

Devolution and Crisis Governance amid COVID-19 Pandemic: The Case of the Provincial Government of Misamis Occidental, Philippines

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Abstract

This paper examines the impacts of devolution relative to the COVID-19 crisis governance of the provincial government of Misamis Occidental (PGMO). It looked at the (1) structure, responsibilities, and modes of coordination in the implementation of COVID-19-related initiatives, (2) decision-making processes in determining the COVID-19 response, and (3) the implementation of these initiatives in the context of devolution. Findings revealed that there is a clear and well-defined structure and mode of coordination with specific duties and responsibilities, albeit the absence of representation from the private sector and/or civil society organizations in the COVID-19 task force. COVID-19 strategy and decision-making processes in the province are centralized, operating towards strict adherence and compliance to directives set by the national government (NG). To some extent, local discretion is high but only in terms of policy implementation, but absent on policy formulation. In light of this, devolution may have broadened the base of power and administration in the country, but it arguably did not foster empowerment of the LGUs during the height COVID-19 pandemic to perform effective localized crisis governance.

Keywords: *COVID-19, Crisis Governance, Devolution, Local Government Units*

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Introduction

The COVID-19 pandemic inevitably ignited crises across multiple fronts in the Philippines. The containment measures in place, as has been the case across the globe, have affected education systems, interfered with health care, severely affected commerce leading to unemployment, and heavily upset social life (United Nations Department of Economic and Social Affairs, 2020). It had a variety of repercussions on all levels of government (Organization for Economic Cooperation and Development, 2020) and this difference was reinforced by Redondo-Sama et al. (2020) who claimed that variations in governance realities were responsible for variations in impacts.

The pandemic has worsened the challenges that local government units (LGUs) are dealing with since they were caught off guard, making the COVID-19 response harder. Yet, some LGUs showed flexibility in their response to bring in local governance changes.

Studies addressing healthcare workers' impact on the services they are providing (Redondo-Sama et al., 2020), and related studies focusing on decentralization among LGUs as they responded to the crisis of COVID-19 (Dutta and Fischer, 2020; Kosec & Mogues, 2020) have extensively been published. Nonetheless, studies on devolution of government in the face of crisis, case in point, the COVID-19 crisis, have been scarce.

This study focuses on the Misamis Occidental's experience of provincial governance during the first and second year of the pandemic (2020 to 2021). Also, this study describes the impact of devolution on LGU's actions in the aftermath of the worldwide public health crisis.

In particular, it examines the impacts of devolution related to the COVID-19 crisis governance of the Provincial Government of Misamis Occidental. The Philippine Statistics Authority Report on the SDG Watch in Region X revealed that the Province of the Misamis Oriental is the lowest among the five provinces in Region X to have adopted and have implemented strategies on local disaster risk reduction in accordance with the disaster-risk reduction strategies of the national government. This data presents an intriguing backdrop for understanding the central-local dynamics among the LGUs dealing with the crisis like the pandemic. In order to explore the impacts of devolution to the crisis governance of the Province of Misamis Occidental, this study looks into the following: (1) structure, responsibilities, and modes of coordination in the implementation of COVID-19-related initiatives, (2) decision-making processes in determining the response to COVID-19, and (3) the implementation of initiatives relevant to COVID-19 in the context of devolution.

Crisis and its Context in Governance

Crisis is generally described as a challenge to standard values which causes policymakers to feel rushed and confused (Stein, 2008 through Vanderbroeck, 2012). Moreover, arguments on the concept of crisis vary across nations (Zamoum & Gorpe, 2018). Rightly so, as for the Arabs, it is regarded as an omen of impending tragedy and drought, but in the English language, it either refers to a change—better or worse. Crisis, as per the

Chinese Mandarin character, contains the word "danger" and the word "opportunity," significant indications as the language saw crisis as a source of opportunity in the face of overwhelming problems. As a result, some Western and Chinese crisis experts feel it could all together indicate danger and a turning point, signaling a desired outcome in some way (L. Rapoport, 1962 as cited by Eastham et al., 1970).

Crisis' potential positive outcomes have been outlined by Meyers and Holusha (1986)—Leaders are born, progress is accelerated, underlying obstacles are dealt with, people are reshaped, novel tactics develop, unique detection systems are produced, and fresh innovative frontiers arise. The crisis, according to this perspective, is an innate phase of organizational development, based in the dichotomy and contradiction of construction and deconstruction, structure and destructure, "business as usual" and discord (Vanderbroeck, 2012).

Notwithstanding its complexity and ambivalence, crisis, as per Hermann (1963), is defined within three components: risks to the organization's high-priority values, time constraints, and as unanticipated by the organization. "Unanticipated" refers to the shortfall of a crisis or contingency plan and the apparent failure to recognize that an incident is extremely likely to happen.

How should the government respond to a crisis, when should it respond, and how far should it go? Given its "unanticipated" nature, a smooth mechanism for effective administration during a crisis is null. Each crisis demands careful judgments regarding each policy's quality, alignment, and timeliness (Brousselle, et. al., 2020). With society's growing reliance on vast and diversified technology and business organizations, crises have intensified and become ubiquitous (Perrow, 1984 as cited by Seeger et al., 1998). Unanticipated, unexpected, and frequently undetected interactions among individuals add to the complexity of these systems (Pauchant and Mitroff, 1992 in Vanderbroeck, 2012).

