

REPORT

The UP Diliman response to the COVID-19 pandemic

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ABSTRACT

As the national university, the University of the Philippines is mandated to perform its unique and distinctive leadership in higher education and development. As the main campus, UP Diliman (UPD) has thus taken the lead in setting academic standards and initiating innovations in teaching, research, and faculty development. As the flagship campus of the national university, UPD also took the lead in responding to the challenges of the COVID-19 pandemic. Its COVID-19 Response Framework shows the different areas of the University's response to minimize the socio-economic impact of COVID-19 on the UPD community. The four major areas of the Response Framework include ensuring good health and safety, ensuring adequate and continuous flow of UPD services, supporting academic and research activities, and promoting effective communications. The Response Framework is designed for the short- to mid-term period to address the COVID-19 pandemic. However, it may be updated to provide long-term response as we transition to the “next normal.”

KEYWORDS

University of the Philippines, UP Diliman, COVID-19, response framework

Introduction

The University of the Philippines (UP) is the premier state university in the Philippines. Its flagship campus, UP Diliman (UPD), is the largest constituent university of the UP System. It houses numerous research centers and laboratories and has the highest number of degree-granting units as well as faculty and student population. To quote Chancellor Fidel R. Nemenzo in his Vision Paper, “Diliman is home not only to more than 25,000 students and employees...whose open green spaces define the overall visual image of the university community.” (Nemenzo 2020a). With a total land area of 493 hectares, the campus is a unique university town because of the interesting interplay of academics, research, biodiversity, residential, and micro business spaces.

As the premier state university in the country, UP has the mandate to lead as a public service university by providing various forms of community, public, and volunteer service as well as scholarly and technical assistance to the government, the private sector, and civil society while maintaining its standard of excellence (The UP Charter of 2008).

The UP System in general and UPD took an active role in mobilizing all its resources to address the challenges brought about by the SARS-CoV-2 (COVID-19) pandemic. The response of the UP community to the pandemic was diverse and widespread. It had initiatives in healthcare (including physical and mental wellness), food security, education, and community service.

This assessment report describes how UPD responded to the challenges of the COVID-19 pandemic. UPD's response fulfills its mandate of taking the lead in setting academic standards and initiating innovations in teaching as well as research and faculty development. At the same time, as the premier public service university, it provides various forms of community, public, and volunteer services as well as scholarly and technical assistance to the government, the private sector, and civil society.

The COVID-19 pandemic

The World Health Organization (WHO) states that coronaviruses are a large family of viruses that may cause illness in animals and humans. In humans, several coronaviruses are known to cause respiratory infections—ranging from the common cold to more severe diseases, such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus is SARS-CoV-2, more commonly called COVID-19 (WHO n.d.).

In early 2020, after a December 2019 outbreak in Wuhan, China, the WHO identified SARS-CoV-2 as a new type of coronavirus (WHO n.d.). As reported by the WHO from its website, the outbreak quickly spread around the world. Like other coronaviruses, it spreads mainly through person-to-person contact. Infections range from mild to deadly; most people infected with the COVID-19 virus experience mild to moderate respiratory illness and recover without requiring special treatment. Older people and those with underlying medical problems, such as cardiovascular disease, diabetes, chronic respiratory disease, and cancer, are more likely to develop serious illness from the virus.

The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes. Thus, it is important to practice respiratory etiquette (e.g., by coughing into a flexed elbow). As of October 1, 2020, there were over 34 million infections and over a million deaths worldwide. In the Philippines, there were over 300,000 cases and over 5,000 deaths, as of October 1, 2020. Based on the Department of Health (DOH) COVID-19 Situationer, the total number of COVID-19 cases in the Philippines has climbed to 472,532 with 9,230 deaths as of December 30, 2020 (DOH 2020).

UP Diliman's initial COVID-19 response

Fidel Nemenzo started his term as Chancellor on March 3, 2020. A week later, classes were suspended, and the Enhanced Community Quarantine (ECQ) was declared nationwide on March 17. In response, Chancellor Nemenzo immediately convened the UPD COVID Task Force.

Several initiatives were implemented immediately. With the support of Act as One Partylist, Palma Hall and the College of Human Kinetics (CHK) gym were established and set up as isolation facilities (Leongson 2020; UP Media and Public Relations Office 2020). The National Institute for Science and Mathematics Education Development (NISMED) was also converted to a facility to accommodate healthcare workers (HCWs) of the Lung Center of the Philippines.

Calls for donations were also critical in quickly providing the help needed by the University Health Service (UHS) in the preparations and operations of the facilities, as well as in providing meals for the HCWs.

UPD was also quick in closing the campus to non-residents and non-employees to prevent the virus from infecting the residents and employees. Employees were given work-from-home (WFH) arrangements and only a skeletal work force with a maximum of 50 percent of office personnel were allowed to physically report for work. The initial response of UPD was more focused on preventing the spread of the virus. However, as the quarantine restrictions slowly eased and the academic activities resumed, other areas had to be addressed.

The UPD COVID-19 response framework

The UPD COVID-19 Response Framework was developed to put together the initiatives that UPD undertook, and should undertake, to address the different aspects of its mandate while ensuring continuity and sustainability of operations. This framework was initially crafted by the author then presented to the UPD COVID Task Force for validation and completion. The main objective of the proposed Response Framework is to minimize the negative socio-economic impacts of the pandemic on the UPD community, as the University continues to fulfill its mandate in this challenging time of the COVID-19 pandemic. It is designed for the short- to mid-term period to address the challenges of the pandemic. This may, however, be updated to provide a long-term response as UPD transitions to a “better normal.”

