Weathering the Perfect Storm

Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan
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The Association of Southeast Asian Nations (ASEAN) was established on 8 August 1967. The Member States of the Association are Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam. The ASEAN Secretariat is based in Jakarta, Indonesia.
About ASEAN

The Association of Southeast Asian Nations (ASEAN) was established on 8 August 1967. The Member States of the Association are Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam. The ASEAN Secretariat is based in Jakarta, Indonesia. As set out in the ASEAN Declaration, the aims and purposes of ASEAN among others are to accelerate the economic growth, social progress, cultural development, to promote regional peace and stability as well as to improve active collaboration and cooperation.

About AHA Centre

The AHA Centre is an inter-governmental organisation established on 17 November 2011, through the signing of the Agreement on the Establishment of the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) by ASEAN Foreign Ministers, witnessed by the ASEAN Heads of States, from 10 ASEAN Member States: Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam. The Centre was set-up to facilitate the cooperation and coordination among ASEAN Member States and with the United Nations and international organisations for disaster management and emergency response in the ASEAN region.

About AADMER

The ASEAN Agreement on Disaster Management and Emergency Response (AADMER) is a legally-binding regional multi-hazard and policy framework for cooperation, coordination, technical assistance and resource mobilisation in all aspects of disaster management in the 10 ASEAN Member States. The objective of AADMER is to provide an effective mechanism to achieve substantial reduction of disaster losses in lives and in social, economic and environmental assets, and to jointly respond to emergencies through concerted national efforts and intensified regional and international co-operation.
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## SPECIFIC RECOMMENDATIONS

## ANNEXES
LIST OF ABBREVIATIONS

3W = Who is doing What and Where

AADMER = ASEAN Agreement on Disaster Management and Emergency Response

ACDFIM = ASEAN Chiefs of Defence Forces Informal Meeting

ACDM = ASEAN Committee on Disaster Management

ACE Programme = AHA Centre Executive programme

ACPF = ACDM-CSO Partnership Framework

ADMER Fund = ASEAN Disaster Management and Emergency Relief Fund

ADMM = ASEAN Defence Ministers Meeting

ADSM = ASEAN Defence Senior Officials Meeting

AHA Centre = ASEAN Coordinating Centre for Humanitarian Assistance on disaster management

AHAC = ASEAN Humanitarian Assistance Coordinator

AIFDR = Australia–Indonesia Facility for Disaster Reduction

AMS = ASEAN Member States

APG = AADMER Partnership Group

APHP = Asia-Pacific Humanitarian Partnership

APTERR = ASEAN Plus Three Emergency Rice Reserve

ARDEX = ASEAN Regional Disaster Emergency Response Simulation Exercise

ARF = ASEAN Regional Forum

ASEAN = Association of Southeast Asian Nations

ASEAN-ERAT = ASEAN Emergency Response and Assessment Team, in November 2013

ASEAN Emergency Response and Assessment Team

BBC = British Broadcasting Corporation

BGAN = Broadband Global Area Network

CAP = Consolidated Appeal Process

CERF = Central Emergency Response Fund

CNN = Cable News Network

CPR = Committee of Permanent Representatives

CSO = Civil Society Organisations

DELSA = Disaster Emergency Logistic System for ASEAN

DEMA = Danish Emergency Management Agency

DFID = UK Department for International Development
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<td>DMRS</td>
<td>Disaster Monitoring and Response System</td>
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<tr>
<td>DSWD</td>
<td>Department of Social Welfare and Development (Philippine DSWD)</td>
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<td>EAS</td>
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<td>EU</td>
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<td>European Community Humanitarian Office - Emergency Response Coordination Centre</td>
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<td>Joint Typhoon Warning Center</td>
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<td>MIRA</td>
<td>Multi-Cluster Initial Rapid Assessment</td>
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<td>MSB</td>
<td>Myndigheten för samhällsskydd och beredskap or Swedish Civil Contingencies Agency</td>
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<td>NDMO</td>
<td>National Disaster Management Office</td>
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<td>NFP</td>
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<td>Reception and Departure Centre</td>
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<td>V-OSOCC</td>
<td>Virtual On-Site Operations Coordination Centre</td>
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<td>SASOP</td>
<td>Standard Operating Procedure for Regional Standby</td>
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Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

LE LUONG MINH
Secretary-General of ASEAN
AMIDST THE DEVASTATION and tragedy caused by Typhoon Haiyan/Yolanda, there remain untold stories of courage and resilience that embodied the affected Philippine communities. There remains a wealth of experience from responding government officials to assisting humanitarian workers inviting not only lessons but also reflection and analysis, more so that this disaster challenged the basic assumptions and tenets of ASEAN’s existing regional mechanisms for responding together.

With ASEAN acknowledged as a key player in the global humanitarian community, its operational engine, the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management or AHA Centre had to coordinate the massive support coming from other ASEAN Member States, the region’s national disaster management organisations and other stakeholders, enabling ASEAN to reach out and provide direct assistance to the communities. The role of the Secretary-General as the ASEAN Humanitarian Assistance Coordinator was likewise activated to secure and deliver wide-ranging support from ASEAN, showing ASEAN solidarity amidst such unprecedented disaster.

This publication seeks to capture the lessons, challenges and successes from responding together as one ASEAN Community. Through this publication, we hope to have a learning platform on humanitarian assistance, disaster relief and disaster risk reduction that ASEAN disaster management practitioners, the humanitarian community and other stakeholders such as policy-makers, professionals, volunteers and social workers can learn from.

This publication is dedicated to the families and communities affected by Typhoon Haiyan/Yolanda, signifying ASEAN’s continuing commitment to help in rebuilding their lives and restoring their confidence in the future. With a little more than a year before the culmination of our Community building efforts in 2015, may these stories and lessons learned be shared and serve as further inspiration to all ASEAN peoples, for whom we are ultimately building a more caring and sharing ASEAN Community.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

COL (R) PENGIRAN DATO PADUKA HAJI ROSLI BIN PENGIRAN HAJI CHUCHU

Chairman of the ASEAN Committee on Disaster Management (ACDM)
FOREWORD FROM THE CHAIR OF THE ASEAN COMMITTEE ON DISASTER MANAGEMENT (ACDM)

TYphoon Haiyan (Yolanda), indeed, is the ‘perfect storm’, whipping its intensity at an almost constant velocity across the Philippine archipelago before tackling the West Philippine Sea heading to Viet Nam. The devastation left in its track has severely scarred the lives and hopes of families and communities who survived its wrath. But, as quickly as the winds swiped past, we have seen how the Philippines and its people rose from the debris to rebuild anew.

For ASEAN, Typhoon Haiyan also presented to us the unfateful circumstance but perhaps the perfect opportunity to show, together with the rest of the world, our solidarity with the Filipino people and the Government of the Philippines. The storm also tested our capabilities as a regional community to quickly respond when one of us is affected by a disaster. This is the vision of the ASEAN Agreement on Disaster Management and Emergency Response (AADMER).

Nine years after the signing of AADMER, and three years after the establishment of the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre), have we done enough to weather more ‘perfect storms’ that will increasingly demand ASEAN’s collective response? We hope this book tells of those hard lessons and remind us where we can do better as a family of ten nations.

The ACDM, together with the AHA Centre, and the ASEAN Secretariat, has not stopped where our response ends. In the months when we prepared this book, we have also taken tangible actions to ensure ASEAN is ready long before another perfect storm hits.

The ACDM thanks the Government of the Philippines and the ASEAN Member States for lending us this opportunity to learn, beyond where we have done right and where we need to improve – that is, to learn what it means for ASEAN to respond as one.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

SAID FAISAL

Executive Director of ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre)
WE ARE pleased to present this report documenting the lessons learnt from the Typhoon Haiyan aftermath. This catastrophe which is believed to be one of the strongest typhoons the world has ever recorded has left profound impact towards the People of the Philippines.

While this report is focused on the lessons learnt, where we humbly feel there is still room for improvement which will be described throughout the report, we also believe that it is important to note some of the achievements as well. These achievements would not be possible without the strong support from the Philippine government with their renowned NDMO – National Disaster Risk Reduction and Management Council (NDRRMC) in facilitating the incoming assistance from ASEAN. The achievements made during our response to Typhoon Haiyan also resulted from the ASEAN Member States who have supported the ASEAN’s efforts in supporting the Government and the People of Philippines in showing the ASEAN solidarity.

This report is generated from the interviews with 25 key informant-stakeholders and 60 respondents from different institutions during focus group discussions (FGDs), lessons learnt workshop and several meetings held in Jakarta.

We would also like to extend our sincere gratitude to the Government of Australia for supporting the publication of this lessons learnt document.

We strongly hope this document can be a useful reference in improving ASEAN Regional Response Mechanism in the future.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan
EXECUTIVE SUMMARY

Introduction

1. Typhoon Haiyan (Philippine name, ‘Yolanda’), made landfall in the Philippines on 8 November 2013. It is considered to be one of the strongest typhoons ever recorded in world history, based on maximum wind speed, with a wind gust reaching up to 320 km/hour at its peak.

2. Haiyan left massive, widespread damage and loss of lives and properties. The last situation update from Philippine National Disaster Risk Reduction and Management Council (NDRRMC) say that over 16 million people were affected, with more than 4 million displaced. Tallies of the number of people who died reached 6,300, with over 1,000 missing, and causing injuries to more than 28,000. Total cost of damages is estimated at more than USD 142 million.

3. Haiyan is one of the biggest disasters that the Association of Southeast Asian Nation (ASEAN) responded to, along with the Indian Ocean Tsunami in 2004, and Cyclone Nargis in 2008. Though the number of people killed was less than the mentioned tsunami and cyclone, the gravely affected number is twice as much of that cyclone, and six times more than that of the tsunami.

4. ASEAN stands in strong solidarity with the Member States affected by disasters. Other ASEAN Member States immediately provided life-saving assistance to the Philippines in the form of personnel support, cash and in-kind contributions — food, water, sanitation and hygiene, health care services and shelter. In addition, the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) provided direct assistance to the Philippine National Disaster Management Office (NDMO) operations, with the setting-up of pre-fabricated offices and warehouse, as well as giving relief goods for the affected population like food, water, emergency shelters, and hygiene kits.

5. It is important for ASEAN to document and disseminate the lessons learnt in conducting emergency response to those affected by the typhoon. Addressing this need for documentation has been raised from several quarters — from the Philippine Department of Foreign Affairs, NDRRMC of the Philippines and the ASEAN Committee on Disaster Management (ACDM).

6. The scale, impact, and scope of the destruction brought on by Haiyan, and the challenges demanded by the emergency situation, tested the existing procedures and mechanisms in ASEAN. Documenting the experience and drawing up lessons learnt from the region’s response underscore the imperative to assess the effectiveness of existing processes and
mechanisms, and recommend improvements in country- and ASEAN-level responses to large-scale disasters in the region. Such recommendation includes better coordination with ASEAN Dialogue Partners, the UN, and other international organisations.

A Technical Working Group (TWG) was formed to document lessons on the ASEAN response to Typhoon Haiyan. The six-member TWG, providing direction and guidance on the documentation processes and findings, comes from representatives from the AHA Centre, the ASEAN Secretariat, the Office of Civil Defence of the Philippine Government, and the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) Partnership Group (APG). Data-gathering methodologies include key informant interviews of 25 respondents, and two group consultations, conducted in Manila and Jakarta, with a total of 60 respondents. Key stakeholders involved were representatives from assisting ASEAN Member States, the affected Member State, ASEAN Dialogue Partners, ASEAN Emergency Response and Assessment Team (ASEAN-ERAT) members, representatives from civil society organisations (CSOs), the UN Office for the Coordination of Humanitarian Affairs (UN OCHA), ASEAN Secretariat, and the AHA Centre.

**What Went Well**

RESULTS of the above-mentioned documentation processes surface the good practices that may be replicated and further institutionalised for future response to emergencies:

1. The good reception of the Philippine NDMO to the arrival of ASEAN-ERAT members before disaster strikes. Positioning people in the country before disaster struck proved to be advantageous for coordination and quick-reaction response. This strong collaboration and cooperation between the Philippine and AHA Centre also show the trust and reputation that AHA Centre has built with ASEAN Member States.

2. The AHA Centre immediately established links with the NDMO’s Operation Centre of the affected country and was integrated as part of the national government operations, while the other ASEAN-ERAT members brought its standard mission communication equipment at ground zero. This contribution proved to be invaluable, enabling the AHA Centre to help in the restoration of emergency telecommunication services immediately after the typhoon struck, especially between the Regional Office to the Operation Centre in the capital city. The ASEAN-ERAT members also conducted training of local disaster management staff on emergency communication one day prior to landfall in Tacloban. Later, the AHA Centre supported the NDMO operations through the provision of a much-needed pre-fabricated office and warehouse.
The Governments of Brunei Darussalam, Malaysia and Thailand channelled the aid assistance led by their respective Ministries of Foreign Affairs (MoFA), in close coordination with the NDMO and the military. Throughout this process, the NDMOs of the assisting Member States used Form 4 of the Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (SASOP), and sent it to the AHA Centre. The Government of Indonesia also provided the information directly to the AHA Centre. This process allowed the AHA Centre to receive updates from the ASEAN Member States, which in turn facilitated the monitoring of aid distribution.

There was a strong and generally smooth collaboration between the Philippine Government and the AHA Centre. A Philippine Liaison Officer assisted the Centre in coordinating with other government departments involved in the Haiyan response. Such liaison support played a crucial role in the coordination with the Philippine military for the timely transport of aid items, and with the Philippine Department of Social Welfare and Development (DSWD), charged with warehousing and distribution of relief goods and other aids.

The ease of disbursement of the ASEAN Disaster Management and Emergency Relief Fund (ADMER Fund) by the ASEAN Secretariat made the AHA Centre more responsive, therefore more effective, especially for mobilising personnel and equipment. As well, tapping the ADMER Fund for the documentation of lessons learnt amplified its crucial role in improving the organisational learning processes. Member States contribute to this Fund, administered by the ASEAN Secretariat.

Before the typhoon struck, the AHA Centre gave a commitment to support the Philippines with resources. Immediately after the disaster, Brunei Darussalam, as Chair of ASEAN and the Secretary-General of ASEAN, sent messages of condolences to express ASEAN’s commitment and solidarity to help the affected communities. Early on, a strong message of the ASEAN solidarity was evident, thus further strengthening the ASEAN’s response.

Even before the super typhoon made landfall, the ASEAN Secretariat already had a close working relationship with the AHA Centre as far as Typhoon Haiyan operations were concerned. The ASEAN Secretary-General (SG), also serving as the ASEAN Humanitarian Assistance Coordinator (AHAC), was periodically given briefing papers with recommended action points, prepared by the Secretariat jointly with the AHA Centre. The Secretary-General’s visit to Manila and Tacloban, together with the AHA Centre, personally leading the
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...delivery of ASEAN’s relief goods to the city of Tacloban and reaffirming ASEAN’s solidarity and support to the affected Member State in times of disasters.

Executive Briefings attended by the Committee of Permanent Representatives to the ASEAN, the Defence Attaché, and ASEAN Dialogue Partners, were organised by the ASEAN Secretariat with the AHA Centre immediately after the disaster. These briefings were timely and useful in terms of information sharing on what was happening on the ground, and dispatching relevant response.

What Have Been Learnt

TEN learning points in emergency response to Typhoon Haiyan for the ASEAN:

1. Be the first on the ground: Quick deployments of ASEAN-ERAT to the country, even before the disaster struck, provided a significant advantage. This approach should be institutionalised as a standard operating procedure for mobilising ASEAN-
ERAT. Deployed teams should be self-sufficient, with proper and adequate equipment and facilities. Proper arrangements need to be secured as early as possible to guarantee the safety, security, health and well-being of all deployed personnel.

ASEAN-ERAT is the backbone of ASEAN’s operation: Playing a critical function, ASEAN-ERAT members should be equipped with basic skills and knowledge on core humanitarian competencies, humanitarian leadership, coordination, and basic logistics management to facilitate assistance from Member States. Its composition should be expanded including representatives from the government (outside the NDMO and military personnel), as well as from non-government agencies, e.g., Red Cross, CSOs, and private sector groups, to bring a wider range of skills as required.

The ASEAN-ERAT Guideline should be revised to reflect the expanded mandate and composition, that has been decided on by ACDM. The guideline should have clear criteria and spell out required competencies of ASEAN-ERAT members, as well as an adjustment of the period of deployments. To facilitate the quick mobilisation of members, a pre-approved deployment agreement should be stipulated, explicitly stating the procedures for demobilisation, and the availability of psychosocial support.

Information sharing needs to be enhanced and expanded: Up-to-date information is required to have the complete picture of the situation, which serves as basis for decisions on the next courses of action for the ASEAN’s response. SASOP, endorsed by all ASEAN Member States, guides the procedure on information sharing, and should be enforced. All NDMOs should be the champions in the use of SASOP procedures. The use of SASOP should also be promoted to other government departments. The Situation Updates, prepared by the AHA Centre, should have an executive summary, and be circulated to a wider audience including key government agencies, such as focal persons of foreign affairs ministries, defence and the military, members of the Committee of Permanent Representatives, and Defence Attaché.

Complementing the Situation Updates, regular executive briefings should be conducted by the ASEAN Secretariat and the AHA Centre, for Country Permanent Representatives, the Defence Attachés of all ASEAN Member States, as well as for Dialogue Partners.

Regular training for the use of the Web-based Emergency Operation Centre (WebEOC) system should be conducted, not just with focal point persons from NDMOs, but with other relevant government departments. Member States should use the WebEOC.

Coordination role of the AHA Centre needs to be enhanced: The coordination role of the AHA Centre is not only with ASEAN Member States, but also with other international humanitarian actors. In disaster situations, it is critical for the AHA Centre to immediately set-up a coordination centre for all ASEAN teams, both in the capital and in the field, for quality operational and tactical coordination. This coordination hub serves also as a staging area to facilitate and expedite the entry of supplies, equipment, and expertise from all assisting parties. In addition, coordination in Jakarta needs to be maintained to support strategic level coordination, including with other ASEAN bodies.