Thus, governance during a crisis is central. Demiroz (2017) elaborates governance in the context of crisis and disaster management as (i) the government's ability to carry out its operations and as (ii) its ability to co-produce services with business and nonprofit groups. In such an event, the government must be capable of utilizing both direct and indirect means to deliver services so that it becomes well-managed. When governments lack the necessary capacity to carry out their functions, their citizens may be jeopardized. In crisis management parlance, cross-sector collaboration admits crucial indications as crisis management is an essentially collective effort. It is a multidimensional policy issue that needs major contributions from all relevant parties.

Further, governance mechanisms and regulatory practices are important. Institutional regulations—the distribution of duties and capacities in all levels and sections of government, as well as the calculations of concerned administrative entities—influence the processes and outcomes of the management of crises. On the one hand, the extent of centralization and decentralization, as well as the autonomy of levels and/or agencies, are important considerations as well. Nonetheless, the literature provides that institutional and administrative contexts and circumstances are not impositional to protocol changes and to personnel decisions. At any rate, they offer channels for movement and might even be

utilized as blueprints by political forces to campaign for concrete solutions to problems (Kuhlmann et al., 2021).

Crisis, therefore, is inherently overwhelming, but it can be overcome and usher into an improved way of doing things. Appropriate governance mechanisms must be present to effectively navigate through its disastrous effects on existing systems while learning from its occurrence to see any prospects for growth. Furthermore, regardless of institutional or administrative contexts or restrictions, crisis management requires cooperation and a coactive strategy which harnesses human and organizational resources for well-coordinated operation.

COVID-19 Crisis and Devolution of Basic Public Services

The COVID-19 crisis certainly planted a difficult hurdle to local governments all around the world. The economic and health impacts of the crisis on various government institutions and local government units are tremendous. This brought extreme pressure to the fundamental concepts of good governance, including transparency, accountability, corruption control, efficiency, inclusiveness, and the rule of law (VNG International, 2020).

In the event of a crisis, case in point the COVID-19 pandemic, what sort of government or structure in society is most adaptable: policy control centralization or power, authority, and resource decentralization? Which is the better approach?

A study in three of the major countries in Europe, namely France, Germany, and Sweden in terms of their governments' COVID-19 responses (Kuhlmann et al., 2021). Their study shows that within crisis management structures characterized as centralized, such as in France, more direct government interference can propel uniform countrywide relief strategies to become centrally enforced and regulated. Thus, what is typical is a more centralized governance strategy. On the other hand, decentralized settings, such as those found in Germany and Sweden, have fewer options and rely (at least in part) on governance mitigations based on willing compliance by local and regional actors, which are frequently linked to compromise and collective action at multiple levels, resulting in less coherent solutions (Kuhlmann et al., 2021).

In looking at the type of crisis governance arrangement at play in the management of COVID-19 in the Philippine context, worthy to investigate is the concept of decentralization as enshrined in the Local Government Code (LGC) of 1991—its force or lack thereof in propelling an effective local crisis governance.

Decentralization refers to the process by which certain powers and responsibilities in performing public duties are transferred, extending from the central government to lower or autonomous governmental agencies and to the private sector. It encompasses numerous concepts and is intricate and multifaceted. Political, administrative, fiscal, and market decentralization are some of its types. Devolution, along with deconcentration and delegation, is one of the three forms of administrative decentralization while privatization, infrastructure, and deregulation are the forms of market decentralization. With devolution,

management authorities, financial concerns, and decision-making are transferred to quasi-autonomous local government agencies (Ozmen, 2014). In addition, devolution as a subset of administrative decentralization involves transfer to sub-national units of any activity and the appropriate financial resources to support them in order to increase autonomy and accountability of officials and public administrators (Bresser-Pereira, 2004).

While international and national policy efforts have gotten a lot of attention throughout the pandemic, it is the local institutions that ultimately adopted them. This brings to the fore the relevance of decentralization during a crisis because the LGUs must be put in the forefront and be fully on board in response as well as recovery efforts. Emphasis on local institutions has been the cornerstone of the decentralization reforms that have been undertaken since the 1980s in several countries throughout the world (Dutta & Fischer, 2020).

Evidently, it is crucial to comprehend the unique difficulty that the COVID-19 pandemic has brought to LGUs, being the final policy implementer of various response measures as local governance bridges national policy and local facts in order to harmonize COVID-19 initiatives.

There are a variety of theories for why local government works better at the local level for a variety of state duties. Aside from that, a growing body of data also suggests that devolving power and resources to local governments can enhance a variety of state operations, including delivery of public service, development of rural areas, and the implementation of systems of social security. Overall, these three components—local governments' capacity to manage context-specific local problems, public responsiveness, and perceived legitimacy in carrying out state obligations—are all likely factors as per the study of Dutta and Fischer (2020).