As shown in Figure 1, minimizing the socio-economic impact of COVID-19 constitutes addressing four aspects, namely, (1) ensuring good health and safety, (2) ensuring adequate and continuous flow of UPD services, (3) supporting academic and research functions, and (4) promoting effective communications.

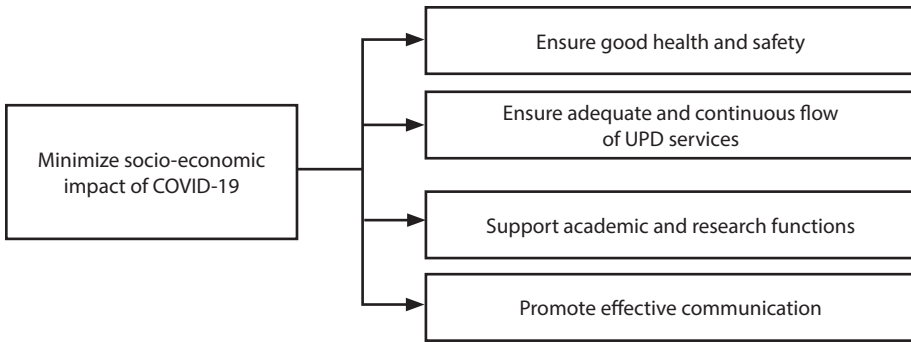


Figure 1. UPD COVID-19 response framework overview.

A. *Ensure good health and safety*

The four responses are each broken down into sub-responses to determine the extent of work done by the university in addressing the different areas affected by the pandemic. The first sub-response is in health and safety. As shown in Figure 2, ensuring good health and safety focuses on the prevention of transmission and on the management of potential infections.

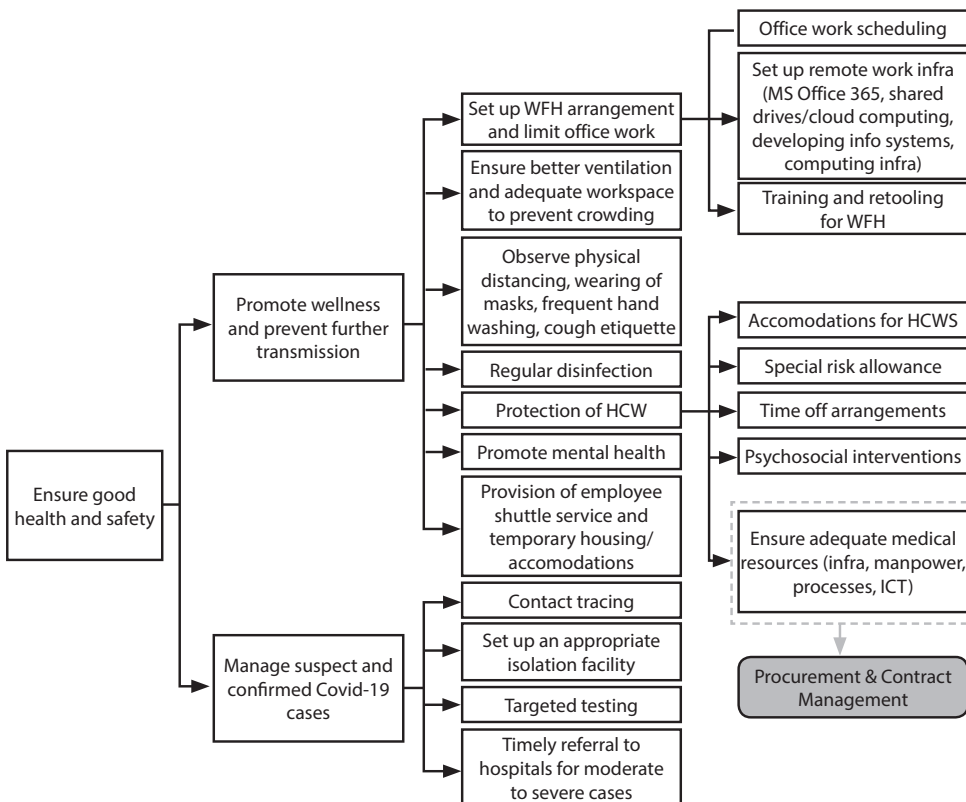


Figure 2. Ensuring good health and safety.

A.1. Promoting wellness and preventing further transmission

In promoting wellness and preventing further transmission, the physical and mental well-being of employees and HCWs were considered. The recommendations on hygiene, such as wearing of masks, frequent handwashing, practicing cough etiquette, and physical distancing, were enforced in offices and widely disseminated. Regular disinfection procedures were also conducted in offices.

Promoting mental health was also addressed with the support of the UP Diliman Psychosocial Services or UPD PsychServ, which offered free counseling or psychotherapy services for those affected by the COVID-19 situation. UPD PsychServ had licensed psychologists and psychosocial support specialists who were trained to provide psychological first aid, counseling, and psychotherapy.

