases in jails that quarantine arrests have been steadily filling up.</p>	<p>30 September 2020</p>	<ul style="list-style-type: none"> • Atty. Tony La Viña (Human rights lawyer) • Atty. Ephraim B. Cortez (Secretary General, National Union of People’s Lawyers) • Fides Lim (Spokesperson, KAPATID-Families and Friends of Political Prisoners) • Dr. Reggie Pamugas (Vice-Chairperson, Health Action for Human Rights)
<p>State of pandemic denial in the 2021 budget</p> <p>Description: A discussion of how the government did not prioritize COVID-19 responses on health, education, and the economy in the 2021 proposed budget.</p>	<p>07 October 2020</p>	<ul style="list-style-type: none"> • Teddy Casiño (People’s Budget Campaign) • Rep. Sarah Elago (Kabataan Partylist) • Kenneth Abante (Move as One Coalition) • Maristela Abenojar, RN (Filipino Nurses United)

The topic for each public briefing was conceptualized, deliberated, and decided upon by the members of the CURE COVID network based on pressing issues and concerns on health, education, the economy, and public administration at the time of the pandemic. The network then invited panelists from different sectors and organizations to narrate their experiences regarding the issues brought by the pandemic. Experts and professionals were also invited to present data and insights on the experiences shared by other panelists.

To show how effective the public briefings were in engaging the viewers, a Pearson correlation coefficient test was done between the metrics of lifetime engaged users (i.e., the number of unique users who engaged with the post in certain ways, such as commenting, liking, sharing, or clicking the post) and the lifetime unique video views solely from the network's page. From this test, a correlation coefficient value of 79.66% was determined. This suggests that an increase in the number of unique video views on the briefing is coupled with an increase in the number of likes, shares, comments, and other engagements, affirming that the briefings had a significant impact on people's level of engagement with the page itself.

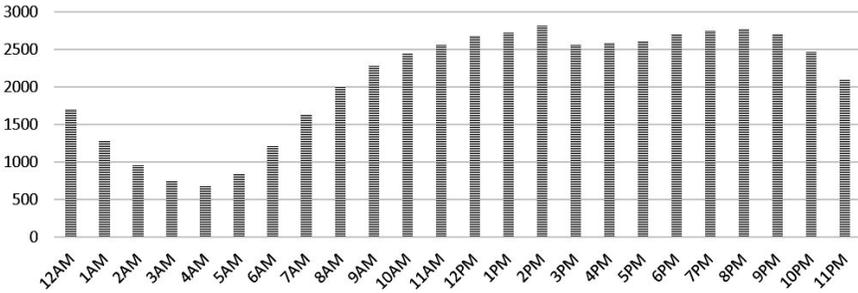
Once a topic for the public briefing had been finalized by the network and the availability of the invited panelists had been confirmed, a poster announcement and media invitation was posted on the network's Facebook Page. There was no strict schedule observed by the network in posting these announcements since some topics that were deemed urgent were scheduled as soon as possible. As noted from the CURE COVID's Facebook Page historical data, the time interval between the announcement and the livestream of the public briefing ranged from approximately two hours to over three days before the start of the briefing.

Nonetheless, an observation from the collected data suggests that there is no significant linear relationship between the number of peak live viewers (i.e., the maximum number of live viewers on a public briefing video) and how early the public briefing's announcement was made. A Pearson correlation coefficient test was done between the number of peak live views and the earliness of the announcement of the briefing. From this, a correlation coefficient value of 10.05% was found. This value suggests that the peak live views of each public briefing video on Facebook were not significantly affected by how early the public briefing announcement was made. Despite this, it may still have been better if a fixed time for posting public briefing announcements was observed for the CURE COVID page, especially if the fixed time set for posting was within the hours when most of the network's followers are online and active.

Based on the data collected, the time when most of the followers of the page are online on Facebook is around 2:00 p.m. (see Table 2). Hence, all public briefings of the CURE COVID network were scheduled to start at 2:00 p.m. and each had a 90-minute running time. However, there were some instances where the briefings were extended for at most 30 minutes to accommodate questions from participants.