On the contrary, Kosec & Mogues (2020) study demonstrated the drawbacks of decentralization in COVID-19 response in low-income and authoritarian areas. Their findings revealed that in those areas, budgets for social services are moved away toward productive services when it is needed if constituents cannot hold leaders accountable. Giving more COVID-19-related funding through provisions decentralized in nature, in this context, may tilt expenditure toward whatever boosts most profits, from which leaders may collect rents at the likely expense of other social services. While decentralization enhances delivery of service, who benefits and how benefits are enjoyed depends on people's willingness to freely express their happiness or dissatisfaction. As a result, for decentralization to create an enabling environment for effective crisis governance, it must be based on expanded participation and a sense of responsibility among leaders and constituents alike. Therefore, opting for decentralization in the context of COVID-19 should be applied with caution (PNVSCA, 2020). Nonetheless, decentralization cannot be considered as the best policy recommendation without thoroughly analyzing the required circumstances for crisis responses to function effectively (Kosec & Mogues, 2020). At any rate, the recommended approaches as analyzed by Martin (2013) of the essential characteristics for successful crisis governance in times of pandemic embody fundamental characteristics advanced by decentralization.

Predicated on the studies that decentralized arrangement is better suited at coping with crisis, it is necessary to ascertain whether the same thing actually happened in the province of Misamis Occidental during the height of the pandemic and whether the local government units have successfully utilized the decentralization and devolution of essential services as enshrined in the LGC and other relevant policies and, in the process, created a supportive climate for effective crisis governance requires to be investigated as well, as far of the COVID-19 crisis is concerned. Figure 1 illustrates the conceptual model of this study.

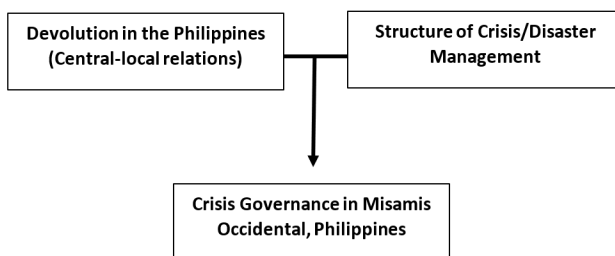


Figure 1. Conceptual Model

Methodology

In order to properly examine the impacts of devolution in relation to COVID-19 crisis governance of the Provincial Government of Misamis Occidental between 2020-2021, this study applied a qualitative approach in the gathering and analysis of data. In using such, relevant policies, guidelines, and policy issuances of both the PGMO and NG pertaining to the management of COVID-19 were gathered and processed. However, since this study is confined only to the COVID-19 response in the first and second year of the pandemic, the data collected shall be limited only to those initiated and implemented in 2020 and 2021.

A review of relevant academic and grey or non-academic literature was conducted. Grey literature, according to Cooper et al. (2009), are those created in print and electronic form by governments, academia, business, and industry that are not controlled by commercial publishers. The study explored national and local government issuances and articles available in their respective websites/pages and/or official print channels. Moreover, this study explored crisis governance with focus on the implementation of COVID-19 measures and initiatives of the PGMO and how it is attributed to devolution as manifested by the delegation of power and resources under the LGC, this research is focused on examining the following areas:

First, the structure, responsibilities, and modes of coordination in the implementation of COVID-19-related initiatives. With this, the responsibilities and duties of the members/offices involved were examined together with the mode of coordination and the system of procedures in place.

Second, the decision-making processes in determining COVID-19 response. In this area, inquiry is focused on questions highlighting the priority setting, legislation, and policy

creation pertaining to the COVID-19 response. This inquiry will illustrate the degree of local responsibility in implementing COVID-19-related policies and regulations mandated by the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-EID), a national agency.

Lastly, this study looks into the implementation of COVID-19 related initiatives in the context of full devolution. Specifically, it examines if the management of the provincial government is inconsistent with the devolved powers and functions given to LGUs under Section 17 of the LGC. In this vein, this study analyzes whether the devolved powers and functions committed to the LGU have positively and negatively impacted the handling of the PGMO of the crisis. The indicated focus areas were aimed at understanding the implementation of COVID-19 response in the province and how the devolved functions shape this implementation. Overall, it looked at how the provincial government responded to a global public health crisis i.e., the COVID-19 pandemic.

This study followed an institutional approach in data analysis. Institutional analysis, as per Mead (1979), is relatively inclined to political influences on programs and more attuned to alternatives of policy. In this way, the data gathered and its corresponding analysis should afford the provincial government with the needed information and should prescribe recommendations, supported by evidence, on policy making in order to improve its crisis governance.

Results and Discussion

A crisis is characterized by confusion and commotion, but is accompanied by a capacity for growth (Eastham et al., 1970). According to Lele (2022), there are three primary types of crisis governance: a) centralization, b) decentralization—both focus government actors, and c) collaborative crisis management (CCM), considered to be more robust and that which covers additional sectors outside of government such as business and civil society. Martin (2013) posits that effective governance during a crisis rests on the smooth implementation of much needed response measures and the collaboration of these measures among other governance actors such as the civil society and private sector.