The AHA Centre should have a smooth interface with the international humanitarian system, using available tools and mechanisms to ensure that the ASEAN’s response synergises with other international aid initiatives. It should strengthen its collaboration with the UN OCHA coordination mechanism, align and strengthen cooperation for funding appeals, and enhance the partnerships between United Nations Disaster Assessment and Coordination (UNDAC) team and ASEAN-ERAT, as well as in conducting joint assessment activities as the Multi-Cluster Initial Rapid Assessment (MIRA) and the Post Disaster Needs Assessment (PDNA).
Civilian-military coordination is essential: Mobilising military personnel and assets for disaster response is a common practice in many ASEAN countries, particularly in situations of large-scale emergencies. With Typhoon Haiyan, some Member States extended assistance with their military personnel, facilities, and vehicles to support the response. This necessitates enhancing and institutionalising better coordination between the civilian and military.

The AHA Centre should develop a mechanism for civilian-military coordination on Humanitarian Assistance and Disaster Relief (HADR). This mechanism should include a clear civilian-military cooperation framework and protocols, as well as a concept of operations for the Centre and the Member States. It is also important that such proposed mechanism be well-aligned with the mechanism governing the UN system and other regional mechanisms. The instrument should be tested regularly through joint response planning, with disaster simulation exercises. To further strengthen coordination, the AHA Centre should have military liaison officers from the ASEAN Member States.

Media relation is an important aspect of emergency response: ASEAN needs to inform the outside world about what responses are being implemented, as well as the role played by the AHA Centre in that response. An effective communications strategy for the AHA Centre and for ASEAN as a whole in the event of disasters, that includes good media relations, is needed to increase the visibility of ASEAN assistance, to facilitate better cooperation for a more effective and timely response. The AHA Centre, in tandem with the ASEAN Secretariat, should have continuous updates to the press, combined with more content through social media sites to increase awareness on the ASEAN’s response to a wider audience.

Collective response should be enhanced: Bilateral assistance from Member States should be seen as part of the ASEAN’s response. This has been agreed by ASEAN Leaders to have a common “branding” projecting both the national and ASEAN flags or logos. Multi-sectoral approach is a requirement in the ASEAN’s collective response. The ASEAN’s collective response to disasters requires not only mobilisation of the AHA Centre and mechanisms under the AADMER, but also mobilisation of other relevant sectors and mechanisms and resources within ASEAN. SASOP should include a mechanism for joint response planning with Member States to facilitate quick and multi-sectoral ASEAN response. It is important that before disaster strikes, scenario and ASEAN’s response planning based on the type and scale of disasters be finalised by the AHA Centre. These ASEAN’s response options should clearly describe the concept of operations, roles and responsibilities, resources needed, the decision-making process, and the “triggering” criteria based on the scale of the disasters.
At the country level, there are various government departments involved in the international aid assistance, especially in large-scale emergencies. As the National Focal Point, NDMOs play a key role in coordinating with other relevant government departments (e.g., foreign affairs and military) that the AHA Centre needs to collaborate with, to facilitate a collective response.

**ASEAN Humanitarian Assistance Coordinator (AHAC) plays a vital role:** Collective ASEAN’s response is as much a show of political will as it is a matter of operations. The Secretary-General (SG) as AHAC has the political capacity to call for support from ASEAN nations for the affected Member State. Such political stance provides the leadership necessary for high-level coordination and timely mobilisation of resources from ASEAN’s sectors, ASEAN’s mechanisms, ASEAN Dialogue Partners and other external actors to ensure multi-sectoral responses. These resources are fundamental to enable a fast, reliable, and collective ASEAN’s response.

In the event of a large-scale disaster where time is of the essence, the highest level coordination by an ASEAN’s central focal point, in this case the SG of ASEAN as AHAC, would be necessary to ensure ASEAN’s coordinated and swift response to the disaster. Using the mandate given by the ASEAN Leaders, the SG of ASEAN could use reinforcement from relevant sectors such as political and defence, to make ASEAN’s response faster and more visible.
The SG as AHAC, could also support the affected country, in coordination with the ASEAN Chair and the UN system, to organise pledging conferences or donor sessions to help with the mobilisation of resources for the affected country’s relief and recovery efforts.

Taking the lessons from Haiyan, the Terms of Reference (TOR) and Operational Procedures of the SG of ASEAN as AHAC are needed to provide clearer parameters and functions for the SG of ASEAN as AHAC in mobilising resources and coordinating multi-sectoral response to disasters. The TOR was endorsed by the ASEAN Coordinating Council, and welcomed by the 24th ASEAN Summit in early May 2014. The Operational Procedures being developed, need to be communicated to and tested in dry-runs or exercises with the sectors and bodies in ASEAN that will be engaged in the event of large-scale disasters.

**Expectations-Resources Match is imperative:**

With the recent success and progress that AHA Centre achieved, expectations among ASEAN Member States and other external stakeholders — CSOs, UN agencies, Dialogue Partners — have risen. The ACDM should match these expectations with resources for the Centre’s use. At present, resources for the operations of the Centre are mainly sourced from the ASEAN Dialogue Partners. There is a need to increase support from the ASEAN Member States, as shown from the ASEAN Leaders’ political commitment to ensure sustainable and sufficient resources for the AHA Centre, as agreed on in the ASEAN Declaration on Enhancing Cooperation in Disaster Management and the Nay Pyi Taw Declaration on Realisation of the ASEAN Community by 2015.

**Early preparations for and mitigation of the next large-scale disaster:** The learning process for a better ASEAN’s response is a continuous one. Clear indicators and mechanisms are therefore needed to measure the performance of ASEAN’s response, as well as the effectiveness of AHA Centre operations in emergency response.

Considering trends, the potential of the next disaster being larger with damage more disastrous than Haiyan is, unfortunately, not a remote likelihood. Preparations for such a possibility have to be done the soonest time possible. This should include the enhancement of regional standby arrangements agreed on in AADMER, review and enhancement of pre-positioned relief items for rapid delivery of initial response, and the improvement of AHA Centre’s operational capacity by establishing long-term agreements with humanitarian partners (such as private sector and CSOs).

ASEAN needs to significantly raise its preparatory efforts for large-scale disasters, including for a disaster even larger than Haiyan, as well as addressing multiple, simultaneous emergencies. Different disaster scenario-building should be conducted, and a joint response planning in each Member State should be implemented, to enable the identification of specific assistance/responses that may be required from ASEAN.
For now, the AHA Centre is focusing on disaster monitoring, response and recovery. The ACDM, with the support from the ASEAN Secretariat needs to raise the level and quality of its leadership in disaster risk reduction, through cooperation and collaboration with other sectoral formations (e.g., education, health, agriculture, finance, etc.). Existing partnerships with UN agencies and CSOs on the implementation of disaster risk reduction measures need further strengthening, towards the AADMER vision of a region of disaster-resilient nations and safer communities in ASEAN.

Conclusion

1. Typhoon Haiyan has shown three things. First, that ASEAN Member States stand in strong solidarity with each other in times of disasters. Member States immediately responded with aid assistance to the Philippines. Second, the Government of Philippines, as the affected country, was successful in receiving the assistance from the AHA Centre and the Member States. And third, the AHA Centre was able to perform critical services to support the ASEAN’s response. Considering that the AHA Centre was just established only two years ago, these achievements are noteworthy.

2. The AHA Centre can further enhance its capacity to fulfil its mandate based on AADMER.

3. The ASEAN’s mechanisms, however, including the AHA Centre, have not yet been designed to address disasters of this magnitude and complexity that required a multi-faceted, multi-disciplinary, and multi-sectoral approach. Evidence shows that this would entail the involvement of a wide range of sectors, not just NDMOs, but with other units of the government, including the military and foreign affairs. This should be addressed through the establishment of the Joint Task Force to promote synergy with other relevant ASEAN bodies on HADR. Multi-sectoral response to disasters is a necessity, particularly if the scale and magnitude is as big as Typhoon Haiyan.

4. The Secretary-General as AHAC plays a vital role in mobilising other ASEAN’s sectoral bodies and mechanisms, as well as the ASEAN’s circle of networks and partners. There should be a strong institutional capacity within the ASEAN Secretariat to support the SG as AHAC to do high level coordination and resource
In the immediate future, ASEAN, including the AHA Centre, should build its coordinative role between the disaster-affected host governments and other actors, including the Member States and other international stakeholders. ASEAN and the AHA Centre should redefine and further strengthen this role.

- At the strategic level, the ASEAN Secretariat should organise discussions for strategic decision-making processes of ASEAN Leaders and Ministers, in support of the Secretary-General as AHAC.

- At the operational level, the AHA Centre should lead the coordination of aid assistance from ASEAN to the affected Member States, working closely with UN OCHA and other humanitarian agencies, private sector, charity groups and NGOs.

- At the tactical level, the AHA Centre should take a leadership role on the ASEAN-ERAT, in support of the NDMO of the affected country, as well as the overall ASEAN’s response.

The strength of ASEAN’s response will depend on the ability of Member States to have a fast, reliable, and collective response. To achieve this, ASEAN Member States should strengthen and empower the existing ASEAN’s mechanisms and multi-sectoral actions by utilising the AADMER as the main common platform for disaster management in ASEAN, and further support the operationalisation of the AHA Centre to enhance its capability.
WEATHERING THE PERFECT STORM

TYPHOON HAIYAN (Philippine name, ‘Yolanda’), made land-fall in the Philippines on 8 November 2013. It is considered to be one of the strongest typhoons ever recorded in world history, with a maximum wind speed of 320 km/hour at its peak.

Haiyan is one of the biggest disasters that the Association of Southeast Asian Nation (ASEAN) responded to, along with the Indian Ocean Tsunami in 2004, and Cyclone Nargis in 2008. Though the number of people killed in Haiyan was less than with the mentioned Tsunami and Cyclone, the number of people adversely affected is twice as much of the Cyclone, and six times more than that of the Tsunami.

To address the massive devastation wrought by Haiyan, the Philippines as well as other countries, including ASEAN countries, international organisations like the United Nations (UN) and the Red Cross, international Non-Government Organisations (INGOs), local NGOs, public and private sector groups, mobilised their resources to assist the affected communities through response and recovery efforts.

ASEAN stands in strong solidarity with Member States affected by disasters. In the case of Haiyan, ASEAN Member States immediately provided life-saving assistance to the Philippines in the form of personnel support, cash and in-kind contributions — food, water, sanitation and hygiene, health care services and shelter. As well, the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) extended direct assistance to the Philippine National Disaster Management Office (NDMO) operations, by setting-up pre-fabricated offices and warehouse, as well as giving relief goods such as food, water, emergency shelters, and hygiene kits, through the NDMO.

Documenting the experiences and drawing-up the lessons from the response and recovery efforts to Typhoon Haiyan are important, not to mention necessary, to ensure that good practices in disaster management processes and procedures are in place for learning and replication. The need for documentation is echoed from several quarters — from the Philippine Department of Foreign Affairs (DFA), to the National Disaster Risk Reduction and Management Council (NDRRMC) of the Philippines, to the ASEAN Committee on Disaster Management (ACDM).

On the one hand, the AHA Centre, assisting ASEAN Member States, together with the ASEAN Secretariat, have followed existing procedures and mechanisms outlined in the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) and the Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (SASOP), in the provision of support for the emergency response to the Philippines.
On the other hand, the scale, impact, and scope of destruction brought on by Haiyan, and the challenges demanded by the emergency situation, tested these same procedures and mechanisms. Documenting the experience and culling lessons from the region’s response underscores the imperative to assess the effectiveness of existing processes and mechanisms. Additional to this is the need to recommend improvements at the country and ASEAN-level response, towards better preparedness for large-scale disasters in the region. Recommendations should likewise include ways to further strengthen coordination with ASEAN Dialogue Partners, the UN, and other international organisations.

Drawing out the lessons learnt from the response and rehabilitation efforts to Typhoon Haiyan is being done at two levels — at the country level (Philippines) and at the regional level (ASEAN). Both studies are co-financed with the ADMER Fund, drawn from contributions from all ASEAN Member States, with additional financial support from the Government of Australia. The process at the country level is led by the Government of the Philippines, while the regional level study is done jointly by the AHA Centre, the ASEAN Secretariat, the Government of the Philippines and the AADMER Partnership Group (APG).
Ocean disturbance in the Pacific

AHA Centre monitored the formation of a weather disturbance in the Pacific Ocean.

5 November 2013

The typhoon was monitored closely by the AHA Centre, in coordination with other agencies such as PAGASA and JTWC. Information was disseminated through social media portals (Facebook and Twitter).

6 November 2013

The Alert level was raised to Yellow. The first Flash Update was sent to all NDMOs. ASEAN-ERAT members were notified of possible deployment. Brunei Darussalam immediately confirmed two ASEAN-ERAT members for deployment. The AHA Centre contacted the Philippine NDMO for the ASEAN-ERAT deployment and its readiness to provide further assistance.

7 November 2013

First deployment consisting of two members of the ASEAN-ERAT team arrived in the Philippines. Coordination with the NDRRMC was conducted in Manila and at the field level (Tacloban). The second Flash Update was issued. The regional warehouse in Subang, Malaysia was on standby.
8 November 2013
Typhoon Haiyan made landfall. ASEAN-ERAT set-up an emergency telecommunications base in Tacloban, and information was disseminated through WebEOC. The first Situation Update was sent to all NDMOs.

10 November 2013
The first ASEAN-ERAT Assessment Report was produced.

11 November 2013
The AHA Centre issued an initial response decision to mobilise relief items amounting to USD 250,000 to the Philippines.

12 November 2013
The AHA Centre and ASEAN Secretariat organised Executive Briefings for ASEAN Dialogue Partners, the Committee of Permanent Representatives of ASEAN and the ASEAN Defence Attaché. This was followed by a press conference.

19 November 2013
The first batch of assistance from the AHA Centre, in the form of rice and bottled-water arrived. The Secretary-General of ASEAN visited the Philippines and handed-over the relief items to the Secretary of Department of Social Welfare and Development.

9 January 2014
The last assistance facilitated by AHA Centre for the Haiyan response was sent.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan
**DOCUMENTATION PROCESS**

**THIS REPORT** is based from data gathered from interviews with 25 key informant-stakeholders, 60 respondents among Philippine stakeholders in focus group discussions (FGDs), and a workshop in Jakarta with representatives of Member States.

The guiding questions were drawn from the original evaluation itemised in the terms of reference and categorised into nine concerns on: the ASEAN’s Response, Operations, Resource Mobilisation, Communications/Media, the ASEAN Secretariat, ASEAN Humanitarian Assistance Coordinator, Preparedness, General comments, and a probe on what people would do differently the next time a disaster happens.

Not all pieces of evidence have the same weight. The contracted Research Consultant weighed the evidence offered by individuals based on three factors:

1. **The extent to which the position of the respondent enabled them to make a grounded summary judgement.** Thus the views of the ASEAN Member States in relation to the extent to which they expect ASEAN’s response was given more weight than the views of the ASEAN Dialogue Partners expectations;

2. **The level of experience of the respondent** (where comparative judgements were offered). Thus more weight was attached to the views of the staff with experience in managing multi-agencies aid assistance, than to those with more limited experience.

3. **The presumed bias of the respondents.** For instance, much more weight was given to the Government of the Philippines saying that the ASEAN-ERAT team was helpful than to AHA Centre staff saying the same thing.
A Technical Working Group (TWG) was formed to document the lessons learnt on the ASEAN’s response to Typhoon Haiyan. The six-member TWG, providing direction and guidance on the documentation processes and findings, comes from representatives of the AHA Centre, the ASEAN Secretariat, the Office of Civil Defense of the Philippine Government, and APG.

The findings of the report are structured into three main sections: before landfall (preparedness); the Haiyan aftermath (response); and the strategic components. For the section on response, the Consultant used the objectives set by the AHA Centre for the Typhoon Haiyan response for the sub-sections of the report. These are:

- Managing Information,
- Facilitating assistance from ASEAN Member States,
- Providing support to the NDMO of the affected country, and
- Providing support to the affected population through the Government of the Philippines.

As for the Strategic Components, analysis is focused on the role of ACDM, the Secretary-General of ASEAN as the ASEAN Humanitarian Assistance Coordinator, and the ASEAN Secretariat.
AHA Centre Support to Philippines Typhoon Haiyan Emergency Operation

November, 2013

07

- 2 BGAN, 2 Sat Phone
- 2 Staff, 1 ERAT, 1 ERAT support personnel from APG

08

- TYPHOON HAIYAN LANDFALL

10

- 2 Staff, 2 ERAT, 1 ERAT support personnel from APG

12

- 1 Staff

19

- 2.5 Tons Rice
- 2,000 Bottled Water

20

- 2 Office Prefabs, Supplies, 1 Generator, 1 MSU, 10 Family Tents
- 1 Staff

22

- 2,000 Personal Hygiene Kits

23

- 1,000 Tarpaulins

24

- 1 Mobile Storage Unit established in Guiuan

25

- 2 Staff

26

- 500 Tarpaulins

December, 2013

02

- 2 Staff

08

- Total Value: US$ 606,700

26

- 200 Temporary Living Equipment
- 200 Personal Hygiene Kits

29

- 250 Shelter Kits
- 500 Tarpaulins

January, 2013

The AHA Centre Operations in responding to Typhoon Haiyan was supported by:
- ASEAN Disaster Management and Emergency Response (ADMER) Fund
- The Government of Australia through the Cooperation Arrangement between Australia and ASEAN on the AADMER Work Programme for 2010-2015
- The Government of Japan through the Japan-ASEAN Integration Fund (JAIF), under Disaster Emergency Logistics System for ASEAN (DELSA) Project
THE CONTEXT – TYPHOON HAIYAN

The ASEAN’s Response to Typhoon Haiyan

THE AHA Centre was already monitoring the development of the storm since 4 November 2013, and positioned two officers on the ground on 7 November 2013, a day prior to its landfall. After some days, this was followed by deploying additional disaster emergency responders from the AHA Centre and ASEAN Member States, including the ASEAN Emergency Response and Assessment Team (ERAT) from Brunei Darussalam, logisticians, and medical personnel, to deliver the necessary assistance and support to the typhoon affected areas.

Solidarity initiatives, as well as public fundraising efforts, were intensified across the region. Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Singapore, Thailand, and Viet Nam sent their best emergency responders, relief goods, and pledges for financial support through bilateral channels, as well as through the AHA Centre mechanism.