Table 2

Average Daily Liked and Online (i.e., the number of people who liked the CURE COVID Facebook Page and when they were online) from 16 March to 07 October 2020



To further increase reach, the CURE COVID network invited different media outfits to every public briefing for coverage. In at least four instances, the briefings were quoted in major newspapers. The first was the public briefing, “Are we really flattening the curve?” where Dr. Felix P. Muga, a mathematics professor from Ateneo de Manila University, debunked the claims of the DOH that the country had already succeeded in flattening the COVID-19 curve in May 2020 (Sabillo, 2020a). In this public briefing, Dr. Muga pointed out that what was evident from the data reported by DOH was that there was still a slow increase in the number of active cases in the country and further increase was still expected once the backlog of test results had been processed.

Another briefing featured by a major news outlet was the “#SONApanoNA COVID response?” where panelists from the health sciences and other disciplines explained why the government deserves a failing grade for its COVID-19 response (Maru, 2020). This public briefing even elicited an invitation from Presidential Spokesperson Harry Roque for the experts of the network to join the Inter-Agency Task Force on Emerging Infectious Diseases (IATF). The network replied that what the IATF needed was not to add more advisers, but to change their militaristic approach to the COVID response. The network reiterated its call for a comprehensive, effective, humane, and participatory response toward the pandemic which it had advocated since its formation in March 2020.

“#SONAkinig tayo. Anong napala natin?” was also featured in a major newspaper. In this briefing, the panelists criticized how Duterte had failed to provide a concrete plan or roadmap that would address the COVID-19 pandemic in his 5th State of the Nation Address (Cheng, 2020).

Aside from public briefings, the network also released and continues to release press statements to address urgent issues. These press statements are published on the network’s Facebook Page with a photo meme or social media card that summarizes the gist of the statement. Since the formation of the network, there has been one instance where a press statement was featured by a major news outlet. This instance was the press statement released on 29 June 2020 regarding the Department of Health’s (DOH) temporary deployment of Doctors to the Barrios volunteers to private hospitals in Cebu (Sabillo, 2020b). In this statement, the network suggested that the DOH should have hired more doctors instead of re-assigning those already serving in areas that also need health professionals.

However, although major news outlets picked up mostly on controversial political statements, citizens were much more interested in other topics more directly addressing the issues they were facing.

To further analyze what factors helped increase the reach of the network’s public briefings, some of the most-viewed briefings of the network were observed. Based on the CURE COVID page’s historical data, the top three most-viewed public briefings, in decreasing order, were as follows: “Preparing for the Oct. 5 School Opening,” “*Balik eskwela: Handa na ba tayo?*” and “#SONApanoNA COVID response?”

The topic “Preparing for the Oct. 5 School Opening” was the most-viewed public briefing video of the CURE COVID network. In this briefing, issues related to the resumption of classes on October 05 via remote learning methods were discussed. One of the panelists, Mr. Raymond Basilio, the Secretary General of ACT-Philippines, discussed the consequences of pushing through with the October 05 school opening without first ensuring a safe, accessible, and quality education for all given the pandemic situation, and why we should consider postponing the proposed school opening. The rest of the panelists discussed the requisites for the delivery of safe, accessible, and quality education for the different sectors affected, such as health workers, students, teachers, and parents.

The video for the “Preparing for the Oct. 5 School Opening” briefing was able to gather 12,258 unique user views out of which 4,560 views (37.20% of the total unique user views) were generated solely by the CURE COVID page while 7,698 views (62.80% of the total unique user views) were generated by the cross-posting done on Facebook Pages of several organizations with higher follower counts, such as the Alliance for Concerned Teachers (ACT), Now You Know, Altermidya, and Pinoy Weekly. Out of all these organizations who cross-posted the briefing, ACT contributed the largest unique user view count of 5,673 (46.28% of the total unique user views).

The cross-posting done for this briefing also helped in significantly increasing the reach of the video as it was able to add 18,223 more unique users to the original 22,959 unique users reached solely by the CURE COVID page. Moreover, this briefing also had the highest peak live viewers count out of all the public briefings, reaching a maximum of 326 viewers when it was livestreamed on Facebook. This was more than thrice the average number of peak live viewers for all public briefing videos, which was 96 viewers. The reason as to why this briefing garnered the greatest number of views, reach, and peak live viewers out of all the network’s briefings may be explained by the cross-posting done by ACT, as well as their wide mobilization of teachers and students to view the public briefing.