In the context of COVID-19, a comparative study by Kuhlmann et al. (2021) of Germany, France and Sweden COVID-19 management strategies show that centralized arrangement like France exhibits a uniform crisis response strategy in contrast to decentralized settings like Germany and Sweden wherein governance strategies were based on voluntary compliance which results in less coherent solutions. In contrast, the study of Dutta & Fischer (2020) in India amid COVID-19 supports the growing body of data which suggests that decentralized arrangements such as devolution of power to local government units enhances state operations in the delivery of public service, development of rural areas, and implementation of social security programs. The finding pointed to the observation that decentralized arrangement is advantageous since LGUs are better suited to manage local-specific concerns, elicit public responsiveness/engagement, and legitimacy given that its strategies are grounded upon the perspectives of the local communities themselves. In a crisis with breadth and degree like the COVID-19 pandemic, the need for the communities in the

locale to be fully engaged to and on board in mitigation, response, and ultimately in efforts of recovery is paramount because whatever directives there may be, it is ultimately the LGUs that will implement them.

In the Philippines, the LGC has empowered LGUs like the province of Misamis Occidental to initiate decisions on issues affecting its constituency and direct the course of strategies relative thereto. Amidst COVID-19, however, this purported freedom to plan and execute the management of strategies has been virtually absent and constrained by the national mandates, directing them to align its actions to the national response framework through the national IATF that is accordingly “national-government-enabled, LGU-led, and people-centered response.”

The succeeding parts of the paper presents the analysis of the findings of the study as regards the structure, responsibilities, and mode of coordination, decision-making processes and implementation of COVID-19 initiatives building upon the devolved services and facilities of the province of Misamis Occidental.

Structure of crisis governance during the COVID-19 pandemic

Government policy issuances served as guidelines in identifying the structure and responsibilities of the COVID-19 response team of the PGMO and its component LGUs. Primarily, COVID-19 response describes the carrying out of particular action to stop the outbreaks and transmission of infections, as well as avoiding its recurrence. COVID-19 response actions include verification, contact tracing, rapid risk assessment, case measures, patient treatment, immunization, risk communication, conduct of prevention activities, rehabilitation related to the treatment and care of COVID-19 patients, as well as other supporting activities that contribute to the implementation and facilitation of COVID-19-related initiatives (DOH, n.d.).

Figure 2 shows the composition of the PGMO Inter-Agency Task Force (referred to as PIATF). Starting from the national government through the national IATF, which was headed by former President Duterte, COVID-19 management structure proceeds to the regional task force and to the provincial IATF. For quick and efficient response, teams within the local IATF were created and categorized to act on certain concerns according to their expertise, official duties or functions. This arrangement which was just adopted by the Provincial IATF out of the issuances of the Department of the Interior and Local Government (DILG) clearly delineates roles and divides functions among its members accordingly.

Chaired by the Provincial Governor, its membership is composed of the heads of the national government agencies operating in its jurisdiction like the DILG, PNP, and Bureau of Fire as well as officers/personnel from the different offices in the provincial government and elected officials in the provincial level. The local chief executives and health officers of its seventeen (17) component cities and municipalities are also members of the provincial IATF. With this arrangement, the province will be able to take coordinated action on COVID-19 in the lower LGUs in fulfillment of its oversight role toward its component cities and municipalities.