WFH arrangements were allowed to maintain a “skeletal workforce” assigned to physical reporting to the offices. Limiting office work also ensured adequate workspace for better ventilation. This was done by identifying essential work and scheduling tasks that required physical reporting. To support WFH arrangements, the UP license for Microsoft Office 365 was made available for download by faculty and students and was accessible via cloud to administrative staff and Research, Extension and Professional Staff (REPS). The development of information systems and upgrades to the computing infrastructure of UPD were also carried out to support those who are working remotely. With these tools being made available, training and retooling were conducted to assist the employees in setting up their computers to maximize these available tools.

UPD also evaluated options for providing shuttle services and temporary accommodations for employees living outside the campus who are required to physically report for work. The UPD COVID Task Force explored the option to use the jeepneys plying the UP routes to provide work opportunities to jeepney drivers and operators, who were severely affected when public utility jeepneys were not allowed to operate. Even with the easing of the quarantine restrictions, UP has shifted from face-to-face classes to remote learning. Thus, there are no students on campus, even though the first semester of AY 2020–2021 has already started. It also remains uncertain whether face-to-face classes will resume in the second semester, even for select laboratory classes.

To further protect the HCWs assigned to the UHS and the isolation facilities, shuttle service and accommodations were provided in the campus dormitories. HCWs are also entitled to the Special Risk Allowance. Psychosocial interventions, if needed, were made available through the UP PsychServ. The procurement of medical resources was also carried out to ensure the adequate supply of manpower, support processes, ICT infrastructure, and equipment.

A.2. Managing suspected and confirmed COVID-19 cases

The second component in ensuring good health and safety is the management of suspected and confirmed COVID-19 cases. This is addressed through proper contact tracing, setting up appropriate isolation facilities for suspects and mild cases, conducting targeted testing, and providing timely referral to hospitals for moderate to severe cases.

For contact tracing, the Public Health Unit of the UHS was mobilized. This was headed by Dr. Aliza Pangaibat and assisted by Dr. Dulce Natividad. Volunteers from the All UP Workers Union (AUPWU) likewise provided assistance in contact tracing.

UPD had set up two isolation facilities. First was the Kanlungang Palma, which was designated as an isolation area for suspected and probable COVID-19 cases in the UPD area. Kanlungang Palma (Figure 3) opened on April 21 with 50 beds under the sponsorship of Act as One PH. Palma Hall was selected as a temporary isolation facility, as classes were suspended and WFH arrangements were already implemented in the College of Social Sciences and Philosophy (CSSP).



Figure 3. Kanlungang Palma Isolation Facility located at the CSSP.
(Source: UP Media and Public Relations Office 2020)

Palma Hall, the home of the CSSP, was also “known as a shelter for activism” back in the 1970s. It was on the Palma Hall steps where the 1971 Diliman Commune staged protests against the former dictator Ferdinand Marcos during the First Quarter Storm. As Jem Javier, Assistant Professor and current Chair of the Department of Linguistics of CSSP said, “Ang mga silya ay nasa fourth floor, echoing [the First Quarter Storm] and the Diliman Commune, pero ang kalaban ngayon ay sakit. At sa halip na magtaboy ng manunupil ay tatanggap ng mga nangangailangan.” (The chairs on the fourth floor, echoing [the First Quarter Storm] and the Diliman Commune, but the enemy now is a disease. And instead of driving away oppressors, it now receives those in need.)

Along with Kanlungang Palma, the Kalinga Center of the College of Human Kinetics Gym was set up as a step-down isolation last May 2020 (Figure 4). Tents, mattresses, and beddings were allocated either for patients who are recovering from COVID-19 or those awaiting their test results. This is a tripartite initiative among UP-CHK, Maynilad, and Act as One PH.



Figure 4. UP-CHK Gym used as a Step-down Isolation Facility.

(Source: Leongson Office 2020)

With Kanlungang Palma also set up, the CHK Gym was later utilized as the temporary accommodation for HCWs from the Lung Center of the Philippines.

Unfortunately, Last June 23, 2020, seven of the HCWs in the UHS and Kanlungang Palma tested positive for COVID-19 (Magsambol 2020), and in just one week, the number of COVID-19 positive cases increased to 16 (Nemenzo 2020b). Thus, the UHS was closed from June 29 to July 2 for disinfection. Then on July 10, the Kanlungang Palma was also closed. After the COVID-19 infections

in both facilities, guidelines were prepared and updated. Lessons learned were incorporated into the guidelines (UPD OVCCA n.d.).

In preparation for the opening of classes on September 10, Palma Hall needed to be cleared. Thus, another isolation facility, Silungang Molave (SiM), was opened on August 15, 2020 (Figures 5 and 6) (Diliman Information Office 2020a) . Molave is one of the student dormitories located inside the UPD campus. It was recently under renovation, and upon reopening, it was immediately repurposed as an isolation facility. SiM is a 24/7 isolation facility with a 39-bed capacity: 20 beds for mild COVID-19 cases and 19 for suspected and probable cases.



Figure 5. Soft Launch of Silungang Molave (SiM) on August 15, 2020.

(Source: University of the Philippines Diliman 2020a)



Figure 6. Hallway of the Silungang Molave.

(Source: University of the Philippines Diliman 2020a)

As the isolation facilities were only intended for mild COVID cases or suspected cases awaiting test results, arrangements were also made with other hospitals, such as the Lung Center of the Philippines, to accommodate moderate to severe cases of COVID-19 for patients below 20 and over 60 years old.