The cross-posting of the live videos of the network to the Facebook Page of other organizations was proven to increase the views and reach of the briefing by up to twice the amount had it not been cross-posted. Based on the data collected from the Facebook Page Insights tool, the average additional views contributed by cross-postings on public briefing videos were 82.47% of the total views solely generated by the network’s page. Moreover, the average additional reach contributed by cross-postings on public briefing videos was 103.30% of the total reach solely generated by the network’s page. These numbers suggest that the cross-posting of public briefings may be effective in increasing the number of views and reach.

The topic “*Balik eskwela: Handa na ba tayo?*” was the second most-viewed public briefing video on the network’s Facebook Page. This briefing was able to gather 9,445 unique user views without the aid of cross-posting, thus, making it the most viewed out of all the public briefing videos that were not cross-posted. The briefing was also able to achieve 271 peak live viewers and 14,960 unique user reach.

The topic “#SONApanoNA COVID Response?” was the third most-viewed public briefing video by CURE COVID. The response elicited from the government may have helped this briefing to gather a total of 8,874 unique user views, 144 peak live viewers, and 24,877 unique user reach.

Notably, the most-viewed public briefings were those that mobilized organizations who were stakeholders on relevant topics, for example, ACT for education-related topics. The public briefing that sought to illuminate information on the government’s COVID response also drew big audiences. The participation of celebrities and government officials likewise attracted viewers for the briefing.

Conclusion

Factors in network-building in the time of the pandemic

As previously stated, network-building as a component of community organizing is important in broadening the reach of individual organizations and in bringing in various expertise and competencies. The significance of networking under normal circumstances cannot be underestimated.

Networking is grounded in the notion that people who pool their resources have a greater ability to advance their interests. Connections formed through networking can be useful in broadening the research and knowledge base of social campaigns and generating new resources and backing for their efforts. Establishing alliances also makes it easier for organizations to gain help from support groups and allies who support their goals. (Maiese, 2005)

Prior to the pandemic, network-building would be facilitated by face-to-face meetings, joint activities on the ground, and team building among others. But given the lockdown, the formation and continued existence of CURE COVID were made possible by a combination of the use of social media and online platforms and limited on-the-ground activities of members.

Social media and other online platforms helped immensely in the formation and further development of the CURE COVID network.

In the first month and a half of the pandemic, the need was for providing immediate relief assistance to vulnerable and affected communities in the country. Many of the organizations who comprised the initial members of the network had already been doing relief work as recent as the Taal Volcano eruption in January 2020. Through the support from donors and the determination of the members of the network, various forms of assistance such as food packs, hygiene kits, PPEs, and face masks were extended to rural and urban communities, stranded construction workers, OFWs, and students, health workers, and even police and barangay *tanod* managing the checkpoints.

Given the restrictions in mobility, the network utilized to the fullest the various social media platforms to generate support for its relief operations, to share the various relief initiatives conducted by its members in the communities, to forward its analyses of issues related to the COVID pandemic, and to harness the expertise of various groups and individuals in relation to addressing the pandemic. A Facebook Page and the public/media briefings were the main platforms for these efforts. Also, the cross-posting of these public/media briefings on the Facebook Page of other progressive organizations helped in increasing the reach of the network.

The network brought together diverse communities such as organizers, unionists, jeepney drivers, health experts, legislators, economists, lawyers, entrepreneurs, and academics through its online public briefing. Women leaders of urban poor organizations shared their stories of setting up community kitchens and monitoring the health of community members. Medical doctors and microbiologists discussed the importance of free mass testing and extensive contact tracing to control the pandemic. Hospital workers talked about the need to increase the budget of government hospitals and to increase workers' salaries. These discussions and many others provided a range of testimonies on the inadequacy of the national government's response and the heroic efforts of communities and groups to extend help especially to those most vulnerable. This bringing together of diverse groups and individuals was made possible by the online platform used by CURE COVID.