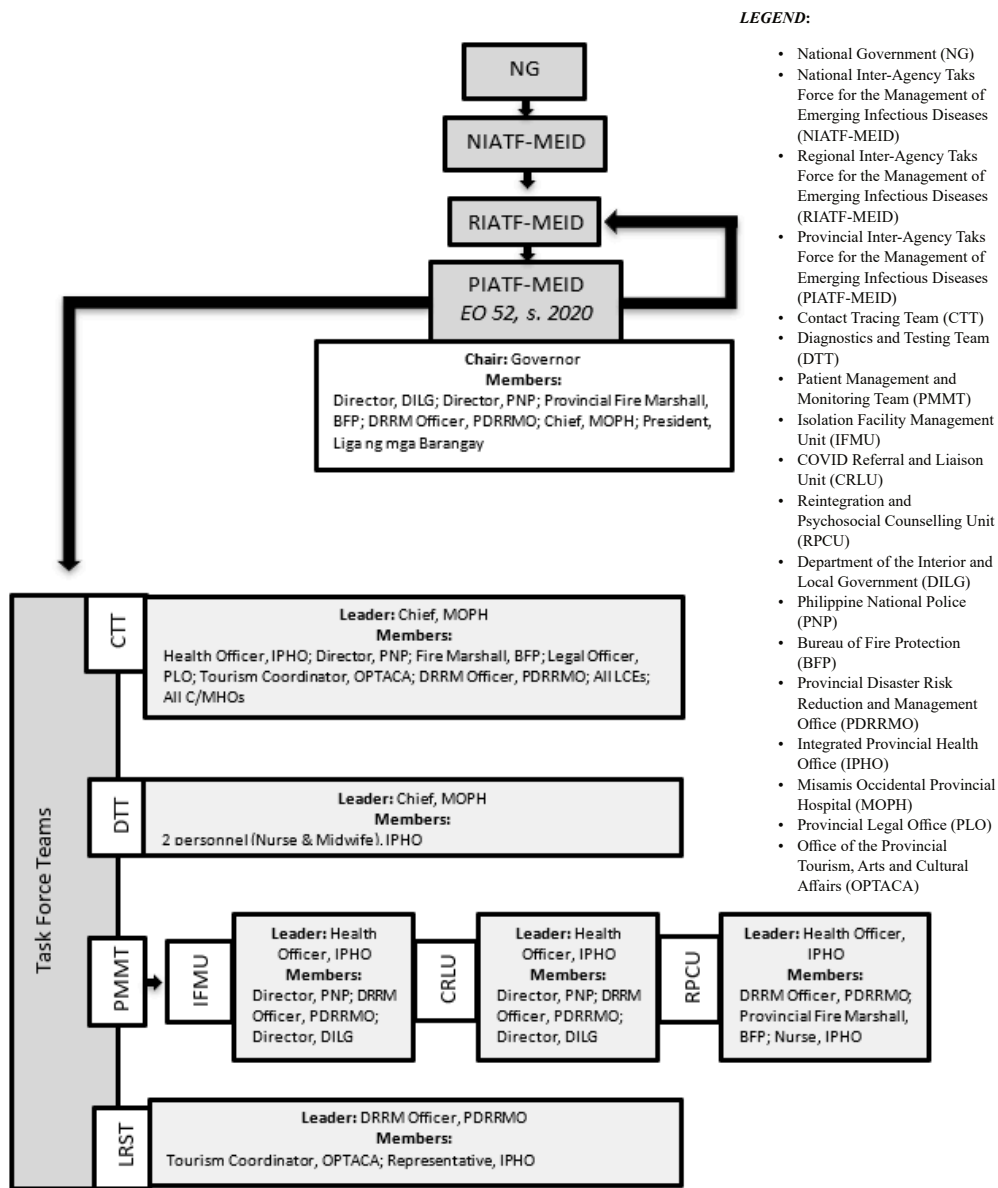


Figure 2. The structure of the crisis response in the Philippines during the COVID-19 pandemic.

Source: PGMO EO 52, series 2020; DILG MC 2020-077

The PIATF through its teams performs a wide array of duties on COVID response. With the Governor as the chair, it oversees the execution of these measures and is authorized to facilitate decision-making. Institutionalized by EO 52, series of 2020 issued by the Governor, it is categorized into four major teams following the national directive outlined by DILG MC

2020-077: *Contact Tracing Team (CTT)*; *Diagnostic and Testing Team (DTT)*; and the (3) *Patient Management and Monitoring Team (PMMT)* units under which are the following: Isolation Facility Management Unit (IFMU), COVID Referral and Liaison Unit (CRLU), Reintegration and Psychosocial Counselling Unit (RPCU), and Logistics and Resources Support Team (LRST). These are the roles and responsibilities of the COVID response team of Misamis Occidental.

Firstly, the Contact Tracing Team (CTT) oversees and works on the contact and tracing efforts for all persons with known exposure to a COVID-19 patient to ascertain that they are strictly observing the home-quarantine measures and to monitor the status of presumed, suspected, and confirmed cases including family members with known contact to a confirmed case to decrease the possibility of contagion, and to report daily updates on the COVID-19 status to PIATF which sends such data to the Regional IATF.

Secondly, the Diagnostic and Testing Team (DTT) conducts expanded testing and provides the framework for formulations and operations, to respond to the mitigation of COVID-19 through but not limited to Real Time-Polymerase Chain Reaction (RT-PCR), blood testing to antibody testing, to temperature scanning and symptoms recording.

And thirdly, the Patient Management and Monitoring Team (PMMT) with the following units: Isolation Facility Management Unit (IFMU), COVID Referral and Liaison Unit (CRLU), Reintegration and Psychosocial Counselling Unit (RPCU), and Logistics and Resources Support Team (LRST). The Team keeps record of all individuals' health status whether those are probable, suspected, or confirmed cases, including those who are quarantined or scheduled for quarantine.

All teams report directly to the Provincial Governor being the head of the provincial task force. All communications, issues, and concerns will have to go through the Governor's office first following a centralized communication system at the provincial level. Issues and concerns are then discussed with other agencies and offices comprising the local task force for action. The Governor assigned every concern to a specific agency according to the nature of the concern. For example, should the concern be related to border control, then PNP shall be directed to act on.

As a bottom line, the structure and the composition of the task forces determine who shall coordinate and implement a particular COVID-19 response guideline. However, the overall coordination between and among these concerned offices remained in place to ensure that the overall direction of the COVID-19 actions is in compliance with the direction set by the PIATF which mirrors national policies and directives.

As can be seen in Figure 2, the Provincial IATF sits as the intermediary of directives coming from the national IATF to its component LGUs and their barangays. Although it functions as an overseer of the local level execution of the strategies, the provincial government response teams are subject to the demands of the higher authorities.