AHA Centre Mission Objectives on Typhoon Haiyan Response

01	Managing Information
Provide continuous update on disaster situation to all ASEAN Member States

02	Facilitating Assistance from ASEAN Member States
Administration and logistical support and field coordination with the Government of the Philippines

03	Support the NDMO of the Affected Country
Provide operational support to the Office of Civil Defense Region 8 in Tacloban through the provision of emergency communication, food & water, office prefabs, generators, mobile storage units, office tents, etc

04	Providing Support to the Affected People through the Government of the Philippines
Provide emergency relief items to the affected people such as tarpaulin, hygiene kits, shelter tool kit
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

ASEAN Support to Philippines’ Typhoon Haiyan Emergency Operation

Consisting of support from ASEAN Member States, ASEAN Secretariat and AHA Centre

Sources: SASOP Form 4, Foreign Aid Transparency Hub (FAiTH)/www.gov.ph/faith, correspondence with Assisting Member States, as of 28 December 2013. Other support from ASEAN Member States to the Philippines may exist without the knowledge of this study.
WEATHERING THE PERFECT STORM

NOV 8, 2013
Typhoon Haiyan, strongest storm ever recorded at landfall
Speed: 260 km/h (160 mph)

Total Number of Devastation

- Displaced: 4,095,280
- Dead: 6,109
- Missing: 1,779
- Injured: 28,626
- Affected Population: 16,078,181

Total Cost of Damages: US$ 142,191,945

Source: NDRRMC as of 24 Dec 2013

ASEAN Support Sources:
- In cash donation
  - US$ 5,050,000
  - US$ 2,700,000
  - US$ 50,000

Various relief items worth of US$ 260,000

CN-235 full of food items, non-food items, medical supplies
Naval ships full of food items, non-food items, medical supplies
Personnel to support AHA Centre field team
C-130 full of food items, non-food items, medical supplies
Field hospital and mobile medical service
53 medical personnel and SMART
US$ 1,000,000 in cash donation
US$ 100,000 in cash donation
Provide various relief items

Field hospital and mobile medical services

10 family tents

2000 rolls Tarpaulins

19 Personnel to support ASEAN Emergency Operation

2 BGAN

2 satellite phones

Source: SASOP Form 4, Foreign Aid Transparency Hub (FAiTH)/www.gov.ph/faith, correspondence with Assisting Member States, as of 28 December 2013.

Other support from ASEAN Member States to the Philippines may exist without the knowledge of this study.
WEATHERING THE PERFECT STORM

FINDINGS

Before Landfall: Being prepared

THE RESPONSE to Typhoon Haiyan started 4 days before the typhoon made landfall in the Philippines. On Monday, 4 November 2013, the Disaster Monitoring and Response System (DMRS) of the AHA Centre indicated the formation of a weather disturbance in the Pacific Ocean, with the forecast tracks going towards the general direction of the Philippines. The following day, AHA Centre provided updates through its website and social media accounts (Facebook and Twitter). By Wednesday, 6 November 2013, the AHA Centre convened the Initial Emergency Operation Centre (EOC) Briefing, and then raised the alert level to Yellow.

In the AHA Centre’s Emergency Operations Manual, activation of a Yellow Alert level triggers preparedness activities, changing of the Alert Level Display Board, and the creation of an incident name in the AHA Centre’s crisis information system called the Web-based Emergency Operation Centre (WebEOC). Preparedness activities implemented for Typhoon Haiyan consist of assigning staff of the AHA Centre to the EOC structure. Funding for response operations was requested to be ready for disbursement, the regional logistic stockpile (in Subang, Malaysia) was activated, the monitoring team collaborated closely with PAGASA and JTWC to keep track of the weather, ASEAN-ERAT members were notified and put on standby. The AHA Centre also started to send Flash Updates. The first Flash Update was issued on the same day to all ASEAN Member States through the NDMOs in the region.

The Executive Director of AHA Centre then sent a letter to the Philippine Head of OCD/NDRRMC, which is the Philippine NDMO, to inform him of the ASEAN-ERAT deployment to the Philippines.
LESSONS LEARNT ON THE ASEAN’S RESPONSE TO THE AFTERMATH OF TYPHOON HAIYAN

Mobilising ASEAN-ERAT

THE ASEAN-Emergency Response and Assessment Team (ASEAN-ERAT) was first activated in response to Cyclone Nargis in 2008. The function of the ASEAN-ERAT at that time was to conduct a joint assessment, coordinate and gather information in the field, to provide recommendations in addressing the support needed by the Government of Myanmar. In March 2010, the ACDM adopted the AAD-MER Work Programme, where one of the flagship projects identified was the establishment of a fully-functional ASEAN-ERAT. By the end of October 2010, the ASEAN-ERAT Workshop and the 1st ASEAN-ERAT Induction Course were successfully conducted in Singapore.

To help steer the ASEAN-ERAT activities, a guideline was developed as a reference tool for ASEAN-ERAT personnel before and during a mission to a disaster or emergency. The guideline contains information on the ASEAN-ERAT system, personal preparedness and pre-deployment arrangements, mission equipment, alert-activation-and-mobilisation procedures, deployment procedures, on-site operations for assessment, as well as on demobilisation and review of operations sections.

The guideline also discusses the minimum standards on what the ASEAN-ERAT team needs to perform, including mobilising within 8 hours of notification, being ready for a deployment period of 10-14 days, drawing-up a Plan of Action with the NDMO, setting up the ASEAN-ERAT base within the first 12-24 hours upon arrival, and submitting the 1st assessment report within 72 hours upon arrival at ground zero.
About ERAT: The ASEAN-ERAT Team is composed of experienced and trained individuals who have responded to disaster incidents in the region. The role of the ASEAN-ERAT is to respond quickly to a major sudden onset disaster or man-made emergency in one or more Member States within the ASEAN region. The function of the ASEAN ERAT is to support the Disaster Management Office (NDMO) of the disaster affected Member State/s in the initial phases of the disaster. To become an ASEAN ERAT member, each person has to finish an ERAT induction course organised by the AHA Centre, with the support of regional experts. To date, the ASEAN has close to sixty ASEAN-ERAT members ready to respond to major disasters in the ASEAN region.

In the process of deploying the ASEAN-ERAT team for Typhoon Haiyan, the AHA Centre contacted ASEAN-ERAT members from four Member States — Brunei Darussalam, Malaysia, Singapore, and Thailand. They were the ones tapped based on their experience and language proficiency. Unfortunately, only Brunei Darussalam was able to immediately deploy ASEAN-ERAT members, sending two personnel for a deployment period of 10 days. The AHA Centre also contacted ASEAN-ERAT members from the Philippines, but most of them, who were government staff members, were already engaged within their respective agencies to prepare for Typhoon Haiyan, except for one who is with the Philippine Red Cross.

With only a handful of ASEAN-ERAT members on hand for this deployment, the AHA Centre then contacted the APG and requested its APG Programme Manager to be deployed as part of ASEAN-ERAT team, as said Manager had participated in the ERAT Induction Training, and was one of the training’s resource persons. APG approved the request, thus the first ASEAN-ERAT team was formed, composed of two persons from the AHA Centre, two from Member States (Brunei Darussalam), and one personnel from APG.

The Team arrived in the Philippines, in batches, between 7 to 9 November 2013 — the two AHA Centre staff arriving in the morning of the 7th, the two from Brunei Darussalam on the 8th, and the APG Programme Manager arriving on 9 November.

With the first batch who arrived, the Field Team Leader immediately established links and coordination with the Office of Civil Defence/NDRRMC, the designated National Focal Point based in Manila, as well as with other AHA Centre staff deployed as ASEAN-ERAT. That batch was also assigned by the Field Team Leader to proceed directly to Tacloban, forecasted then to be directly in the typhoon path. The decision to split the Team proved to be valuable as this enabled the Team Leader to contact the NDMO’s Operation Centre and be part of
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

the national government operations. From this operation centre, the Field Team Leader was able to do coordination work and disseminate information from Tacloban and Manila to Jakarta, and vice versa.

The ASEAN-ERAT was integrated well within the NDRRMC operations, both at the national and field levels. This style and method of work was appreciated by the Philippines, as this facilitated the AHA Centre to extend support to the government, by working within the government’s structure, without duplicating the response mechanism. The AHA Centre also selected well the post of the Team Leader. The assigned person was generally conversant with the humanitarian system of the affected country, familiar with the NDMO staff there, and had experience in managing a large-scale humanitarian response. These qualities are sound criteria in selecting future team leaders for the ASEAN-ERAT.

What went well: The NDMO of the Government of the Philippines immediately welcomed the arrival of ASEAN-ERAT members even before Haiyan made landfall. Positioning people in the country before disaster strikes is an advantage for a more efficient coordination and provision of quick-reaction response. The AHA Centre staff attended the national coordination meeting and had immediate access to information at the national level, while other ASEAN-ERAT members brought communication equipment and trained local Disaster Management office staff in conducting emergency communication at ground zero. This strong collaboration and cooperation between the concerned Philippine agencies and AHA Centre demonstrate the trust earned and good reputation built by the AHA Centre with ASEAN Member States.

From the establishment of the AHA Centre in November 2011 until the end of 2013, the ASEAN-ERAT had deployed teams to address emergencies in the region. From these deployment experiences, timely deployment of ASEAN-ERAT teams before disaster strikes at the affected country, provides grounding information to the AHA Centre, which in turn, prepares its capacity to respond efficiently. The NDMOs should institutionalise this approach and use this as a standard procedure for the mobilisation of ASEAN-ERAT.

In November 2013, at the 23rd Meeting of the ACDM in Da Nang, Viet Nam, the ACDM changed the name of ASEAN-ERAT from ASEAN Emergency Rapid Assessment Team to Emergency Response and Assessment Team, to expand the ASEAN-ERAT function to include assessment and support for the ASEAN’s response. With this expanded mandate, the AHA Centre needs more skills and expertise for the ASEAN-ERAT to support the ASEAN’s response.

The type of skills needed is contingent to the nature of the response operation. Just the same, every ASEAN-ERAT member should possess the skills and knowledge on: core humanitarian competencies, humanitarian leadership and coordination with the national government and organisations using the international humanitarian system, and handling basic logistics to facilitate provision of relief items from ASEAN Member States and the AHA Centre. Regular team building is also needed to strengthen collaboration among ASEAN-ERAT members.

The mobilisation procedure of the ASEAN-ERAT was not as effective as it was expected to be. The AHA Centre planned on deploying 10 ASEAN-ERAT members for the Typhoon Haiyan operation. But only four ASEAN-ERAT members were mobilised (only two or three AHA Centre core staff were sent at a given time, as the AHA Centre only has 13 core staff members at the time of this study). Other humanitarian agencies deployed more people, with major international NGOs sending around 20 to 50 people, and the UN OCHA deployed around 150 to 170 at any given time. Even as the nature of the work of AHA Centre is different vis-a-vis other humanitarian agencies, its function of providing support to the ASEAN’s response was severely weakened due to the limited number of personnel on the ground.

Another observation noted is the advantage given by having locals (local ASEAN-ERAT members) from the affected
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

The ASEAN-ERAT function is critical to the ASEAN’s response. ASEAN-ERAT members need the right skills set, should be mobilised quickly, and there should be a sufficient number deployed. Membership in the ASEAN-ERAT teams should likewise include military and government personnel outside the NDMO, and staff from non-government institutions (e.g. the Red Cross, CSOs, and from the private sector). Expanding the base of the ASEAN-ERAT will broaden the expertise of the team.

In large-scale emergencies such as Typhoon Haiyan, the ASEAN-ERAT should be mobilised in several phases, possibly beyond a 10-14 day deployment period, which is what is stipulated in the ERAT guideline. Short-term deployment may get in the way of providing timely transfer of knowledge and maintaining the momentum in a response operation. For large-scale emergency situations, the ASEAN should have the flexibility to extend the duration of deployment of each ASEAN-ERAT member, from 10-12 days to 1-3 months, and these deployments of ASEAN-ERAT should not be limited to one time deployment only, but may be done in different phases, to support the ASEAN’s response, like during the recovery phase.

To improve the quality of ASEAN’s support, more capacity-building activities may be conducted. There is also the need to revise the design of the ERAT Induction Course. A training and development strategy needs to be developed for the ASEAN-ERAT, where the training design should be more hands-on, using practicums, simulations, e-learning modalities, OJTs or on-the-job training with actual deployments, exposure visits, and mentoring-coaching teaching strategies.

At the time of this study, the ACDM Working Group on Preparedness and Response had approved the AHA Centre’s proposal to classify the ASEAN-ERAT membership roster into three levels:

1. **LEVEL ONE:** Basic members where ASEAN aims to have at least 100 ASEAN-ERAT members in each ASEAN Member State, to ensure that the ASEAN has a sufficient number of trained local ASEAN-ERAT members in all Member States;

2. **LEVEL TWO:** Selected members from the Level One roster, who have achieved certain standards, and may be trained further to become specialists or experts in specific sectors; and

3. **LEVEL THREE:** Members who are specialists from Level Two, to receive further training to qualify as Team Leaders with coordinative skills to provide the ASEAN’s response for large-scale emergencies and complex environments.

It is incumbent upon the AHA Centre to set a clear criteria on the competencies required of ASEAN-ERAT members for each level.
As for the mobilisation procedure, there is no written commitment or pre-approved deployment agreement (e.g. Memorandum of Agreement or MOA) with the employing organisations of ASEAN-ERAT members. Mobilisation for deployment operates on goodwill. Thus for improvement, a pre-approved deployment agreement between the AHA Centre and the employing organisations, especially for ASEAN-ERAT members in Levels Two and Three, is needed. Said agreement will make mobilisation and deployment to emergency situations mandatory, whenever the AHA Centre deems that the situation warrants it.

**Being the First on the Ground**

**THE AHA** Centre was one of the few humanitarian agencies to field personnel in Tacloban, even before Typhoon Haiyan made landfall. The ASEAN-ERAT member arrived in Tacloban on 7 November 2013, a day before the Typhoon struck, bringing emergency communication equipment. On the same day, he immediately conducted training for the Office of Civil Defence on the use of satellite phones and connection to a global satellite internet network called Broadband Global Area Network (BGAN). The equipment brought and the set of skills possessed by said AHA Centre personnel were very advantageous, especially during the early days of the emergency.

Since the establishment of the AHA Centre in 2011, deployment of the ASEAN-ERAT team was limited to medium-scale emergencies for a limited period of time of around 1-2 weeks of operations. Response operations to Typhoon Haiyan was the first time that the AHA Centre deployed ASEAN-ERAT member to ground zero before the disaster struck.

The AHA Centre’s core staff with expertise on Information and Communication Technology in emergencies was an ASEAN-ERAT team member, who also had training on the ERAT Induction Course. That staff however, had no prior experience in actual emergency situations, and minimal knowledge on basic health, safety, and security in emergencies (these topics were not included in the ERAT Induction Course). Nonetheless, the spirit of having ASEAN presence on the ground dominated the decision-making process. The AHA Centre made the decision to send the staff given that the person was part of the local NDMO operations, thus lessening the risks.

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OCD Region 8 personnel test and learn how to use ICT equipment set up by ASEAN-ERAT one day before the landfall.

Right after the incident, Regional Director of OCD Region 8 uses the satellite phone brought by ASEAN-ERAT to communicate with OCD/NDRRMC Headquarter in Manila.
The AHA Centre was however cognizant of the magnitude of risks with Typhoon Haiyan — the biggest disaster that the Centre has ever responded to. The risks of sending an ASEAN-ERAT team member to the ground zero are high. Thus, the Field Team Leader provided briefing on basic safety and security, and ensured that the person knows the risks involved. Still, there were not enough adequate measures in place to mitigate those risks, like not having insurance, safety and security plans, and evacuation procedures.

After the typhoon blew over, the rest of ASEAN-ERAT members trying to immediately go to Tacloban had faced access difficulties with commercial planes not being operational yet, except for the military. Still, the team managed to board the C-130 plane of the Government of the Philippines.

In the early days after the storm, devastation in Tacloban was so widespread, made worse with food and water shortages, and no kind of service available. These seriously hampered all emergency operations of all aid agencies, including the ASEAN-ERAT Team, who faced logistical challenges — inadequate supply of food and water, and no vehicle which severely hampered mobility. Thus the realisation that the ASEAN-ERAT need to raise the level and quality of self-sufficiency during emergency response operations.

Lifeline support and the duty of care for the operations are essential services to be provided by the employing organisation, especially in the early days of emergency. Employing organisations should ensure that the security, health and safety of all staff are appropriately protected as much as possible, and that measures are in place to ensure the staff’s well-being. These require significant thought and planning on the part of managers, cognizant that improving security for the staff will incur additional costs, as staff safety is paramount.
Stressful and risky situations are occupational hazards for aid workers, heightened especially during emergency situations. But much may be done to mitigate the unnecessary risks of illness, injury, stress, burnout, etc. to staff and their dependents. There are no guidelines or policies from the AHA Centre on these concerns yet. For response operations, the current ERAT guideline includes discussions on personal preparedness, and upkeep and use of mission equipment. The AHA Centre’s Emergency Operation Manual has a section on Field Team Support Unit focusing more on staff’s travel arrangements and administrative activities.

In hindsight, the AHA Centre should eventually address the need to guarantee the security, safety, health, and well-being of all deployed personnel for the emergency, and ensure sufficient logistics support for the team and individual personnel, to function in full capacity. Included in this recommendation is the timely setting-up of a field team support unit in the capital or nearby areas that are not affected. As well, proper guidelines to regulate these concerns as part of the ERAT guideline and Emergency Operations Manual are needed, as a stand-alone document that complements the two other documents. The health, safety and security, and general well-being of deployed team members should also be included in the ASEAN-ERAT Induction courses and core training for AHA Centre staff.

Learning from this experience, the AHA Centre will likewise review the list of items for the mission kit specified in the ERAT guideline. The ASEAN-ERAT should be self-sufficient (this applies for teams from assisting Member States as well), thus the field operation should be supported with personal and office kits, with supplies and equipment adequate for at least 1-2 weeks of operation, or until the Field Team Support Unit can replenish these. These kits should be available in advance and provided by the AHA Centre. The Centre should also develop standby arrangements with the Member States and the private sectors, so that ASEAN-ERAT teams have priority access for transportation to affected areas.