Likewise, for the targeted testing, a risk matrix was prepared to determine the risk infection levels of employees and agency personnel. Using the risk matrix, employees underwent swab testing at a frequency based on the level of risk. Figure 7 below shows the Risk Assessment Matrix.

Risk assessment matrix					
Level of risk					
Probability	Impact				
	Very low (1)	Low (2)	Medium (3)	High (4)	Very high (5)
Very high (5)	5	10	15	20	25
High (4)	4	8	12	16	20
Medium (3)	3	6	9	12	15
Low (2)	2	4	6	8	10
Very low (1)	1	2	3	4	5

Legend:

Value	Impact	Definition
1	Very low	Little to no impact on testing activities or to the personnel performing the activity
2	Low	Minimal changes to work environment, resulting in delays in testing activity
3	Medium	Medium impact due to changes in work environment and/or equipment, resulting in ambiguous/inaccurate test results
4	High	Marked impact due to high personal risk on personnel performing the activities, resulting in threat to health and safety or great compromise to the operations of the facility
5	Very high	Very high impact that directly results in injury to personnel involved and can potentially disrupt all operations

Value	Probability	Frequency of Reporting to Work
5	Very high	Daily
4	High	At least once a week
3	Medium	At least once a month
2	Low	At least once every six months
1	Very low	At least once a year or rarely

Figure 7. Risk assessment matrix.

According to the matrix, scores from 1–4 have Low-Risk exposure. These employees are to be tested only when they showed symptoms of COVID-19. Personnel who are required to report for work as part of the skeletal workforce but do not have many interactions are considered Medium Risk and have scores of 5–9. An estimated 200 personnel in this category should be tested once every two months. Meanwhile, those with a rating of 10–15 are considered High Risk. They interact with a significant number of people on a regular basis as part of their function and/or have risk exposures due to the nature of their work. Personnel who perform Very High-Risk functions (e.g., UHS and Philippine Genome Center staff, security and maintenance staff assigned to other health and isolation facilities, etc.) are estimated to number around 150. These personnel will be tested once a month.

The swabbing to be conducted for these personnel will use the GenAmplify COVID-19 test kits developed by the UP-PGH. The swab samples will be processed at the Philippine Genome Center in the UPD campus. Test results will be released within 24–72 hours.

B. Support academic and research functions

As the flagship campus of the national university, UPD is expected to lead the way in continuing education amidst the pandemic (Mickey et al. 2020). Thus, UPD continues to conduct and support its academic and research functions. This means an adjustment for the faculty, students, and researchers as they transition to remote learning. As shown in Figure 8, “sustaining the continuity of instruction and learning,” as stated by Vice President for Academic Affairs Cynthia Bautista, requires support for academic and research functions (2020). This includes support for multi-modal teaching for the faculty, provision for Student Learning Assistance System (SLAS), and engagement in research and development (R&D) for COVID-19 monitoring, protection, and treatment.

The six pillars of preparation were defined by the Office of the Vice President for Academic Affairs (OVPA) to ensure support for academic and research functions (Bautista 2020). Five of the six are intended to support multi-modal teaching for faculty and one pillar aims to provide the SLAS. These six pillars, presented in Figure 8, are further discussed below.

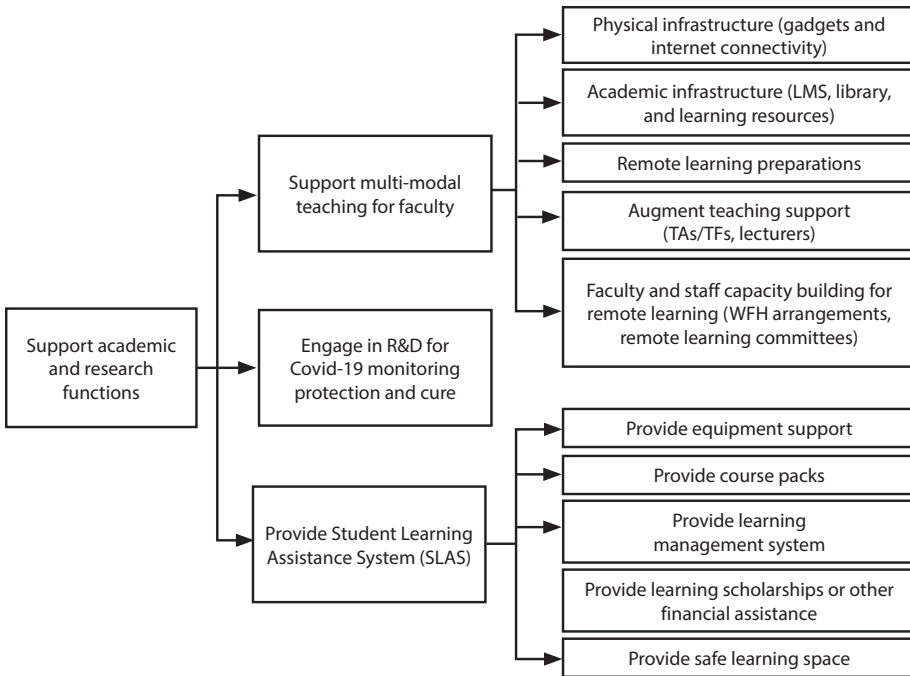


Figure 8. Support for academic and research functions.