Remarkably, however, neither the private sector nor civil society organizations are represented in the composition of its membership. It is essential to mention that a considerable body of literature indicates that effective crisis governance requires the co-production of services across sectors beyond the government. Granted, the composition was established in accordance with the directives provided by the DILG. On closer examination, the directive did not, however, specifically limit them to this membership. Section 3.5 of DILG MC 2020-077 explicitly provided a certain level of discretion to LGUs in expanding membership in accordance with local realities but should ensure the representation of the prescribed members.

Decision-making processes in determining COVID-19 response in the provincial government

An organizational structure has been established by the local government units to facilitate the improvement of the COVID-19 response. With regard to the priority-setting, the main guiding policy of the PGMO is still the national mandates provided by the national IATF-EID together with the various administrative policies by relevant national government agencies (NGAs). It is mainly the Provincial Governor in concurrence with the component city and municipal local chief executives that sets the priority of the COVID-19 response in the province. This is evidenced by the relevant executive orders issued by the provincial governor which are responsive to any changes in the COVID-19 status in the province. Case in point: the issuance of Executive Order No. 40, series of 2020 which placed the entire province under modified general community quarantine from June 1-15, 2020 was based on IATF-EID classification for Misamis Occidental (Tangub City, 2020). It is noteworthy to emphasize that through Executive Order No. 112 series of 2020 signed by then President Duterte, the IATF-EID regularly issued the quarantine classification of LGU based on epidemic risk level, economic, social and security considerations as well as amended or modified the Omnibus Guidelines in the Implementation of Community Quarantine in the Philippines. Although each component city and municipality issued their COVID-19 guidelines and regulations, the provincial government initiatives that were harmonized with the national mandates still provided the overall direction of local COVID-19 efforts and initiatives.

Furthermore, together with the offices which composed the PIATF, the provincial government worked hand in hand with the Sangguniang Panlalawigan as well to design and implement tighter and more proactive legislative measures to mitigate the local spread of COVID-19. The result of this coordination is translated into various Sanggunian Panlalawigan ordinances. The joint efforts of both the executive and legislative branches of the provincial government are the core feature of its COVID-19 response and initiatives.

Figure 3 shows the decision-making dynamics among levels of government in COVID-19 response. The national IATF acting upon the advice of the Department of Health (DOH) determines the policy choices such as the classification of areas under community quarantine or alert level system in the country. Afterwards, the regional IATF will cascade the same to the local government units through its member NGAs first from the province down to its component LGUs. The province, on the other hand, as the higher LGU task to oversee the

performance of its component cities and municipalities ensures that the national policy/guidelines are being adhered to.

The provincial IATF decisions frequently yield to the pronouncements and guidelines from the national level which is cascaded to the regional level IATF. Any decision that the LGU initiates like issuance of an executive order about COVID-19 must be concurred by the regional counterpart of IATF. This is stated in Section 2 of EO 112, series of 2020, which states that with the regional IATF's approval, provincial governors are permitted to impose, lift, or prolong the ECQ in cities and municipalities. Local chief executives in its component LGUs (mayors of cities and municipalities) are also permitted to impose, to lift, or to extend the ECQ in barangays. This does not affect, however, the IATF's ability to directly impose, lift, or prolong ECQ in certain sectors should the need arise. Clearly, the extent of local discretion is limited to the approval of the national government through the regional IATF.

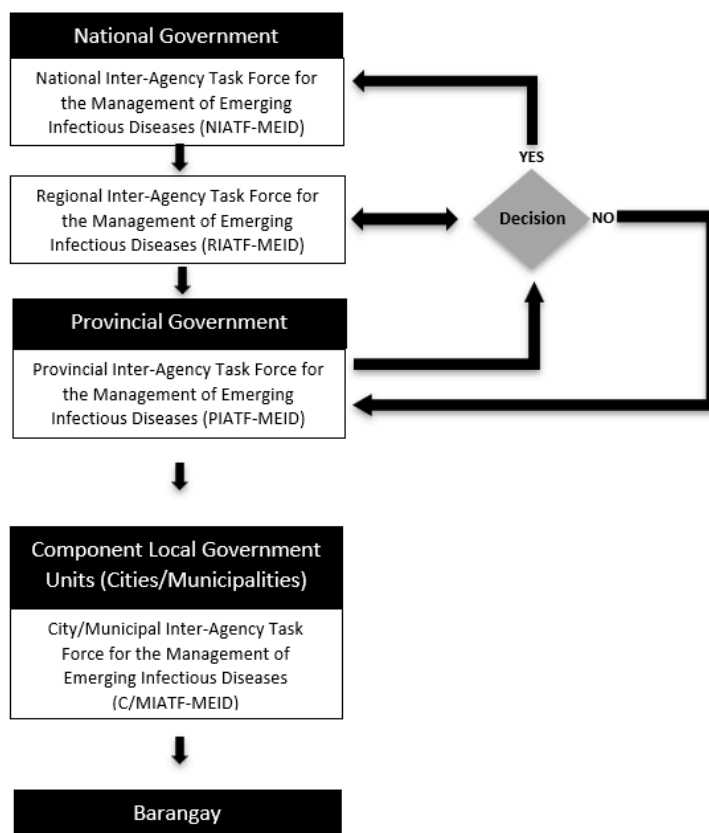


Figure 2. Decision-making Process/Arrangement for COVID-19.