Supporting Response Operations through Partnership

In 1995, the UK Department for International Development (DFID), the Danish Emergency Management Agency (DEMA) and the Swedish Civil Contingencies Agency (MSB) signed the International Humanitarian Partnership (IHP) to provide multi-national collaborative support to the humanitarian community. The purpose of the IHP is to support humanitarian organisations in their response to natural disasters and complex emergencies, by providing rapidly deployable support functions and services by pooling the combined competencies and capacities of the IHP members.

For Asia-Pacific, there is the Asia-Pacific Humanitarian Partnership (APHP), which is a regionally-based multinational technical arrangement designed to strengthen the response of humanitarian agencies. APHP is primarily for UN agencies and UNDAC teams, the International Federation of Red Cross and Red Crescent Societies (IFRC) and the ASEAN. Basic modules (e.g. laptops, telecommunications equipment, tents and generators) can be mobilised within 6 hours for two to four weeks, and come with fully-trained support staff. Larger and more complex modules (e.g. light base camps and environmental support) can be mobilised within one to two days. Countries in Asia and the Pacific contributing to the APHP with support modules positioned nationally are Australia, China, Japan, New Zealand, Singapore, and South Korea.

Similar arrangements can also be developed for the ASEAN region, where partnership is established with various humanitarian partners, including the private sector, to support ASEAN operations during emergency situations. Partners can provide support for setting up base camps and coordination centres, information and communication technologies, information management, GIS support module, and vehicle support.

All in all, despite the logistical limitations and challenges, the five-member ASEAN-ERAT team managed to fulfil its function as mandated in the ASEAN-ERAT guidelines. The Team Leader managed to establish initial contact with the National Focal Point, and have close coordination with the NDMO at the national and local levels. Initial reports were coming in from the ASEAN-ERAT member in the field, from the evening after the typhoon struck. ASEAN-ERAT members were already at ground zero within 48 hours. And the first assessment report by the ASEAN-ERAT was sent to
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The Emergency Operation Centre (EOC)

During disaster response, the AHA Centre EOC serves a strategic role in terms of command and control in ensuring that the AHA Centre can fulfil its mandate of coordinating collective response from all the ASEAN Member States, including its own field personnel. The AHA Centre EOC will primarily focus on collecting, gathering and analysing data, crafting strategic decisions, maintaining continuity of operations of the organisation, and disseminating information to ASEAN Member States, select concerned individuals, and external stakeholders.

In Jakarta, the AHA Centre immediately set the directions for the Field Team to develop the tactical and operational plans. Before the typhoon struck, the AHA Centre gave a commitment to support the Philippines with resources. Immediately after the disaster, Brunei Darussalam, as Chair of ASEAN, and the Secretary-General of ASEAN, sent messages of sympathies, and expressed the ASEAN’s commitment and solidarity to help the affected communities. Early on, a strong message of ASEAN’s solidarity was evident, thus further reinforcing ASEAN’s support and response. The AHA Centre then issued an initial response decision on 11 November 2013 — to mobilise relief items from the regional warehouse with total value of USD 250,000.00, and then on the following day, the efforts were doubled to a total value of USD 500,000.00. At the end of the operation, the total value of the response operation of the AHA Centre for Typhoon Haiyan was USD 606,700.00, with funding supported by the Government of Japan, Australia, and the ASEAN Disaster Management and Emergency Relief (ADMER) Fund.

During the typhoon operation, there was a lack of clarity on who should lead the planning for the response. Tactical decisions were made between the EOC Manager and Field Team Leader, but there was no overall planning or a strategic response plan. The absence of such a plan made...
it difficult for this study to measure the effectiveness of the ASEAN’s response, because assessing effectiveness involves an analysis of the extent to which the stated intervention objectives are met.

Also, to date there are still no indicators to measure the performance of the ASEAN’s response, including the AHA Centre in responding to emergencies. There is an on-going work led by the ASEAN Secretariat in the areas of monitoring and evaluation for the implementation of AADMER that includes indicators for preparedness and response. These monitoring and evaluation indicators for AADMER were developed and endorsed by the ACDM, subject to later testing and operationalisation.

In the first version of AHA Centre’s Emergency Operations Manual, there was a discussion on the functions of a Planning Section Leader, under the EOC Manager. But this function has been removed since there is no need to have a full-time function just for planning, considering that the AHA Centre does not have sufficient number of staff.

It was also observed that during the Typhoon Haiyan operation, information regarding the operation was concentrated to just two persons — the Field Team Leader and the EOC Manager. To some extent, the ASEAN-ERAT members were not aware of the decisions made, and this was also felt by some of the members at EOC level. Some of the discussions were also not properly documented as the communications were using mobile messaging application (i.e. WhatsApp).

About WebEOC: The WebEOC (Web-based Emergency Operation Centre) is a customised, web-based crisis information system. The platform enables smooth communication and seamless information sharing between the AHA Centre and ASEAN NDMOs, during both emergency and non-emergency periods. Through this platform, movement of resources, correspondence with the assisting entity and affected country, change of situations, and decisions may be accessed and recorded. WebEOC is supported by the Government of Japan.
In support of the management of internal information, the AHA Centre EOC, since April 2013, has been supported by a web-enabled crisis information management system called WebEOC. Through this system, all AHA Centre staff and others with access to this system are able to feed, read, and record updates during an on-going emergency. In the case of Typhoon Haiyan, the WebEOC warehouses a wide range of useful information that includes minutes of meeting, staff mobilisation, response planning, coordination between the field team in the Philippines and EOC in Jakarta, movement of aid items from the Member States, and the regional warehouse, and other information related to the operations. The utilisation of WebEOC connects the team in Jakarta with field teams, as well as with the Member States.

From the interview with the AHA Centre staff, only four Member States — Brunei Darussalam, Laos PDR, Malaysia, and Singapore have used the Web EOC since its establishment, even though two-users access have been given to all ten ASEAN NDMOs. During the Typhoon Haiyan operations, only Brunei Darussalam and Singapore accessed the WebEOC to give information on the movement of goods and personnel, and also to provide updates from monitoring activities.

A thorough look at the WebEOC, however, indicate that it has not been fully utilised by Member States, probably because people need time to understand and familiarise themselves to the system. The WebEOC was established in April 2013, and training on it for representatives of the Member States was done only in September 2013 (the Philippines and Indonesia were not able to participate), just two months before the Typhoon struck. But even those who attended the training are still just familiarising themselves with it. It was only in February 2014, when the AHA Centre managed to train all the Member States. The familiarisation process will take time for people to use this system with a huge potential as a key tool of every AHA Centre’s emergency operations. The use of the WebEOC needs to be enforced, as it provides vertical information sharing between the AHA Centre and ASEAN Member States, as well as horizontal information sharing among the field team members, and with the EOC of the AHA Centre. Member States can also create an exclusive discussion platform for themselves.

For familiarisation with the system, NDMOs should conduct routine checking to the system every two months, and conduct regular exercises every six, ideally before the rainy season starts in the region. The WebEOC is also designed for multi-users beyond the NDMO. Other users may include other government departments, such as the Foreign Affairs and military. The AHA Centre should expand the users of the WebEOC, ensuring that it has specific policy and clear procedures for user access to WebEOC, noting the particularity of the humanitarian community, where there is a high rate and speed of turn-over of staff and representational assignments. During emergency response, it is also suggested that there is an assigned person within the NDMO of the affected country to facilitate the exchange of information to and from the WebEOC.
Managing information internally during a humanitarian emergency situation is a crucial part of any operation. A strong information management network, supportive of emergency coordination, requires processes of collection, analysis, and information sharing among the various functions involved in a crisis management team, and ensures that the coordination system runs efficiently. The team needs to have access to essential information regarding the planning and the changes (if any) in the decisions made regarding the operations. To improve on information sharing, the AHA Centre should provide access and regularly train all concerned in the emergency operations to use the WebEOC, and the EOC in turn, should ensure quality documentation and recording of all critical information in WebEOC.

On the issue of planning, it is critical that the Planning Section ensures that there is a response plan in place during the whole operation. If the AHA Centre does not have sufficient staff, the function of the Planning Section Leader should be integrated into other available posts. As to the question of what other positions this responsibility of planning goes to, this study observes that while the Field Team understands the needs of and grasps the changing situation during an emergency, given the close coordination with the NDMO and other humanitarian actors, it is the EOC who knows the resources available in the region and is also able to liaise with strategic partners, including the ASEAN Secretariat, ASEAN Dialogue Partners, and Member States representatives. Based on this reason, the EOC is in a better position to take a step back, see the big picture, and set up the objectives, targets, outputs, and resources available, to develop a proper strategic response plan. Therefore, the Planning Section function should be integrated within the EOC structure. The response plan will then be operationalised by the Field Team, who will adjust plans as needed, and provide tactical and operational decisions based on the changing situation. In the case of large-scale emergencies, there is a need for a senior and experienced emergency manager to support the EOC Manager or Planning Section Leader for developing the overall response plan.

A comprehensive response plan provides direction on the overall response, as well as measures the progress and achievements in its implementation. In addition to this, the ASEAN Secretariat should test and operationalise the monitoring and evaluation framework and procedures, that includes clear indicators and mechanisms of measure on the performance of ASEAN’s response operations.

The ACDM Working Group on Preparedness and Response discussed the funding decisions made by the AHA Centre. They saw that the fund allocated was not adequate for a disaster of this magnitude, even as the Executive Director has the authority to decide on expenditures equivalent to USD 1 million. From the perspective of the AHA Centre, there was no need to pledge commitment to the maximum level, since resources from AHA Centre was only for the initial response, while the main response should be equivalent to the total value of the contributions from all Member States. These differing perspectives exist because there are no standards to guide the decision-making process. Regardless, having the capacity for the AHA Centre to commit resources in the first days of emergency gave a strong message of ASEAN solidarity, and that solidified and further facilitated the entry point of the ASEAN’s response.
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After the disaster struck: The response period

MANAGING INFORMATION

ASEAN HAS developed Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (also known as SASOP), which was adopted by the ACDM in 2008. One of the sections in SASOP governs the procedures for joint disaster relief and emergency response operations, which states that the AHA Centre shall analyse each Situation Update received from the National Focal Point (NFP) of the affected Party, and immediately notify the other Member States of the significant developments to the disaster. Otherwise, the AHA Centre shall prepare and disseminate regular Situation Updates to the other Parties daily. Detailed procedures in developing Situation Updates are described in the SASOP.

About SASOP: The ASEAN Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response (commonly known as SASOP) guides the actions of ASEAN Member States and the AHA Centre in coordinating joint disaster relief and emergency response operations. SASOP describes the procedures and forms to be used for the assisting entity to offers and/or renders assistance to a receiving or a requesting Party (ASEAN Member State) in cases of a disaster emergency. SASOP also contains guidelines to implement the regional standby arrangements for disaster relief and emergency response; the utilisation of military and civilian personnel, transportation and communication equipment, facilities, goods and services, and the facilitation of their trans-boundary movements. SASOP was endorsed by the ACDM in 2008, and has been tested in regular ASEAN’s disaster exercises (ARDEX) and other disasters, such as Cyclone Nargis in 2008. The AHA Centre is responsible for updating the SASOP.

When the typhoon struck, all local communication channels were down. It was the communication equipment brought to Tacloban that enabled the local Disaster Management Office to contact the main Operations Centre in Manila. The satellite phone that ASEAN-ERAT set-up before Haiyan’s landfall was the only functioning phone in Tacloban on the day the storm hit. Within one hour, the ASEAN-ERAT member in Tacloban was able to assist in the restoration of emergency telecommunication services, and the satellite phone was used to facilitate communications between the Regional Office and the Operation Centre in the capital city.

What went well: The communication equipment that is part of the ASEAN-ERAT’s standard mission equipment proved to be invaluable. Having this equipment at the ground zero enabled the AHA Centre to support the restoration of emergency telecommunication services to the Operation Centre in Manila. The ASEAN-ERAT member deployed to Tacloban also has the skills on emergency communication which also helped the local Disaster Management operation in re-establishing the communication system in the local Disaster Management office that was disrupted because of the typhoon. There is an idea to establish an ASEAN Emergency Telecommunication Team service to quickly restore and support NDMO operation on emergency telecommunications.

After the typhoon made landfall, the AHA Centre produced 11 Situation Updates within the first two weeks of emergency. This was primarily sent to the NDMOs of all ASEAN Member States and the ASEAN Secretariat. Meanwhile, during Typhoon Haiyan operations, aside from the NDMOs, there were other government departments that were significantly involved in the operations, particularly the Ministry of Foreign Affairs and the defence and military.

Until the Haiyan operation ended, the AHA Centre was not able to get the exact figures of assistance coming from ASEAN Member States. There were Member States who sent the aid assistance bilaterally, and not all Member States sent this information to the AHA Centre. This situ-
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This was a difficult situation since there were no people available for those important meetings. As mentioned in previous sections, the AHA Centre was only able to mobilise a limited number of people. Assigning people to attend coordination meetings will affect the team’s ability to facilitate assistance of Member States, and the AHA Centre’s response. However, even when team members were present at coordination meetings, it was not clear to them whether they have the authority to share information related to the ASEAN’s response or not, as the team only collects information, whereas sharing information or taking part in strategic planning meetings were not their function. The AHA Centre also did not take part in the mapping exercise of “Who is doing What and Where” (3W), a common tool used by the UN OCHA to be updated on humanitarian agencies responses to help avoiding duplication of efforts. This made the ASEAN’s response less visible since most agencies share updates of their responses in this meeting, which are recorded in the UN OCHA and/or NDRRMC situation reports.
On the other hand, based on the interviews with ASEAN Member States and ASEAN Dialogue Partners who received such updates, the information provided by the AHA Centre in the early days were useful in knowing the situation on the ground, and validated with the information coming from the news. It was also mentioned that unexpectedly, the AHA Centre was able to produce photos, maps, and infographic materials of high quality, e.g. the satellite imagery of the affected areas from Copernicus through ECHO-ERCC and from Sentinel Asia, maps of the impact to the population affected by the disaster, and also photos from the ERAT assessment. These highly informative materials were very useful for the Member States and Dialogue Partners.

To further improve the quality of the Situation Updates, the AHA Centre should guarantee the accuracy of the information in the situation reports and validate the information with the ASEAN Member States and Dialogue Partners. Member States also provided feedback that having an executive summary (preferably in bullet points) in each situation update is important. Situation updates generally tend to be 5-7 pages long, thus the NDMO staff needs to summarise the report, and translate it to their official language. This executive summary will help them in translating the report, and share it to concerned decision-makers and other government departments. Situation updates should be written in a more professional style and tone, using terminologies and language style appropriate for emergency situations.

The AHA Centre should also expand the list of government department recipients of the situation updates, ensuring that the Ministry of Foreign Affairs and the defence/military are included in the mailing list. The expanded list could also be based on the particularities of the country (where relevant, the social welfare and health departments of the affected country may also be included). Country Permanent Representatives and Defence Attachés may also be beneficial being part of the expanded mailing list. A complete list of government departments and the focal points should be provided by the NDMO, being the National Focal Point of AADMER.

Data-gathering on the ASEAN’s response is the main strength of the AHA Centre Situation Updates, which include the assistance from Member States. So, if the AHA Centre is not able to provide accurate and timely information regarding this, the value of the updates is significantly reduced. As the National Focal Point, NDMOs should be more vigilant in gathering information from other relevant government departments within the country and pass on this information to the AHA Centre.

Meanwhile, the SASOP has already stated that the AHA Centre may likewise use information in the Situation Update to inform other actors in the international emergency response system. To operationalise this, the AHA Centre should develop a guideline for the field team (to guide ASEAN-ERAT members as well) to engage the international coordination mechanism, specifically on information sharing.
Working within the International Humanitarian System

United Nations General Assembly Resolution 46/182 defines the role of the UN in coordinating international humanitarian assistance when a government requests external support. The resolution establishes a number of UN mechanisms to strengthen the effectiveness of international humanitarian action: on the Central Emergency Response Fund (CERF), the Consolidated Appeal Process (CAP), the Emergency Relief Coordinator (ERC) and the Inter-Agency Standing Committee (IASC). Resolution 46/182 was unanimously adopted by UN Member States in 1991. Effective disaster response requires careful coordination at the global, regional, and national levels. The UN has established a number of interdependent coordination mechanisms designed to guide relations among humanitarian actors and between humanitarian actors, governments and disaster-affected people, to ensure the delivery of coherent and principled assistance. In addition to this, there are tools and services for disaster response established to support the international humanitarian system.

The AHA Centre should be guided by the international coordination mechanisms, and use available tools and mechanisms to ensure that the response operations of ASEAN are well coordinated with the over-all international aid assistance. Some of the tools that the AHA Centre should be familiar with and use are the Virtual On-Site Operations Coordination Centre (V-OSOCC), Financial Tracking Services (FTS), and 3W mapping. There is also a need to align and strengthen the coordination for the UN Flash Appeal and Consolidated Appeal Process (CAP), as these mechanisms are used to mobilise financial resources. Also, there needs to be an agreed on working arrangement to enhance collaboration and cooperation between UNDAC and ASEAN-ERAT, as well as for conducting joint assessments like the Multi-Cluster Initial Rapid Assessment (MIRA) and Post Disaster Needs Assessment (PDNA).

Clearly-defined terms of the working relations between the Secretary-General of ASEAN as the ASEAN Humanitarian Assistance Coordinator (AHAC), and the UN’s humanitarian system, particularly with the UN Under-Secretary General and Emergency Relief Coordinator (USG/ERC), who is responsible for the oversight of all emergencies requiring United Nations humanitarian assistance and serves as the UN’s central focal point for governmental, intergovernmental and non-governmental disaster relief and humanitarian assistance activities, is likewise needed.

Projecting the ASEAN efforts

Information from the Public Outreach and Civil Society Division of the ASEAN Secretariat shows that through press releases, social media accounts and interviews, the ASEAN message of support to the Government and people of the Philippines have reached millions of readers/viewers from within and outside the region. Five stories were written about the ASEAN’s response to the calamity, and there were 817 pick-ups from national, regional, and international media. Interviews were also arranged with major media outlets such as CNN, BBC, Al-Jazeera, Channel News Asia, and major media networks in the Philippines.