B.1. Supporting multi-modal teaching for faculty

The multi-modal teaching allows for both synchronous and asynchronous modes of teaching. Upon approval of the Chancellor and the Board of Regents (BOR), exemptions on the conduct of face-to-face classes may be granted for graduating students and researchers needing to complete laboratory experiments, internships, and laboratory-based course requirements. This is, however, subject to strict health protocols, compliance review, and inspection.

The first pillar is the establishment of Academic Infrastructure. The academic infrastructure for the Learning Management System as well as Library and Learning Resources were also quickly set up to ensure that the students will have access to their course materials as classes moved to asynchronous mode and self-paced learning. For the Learning Management System (LMS), UPD is using the University Virtual Learning Environment (UVLê) (ILC n.d.). All faculty members are encouraged to use UVLê for their classes. All course packs (containing course guides, reading materials, and other learning resources) intended to support guided independent learning were uploaded in UVLê before the start of the first semester of AY 2020–2021.

Incentives were given to faculty members who were able to upload their course packs within the prescribed period. For students with no or low internet connection, printed course packs or USB drives were delivered to them via

courier. This is to ensure that no student is left behind. Several library and learning resources subscriptions and purchases were also made by UP to provide a wide array of databases, collections, and reference materials for faculty members and students.

The second pillar is Physical Infrastructure. For the faculty, the university needed to provide support for multi-modal teaching. The necessary gadgets, computer equipment, and Internet connectivity were provided through a mix of subsidies, allowances, and interest-free computer loan packages.

The third pillar consists of Remote Learning Preparations. This covers modifications in the academic calendar, suspension of academic rules affected by remote learning, program redesign, development of course packs, and the evaluation of remote learning to guide the university's course delivery for the second semester. Program redesign was allowed for AY 2020–2021 to revise the courses offerings for the first and second semester. This redesign allowed temporary changes in the curriculum to move laboratory courses in the second semester when some face-to-face classes may hopefully be held. This resulted in the modification of the academic calendar of the first semester for SY 2020–2021 from 16 weeks to 14 weeks, with adjusted course coverage, splitting of lecture and laboratory components, and remote delivery methods.

Several stakeholder orientations and dialogues were also conducted to plan for the closing of the second semester AY 2019–2020 and the opening of the first semester AY 2020–2021. Webinars on “Taking Stock and Gearing UP for Remote Learning” for faculty members and university-wide faculty consultations were conducted in collaboration with the UP System.

The fourth pillar is Student Support. This will be discussed under the SLAS in the next section.

The fifth pillar is Faculty and Staff Capacity Building for Remote Learning. In this remote learning environment, it is not just the faculty who needed a paradigm shift. This also required the Research, Extension, and Professional Staff (REPS) (Diliman Information Office 2020b) as well as the administrative staff to upgrade their skills as they moved to WFH arrangements. Preparations for the webinars and online training were assigned to the REPS and admin staff. They were required to conduct self-training or on-the-job training alongside contracted personnel for the development of the webinar and training materials. All these needed to happen quickly and simultaneously as activities were happening on the go with deadlines fast approaching. Fortunately, the assigned personnel learned and adjusted along the way.

The sixth pillar is Support for Teaching and Research for Teaching Technologies/ Innovations. This means engaging graduate students as teaching assistants (TAs) and teaching fellows (TFs) to assist the faculty and to provide employment opportunities to the graduate students as well. The Visiting Professorship Program was also tapped, as remote learning allowed foreign faculty to be engaged as additional resources to handle the classes.

B.2. Establishing the Student Learning Assistance System (SLAS)

Considering that the students are at the heart of the learning process, the SLAS has been developed in consultation with the students. In the remote learning set-up, other concerns needed to be addressed. Uncertainty and anxiety in the new mode of remote learning have also made the students vulnerable to mental health issues. In response, the SLAS was established to assist the students in the remote learning process. Peer learning groups and other volunteer groups were organized. A Student Mental Health and Wellness Program and the Student Help Desk were also made available to enhance students' emotional resilience and ensure support as they adjust to the "new normal."

B.3. Engaging in R&D for COVID-19 monitoring, protection, and treatment

Several research projects were launched at the onset of the pandemic. Although the UP Manila College of Medicine and the Philippine General Hospital (PGH) took the lead in the medical research, many projects were carried out in partnership with the UPD College of Science and UPD College of Engineering. The close collaboration of the three colleges with the support of the PGH clinicians and funding from the Department of Science and Technology (DOST) led to the creation of several medical biomedical devices. With the support of the Technology Transfer and Business Development Office in the different campuses, these biomedical devices are undergoing market studies and intellectual property assessment for Intellectual Property Rights (IPR) filings and eventual commercialization.

Personal protective equipment (PPEs) was produced through 3D printing, with funding from alumni and other donors. Several studies were undertaken to monitor COVID-19 infections in the Philippines in terms of reproduction rate and effects on the food supply chain. The results of the studies have provided inputs for policy recommendations of the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-MEID) (2020). The IATF-MEID is mandated to establish preparedness and ensure efficient response to assess, monitor, contain, control, and prevent the spread of any potential epidemic in the Philippines.