Source: Author's illustration based on national and local policies/guidelines

On September of 2021, the province of Misamis Occidental has gone against national policy and caused a significant stir among government and citizens upon its unilateral issuance of Executive Order No. 105, series of 2021 which requires Authorized Persons Outside Residence (APORs) to present a negative RT-PCR/Antigen test result. In the documents accessed from the DILG Misamis Occidental Provincial Office, pertinent complaints were formally lodged to the 8888 portal and to the DILG, with complainants invoking the national policy contained in national IATF Resolution 124-B which rendered as sufficient documents to any testing requirements before travel departure or upon arrival the COVID-19 Vaccination Card certified by a legally credited vaccinating establishment or quarantine completion certificate, whichever is applicable. In its defense, the PGMO responded to the complaints that such stringent requirements are meant to safeguard the general welfare of its constituents and to slow the rapid increase of COVID-19 cases in the province. In the end, the provincial IATF on October 2, 2021 issued Executive Order No. 121 series of 2021 that amends the controversial issuance and already adopts the aforementioned National Task Force (NTF) guidelines; APORs were then made to secure APOR pass in lieu of the negative RT-PCR/Antigen test result.

Such cases show the extent of control the NG has over the LGUs because the PGMO ultimately yielded to its directive. The province was unable to formulate and/or impose policy options in its own terms regardless when in their view, as the administrators of the province, the implementation of the locally initiated policy was intended to secure extra protection for its constituents. While national level decisions were driven by data coming from the local level, decision-making processes are more of a top-down approach rather than bottom-up with the national government via a national task force in full control of what guidelines to be followed across levels of government.

Impact of devolution to COVID-19-related initiatives

The devolution, at the outset, has positioned the LGU to be self-reliant in discharging the functions and responsibilities as the same confers powers and responsibilities for them to perform specific functions and responsibilities. Among other functions, services and facilities devolved to the province as put forth in the LGC. In the context of the public health crisis, health and social welfare services deserve utmost examination.

Data on the Provincial health services revealed that the Province does have the necessary resources to respond to the impacts of the crisis, albeit admittedly inadequate. There are just two (2) government tertiary hospitals managed by the PGMO (Mayor Hilarion Ramiro Sr. Hospital in Ozamiz City and Misamis Occidental Provincial Hospital in Oroquieta City) among the less than forty private and public hospitals/clinics (secondary & primary level) that are currently in operation in the province. The provision of tertiary hospital services which provide specialized care is explicitly devolved to the province in the Code, yet more than three decades later, just two (2) hospitals have been built and are operated to serve the more than 500,000 residents of the province. This unfortunately contributes to the seemingly low average bed-to-population ratio of Mindanao, averaging only to 0.555 as opposed to the minimum required 1:1000 population (Flaminiano et al., 2022).

In addition, the pandemic saw the most pressing issue on the delivery of social protection packages and other immediate assistance by LGUs for those infected by and quarantined due to COVID-19, displaced from work, lost income or simply stranded without adequate necessities for subsistence due to limitations on movement.

Most infamous of these government subsidies is the Social Amelioration Program (SAP) which was facilitated by the Department of Social Welfare and Development (DSWD) in collaboration with DILG and LGUs. In consonance with the enactment of the Bayanihan Law on March 24, 2020, a total of 205 billion pesos was allocated for social amelioration program to low-income and vulnerable families. Beneficiaries received amounts ranging from 5,000 to 8,000 pesos and were paid in tranches. The DSWD released comprehensive instructions on beneficiary selection and award distribution that drew on the database of already-existing social security programs like 4Ps. To speed up the distribution, a thorough list of recipients coming from the LGUs was created and verified against the country's database of the poor and vulnerable, *Listahanan* (Gudmalin et al., 2021).

Records show that for Misamis Occidental, 84.46% of first tranche of SAP were distributed to target beneficiaries as of May 12, 2020 (Quilinguing, 2020). The distribution, however, was fraught with issues on political clientelism against officials and worst corruption. Of the seven (7) barangay officials who had verified SAP complaints in the region and their case was referred to PNP-CIDG by the DILG in June 2020, one of them was from Barangay Banadero, Ozamiz City, province of Misamis Occidental (Sialana, 2020). An article by Eadie (2022) posited that DSWD received more than 400,000 complaints on SAP by September 2020. The Presidential Anti-Corruption Commission (PACC) revealed in October 2020 that it has looked into 7,601 allegations of corruption in connection with the distribution of SAP funding. Aside from SAP, the distribution of other social protection packages like government food packs was also mired with issues. The culture of *palakasan* or political clientelism was accordingly evident since beneficiaries who were able to receive assistance are friends/political allies of the local officials. These issues are certainly not unique to Misamis Occidental, the region, or any other LGUs. Nonetheless, it provides evidence that delivery of social services was incredibly troublesome in the province as well.