Online meetings of the network to agree on its thrust, discuss plans, and report on activities and assess them were important in updating members and in eliciting their views and suggestions. Four network meetings were held in 2020: the April 24 meeting to formalize the network with the adoption of its thrust; the May 15 meeting to report on activities, the August 4 meeting for updates, and the December 19 meeting to assess the work of the network in the previous months and to make adjustments on its plans.

Online platforms were not enough to highlight the urgent needs of communities under lockdown or to call the government's attention to the inadequacy of its response. The network participated in protests initiated by multisectoral groups to call for mass testing, to end the militaristic approach to the pandemic, to demand immediate provision of PPEs for frontline workers, to demand a higher budget for health and social services, among others. These actions strictly followed health protocols such as physical distancing and the use of face masks, as well as regular disinfection of the microphones used during the rallies. The network also participated in legal challenges through individual members and organizations who were signatories to the Supreme Court petitions, such as those against the Anti-Terror Law and for government to implement free mass testing.

Finally, and most importantly, while social distancing is cited as one means of preventing the spread of the virus, the CURE COVID experience shows that such social distancing should not translate to the loss of social solidarity, much less the loss of basic rights to organize, to speak truth to power, and to hold demonstrations. Network-building utilizing social media and other online platforms and participation in protest actions which follow health protocols enabled CURE COVID to coordinate and amplify the activities of its members even under pandemic conditions.

End Notes

¹ Many of these groups and individuals had already been doing relief work for decades and, prior to March 2020, were in the midst of assisting victims of the Taal Volcano eruption in January 2020.

² Based on reports submitted by the organizations to the CURE COVID Secretariat as well as Facebook posts of relief efforts.

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Reports of Network Members on Their Relief Assistance

ACT for People’s Health: Tulong Guro, April 27, 2020

Central Luzon Disaster Response Network (CLDRN)

Cordillera People’s Alliance Relief Operations Report, April 24, 2020

CURE COVID Polyeto: Sama-samang Biguin ang COVID-19 used by Tulong Kabataan

Damayang Simbahan sa Panahon ng Disasér- An Ecumenical Response: Power Point Presentation - March-April 2020

Sagip Kanayunan at Tulong AnakPawis Relief Operations: Summary of Relief Delivery Operations as of April 25, 2020

Southern Tagalog Serve the People Brigade Tulong Drivers

Appendix: CURE COVID Orientation

Pursue a comprehensive, effective, humane and participatory response to the COVID-19 crisis!

Citizens’ Urgent Response to End COVID-19 (CURE COVID)

Adopted April 24, 2020

As the end of the extended lockdown period nears without a clear decline in the number of COVID-19 infections, a comprehensive plan needs to be put in place to control the spread of the virus, treat the sick, and allow a safe and reasonable easing of restrictions to allow our people to earn a living.

It is becoming clear that COVID-19 is going to be a prolonged health crisis. It will likely trigger an unprecedented economic slowdown and heightening of social tensions. The pandemic has become so destructive not only because of the government’s inadequate, haphazard and delayed response but due to the long-running neglect of the health care system coupled with glaring socio-economic inequalities.

There is also growing evidence that the emergence of coronaviruses in the last few years is linked to environmental degradation. Sadly, too, we see how the pandemic is used to justify more repressive measures against our people.

In this light, CURE COVID calls for a different kind of response to the crisis: one that is **COMPREHENSIVE**, **EFFECTIVE**, **HUMANE** and **PARTICIPATORY**.