C. Ensuring adequate and continuous flow of UPD services

With the quarantine restrictions and the skeletal workforce, challenges emerged in ensuring sufficient manpower for the continuous flow of services. Physically reporting to work was limited to a maximum of three times a week. This resulted in delays in processes, as most administrative processes required document attachments with wet signatures from the unit heads, as required by the Commission of Audit (COA). Figure 9 below shows the initiatives done by the UPD administration to ensure the continuity of services despite the slowdown of work due to limited manpower.

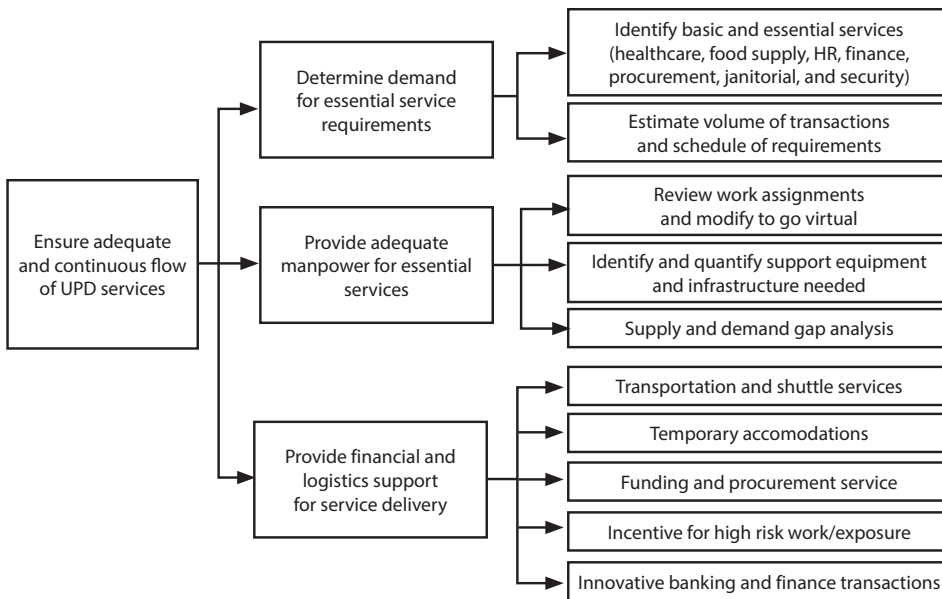


Figure 9. Ensure adequate and continuous flow of UPD services.

Three key areas were identified in ensuring the adequate and continuous flow of UPD Services: determining the demand for essential service requirements, providing adequate manpower for essential services, and providing financial and logistics support for service delivery. Each key area will be discussed below.

C.1. Determining demand for essential service requirements

When the ECQ with very strict restrictions was imposed on March 2020, only the deliveries of essential services were allowed. Each office or unit was required to identify their essential services, and only personnel performing such services were allowed to physically report to office. All others were required to work from home.

The essential services were mostly for healthcare, food supply, human resource, finance, procurement, and janitorial and security services. The UHS needed to be operational to attend to the health concerns of the community and ensure the well-being of the people to avoid further COVID infections. First, food supply, sanitation, and security must be secured, as there were hundreds of students stranded in the campus with the sudden imposition of the ECQ. Procurement of needed supplies, particularly for PPEs, disinfection, and other health and sanitation essentials had to be carried out. Human resources (HR) and financing were also essential in providing the needed salaries and benefits disbursed to support the needs of the community.

C.2. Providing adequate manpower for essential services

When the ECQ was imposed from March 17–April 30, 2020, which was eventually relaxed to Modified Enhanced Community Quarantine (MECQ) in May 2020, activities were limited to the essential services. However, when the General Community Quarantine (GCQ) was implemented starting June 2020, increased activity and transactions were noted. Despite this new arrangement, UPD personnel were still mostly on WFH mode, with a maximum of three days of required physical attendance at work per week. New requirements needing HR and financial services increased the volume of transactions. However, the WFH arrangements and limited physical reporting continued. At the same time, there was an increase in COVID-19 community transmission, causing some offices to temporarily close for disinfection. This became an increasing challenge in ensuring the continued flow of services.

Admittedly, the current systems and processes were not able to support the move to a digital work environment. Work assignments need to be reviewed and modified to support electronic transactions and communications. The systems and processes need to be modified and upgraded into an integrated system for ease of processing and reporting, and the necessary equipment and infrastructure to support an integrated system must also be established. However, this will take time and resources to happen, and this is the major gap that needs to be filled. Until such time that the systems and infrastructure are upgraded, additional manpower will be needed to address the gap.

C.3. Providing financial and logistics support for service delivery

To ensure the availability of the personnel who will perform the work, continued financial and logistics support must be provided. Those physically reporting to work during the ECQ and MECQ with high-risk exposure were provided incentives. The HCWs exposed to COVID cases also received Special Risk Allowance, as provided by the government under the Bayanihan Act.

Arrangements were made for transportation and shuttle services, especially for those living outside the campus or areas far from UPD. Temporary accommodations were also provided in the vacated student dormitories due to the shift to remote learning mode.

With the required additional resources as the university shifted to remote learning and online transactions, procurement and funding services were urgently needed. As UPD was a government institution, it should follow the procurement laws and processes even while the operations of suppliers remained limited due to the community quarantines. As such, the university was unable to move and respond as quickly as needed, even with the emergency procurement mode. Even funding approvals and releases needed to go through the proper channels, sometimes even up to the BOR.