In line with this, Cho & Johnson (2022) aptly concluded that some crucial lessons can be learned from the experience. First and foremost, in order for emergency operations to be successful, it is essential to have well-established social protection policies, programs, and processes. Second, investments in and efforts toward ongoing updates and modernisation are necessary for its delivery systems. Third, technical innovations and digital technologies should be actively employed in its delivery. Lastly, prompt and flexible policy changes that are based on the knowledge gained from each shock can improve overall social protection systems and services for future resilience.

With this, the PGMO was struggling in the implementation of such basic services and in the performance oversight to its component LGUs despite the enactment of the LGC decades ago. Along with its lower LGUs, it has struggled in the implementation of all COVID-19 response initiatives despite decades-long devolution and capacity training that should have equipped them to formulate better systems and structures to be ready, resilient, adaptable to

any unanticipated conditions like a crisis of this sort.

Overall, the devolution of the services has done little to improve the number of health facilities and services as well as social protection programs to the vulnerable population. A closer look reveals that the PGMO's crisis governance is deficient. Understandably, the functional limitations on decision making to local-specific concerns imposed by the national government is justified on the point that the crisis is shared and, in fact, global in scope and consequences. Nonetheless, the transfer of functions, services and facilities ought to have equipped the LGU to supply urgently required social and health services during the pandemic, but it did not. The province also needs to institutionalize a framework within which a culture of governance may thrive by ensuring the involvement of other non-government sectors as a matter of policy. Crisis governance must live up the notion of governance, which needs collaboration amongst numerous organizations coming from the private realm and civil society. Recognizing the different capacities and scope of duties and function, collaboration outside of one's own is essential for effective response, management, and recovery.

Conclusion

It is undeniable that the pandemic caught the PGMO off guard. This certainly presented challenges and difficulties on how to properly manage or implement COVID-19 efforts to prevent and/or minimize local transmission of the virus and recover from the damages it caused.

In terms of structure, responsibilities, and mode of coordination of the PIATF, the PGMO was able to establish a clear and well-defined structure with specific duties and responsibilities that are targeted toward the achievement of the national strategy to control the transmission of the coronavirus, albeit there is a lack of representation from non-government sectors. The mode of coordination is also established through the concerned offices and national agencies operating within the province. Also, it was able to centralize all communications within the task force to come up with a unified response to all COVID-19-related initiatives in the province.

As regards the decision-making processes, the governor wields the utmost authority as chair of the provincial IATF. Its actions, however, continue to point toward strict adherence and compliance to mandates set by the national IATF-EID. Although local discretion is still high, it is only confined in policy implementation and not in formulating distinct local policies PGMO deems fit. The PGMO through its PIATF implements measures directed toward complying with national directives intended to achieve national policies and goals. The obvious penalty provision included in various national IATF-EID resolutions and issuances from NGAs like DILG which specifically stipulated that non-compliant LGUs shall be dealt with accordingly was one crucial aspect that certainly kept the PGMO on its toes in the exercise of its powers and responsibilities. This resulted in national mandates and directives being executed by every level of the LGUs, ensuring that local responses and initiatives are aligned with the national COVID-19 strategy framework.

In terms of the implementation of the COVID-19 pandemic response in the context of full devolution, the crisis certainly revealed the weakness of the LGUs in performing its devolved functions. The provincial government still depends upon national directives in carrying out its crisis response, and had to request support from the national government to make up for the lack of provision of health and social services amid the pandemic. National resources were funneled to the LGUs to support the management of the crisis, with a large chunk of the funds pooled towards the operationalization of COVID-19 responses at the local level (i.e. SAP). This alone demonstrated the PGMO's inadequacies in carrying out its responsibilities on basic services delivery mandated by the LGC, exposing the persistent problems on the provision of social security packages and health care, among others.

Finally, the provincial government's COVID-19 response seems well-established, despite the absence of the private sector and CSOs. To effectively control the spread of coronavirus in the province, structures, responsibilities, modes of coordination, decision-making processes, and communication channels that reflect the national action plan have been put in place. Nonetheless, it is submitted that devolution of functions, basic services and facilities set forth in the LGC may have been significant in terms of broadening the base of power and administrative base in the country; however, it did not afford significant impact in empowering the PGMO and ensuring the delivery of adequate key basic services necessary to realize effective governance in times of crisis like the COVID-19.

Recommendation

With the findings and discussions made above, the author recommends the following:

1. With the additional financial resources available to the local government unit in view of the implementation of Mandanas-Garcia Ruling in 2022 and the full assumption of services and facilities as per Executive Order No. 138, series of 2021, the provincial government should level up its crisis governance by strengthening the institutionalization of CSOs in the province in order to fuel innovation and broaden people engagement. They should be one of the primary response teams in every crisis given that effective crisis governance requires the co-production of services with sectors outside the government.
2. An in-depth study exploring feasible local-specific policies to be implemented by the provincial government of Misamis Occidental may be undertaken in an effort to improve and create innovative crisis management systems and processes.

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