However, criticisms remain that during Typhoon Haiyan, the ASEAN response should be more visible in the media. Aside from receiving hundreds of coverage on the news with positive comments, there were a couple of articles that gave negative remarks of the ASEAN response not coming in fast enough. Unfortunately, this negative image was the one with high recall for some people. Some argue that the negative coverage was due to a lack of awareness on the context by the writer. However, this shows that the ASEAN need to further improve its communication on the ASEAN response.

Some of the respondents mentioned that the reason AHA Centre received such a warm welcome from the Government of Philippines was because of its low-profile style, focusing on work rather than media projection, providing support to the affected country. However, in the humanitarian world, this kind of “silent” operation is less appreciated and often underestimated because of lower visibility compared to other humanitarian actors that put media engagement as one of their main priorities, with some agencies even delivering strong criticisms and negative remarks in order to be picked-up by the media. But this is not how the ASEAN operates. Thus the challenge for the AHA Centre is to have that balance between providing news-worthy messages to the media that objectively present the ASEAN and the AHA Centre’s response efforts to the public, while maintaining the good relationship with the affected country.

An effective communication strategy for the AHA Centre is needed. This needs to be done in collaboration with the Public Outreach and Civil Society Division in the ASEAN Secretariat.

In addition to this, another reason to the ASEAN’s low visibility was because the assistance of Member States is seen only as individual assistance and not as part of the larger ASEAN response. The ASEAN Leaders have
agreed to carry both the national and ASEAN flag or logo to promote visibility of the ASEAN among the first responders engaged in humanitarian missions. This was stated in the ASEAN Socio-Cultural Community Blueprint under the Roadmap for the ASEAN Community (2009-2015). Unfortunately this agreed action has yet to be fully implemented, requiring a more defined operational guideline or procedure.

It was also noted that the AHA Centre’s tweets played a role in sending information on what the AHA Centre was doing in response to the Haiyan aftermath. Feedback from Member States encouraged the AHA Centre to continuously provide more content through social media outlets such as Facebook and Twitter, as information from these portals reach a wider audience near instantaneously and many expect to see such kind of live reporting from the ground, making evident where the resources from ASEAN or contributions is being spent on.

The growth of the digital world in the ASEAN region is remarkable, with the use of smartphones and social media spaces rapidly increasing. Some of the figures from the ASEAN Public Outreach and Civil Society Division show that the number of Indonesia’s mobile phone users is 109% of its total population (most Indonesians use more than one mobile phone). Thailand is said to be the Facebook capital of the world, with users reaching 89.2% of its total population, while 8 out of 10 Vietnamese are onboard the social media platform. If the ASEAN aims to project the ASEAN efforts and brand, then the AHA Centre needs to invest more on the use of social media, including posting more photos and updates in the Facebook pages of the AHA Centre and ASEAN’s, do more live reporting through Twitter, and also get more people to “Like” AHA Centre’s Facebook page and “Follow” AHA Centre’s Twitter account. The outcome can be larger if this to be done in collaboration with relevant divisions of the ASEAN Secretariat.

On the other hand, if the ASEAN wants to build a more meaningful discussion on the ASEAN response, the more appropriate way to do this is through in-depth reporting. A steady stream of press releases should always be maintained and strengthened. It is however more effective if the AHA Centre can also allow or encourage senior journalists, writers, and academics to conduct more in-depth reporting, analysis, and interviews to create more powerful reporting and show a complete picture of the ASEAN response in the media.

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**FACILITATING ASSISTANCE FROM ASEAN MEMBER STATES**

The ASEAN Co-ordinating Centre for Humanitarian Assistance on disaster management (the AHA Centre) shall be established for the purpose of facilitating cooperation and coordination among the Parties, and with relevant United Nations and international organisations, in promoting regional collaboration. (AADMER Article 20.1)

**BASED ON AADMER, the first and foremost objective of the AHA Centre as the main coordinating body of the ASEAN’s response is to coordinate the ASEAN’s response as one collective response. However, the conduct of the Typhoon Haiyan response showed that this has yet to fully materialise.**

As stated in SASOP, the NDMO plays an important role in facilitating communication with other ASEAN Member States and the AHA Centre, and serves as the single point of contact for the country. In SASOP, there is no obligation for Member States to channel aid assistance through the AHA Centre, since the Member States will act first to manage and respond to disasters. In the event that the Member States requires assistance to cope with such a situation, in addition to the direct request from the assisting Member States, it may seek assistance from the AHA Centre to facilitate such a request.

What went well: The Government of Brunei Darussalam, Malaysia and Thailand channeled the aid assistance led by their respective Ministries of Foreign Affairs, in close coordination with the NDMO and the military to the AHA Centre. Throughout this process, the NDMOs of the assisting Member States use Form 4 of the SASOP, and sent it to the AHA Centre. The Government of Indonesia also provided information directly to the AHA Centre. This process allowed the AHA Centre to receive updates from those ASEAN Member States, which in turn facilitated the monitoring of aid distribution.
Based on the experience with the Haiyan response, there were three ways of channelling aid assistance from ASEAN Member States:

1. The first option is facilitated through AHA Centre;
2. The second one is channelling it bilaterally (through Ministry of Foreign Affairs); and
3. The third and last one is through a military-to-military cooperation.

All representatives of the ASEAN Member States (AMS) who attended the Lessons Learnt Workshop mentioned that all international aid assistance is being led by Ministry of Foreign Affairs. This was why the assisting Member States used the bilateral channel. Meanwhile, the military-to-military cooperation happened because the aid was shipped using military assets (using C-130 military planes or naval military ships). The Ministry of Foreign Affairs and the military of ASEAN Member States were not familiar with the tools and services that the AHA Centre provides.

One of the reasons that Member State did not channel their aid assistance through the AHA Centre was because they were not clear on what the AHA Centre plan was, the resources and capacity that the AHA Centre had, as well as the services that the AHA Centre could provide for the assisting Member States. Information sent to the Member States were only limited to the situation and needs on the ground, and did not have a sense of the direction of the overall ASEAN’s response. It was also not clear when ASEAN’s response starts and when it will end. Thus, it is important for the Member States to define what the AHA Centre needs to do to support the overall ASEAN’s response.

This observation was also amplified from the information obtained in the interviews and at the Lessons Learnt Workshop. From one of the Member States, it was said that more detailed information was received from their embassy in the Philippines to the Ministry of Foreign Affairs office on the “what, where, and when” the relief items will be delivered. Such information is necessary for the assisting Member States in decision-making and actual sending of aid.

SASOP regulation states that the AHA Centre shall provide clear information and recommend courses of action for the ASEAN’s response. However, there were no steps itemised in SASOP on how to conduct planning for a joint response. Also, format of the report of the AHA Centre to the Member States (Form 2 in SASOP), is more focused on providing information on the situation. There is a Recommendations section, but this does not provide adequate “room” to give information on the recommended ASEAN’s response.

Two proposals to address the above-mentioned issue are forwarded. There is a work planned in developing an ASEAN Response Options, included in the 2010-2015 AADMER Work Programme. In Output 11, on the Preparedness and Response section, it is expected that ASEAN Response Options is developed and agreed on. The AHA Centre should continue this work and have these response options in place before the next disaster situation.

A well-designed response option outlines the roles and responsibilities of all key players involved in the operation, and provides for a clear layout on the concept of the operations. These response options should be based on the scale of disasters, outlining as well, the decision-making process with respect to the delivery of a collective ASEAN’s response.

The AHA Centre should also review SASOP, including the procedures and forms on adding mechanisms for a joint response planning. There should be a clear and appropriate mechanism for Member States to design the joint ASEAN’s response in times of disaster, in collaboration with the AHA Centre and the Secretary-General (SG) of ASEAN as AHAC.
The art of the ASEAN Way

The processes of musyawarah (consultation) and mufakat (consensus) are traditional norms for the ASEAN. Seeking and building consensus as a basis for collective decisions have strengths that are often overlooked, especially by people outside the ASEAN. Through these norms, ASEAN has been progressing rapidly on the disaster management field, and marked achievements that are not inconsiderable. The establishment of the ASEAN-ERAT, creation of regional stockpile, and the development of SASOP are some of the visible achievements, but the most important of all, is the trust and support received from the Member States. Past experiences also show the strong solidarity of the ASEAN when the Indian Ocean Tsunami struck Indonesia in 2004 and when Cyclone Nargis devastated Myanmar in 2008.

None of these would have been possible without working through the ASEAN way of mutual consultation and consensus building. In a regional neighbourhood filled with ideological divides, economic disparities, competing interests, mutual suspicions and territorial disputes, the idea of a strong and operational AHA Centre could have dithered if there are no consultation and consensus.

In routine cases, consultation and consensus mean that the group requires a unanimous vote on major decisions. A single dissenter among the group can block an otherwise-unanimous decision. However, in times of emergency, decisions may have to be made with speed, as time is of the essence. This may be done by using assumptions and without having the space to do a proper consultation and full consensus building with all ASEAN Member States. Therefore, these conditions need to be taken into account when developing a clear decision-making process for the ASEAN response, in order to ensure fast, collective and reliable ASEAN responding as one.

In many disasters, the UN OCHA establishes RDC16. This activity therefore needs to be well coordinated between the two agencies. The RDC serves as the first point of contact for relief teams upon arrival at the affected country. The personnel of Member States who arrived in the affected site should be able to gather information through the RDC set-up by the AHA Centre.

There was also an observed missed opportunity, with the AHA Centre not setting up a coordination centre in the field (e.g. Tacloban), as well as at the operational level (e.g. in Manila), to support the over-all coordination for the ASEAN’s response. The AHA Centre’s main role is to facilitate assistance and coordination, thus the AHA Centre should have established a coordination hub for ASEAN teams, in Manila and more importantly in Tacloban, since the main coordination is taking place in those locations. Setting-up a Joint Operations Centre of ASEAN (JOCA) will provide a significant value to complement the coordination of the over-all international aid assistance. Similar with the UN OCHA operation, the AHA Centre can play a coordination role and provide support for the teams from assisting Member States, towards smoother coordination and delivery of a more effective response.

What went well:

Many people would agree that sending aid assistance is much easier compared to receiving aid assistance. For this, the Government of Philippines managed to do this seamlessly with the AHA Centre. There was a strong and generally smooth collaboration between the Philippine Government and the AHA Centre. A Philippine Liaison Officer was assigned to assist the AHA Centre in coordinating with other government departments involved in the Haiyan response. Such liaison support played a crucial role in the coordination with the Philippine military for the timely transport of aid items, and with the Philippine Department of Social Welfare and Development (DSWD), charged with warehousing and distribution of relief goods and other aids.

In terms of assisting and coordinating aid delivery to the affected country, one of the assisting Member States mentioned that their personnel did not know where to secure information on where to go and what to do once they arrived in the Philippines. This could have been avoided if the AHA Centre had set up a staging area, Reception and Departure Centre (RDC), to facilitate and expedite the entry of supplies, equipment and expertise from assisting parties.

Regardless of the situation that happened, the AHA Centre managed to facilitate aid assistance from three Member
States — Brunei Darussalam, Indonesia, and Malaysia, where the AHA Centre provided services in contacting the relevant local authorities, port handling, facilitating customs clearance, and bringing in resources to transport the aid items from the ships or airplanes to the warehouse. Coordination between the assisting party and receiving party, with the team of AHA Centre at the EOC level and field level, went smoothly by using the SASOP. Based on data gathered from the FGDs in the Philippines, this type of coordination was helpful in ensuring aid assistance arrive in the most appropriate and effective manner.

On the use of the SASOP, the NDMOs should be the champions and advocates of AADMER, continue to use the regional tools that the ASEAN has on disaster management (i.e. WebEOC, SASOP, DMRS, ERAT, and DELSA), and promote it to other government departments. The AHA Centre should support this effort by continuing to promote and train more people on how to use SASOP. This should not be limited to NDMO personnel, but should be extended to other government departments, such as the social welfare, foreign affairs, and even the military.

One suggestion floated to address this is by conducting a road show in each Member State, and invite relevant government departments. The NDMOs of each Member State should play a leading role in popularising and institutionalising AADMER in their respective countries, being the National Focal Point. This may also be done as a follow-up to the ACE Programme. The graduates of the ACE Programme may serve as champions of AADMER, and advocates for the utilisation of available tools and mechanisms to other stakeholders in the country. The ASEAN also has AADMER Advocates from the NDMOs and CSOs, who can also support this effort.

Scenario-building and conducting joint response planning for mega-disasters were also suggested for each Member State, so that the country will know what specific assistance may be provided from the ASEAN’s response in the case of large-scale emergencies.

In the last ten years, the Southeast Asian region was struck by large-scale disasters, notably the Indian Ocean Tsunami, Cyclone Nargis, and Typhoon Haiyan. The common denominator on all of these disasters is the unimaginable scale, scope, and impact of havoc these disasters could wreak. Conventional preparedness measures always look back and use the scenario according to past history. However, the ASEAN region needs to be better prepared for the next disaster that may even be larger than Typhoon Haiyan. The region cannot be complacent. Looking at the trends, the next disaster that is larger from Typhoon Haiyan is not a question of “if” but “when”.

AHA Centre facilitates relief assistance from Indonesia and Brunei Darussalam.
Civilian-Military Coordination

In the context of the Philippines, the NDRRMC is headed by the Secretary of Defence. The Office of Civil Defence (OCD) – the executive arm of the NDRRMC – is one of five bureaus within the Department of National Defence. The OCD is the civilian component of the Department of National Defence. This positioning of the OCD within the Department of National Defence has a number of implications for disaster management. A related issue on this is the dependence of the OCD and other departments, when responding to disasters, on military assets. In the case of large-scale disasters, the government departments tasked with disaster response generally do not have sufficient and adequate equipment or logistical capacity to carry out the necessary activities on their own. This means that they must draw upon the resources of the OCD, which – because the OCD does not have its own civilian resources – means military assets.

In Typhoon Haiyan, more than 650 Armed Forces of the Philippines’s (AFP) military assets were deployed to deliver relief goods through land, air, and sea. A week after the typhoon struck, 12,000 troops under the Central Command were on the ground in various areas in the Visayas. In addition to this, twenty-two (22) Member States deployed Foreign Military Assets (FMA) in the first six weeks of the response, consisting of various air, sea, medical, engineering and communication assets, including personnel.

The Guidelines on the Use of Foreign Military and Civil Defence Assets in Disaster Relief, known as the Oslo Guidelines, state that, the involvement of domestic military forces is often a first resort due to lack of capacity elsewhere, the use of foreign military assets must be a last resort. Nonetheless, the use of foreign military personnel and assets in disaster response is not a rare practice throughout countries in ASEAN, and is often appropriate due to the military’s resources and capacity, particularly in the case of large-scale emergencies.

Referring back to the purpose of the AHA Centre as stated in AADMER, it is clear that AHA Centre should be the champion in “facilitating cooperation and coordination”. In the future, the AHA Centre should build its coordinative role capacity, bridging between the disaster-affected host government and others, including the Member States and the rest of international stakeholders. ASEAN, including the AHA Centre should redefine and further strengthen this “bridge” role. At the strategic level, the ASEAN Secretariat should organise a discussion for strategic decision-making processes of ASEAN Leaders and Ministers, in support of the Secretary-General as AHAC. At the operational level, the AHA Centre should lead the coordination of aid assistance from ASEAN to the affected Member States, working closely with UN OCHA and other humanitarian agencies, private sector, charity groups and NGOs. At the tactical level, the AHA Centre should take a leadership role in the ASEAN-ERAT, in support of the ODMO of the affected country, as well as the overall ASEAN’s response. This central role, at all levels, can be the biggest strength of ASEAN and the AHA Centre in the future.
The AHA Centre should develop and institutionalise mechanisms for civilian-military coordination during Humanitarian Assistance and Disaster Relief (HADR), especially for large-scale emergencies, to effectively engage the military of both the affected Member State and the assisting Member States. The mechanism may include a civilian-military framework and/or protocol, and the concept of operations for the AHA Centre and the ASEAN Member States. This protocol and concept of operations should include guidelines for the AHA Centre to coordinate volunteers, charity organisations, and NGOs from the ASEAN on how to tap military assets from Member States for an effective response.

This mechanism should be well-aligned with the mechanism in the UN system, as well as other regional mechanisms in the ASEAN (through ADMM, ADMM Plus, and ACDFIM) and tested regularly through joint response planning and disaster simulation exercises. The AADMER should be inserted in the training curriculum for the military on the topics of HADR.

At the time of this study, there was an on-going work on developing a Standard Operating Procedures (SOP) for the ASEAN military on HADR. There is already a request to the ACDFIM to consider incorporating the role of the AHA Centre and the AADMER into the draft SOP.

To strengthen coordination, it may be good for the AHA Centre to have a military liaison officer to help in facilitating civilian-military coordination at the operational and tactical (field) levels. This should consider including military personnel as ASEAN-ERAT members. This suggestion is in line with the decision at the 20th Meeting of the ACDM in July 2012 in Bangkok, Thailand as well as the 1st Meeting of the Joint Task Force to Promote Synergy on HADR in May 2014 in Brunei Darussalam, on the discussion with the Chair and Vice Chair of the ASEAN Defence Senior Officials Meeting (ADSM) regarding strengthening civilian-military coordination. The AHA Centre should follow through on this to put this in place before the next disaster.

**SUPPORT TO THE NDMO AND TO THE AFFECTED PEOPLE (THROUGH NDMO) OF THE AFFECTED COUNTRY**

**TO ENSURE** preparedness for effective response, Member States have agreed in AADMER on the establishment of the ASEAN Standby Arrangements for Disaster Relief and Emergency Response, where Member States, on a voluntary basis, shall identify and earmark assets and capacities which may be made available and mobilised for disaster relief and emergency response. These earmarked assets and capacities consists of (i) key public and private, or civil society agencies, that have emergency response, and search and rescue capacities; (ii) military and civilian assets and capacities; (iii) emergency stockpiles of disaster relief items; and (iv) expertise and technology resources available for disaster management, all of which may be deployed to support the joint disaster relief and emergency response operations.