Payments to employees, suppliers, and contractors were required to be done through bank deposits in government banks, such as Landbank of the Philippines (LBP), Development Bank of the Philippines (DBP), and Veterans Bank. This is to minimize the issuance and collection of cheque payments and limit people going to the Diliman Cash Office. As the university is limited to banking with government banks, UPD is thus restricted to available banking services of these banks. To date, the university continues to explore other innovative banking and finance transactions to better serve the university’s different stakeholders.

D. Promoting effective communication

Communication plays a critical role in any crisis. The COVID-19 pandemic has more highlighted the key role that communication plays in managing and minimizing the effects of a crisis.

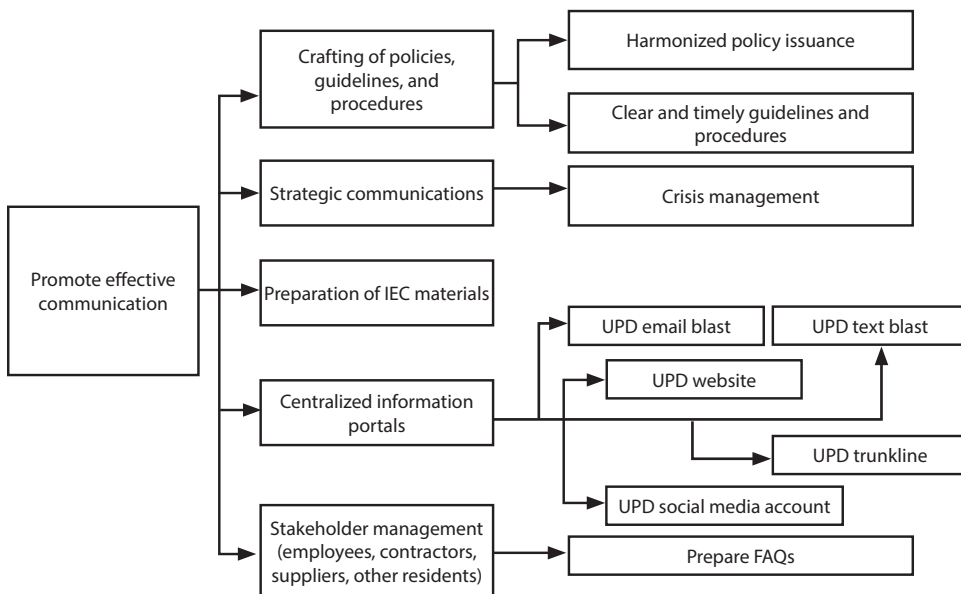


Figure 10. Promoting effective communication.

As shown in Figure 10 above, five areas of communication have been identified: (1) crafting of policies, guidelines, and procedures; (2) strategic communications; (3) preparing the information, education, and communication (IEC) materials; (4) creating centralized information portals; and (5) implementing stakeholder management. Each area is discussed below.

D.1. Policies, guidelines, and procedures

The crafting of policies, guidelines, and procedures should be harmonized across the different levels of university governance—from the BOR to the UP System to the Constituent University (CU) to the Colleges, Departments, and units/offices. Harmony and consistency among policy issuances across various levels should be maintained to avoid confusion and miscommunication even if this may mean longer processing time.

Clear and timely guidelines and procedures are necessary to ensure safety and to prevent the spread of the coronavirus. These guidelines are also updated because of the evaluation after implementation. Guidelines have been created for the use of the community spaces, dormitories, public assembly, and health protocols, among others.

D.2. Strategic communications

Kjerstin Thorson, author of *Strategic communication*, defined strategic communication as “an umbrella term to describe the activities of disciplines, including public relations, management communications, and advertising” (2013, X). He added that strategic communication also “explores [the act of] engaging in purposeful communication.” Therefore, this has become increasingly important in managing crisis situations, as it emphasizes strategy rather than tactics. It means planning for strategies in handling different crisis situations before they happen, thereby allowing an organization to be better able to handle a crisis when it happens. In relation to this, the COVID-19 pandemic has highlighted the need for strategic planning that goes beyond the term of current administrators.

D.3. Information, education, and communication materials

Several IEC materials were developed since the start of the ECQ on March 2020. These materials covered areas ranging from #TatagUP (UP endurance) as the slogan of UP Diliman’s response to the COVID-19 pandemic (Figure 11), the announcement of COVID cases in the UPD community (Figure 12), messages from the UPD Chancellor (Nemenzo 2020c), new HRDO training programs (Figure 13), and Coursera training modules that UPD subscribed to and made available for UPD students. The official announcements from UPD are prepared by the Diliman Information Office (DIO) headed by Dr. Sir Anril Tiatco.



Figure 11. The #TatagUP Slogan.