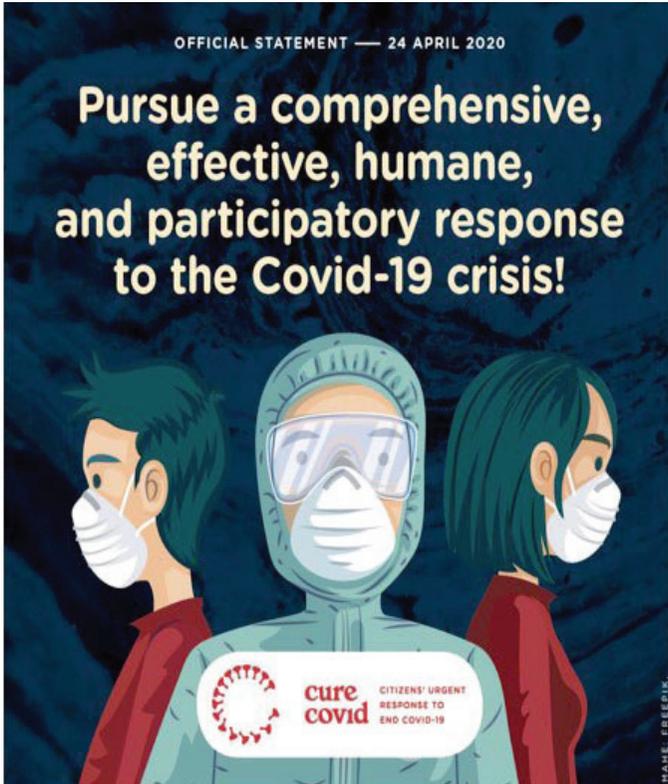
- **Comprehensive** - COVID-19 is a global health emergency with wide-ranging socio-economic implications. Any plan to address the pandemic should prioritize the necessary measures to identify, treat and care for patients and their families; to prevent the spread of the disease through primary health alongside quarantine measures; and to mitigate consequent adverse socio-economic and more so political impacts resulting from the needed health measures. The plan should include other measures: psychosocial counseling for the vulnerable sections of the population; public information drives to counter the epidemic of fake news; community organization and empowerment to build social solidarity; and, most importantly, channels for early identification and mitigation of socio-economic dislocation. Ecological aspects like community sanitation, preventing urban decay and pollution, and waste management particularly of medical waste must be addressed. Over the medium term, the plan should work towards reducing the economic and social inequities that render our people highly vulnerable to public health crises such as pandemics.
- **Effective** - The health and related measures to address the COVID-19 pandemic should be adequately funded, science-based and complemented by non-bureaucratic mechanisms for widespread and proper implementation down to the grassroots.
- **Humane** - The impacts of the pandemic, quarantine and social distancing measures differ widely based on existing socio-economic inequalities. Thus the government's response should involve humane policies such as prioritizing vulnerable groups like the poor and unemployed, those who have lost their livelihood, those in prison, among others. It requires utmost cultural sensitivity, maximum tolerance and compassion for those in difficult or precarious situations.

- **Participatory** - To be effective, measures to address COVID-19 should obtain the trust and participation of a well-informed and empowered citizenry. This requires maximum transparency and accountability on the part of authorities while continuing to respect human rights as well as providing our people with enough information and leeway to be creative and innovative in dealing with the pandemic and related challenges.

The following measures are particularly urgent and require much more effort and resources from the government, with the help of the private sector:

1. Free COVID-19 mass testing with priority to all suspected and probable cases, frontline health workers, residents in highly infected areas and communities (including surveillance testing), and essential workers;
2. Assiduous contact tracing to identify, test, monitor and quarantine all those who came in contact with suspected, probable and confirmed cases of COVID-19;
3. Adequate, properly equipped, accessible and free quarantine facilities at the city, municipal and district levels;
4. Full support to frontline health workers in terms of PPEs, food, transportation, accommodation and hazard pay, as well as adequate facilities, supplies and equipment for hospitals; similarly, adequate protection and support for other essential workers.
5. Assured free treatment for all COVID-19 patients in public hospitals and subsidized treatment in private hospitals;
6. Increased, expanded and expedited social protection and amelioration programs and other forms of assistance to those adversely affected by COVID-19 and the enhanced community quarantine. This should include regular and contractual workers, farmers, fisherfolk, informal sector workers such as street vendors, jeepney and tricycle drivers, as well as middle class families dislocated by the lockdown together with small and medium enterprises. Special focus must be given vulnerable groups like the elderly, persons with disabilities, pregnant women and nursing mothers, and persons deprived of liberty;

7. Uphold civilian supremacy, respect and protect civil liberties and human rights at all times.
8. Let us build on the social solidarity and generosity of spirit that has emerged due to this crisis. Together, we shall overcome COVID-19. #



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