To date, the standby arrangements have yet to be fully functioning. The AHA Centre is currently setting-up the Regional Resource Mobilisation and Deployment platform, where the AHA Centre is establishing exclusive access to see resources for emergencies in all Member States (such as stockpile of tents, mobile hospitals, and other relief items). Should a disaster happen in the region, the AHA Centre may contact the Member States that have the needed resources and provide recommendations to assist the affected Member States. This work is still in its development phase.

From the NDMO’s perspective, the process of identifying and earmarking assets and capacities is not simple, given that the process is voluntary, and said assets and capacities are sometimes outside the authority of the NDMOs, for example, military assets. Member States also need to process their assistance through the Ministry of Foreign Affairs as this is related to international cooperation. Thus, underscoring once more the importance of expanding the collaboration and cooperation between the AHA Centre and Ministries of Foreign Affairs (as well as with other government departments), even as the AHA Centre recognises the NDMOs as the point of contact for the country.

In the AADMER Work Programme 2010-2015, the ACDM agreed to improve ASEAN’s responsiveness to major disasters in a manner that is collective, fast, and reliable, and
WEATHERING THE PERFECT STORM

in line with humanitarian standards. One of the expected outputs for the Strategic Components on Preparedness and Response is to establish an efficient ASEAN’s disaster emergency logistics system that includes pre-positioning of stocks and having preferred suppliers. This is complementary to the ASEAN establishing the standby arrangements.

This work has led the AHA Centre to build up its regional stockpile and raise its capacity to pre-positioned aid items from the warehouse in Subang, Malaysia, for delivery to affected Member States for the initial ASEAN’s response. This beefed-up capacity is built from the Disaster Emergency Logistics System for ASEAN (DELSA) project. At the time of this study, the regional stockpile consists of family kits, family tents, shelter tool kits, pre-fabricated buildings, pre-fabricated warehouses, generators, rescue boats and basic office equipment.

There is a need to emphasise that the regional stockpile is a resource of ASEAN, and not of the AHA Centre. Therefore, this resource is available whenever the Member States need it, especially in times of disaster. But also, these pre-positioned items are functioning primarily just for the initial wave of ASEAN’s response and the main ASEAN’s response is the aid assistance coming from assisting Member States facilitated by the AHA Centre.

At the request from the NDMO, the AHA Centre through DELSA sent one pre-fabricated office, complete with office supplies and a diesel generator to support the operations of the Regional Disaster Management office in Region 8. There was also one mobile storage unit serving as a temporary warehouse in Guiuan, Eastern Samar. The needs were presented in the AHA Centre’s Situation Report of 14 November 2013, and the items were flown from the warehouse in Subang, Malaysia, arriving in the Philippines on 20 November 2013. Feedback from the Government of Philippines showed that the relief items provided by the AHA Centre to support the operation of the NDMO were suitable and useful with the needs on the ground.

The pre-fabricated building is equipped with air conditioning facility and a generator. This functioned as a temporary office (for 4 people, complete with office supplies and equipment, such as chairs, cabinets, and cupboards), or as a temporary accommodation (for 4 people as well, complete with bunk bed, mattresses, and wardrobe). The pre-fabricated warehouse can function as temporary school, emergency hospital, emergency coordination centre, or warehouse. All of these facilities are insulated, durable in 4 seasons, and can withstand wind in high velocity.

About DELSA: The Disaster Emergency Logistic System for ASEAN (DELSA) project was established to develop a disaster emergency logistic system for the ASEAN, through the establishment of a regional stockpile of relief items and securing pre-arrangements with potential suppliers and transporters. The project also aims to enhance the capacity of the AHA Centre and the ASEAN Member States in disaster emergency logistic operations. It is expected that the regional stockpile will ensure speedy access to emergency relief items by Member States, and considered as internal assets in both large- and medium-scale disasters. DELSA is supported by the Government of Japan through the Japan-ASEAN Integration Fund (JAIF).

What Went Well: These pre-positioned items are within the authority of the AHA Centre, thus giving the AHA Centre the ability to quickly mobilise the much-needed items to support the operations of the NDMO at the most devastated area, which in this case was in Tacloban. This approach serves as an entry point for the AHA Centre to deliver concrete action to support the NDMO of the affected country, and open the way for the ASEAN response. The pre-fabricated office and mobile storage unit were also uncommon items that other humanitarian agencies are usually not able to provide during a crisis.

In addition to the above, the AHA Centre also provided food and non-food items for the affected population, consisting
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of rice, bottled water, tarpaulins, family tents, personal hygiene kits, temporary living equipment, and shelter kits. All of these items were procured locally and handed over to the local Disaster Management Office for them to distribute to the affected population.

The AHA Centre decided to do local procurement rather than transported the pre-positioned items in the regional warehouse. This is because there are items in the pre-positioned items (such as family kits) that were not suitable to the needs of the affected population. Also, procuring locally apparently provided the same lead time, and the cost was considerably lower compared to non-local procurements, even if it is done directly by the AHA Centre.

However, during the operation, AHA Centre did not have contacts of local suppliers. The logistics team had difficulties identifying reliable local suppliers, thus it was good that Oxfam in the Philippines, a member of the APG, provided assistance with a recommended list of local suppliers. Proper quality control and the exercise of due diligence process with the local suppliers were however, not carried out. This was the disadvantage of the AHA Centre compared to other humanitarian agencies with a long-term presence in the country. Most humanitarian agencies have established relationships and built a reputation with preferred suppliers, and are able to exercise proper due diligence with them.

Pre-positioning items were effective, because the regional standby arrangement is not yet in place. According to AADMER, all Member States shall identify and earmark assets and capacities which may be made available and mobilised for disaster relief and emergency response. The progress of establishing this standby arrangement is different from country to country, contingent to the involvement of various government agencies or departments. Being voluntary in character, this does not create the space for the AHA Centre to mobilise response as quickly as mobilising its own logistics stockpile from the regional warehouse. The advantage the AHA Centre has by mobilising pre-positioned items does not apply with the current status and progress of the regional standby arrangements.

However, from the period of arrival, all relief items transported from the regional warehouse, and those procured locally arrived within 12-14 days after the typhoon struck. Delivery time should be faster, especially since the objective of establishing a regional emergency stockpile is to ensure speedy delivery and timely provision of emergency relief items.

Learning from the Typhoon Haiyan experience, it appears that pre-positioned items, particularly the relief kits, need to be reviewed to check the appropriateness of the items in these kits, for the initial response. The family kits were not mobilised since the list of items were not suitable to the needs of the population affected by the typhoon. There is a suggestion that pre-positioned kits should have items that are: (1) not common but can support the NDMO to restore its operational capacity quickly; and/or (2) life-saving, suitable for most (if not all) ASEAN Member States, particularly for the initial response. Currently, these pre-positioned items are donations from the Government of Japan, but in the future, Member States should contribute to increase their capacity.

It was also observed from the study, that the AHA Centre’s capacity to do local procurement was not as strong as other humanitarian agencies that have established long-standing presence on the ground. There is a plan for the AHA Centre to forge long-term agreements with local suppliers in ASEAN Member States, and this needs to be pursued. Another suggestions to address this, is for the AHA Centre to form partnerships with humanitarian agencies, such as NGOs with longstanding presence in the country. These agencies are in a better position and capacity to engage local suppliers, able to conduct regular monitoring and quality-check, and perform local procurement in large-scale during crisis. This may be piloted, first with the APG or with the ACDM-CSO Partnership Framework (ACPF), which have a current partnership with ASEAN on the implementation of AADMER.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

As mentioned, having pre-positioned stocks and enhancing the AHA Centre’s capacity to do local procurement should be complementing the efforts to establish standby arrangements with all Member States. Recognising that this requires cooperation and collaboration of multi-sectors and various government departments, this issue should be discussed at ACDM level, as well as with other sectoral ministerial bodies, including with the military and foreign affairs.

The hidden risks: the threats of multiple emergencies and pandemics

Typhoon Haiyan tested the capacity of the AHA Centre in responding to a large-scale emergency. This emergency underscored the limited capacity of the AHA Centre in responding to more than one emergency at the same time. Many saw that it was fortunate that typhoon strength dissipated after it struck the Philippines and that Haiyan did not cause major damages in Vietnam.

However, the ASEAN region is very prone to multiple disasters happening at the same time as demonstrated in 2009 when Typhoon Ketsana travelled from the Philippines to Vietnam, and then weakened into a tropical depression over Laos. This extreme weather phenomenon caused major flooding in the Philippines, Vietnam, Cambodia, Laos, and Thailand, and brought significant damages to millions of people in the region. This situation was made worse with an earthquake magnitude of 7.6 Richter scale in West Sumatera, Indonesia, one month after the typhoon struck the region.

Such a situation is not rare in the Southeast Asian region. With the changing climate patterns and the rise of extreme weather events, the region needs to significantly raise its efforts for preparedness in handling multiple emergencies. Everybody has a role to play in building resilience and to increase the ASEAN’s capacity to respond.

Another possible threat in the region is exposure to the risk of a pandemic or a large-scale epidemic that crosses international boundaries, thus affecting a large number of people. The Asian region, in particular Southeast Asia, is a hot spot for emerging infectious diseases, as illustrated by the emergence of the NiPah virus, cholera, dengue, SARS, swine flu and avian flu virus. ASEAN has to be well-prepared for any pandemic outbreaks.

Aside from those, the region also has a number of ongoing armed-conflicts that results in emergency situations. Though this issue is primarily addressed by the ASEAN Political Security Community, the impact of the conflict have humanitarian consequences that the ASEAN needs to play a role in.
STRATEGIC COMPONENTS

ASEAN'S PROGRESS in implementing AADMER has been admirable. The agreement itself is considered as the world’s most powerful instrument related to international cooperation on disaster management. It is the first global legally-binding HFA-related instrument. Likewise, the AADMER was signed by the Foreign Ministers of ASEAN in July 2005, after just four months of negotiations, making it one of the fastest negotiated agreements in ASEAN’s history. Since the Agreement entered into force in December 2009, significant achievements have been made particularly in the areas of early warning and disaster monitoring, preparedness and response, and partnership and resource mobilisation. All in just 5 (five) years. Notably, as shown in the previous sections, with just 2 (two) years of existence, the AHA Centre became operational, providing services and support for the Member States, despite challenges with limited human capital and operational funding.

A more effective AHA Centre with more resources and a stronger mandate are undeniable. But such issues often depend on political will. The strength of ASEAN, or the effectiveness of the AHA Centre, is only what its least willing Member States would allow it to be. All of the achievements mentioned above will not happen if there is no strong trust and cooperation between Member States, ASEAN Secretariat, and the AHA Centre. The progress of AADMER implementation therefore, really depends on the effectiveness of work of ACM, the decision-making body together with support from the Secretariat, where the strategic decisions and directions emanate from.

ASEAN COMMITTEE ON DISASTER MANAGEMENT

THE ASEAN Committee on Disaster Management (ACDM) is a policy-making body that provides leadership and guidance towards realising the goals and objectives of AADMER, pursuant to the vision of AADMER. The ACM, headed by a Chair,

is primarily tasked to initiate and direct execution of the AADMER Work Programme activities, through the ACM Working Groups and Lead Shepherd Countries. The ACM was not set up for direct involvement during emergency operations, even as it plays a role in raising preparedness and enhancing response capacity.

With Typhoon Haiyan, it was observed that dealing with large-scale disasters cannot be handled by the sectoral ministries of disaster management alone. Strong cooperation and coordination with other sectors are crucial to ensure a smooth emergency operation. At the end of 2013, the ACM submitted a proposal to improve such cooperation on disaster management to the ASEAN Leaders. Such proposal resulted in the adoption of the ASEAN Declaration on Enhancing Cooperation in Disaster Management by the ASEAN Leaders at the 23rd ASEAN Summit on 10 October 2013. Through this Declaration, the formation of a Joint Task Force to promote synergy with other relevant ASEAN bodies on HADR is underway. This Joint Task Force includes senior officials on disaster management, foreign affairs, the military, and health sectors, with a mandate to expand and nurture cooperation and coordination among the ASEAN Member States in promoting regional collaboration.

Initial multi-sectoral issues have been identified to be discussed and resolved by this Joint Task Force. These are:

1. Need to identify mechanisms to convene high level meeting before and/or when disaster strikes one or more ASEAN Member States;

2. Advancing the establishment of the regional standby arrangements on earmarked assets and capacities of ASEAN Member States; and

3. Unity on the procedures of co-branding in carrying both the national and ASEAN flag or logo, to promote the visibility of ASEAN.
Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

The ACDM as Chair of the Joint Task Force needs to push the Joint Task Force to fulfil its purpose and resolve these issues.

As the policy-making body, the ACDM also plays a vital role in providing guidance and directions for the AHA Centre and ASEAN Secretariat in the area of disaster management. Currently, many see that the expanding expectations to the AHA Centre have to be matched with the resources, specifically in terms of systems, funds, and personnel.

**ASEAN HUMANITARIAN ASSISTANCE COORDINATOR**

**THE EXECUTIVE** Director of the AHA Centre contacted the Secretary-General of ASEAN as the ASEAN Humanitarian Assistance Coordinator (AHAC) on 11 November 2013, to provide updates on Typhoon Haiyan, and then conducted a special briefing to the ASEAN Secretary-General, Deputy Security-General for ASEAN Socio-Cultural Community, and the team from the ASEAN Secretariat.

In the Haiyan response, the Secretary-General of ASEAN, in his capacity as the ASEAN Humanitarian Assistance Coordinator\(^2\), sent a letter of sympathies, dated 10 November 2013, that expressed the ASEAN’s readiness for assistance. The AHAC visited the country on 19-22 November 2013, to convey ASEAN’s solidarity with the Filipino people and to see how ASEAN can better support the Government and the people of the Philippines in its relief and long-term recovery efforts. The Secretary-General’s visit to Manila and Tacloban, together with the AHA Centre, led the delivery of the ASEAN’s relief goods to the city of Tacloban and reaffirmed ASEAN’s solidarity and support to the affected Member State in times of disasters.

An advance team went to the Philippines to liaise with the national government, four days before the Secretary-General’s visit, which happened two weeks after the typhoon made landfall. And based from the interviews conducted, it would be more effective and more impactful, if the visit happened sooner.

The ASEAN Leaders agreed for ASEAN to convene special meetings at the Leaders’ or Ministerial level in the event of crisis or emergency situations affecting ASEAN, and develop arrangements to address such situations in a timely manner\(^2\). The SG, in consultation with the ASEAN Chair, also has the capacity to use his/her political influence to call for support from other ASEAN nations to the Philippines. This special Leader’s meeting was called in response to the Indian Ocean Tsunami led by Indonesia as the affected Member State, and a ministerial level meeting in response to Cyclone Nargis led by Singapore as the ASEAN Chair at that time.

The designation of SG as AHAC was made by the ASEAN Leaders at the 14th ASEAN Summit in 2009 where the Leaders “agreed to entrust the ASEAN Secretary-General to serve as ASEAN’s humanitarian assistance coordinator which can be activated any time at the request of the affected Member State in the event of a major disaster, whether it be a natural disaster or a pandemic.” However, following the above decision, the role of the SG as AHAC was not clearly defined, thus the function of the SG as the AHAC has not been fully utilised. There is also a lack of clarity on the working arrangements between the AHA Centre and the AHAC, as well as between the AHAC and the ASEAN Member States. There is a need to clarify the “what, where, and when” should the AHAC intervene during disaster response, who should this position report to and communicate with, and also at what level of disaster that it should be “activated”.

In view of the need to clarify the mandate and the parameters in which SG as AHAC operates, the ASEAN Secretariat developed the Terms of Reference (TOR) of the SG as AHAC. The TOR was endorsed by the ASEAN Coordinating Council, and welcomed by the 24th ASEAN Summit in early May 2014. For the next steps, the ASEAN Secretariat, in close coordination with the AHA Centre, is currently developing the operational procedures to elaborate all necessary arrangements related to resource mobilisation, partnership building, communications, and the required resources to support and operation-
alise the SG as AHAC. These procedures will enable the SG to provide leadership and be proactive in offering support to the affected country and to maximise its political influences to call for a collective effort of ASEAN responding as one.

The Operational Procedures should also include clear co-ordination arrangements between the Secretary-General of ASEAN as AHAC, and his/her supporting departments and divisions in the ASEAN Secretariat, with the AHA Centre and other ASEAN bodies and mechanisms.

**THE ASEAN SECRETARIAT**

**EVEN BEFORE** the super typhoon made landfall, the ASEAN Secretariat already had a close working relationship with the AHA Centre, as far as Typhoon Haiyan operations were concerned. The ASEAN Secretary-General, also serving as the AHAC, was periodically given briefing papers with recommended action points, prepared by the Secretariat jointly with the AHA Centre.

In times of emergency, the Secretariat, particularly the DMHA Division supported the role of the SG as the AHAC. In addition to this, the Secretariat organised executive briefings with key stakeholders (CPR, Defence Attaché, Dialogue Partners) at the AHA Centre, and also administered the ADMER Fund, and funds from Dialogue Partners. For the Typhoon Haiyan response, the ADMER Fund of USD 10,000.00 was immediately disbursed on 7 November 2013 and this played a critical role in support of initial field operations.

The amount of USD 10,000.00 was already pre-approved in the ADMER Fund Financial Rules, whereby the Executive Director of AHA Centre is given the authority to release...
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the disbursement of up to USD 10,000.00 per incident, for emergency relief purposes, upon receipt of a request from Member State (disbursements higher than USD 10,000.00 would require approval of the ACDM). However, this amount was not sufficient for an emergency of such scale. For this, contribution from the Government of Australia was sought.

In hindsight, the ceiling of USD 10,000.00 is recommended for review, particularly in relation to large-scale emergencies. The appropriate ceiling for fund disbursements for large-scale emergencies should be decided when developing the ASEAN Response Options.

The ASEAN Secretariat led the monitoring and evaluation in the implementation of the AADMER. Hence, the ASEAN Secretariat is also part of the TWG for this study, which is co-funded by the ADMER Fund and funding from the Government of Australia.

What went well: The ease of disbursement of the ASEAN Disaster Management and Emergency Relief Fund (ADMER Fund) by the ASEAN Secretariat made the AHA Centre more responsive, therefore more effective, especially in mobilising personnel and equipment. As well, tapping the ADMER Fund for the documentation of lessons learnt amplified its crucial role in improving the organisational learning processes. Member States contribute to this Fund, administered by the ASEAN Secretariat.