(Source: Diliman Information Office 2020e)

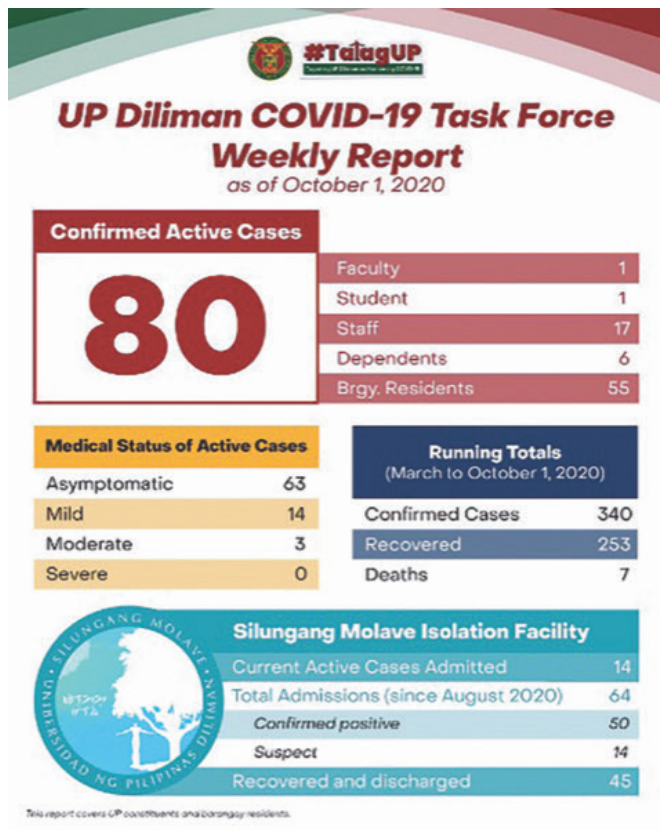


Figure 12. Weekly Report on COVID Cases in UPD.

(Source: Diliman Information Office 2020d)



Figure 13. Announcement on the New HRDO Training Programs.

(Source: Diliman Information Office 2020e)

The issuances of guidelines are also made through the DIO. These guidelines include health protocols, academic matters, conduct of research and field activities, use of dormitories, submission of requirements on HR and financial transactions and many others. These guidelines are also updated to incorporate new information or feedback from the community.

D.4. Centralized information portals

To avoid confusion, information dissemination is centralized and released only through official UPD channels, which include the UPD Website, UPD email blasts, and UPD social media accounts on Facebook, Twitter, and Instagram. UPD also does text blasts, and urgent announcements may also be done through the UPD trunkline.

D.5. Stakeholder management

The UPD Community includes administrators, faculty, students, researchers, administrative staff, families of UP employees, alumni, tenants, boarders, contractors, vendors, service providers, joggers, bikers, and other visitors. These are all stakeholders of UPD. Each component of the community has their own set of needs, expectations, and concerns. To address these, Frequently Asked Questions (FAQs) have been prepared as a guide in transacting within the university during the pandemic. The FAQs were prepared by each of the Vice Chancellor Offices related to academic affairs, student affairs, research and development, administration, and community affairs.

UPD COVID response investments

All the initiatives discussed above required manpower, technical, and financial support. Thus far, about P100,000,000 have been spent for COVID-related expenses over six months into the pandemic.

In the health sector, additional doctors, nurses, public health workers, and janitorial and security personnel were hired to support the UHS and the designated isolation facilities. Additional medical supplies as well as disinfection and sanitation equipment were procured. Health-related expenses for the prevention and support accounted for 59 percent of the costs as of the end of September 2020.

For the academic, research, and administrative support, procurement of computer equipment and Internet support, conduct of capacity building seminars, and the development and distribution of the course packs to the students all needed to be done to support remote learning and WFH arrangements. This accounted for 36 percent of the total, enabling the relevant stakeholders to adjust to the new way of teaching, learning, and working during the COVID-19 pandemic.

Communication has played a vital role in managing the fears, anxiety, and uncertainty brought about by the pandemic. Thus, information, education, and communication materials were developed. Regular addresses and messages from the UPD Chancellor, updates on the COVID situation in the campus, development of infographics, and other community engagement activities were done to maintain the communication lines within and among the different stakeholders. Investments in communications and community engagement accounted for 5 percent of the costs.

These investments will continue as the university adjusts and moves towards the “better normal.”

Conclusion

The UPD COVID-19 Response Framework is a general guide for addressing the various areas of concern of the university and the entire UPD community. It shows the breadth of initiatives undertaken to minimize, if not contain, the socio-economic effects of the COVID-19 pandemic. This framework may also be used for other types of disasters or similar health risks that the university may face in the future.

The UPD Community consists not just of UP employees living on campus. Student dormers, boarders of UP housing units, families of UP employees, vendors, contractors, agency workers, and even joggers and bikers are considered stakeholders. This ecosystem requires a more organized approach to responding to crisis situations, such as a pandemic. A Response Framework built on scalable, flexible, and adaptable concepts helps identify the key areas that need to be addressed. As such, it can be adapted to both a general or more specific type of crisis in the future.

The UPD COVID-19 Response Framework identifies the four key areas for the university. With COVID-19 being a health crisis, addressing health and safety was the primary goal. Moreover, to continue its academic, research, and support functions in accordance with the mandate of the university, key areas of response have also been identified, and the net that ensures smooth and effective response in these key areas is communication. Keeping the stakeholders informed also ensures the alignment of all concerted efforts to address the challenges brought about by the COVID-19 pandemic.

In true UP fashion, the *Utak at Puso (Mind and Heart)* spirit prevails. As the flagship campus of the national university, UPD rises to the challenge of taking a leading role in studying and understanding a national crisis, making innovative and appropriate recommendations, and responding with care and compassion for the people. It is to this end that the Response Framework has been developed. As it has been designed for the short- to mid-term period, it may not be exhaustive. Nevertheless, it can serve as a baseline to be updated and adapted for other crisis situations that may arise in the future.

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