There are two types of contributions from the Member States — the ADMER Fund and the AHA Centre Fund. The former was established for the implementation of the AADMER, while the latter was established as part of the Agreement on the Establishment of the AHA Centre. Every Member State has a mandatory annual and equal contribution to the AHA Centre Fund. Meanwhile, ASEAN Member States give voluntary contributions to the ADMER Fund, which is open to contributions from other sources, subject to the decision or approval by the Member States. Some parts of the ADMER Fund are also allocated for emergency response operations of the AHA Centre. Seeing the critical function of the ADMER Fund, as well as the AHA Centre Fund, many respondents expressed that the contributions of ASEAN Member States should be increased according to their expectations from the AHA Centre.

NDMOs who participated in the Lessons Learned Workshop also agree that AMS contribution needs to be raised. They, however, mentioned that these contributions require political commitment from the Head of States or Governments. A more effective AHA Centre with more resources is an undisputable priority, but actualising such priority is subject to the exercise of political will of ASEAN Leaders. This implies that the AHA Centre could only be as effective as ASEAN Member States want the Centre to be.

The ACDM, with the support from the ASEAN Secretariat, should continue and intensify the lobbying efforts to secure political commitments from the ASEAN Leaders, preferably at the ASEAN Summit level for more resources for the implementation of AADMER and operationalisation of the AHA Centre.

What went well: All respondents (CPRs, Defence Attaché, and Dialogue Partners) who participated in these briefing sessions see the Executive Briefings as timely and very useful in information-gathering on the situation in the Philippines. These Executive Briefings were expected to be conducted regularly, especially during the early days of an emergency. The ASEAN Secretariat should take the lead in organising these briefing activities, having stronger links with the Dialogue Partners, CPR and Defence Attaché.

Another role of the Secretariat was supporting the AHA Centre in conducting an executive briefing on Typhoon Haiyan on 12 November 2013. This was attended by the Committee of Permanent Representatives (CPR) of ASEAN, and the Defence Attaché from Member States. It was then followed by a press conference. Still on 12 November, the AHA Centre also conducted another executive briefing on
Typhoon Haiyan, this time for five ASEAN Dialogue Partners that have supported the AHA Centre — Australia, Japan, the European Union, New Zealand and United States of America. New Zealand, however, was not able to join. In the event of large-scale disasters, it is suggested that executive briefing sessions be done regularly, jointly organised by the ASEAN Secretariat and AHA Centre.

The ASEAN Secretariat could also play a lead role in engaging the Dialogue Partners, as well as mobilising other sectoral bodies. With the Dialogue Partners, the ASEAN Secretariat is in a better position to engage with them, and to raise resources (such as convening donor conferences) to support on-going operations. The ASEAN Secretariat has twice organised AADMER Partnership Conferences, inviting ASEAN Dialogue Partners and partner organisations, to accelerate and support the implementation of AADMER. A similar conference should be done to raise support from the Dialogue Partners, to add value to the ASEAN’s response. In order to do this effectively, a resource mobilisation strategy, possibly for ASEAN to set up a multi donor relief fund in the future, particularly for emergency (and also for recovery) phase, should be in place. And this strategy needs to be aligned with other humanitarian fund-raising mechanisms, such as the UN Flash Appeal and the Consolidated Appeal Process (CAP), with the mechanism led by the government of the affected Member State.
The ASEAN’s collective response to disasters requires not only the mobilisation of the AHA Centre and the current mechanisms under the AADMER, but also the mobilisation of other relevant sectors’ mechanisms and resources within ASEAN. Apart from the disaster management sector, other sectors normally involved in the immediate aftermath of a disaster would be the political and security sector, the defence and military sector, and the health sector, among others. Based on the ASEAN’s experience following Cyclone Nargis in Myanmar in 2008, the youth sector could mobilise its extensive youth volunteers’ networks to help the affected communities in the recovery programme.

Evidence suggests that using a multi-faceted, multi-disciplinary, multi-sectoral approach is a necessity in addressing preparedness and early response, as well as in setting the basis for establishing coordination mechanisms for quick and reliable response, and ultimately, to achieve substantial reduction of disaster losses in the region. A large-scale disaster such as Typhoon Haiyan requires high-level facilitation to mobilise resources from various sectors in ASEAN, and from other partners and stakeholders, to help the affected country in the relief and long-term recovery efforts.

Aside from the ACDM, ASEAN has a growing number of ASEAN-related mechanisms on HADR, under its regional architecture. These mechanisms are the ASEAN Defence Ministers’ Meeting (ADMM), ASEAN Defence Ministers’ Meeting Plus (ADMM-Plus), ASEAN Chiefs of Defence Forces Informal Meeting (ACDFIM), ASEAN Regional Forum (ARF), and the East Asia Summit. In addition to this, there is also the ASEAN Plus Three Emergency Rice Reserve (APTERR)²⁴, which also provided assistance to the Philippines for Typhoon Haiyan. It has been acknowledged that disaster management is an issue of concerns, not only for disaster management practitioners, but also those in the economic, as well as political and security track. It is important that these various sectors and mechanisms at the regional level have policies that are aligned and in complementation with each other, using AADMER as the common platform to ensure the principle of ASEAN’s centrality.

Building resilience

The AADMER’s spirit and intent is to attain the ASEAN vision of disaster-resilient nations and safe communities by 2015. However, the AHA Centre, in its two years of operation, is focused more on disaster response and preparedness, due to resource limitation. Nonetheless, building resilience through disaster risk reduction is very critical, especially for this region that is quite prone to recurrent hazards and large-scale disasters. This is one of the things that the ASEAN Secretariat can play a leading role in, through cooperation and collaboration with other sectoral bodies (for example – but not limited to education, health, agriculture, and finance).

Implementing disaster risk reduction will need to involve the ACDM Working Groups on Prevention and Mitigation, that monitor the progress and provide technical guidance in the area of Prevention and Mitigation of AADMER. The Co-Chairs for the Prevention and Mitigation Working Group are Thailand and Lao PDR. The Working Group, with the support of the ASEAN Secretariat, should continue to strengthen the existing partnership with UN agencies and CSOs, towards building resilience. A two-track approach should be applied at the regional level, emphasising in establishing standards, frameworks, policies and regulations, while rolling out these policies at the country level supported by UN agencies and CSOs.

In the areas of learning, ASEAN has a lot to offer with the experiences of mega disasters such as the Indian Ocean Tsunami, Cyclone Nargis, and Typhoon Haiyan, as well as the recurring disaster risks such as floods and droughts. For this area of work, the AHA Centre should facilitate knowledge transfers among its Member States, and foster research and innovations, which may be fostered in collaboration with ACDM and the ASEAN Committee on Science and Technology, ASEAN’s sectoral body for science and technology.

The AHA Centre needs to continue to invest in building preparedness and increasing capacity of the region to respond to disasters, like in the identification of vulnerabilities and capacity gaps of each Member State when responding to disaster. There too is the need to develop an effective capacity-building plan in the region, to build up each Member State’s capacity to address their need, according to the level and nature of disaster risks that they are prone to. This vulnerability mapping could be integrated with the AHA Centre’s DMRS and ADINet to increase effectiveness and reach to the public.
In Conclusion

The scale, scope, and impact of Typhoon Haiyan were unprecedented. It tested the tools and capacity of all humanitarian agencies to respond to the call of the times, not just for ASEAN. In the past two years, the AHA Centre has invested significant resources in building tools and mechanisms, not to mention, capacity-building efforts to foster regional collaboration.

Typhoon Haiyan has shown three things. First, that ASEAN Member States stand in strong solidarity with each other in times of disasters. In this case, Member States immediately responded with aid assistance to the Philippines. Second, the Government of Philippines, of the affected country, was successful in receiving the assistance from the AHA Centre and the Member States. And third, the AHA Centre was able to perform critical services to support the ASEAN’s response. Established only two years ago, the AHA Centre’s achievements are noteworthy. These should not and could not be overlooked. The AHA Centre has shown its potential to further enhance its capacity in fulfilment of its mandate based on AADMER.

The ASEAN’s mechanisms, however, including the AHA Centre, have not yet been designed to address disasters of this magnitude and complexity, requiring a multifaceted, multi-disciplinary, and multi-sectoral approach. Evidence underscores the need to involve a wide range of sectors, not just NDMOs, but with other sections of the government, including that of the military and its foreign affairs. This should be addressed through the establishment of a Joint Task Force to promote synergy with other relevant ASEAN bodies on HADR. Multi-sectoral response to disasters is a necessity, particularly if the scale and magnitude is as colossal as Typhoon Haiyan.

The Secretary-General of ASEAN as AHAC, plays a vital role in mobilising other ASEAN’s sectoral bodies and mechanisms, as well as ASEAN’s circle of networks and partners. There should be a strong institutional capacity within the ASEAN Secretariat to support the SG as AHAC, to conduct high-level coordination and resource mobilisation.

In the immediate future, ASEAN, including the AHA Centre, should foster a more effective and efficient co-ordinative function between the disaster-affected host government and other actors, including the Member States and other international stakeholders. There is, therefore, a need for ASEAN and the AHA Centre to redefine and further strengthen this role.

At the strategic level, ASEAN Secretariat should organise discussions for the strategic decision-making processes of ASEAN Leaders and Ministers, in support of the Secretary-General as AHAC.

At the operational level, the AHA Centre should lead the coordination of aid assistance from ASEAN to the affected Member States, working closely with UN OCHA and other humanitarian agencies, private sector establishments, charity groups and NGOs.

At the tactical level, the AHA Centre should take a leadership role on the ASEAN-ERAT, in support of the NDMO of the affected country, as well as the overall ASEAN’s response.

The strength of the ASEAN’s response depends on the ability of Member States to have a prompt and speedy, reliable, and collective response. Member States, when providing humanitarian assistance to the affected country, should utilise mechanisms under the AADMER, and further support the operationalisation of the AHA Centre, including mobilising resources from within and outside ASEAN, to enhance its capability.
## SPECIFIC RECOMMENDATIONS

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<th>No.</th>
<th>Specific Recommendations</th>
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</table>
| 1   | Revise the ASEAN-ERAT guideline | ASEAN-ERAT | • Include a guideline for positioning ASEAN-ERAT team before disaster strikes;  
• Adjust the ASEAN-ERAT deployment period to up to 1-3 months;  
• Include clear criteria and required competencies of ASEAN-ERAT members for each level (Levels 1-3);  
• Finalise the "Demobilisation" and "Review of Mission" procedures;  
• Include a section defining the working arrangements between UNDAC and ASEAN-ERAT; and  
• Include a guideline on the ASEAN’s role in MIRA and PDNA. |
| 2   | Improve the quality of ASEAN-ERAT by crafting a training and development strategy. | ASEAN-ERAT | • Draw up a training design that is more hands-on, facilitative of testing practical skills and utilises more simulation activities;  
• Include training topics on core humanitarian skills, leadership, coordination and basic logistics;  
• Include discussions on safety, security, health and well-being of team members;  
• Develop a training curriculum and design for ASEAN-ERAT Levels 2 and 3;  
• Include regular team-building exercises, at least annually; and  
• Consider other approaches of capacity-building, including using e-learning resources, incorporating on-the-job training (through deployments), exposure visits, and coaching. |
<p>| 3   | Increase the number of ASEAN-ERAT members trained in each Member State. | ASEAN-ERAT | • Consider ASEAN-ERAT members from outside NDMO, military personnel, and non-government staff (such as Red Cross, CSOs, and private sector). |</p>
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| 4   | Develop AHA Centre's **Field Operations Manual.** | Operations | Include a guideline:  
• On the safety, security, health, and well-being of and for all field personnel (including ASEAN-ERAT members);  
• On mobilising the military and civilian assets of AMS to provide air lift and ground transport to support field operations;  
• In utilising the international coordination system, including information-sharing;  
• Establishing a Joint Operations Centre of ASEAN (JOCA); and  
• On setting-up a Reception and Departure Centre (RDC) for ASEAN teams. |
| 5   | Pre-position **standard kits and equipment** for the field team at the AHA Centre. | Operations | These kits should be sufficient enough to support large-scale emergencies in the initial phase. |
| 6   | Establish **partnerships** with the **private sector** and **CSOs**, that are able to support ASEAN’s operations during emergency response. | Operations | This is to ensure support for the ASEAN’s operations, in the areas of ICT, mapping, vehicle support, setting-up of the base camp, and also for local procurement. |
| 7   | Revise the AHA Centre’s **Emergency Operations Manual.** | Operations | Include a discussion on the Planning section under the EOC structure of the AHA Centre. |
| 8   | Revise **SASOP.** | Operations | • Include mechanisms for joint response planning with AMS;  
• Revise SASOP Form 2 to include an Executive Summary in each report;  
• The AHA Centre’s Situation and Flash Updates should be posted in the ReliefWeb and V-OSOCC. |
| 9   | Expand the **mailing list** for the AHA Centre’s Situation Update. | Operations | • Include the focal points from the military and foreign affairs units from each Member State into the list, as well as the CPRs and Defence Attaché of all AMS.  
• Consult with NDMOs for other focal points to be included in the list; and  
• Those in the list should be given access to the WebEOC. |
| 10  | Train AHA Centre staff to use **international humanitarian system tools.** | Operations | Training topics should include:  
• Financial Tracking Service (FTS);  
• Who is doing What and Where (3W);  
• Virtual On-Site Operations Coordination Centre (V-OSOCC); and  
• ReliefWeb. |
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<tr>
<td>11</td>
<td>Speed up the development of scenario and ASEAN’s response planning based on the type and scale of disasters.</td>
<td>Operations</td>
<td>• Include developing the ASEAN Response Options, as planned in AADMER WP, and in Expected Output #11; • Consider revising the ceiling of USD 10,000.00 for emergency from the ADMER Fund for large-scale disasters; and • Scenario planning should include small, medium, and large-scale disasters, as well as multiple, simultaneous disasters.</td>
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<td>12</td>
<td>Conduct different disasters scenario-building, combined with joint response planning in each Member State.</td>
<td>Operations</td>
<td>• This activity is to enable identification of the specific assistance/responses that may be required from ASEAN; • Include a discussion on popularising AADMER, the AHA Centre, and the regional tools (WebEOC, SA-SOP, DMRS, ERAT, and DELSA); and • Collaborate with each NDMOs to conduct a road show in each Member States, inviting relevant government departments.</td>
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<tr>
<td>13</td>
<td>Develop a guideline for civilian-military coordination during HADR.</td>
<td>Operations</td>
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<td>14</td>
<td>Assign military liaison officers for AHA Centre to facilitate civil-military coordination</td>
<td>Operations</td>
<td></td>
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<tr>
<td>15</td>
<td>Develop the ICT policy for user access to WebEOC.</td>
<td>Operations</td>
<td>• Ensure that Member States (NDMOs, MoFA, military liaisons), the AHA Centre staff, and ASEAN-ERAT members have user access to WebEOC; • Be conscious of the rate of rotation, or change of posts assumed by personnel, within a relatively short period of time; and • Include a clear outline of the roles and responsibilities for each function.</td>
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<tr>
<td>16</td>
<td>Develop a media communication strategy for the AHA Centre.</td>
<td>Communications</td>
<td>To be done in coordination with ASEAN Secretariat.</td>
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<td>17</td>
<td>Work towards increasing the number of followers and Likes on AHA Centre’s social media accounts.</td>
<td>Communications</td>
<td>To be done in coordination with ASEAN Secretariat.</td>
</tr>
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<td>18</td>
<td>Conduct in-depth reporting, analysis, and facilitate exclusive interviews by senior journalists, writers, and academics, regarding ASEAN’s response in every disaster.</td>
<td>Communications</td>
<td>To be done in coordination with ASEAN Secretariat.</td>
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<td>19</td>
<td>Review and do an inventory of the regional warehouse and pre-positioned stocks.</td>
<td>Logistics</td>
<td>• Review the effectiveness of the kit list for initial response; and • Conduct a feasibility study (with a cost-benefit analysis) for the regional and satellite warehouses.</td>
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<td>20</td>
<td>Establish <strong>long-term agreements</strong> with preferred suppliers.</td>
<td>Logistics</td>
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<tr>
<td>21</td>
<td>Establish an <strong>information hub</strong> to promote the exchange of relevant information, expertise, technology, techniques and know-how.</td>
<td>Knowledge Management</td>
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<tr>
<td>22</td>
<td>Establish the <strong>regional standby arrangements</strong> with AMS.</td>
<td>Joint Task Force</td>
<td></td>
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<td>23</td>
<td>Develop indicators and set-up mechanisms to <strong>measure performance of ASEAN response</strong>.</td>
<td>DMHA</td>
<td>Include performance indicators for AHA Centre’s operations, as well as for the SG as AHAC.</td>
</tr>
</tbody>
</table>
| 24  | Finalise the **Operational Procedures** of the **SG as AHAC**. | DMHA | • Include procedures to organise regular executive briefings for the CPR, Defence Attaché, Dialogue Partners and others; and  
• Clarify the roles and responsibilities of each division within the ASEAN Secretariat, in support of the SG-AHAC, and the coordination between the ASEAN Secretariat and other ASEAN’s sectors and mechanisms. |
| 25  | **Disseminate** and **popularise** the TOR and Operational Procedure of SG as AHAC to all ASEAN Member States. | DMHA |         |
| 26  | Develop the ASEAN’s **post-disaster resource mobilisation strategy** (for relief and recovery). | DMHA | • Develop the guidelines and mechanisms of coordination for ASEAN-led humanitarian appeals; and  
• Consider coordination with other mechanisms, such as UN Flash Appeal, Consolidated Appeal Process (CAP), and other types of humanitarian financing efforts at the global level. |
<p>| 27  | Develop ways to more effectively coordinate work of the <strong>ASEAN’s various sectors and mechanisms</strong> related to HADR with AADMER. | DMHA | Note that this may be done through the Joint Task Force on HADR, chaired by the ACIDM, which consists of Chair/Vice Chairs of ADSOM, SOM and SOM-HD. |
| 28  | Develop <strong>mechanisms for common branding</strong> to carry both the national and ASEAN flags and/or logo to promote visibility of ASEAN. | Joint Task Force |         |
| 29  | Identify <strong>mechanisms to convene high-level meetings</strong> when a Member State is faced with disaster, or some imminent risks. | Joint Task Force | This is in line with the approved TOR of SG-AHAC and the Operational Procedures being developed. |</p>
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<tr>
<td>30</td>
<td>Establish <strong>partnerships</strong> at the regional level in the development sectors.</td>
<td>ACDM</td>
<td>For example education, health, agriculture, and finance, among others</td>
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<tr>
<td>31</td>
<td>Increase <strong>contribution from the AMS</strong> for ADMER Fund and AHA Centre Fund.</td>
<td>ACDM</td>
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<tr>
<td>32</td>
<td>Ensure that all NDMOs use the WebEOC and have the capacity to train others on its use.</td>
<td>NDMO</td>
<td>• Each Member State should conduct routine checking of WebEOC every two months;</td>
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<td>• The AHA Centre should conduct a regular exercise with all Member States (done simultaneously) on the WebEOC, every six months, preferably before the monsoon season starts;</td>
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<td>• This regular exercise may be done through disaster exercises, such as ARDEX, ARF-DIREX; and</td>
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<td>• The AHA Centre should develop a quick guide for such routine checking and regular exercise.</td>
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<td>33</td>
<td>NDMOs should utilise <strong>the procedures in SASOP.</strong></td>
<td>NDMO</td>
<td></td>
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<tr>
<td>34</td>
<td>Continue to support and further strengthen <strong>ASEAN-ERAT deployment.</strong></td>
<td>NDMO</td>
<td>The AHA Centre should have pre-approved deployment agreement/s with employing organisations for ASEAN-ERAT members.</td>
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### Key Informant Interviews

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<tr>
<th>No</th>
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<tr>
<td>1</td>
<td>Ferny Hapsari</td>
<td>AHA Centre</td>
<td>KIlS</td>
<td>AHA</td>
<td>05-Mar</td>
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<td>2</td>
<td>Gaynor Tanyang</td>
<td>APG</td>
<td>KIlS</td>
<td>ERAT</td>
<td>05-Mar</td>
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<td>3</td>
<td>Andrew Mardanugraha</td>
<td>AHA Centre</td>
<td>KIlS</td>
<td>AHA</td>
<td>10-Mar</td>
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<td>4</td>
<td>Adi Bishry</td>
<td>AHA Centre</td>
<td>KIlS</td>
<td>ERAT</td>
<td>10-Mar</td>
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<td>5</td>
<td>Arnel Capili</td>
<td>AHA Centre</td>
<td>KIlS</td>
<td>ERAT</td>
<td>07-Mar</td>
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<td>6</td>
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<td>KIlS</td>
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<td>13-Mar</td>
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<td>7</td>
<td>Adelina Kamal</td>
<td>ASEAN Secretariat</td>
<td>KIlS</td>
<td>ASEC</td>
<td>14-Mar</td>
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<td>8</td>
<td>Said Faisal</td>
<td>AHA Centre</td>
<td>KIlS</td>
<td>AHA</td>
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<td>9</td>
<td>Dominic Morice</td>
<td>AIFDR</td>
<td>Group Interview</td>
<td>ADP</td>
<td>25-Mar</td>
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<td>10</td>
<td>Ben O’Sullivan</td>
<td>AIFDR</td>
<td>Group Interview</td>
<td>ADP</td>
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<td>Jeong Park</td>
<td>DFAT</td>
<td>Group Interview</td>
<td>ADP</td>
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<td>12</td>
<td>Colonel Romeo S. Brawner Jr.</td>
<td>AFP</td>
<td>KIlS</td>
<td>PHL</td>
<td>27-Mar</td>
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Lessons Learnt on the ASEAN’s Response to the Aftermath of Typhoon Haiyan

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<tr>
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<td>13</td>
<td>Director Rosario T. Cabrera</td>
<td>OCD</td>
<td>Short interview</td>
<td>PHL</td>
<td>28-Mar</td>
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<td>14</td>
<td>Asri Wijayanti</td>
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<td>KIIs</td>
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<td>15</td>
<td>Durudee Sirichanya</td>
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<td>17</td>
<td>Muamar Vebry</td>
<td>EU Delegation Office</td>
<td>KIIs</td>
<td>ADP</td>
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<td>18</td>
<td>Pannapa Na Nan</td>
<td>Department of Disaster Prevention and Mitigation</td>
<td>KIIs</td>
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<td>10-Apr</td>
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<td>19</td>
<td>Jommel Merano</td>
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<td>20</td>
<td>Vu Van Tu</td>
<td>Department of Dike Management Flood and Storm Control</td>
<td>KIIs</td>
<td>AMS</td>
<td>11-Apr</td>
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<td>21</td>
<td>H.E. Alicia Dela Rosa Bala</td>
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<td>KIIs</td>
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<td>22</td>
<td>Larry Maramis</td>
<td>ASEAN Secretariat</td>
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<td>23</td>
<td>Takako Ito</td>
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<td>KIIs</td>
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<td>Sebastian Rhodes Stampa</td>
<td>UN OCHA ROAP</td>
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**GROUP MEETINGS**

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<th>No. of Women</th>
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INTERVIEW PROTOCOL AND GUIDE

INTERVIEW PROTOCOL

Introduction (start at ______ 2 min | end at ______ )

Welcome—Explain purpose of the interview
1. Thank you for agreeing to do this interview. My name is [NAME] and I’ll be talking with you today.
2. As you know, this project is being commissioned by ASEAN Coordinating Centre for Humanitarian Assistance (AHA Centre) and endorsed by the ASEAN Committee on Disaster Management (ACDM). The focus of this documentation is to make improvements for a fast, reliable, united, and collective response of ASEAN together as one.
3. The purpose of this interview today is to learn more about your experiences with and recommendations related to ASEAN’s response to Typhoon Haiyan in the Philippines.
4. The interview will last about 1 hour.
5. Did you read the consent form that was sent to you? Do you have any questions? Do you agree?

Ground rules

1. Everything you tell us will be confidential. To protect your privacy, we won’t connect your name with anything that you say.

2. At any time during our conversation, please feel free to let me know if you have any questions or if you would rather not answer any specific question. You can also stop the interview at any time for any reason.
3. Please remember that we want to know what you think and feel and that there are no right or wrong answers.
4. Is it OK if I audiotape this interview today?

[Turn on recording equipment.]

Background (start at ______ 3 min | end at ______ )

I’d like to begin by asking you some questions about your current job.
1. Could you please tell me your full name and exact title?
2. What are your key responsibilities in your current position?
3. How long have you been with [organization]?

[Move to questions guide]

Closing (start at ______ 5 min | end at ______ )

1. What is the most important message that you want us to take away from this interview?
2. Do you have any documentations or resources that may be useful to include for this lessons learned documentation? If so, please send them to me.

Thank you for your time and participation in this interview. The information that you provided to us will be very helpful in this project.

**INTERVIEW GUIDE**

**General questions**

1. What role did you play in the response? (then deepen and expand)
2. To what extent has ASEAN able to respond to Typhoon Haiyan?
3. Are you aware of the ASEAN response coordination mechanisms, who to contact, what are the procedures, etc? Did you use these procedures? Why or why not?
4. To what extent do you see AHA Centre coordination with other humanitarian actors? (National Government, Local Government, UN OCHA, INGOs, Dialogue Partners)

**Specific Questions**

**ASEAN Response - Appropriateness/Relevance**

1. On what basis was ASEAN immediate response developed? How was design and decisions made in terms of scope of ASEAN Response? Were these informed by the SASOP Form 1, Form 2, and ERAT reports? What were the other sources of information for deciding on the type of intervention/response?
2. To what extent was the ASEAN response appropriate and in line with government priorities?
3. What mechanisms were used to monitor the changing context as well as tracking input/outputs, and progress of response? Who has been leading/guiding this? Where is information coming from and how has this been used?
4. What daily/weekly mechanisms/procedures/structures were used to ensure internal coordination and collaboration between partners and staff as well as other support departments? How did this work? Strengths/short comings?

**ASEAN Response - Timeliness**

1. Was the response to Typhoon Haiyan quick as required by SASOP and timely (able to adjust according to changing conditions)? If so, or if not, why?
2. What were the factors involved in ensuring a timely (or untimely) response?
3. To what extent did ASEAN SASOP facilitate assistance from Member States in an effective and timely manner?
4. Was ASEAN response faster than other humanitarian actors? (Probe further and comparing it with Nargis and Bopha; has the response timeliness improved from previous response coordinated/led by AHA)

**ASEAN Response - Effectiveness/Impact**

1. To what degree were the response objectives achieved? For NDMOs, MOFA: Were you aware of the objectives of the ASEAN response and did these guide your decision to respond in a specific manner (e.g., choice of type of assistance). Probe on the 4 response objectives: Managing information, Facilitating assistance, Support to affected country, Support to affected population
2. What were the key factors responsible for the objectives to be met (or unmet)?
3. How many AMS benefitted from the services provided by AHA Centre?
4. How many people benefitted from the ASEAN response? How was this information obtained?
5. What downward accountability measures are in place?
6. In the context of ASEAN assistance where the end-point is delivery of goods/services to NDMO, not the affected population, how did ASEAN ensure that the assistance benefited the affected population in most need of assistance (with reference to ERAT guidelines/mandate)? Is this an area that needs to be improved, how?
ASEAN Response - Connectedness

1. Did you encounter any problems in shifting from response transitioning to normal phase? What was the basis in deciding to go back to normal phase?

Operations – ERAT/ Need Assessment

1. Was the ERAT guideline being followed completely? What is your experience in following the guideline in a response with this scale?
2. How was the rapid assessment designed, planned, executed? Was it finished timely?
3. How do you rate the quality of needs assessments? ?
4. Was the ERAT assessment useful for ensuring (1) quick response, (2) helping the NDMO make big picture analysis and design its response, and (3) that AHA Centre is able to coordinate the mobilisation, response and deployment of regional disaster management, assets, capacities and humanitarian goods and assistance to the disaster affected areas?
5. Were they shared internally/ externally? If so, how?
6. Were the affected population consulted as part of the needs assessment? If so, how did this take place? If not, why?
7. How relevant were the tools and methodology including ERAT member’s capacity to undertake such assessments and consultations with the affected community? (Probe also ERAT training materials)
8. Were the affected population consulted as part of the needs assessment? If so, how did this take place? If not, why?
9. Were different needs of women, men, boys, and girls, and other vulnerable sectors of the population (people with disabilities, geographically distanced population, ethnic groups, etc.) considered?
10. Probe on the strengths and shortcomings of this process
11. Operations – On-site Coordination
12. Which agencies did AHA Centre most engage with?
13. How is ASEAN’s response linked or coordinated with the existing humanitarian response system existing in the country (e.g., in the Philippines, the UN cluster system is in place, and is led by the government)? How do you rate AHA Centre coordination with other humanitarian actors? (National Government, Local Government, UN OCHA, INGOs)
14. Did coordination lead to improved effectiveness and impact? How did this come about?
15. What were the main constraints and supports to coordination? How good coordination was achieved, and is it replicable in other situations?
16. What clusters or coordination meetings have been regularly attended and why?
17. What role did AHA Centre play in the coordination?
18. Did the AHA Centre actively contribute to the mapping exercise (Who is doing What and Where)? Did ASEAN response part of the overall Haiyan response plan?
19. Operations – Civil – military coordination
20. What was the role of military in supporting ASEAN’s response?
21. What was the basis in establishing this collaboration?
22. What is the nature of civil-military coordination during the response? Were they based on existing standards and agreed procedures?
23. How did it worked? What was the learning? How can we improve?

Operations – Information Management

1. How was the IM “products” (sitreps, weekly disaster update, flash update) being used for you? (Probe on how useful it was before the typhoon strikes)
2. What are the sources of information? What were the challenges in obtaining and consolidating information?
3. Who were the recipients of information? How did they use the information from AHA Centre?
4. Did the information from AHA Centre provided added value to the affected MS? To the other AMS? To other stakeholders?
5. Was there a dedicated staff to manage the information?

Operations – Logistics

1. What mechanisms/ procedures are in place to ensure you are getting the right item to the right place at the right time? (probe on distribution guidelines, systems for tracking relief
items, and staff capacity)? Did they facilitate timely and appropriate response?

2. Are the existing systems and processes in place for this scale of the emergency? What adjustments were made to the procedures to accommodate the demands in the current context? Why/when were these made and who decided? (probe on local procurement vs international shipping)

3. Does AHA Centre staff have the required knowledge, skills and attitudes to deliver the logistics operations?

4. How do you rate the role of logistics in the operation so far? (Probe on transportation, procurement, storage, distribution, and security)

5. How do you rate the logistics support for the personnel so far? (Probe on on-site office space, facilities, accommodation)

**Operations – EOC**

1. What was the role of the EOC? Is this clear to those concerned (NDMOs, MOFA, ERAT, other stakeholders)?

2. How effective was the use of the Emergency Operations Centre?

3. What mechanisms that was in place during the response phase to ensure continued/clear leadership and direction of the response operation? How were decisions made, at what point and who were involved?

4. How do you rate the usefulness of the Web EOC for your role?

5. How was the staff rotation process being executed on the management of the EOC?

**Strategic - Resource Mobilization (Fundraising, AADMER Fund, and others)**

1. Has the ADMER Fund contributed to a timely response? Was it mobilised in a timely manner?

2. What resources were mobilised by the following for the ASEAN response: AHA Centre, ASEAN Secretariat, ASEAN Member States, Dialogue Partners, and Other Partners: UN, Red Cross, NGOs.

3. What effect, did the utilisation of ADMER Fund had on the overall fundraising and mobilisation of resources?

4. What effect, if any, have they had on the overall fundraising and mobilisation of resources?

5. How successful has fundraising been for the response? What were the key determining factors?

6. What was the role of ASEAN’s Dialogue Partners and other partners in supporting ASEAN’s response? Were there assistance provided other than funding?

**Strategic - Communications/ Media**

1. Were relevant information/spokespersons/personal stories and case studies about the ASEAN response made available to the public and key stakeholders in a timely manner? Why? Why not? How was this done?

2. Was there sufficient number of staff (whether in AHA Centre, ASEC, or contribution by other partners) with required competencies on communications and media relations during the response?

3. To what extent has the ASEAN’s response been communicated at local media level Vs International media?

4. Did the media and communications work enable the visible profiling of ASEAN response to the public and key stakeholders?

**Strategic - ASEAN Secretariat**

1. What has been the role of the ASEAN Secretariat in the operation so far? (probe on the results that was achieved)

2. Is the coordination between the ASEAN Secretariat and AHA Centre sufficient and effective to deliver the objectives of the response? Are the points for coordination between AHA Centre and ASEAN Secretariat clear to both institutions and to the external stakeholders (non-NDMO agencies of the AMS, donors, etc.)?

3. How well did ASEAN’s existing support functions facilitate the implementation of the response efforts?

4. What has been the role of SG as AHA-C in the operation so far? (probe on the results that was achieved)

5. What do you see the role of the SG in future emergencies?

6. What has been the role of other ASEAN sectoral bodies and...
divisions (Public Outreach and Civil Society Division and Security Cooperation Division) so far? What needs to improve in future emergencies? How did they coordinate with AHA Centre?
7. Was the overall response seen as an ASEAN unified response?

ASEAN Response - Preparedness

1. What disaster preparedness measures did AHA Centre have in place prior to the typhoon and how did this level of readiness affect ASEAN response?
2. Probe:
3. Preparedness and contingency plans in place?
4. Capacity training of staff?
5. Tools and facilities to support the operations? (probe on ICT equipment, operation logistics)
6. Management structure/ decision making/ roles of staff?
7. Partnerships/ networks? (with Dialogue partners, UN OCHA, INGOs, etc)
8. Availability of financial resources and timely disbursements?

Learning questions

1. What worked well and needs to be maintained?
2. How could the response be improved?
3. Are there any questions that you are surprised I have not asked?
4. What lessons have you learned, or had reinforced by the response? What would you do differently the next time? What lessons have you (re)learned?
5. Are there any lessons for you personally?
Notes

1. ASEAN is composed of the following countries: Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam.

2. Haiyan developed to typhoon level on 4 November, 2013, in the afternoon. In the morning of the 4th, it was still categorised as a tropical depression, based on the information gathered from the AHA Centre’s DMRS. A week before Typhoon Haiyan was formed, there were two significant weather events forming in the region — Typhoon Krosa and Tropical Depression 30W (Wilma). Additional reference from: http://en.wikipedia.org/wiki/2013_Pacific_typhoon_season, last accessed 27 April 2014.

3. In April 2013, the AHA Centre developed the Emergency Operations Manual, a guide to the response operations of the AHA Centre team in Jakarta, and at the field level as it coordinates, collaborates, and supports Member State during disaster response operations. Reference: AHA Centre Emergency Operation Manual Version 1


5. Flash Updates usually contains information regarding the disaster, as well as the estimation of the disaster damage in affected areas. For Typhoon Haiyan, the AHA Centre provided information on areas on the path of the Typhoon, its intensity, and the estimated impact area. Reference: AHA Centre.

6. ERAT members mostly consist of government officials, primarily from the NDMO. Out of the 56 ERAT members that have been trained, only 2 are non-government staff (from Red Cross and another one from INGO), and one military personnel from Indonesia. Reference: AHA Centre.


8. Leadership is a vital element in humanitarian operations. Good leadership can lead to more effective humanitarian response, while poor leadership can create delays, confusion, and missed opportunities. A recent literature review has been produced by ALNAP. This may be downloaded from: http://www.alnap.org/resource/8640, last accessed 28 April 2014.

9. Broadband Global Area Network (BGAN) is a global satellite internet network, with telephony using portable terminals. The terminals are normally used to connect a laptop computer to broadband Internet in remote locations, as long as line-of-sight to the satellite exists, the terminal can be used anywhere. The value of BGAN terminals is that unlike other satellite Internet services which require bulky and heavy satellite dishes to connect, a BGAN terminal is only about the size of a laptop, and thus can be carried easily. Reference: http://en.wikipedia.org/wiki/Broadband_Global_Area_Network#cite_note-1, last accessed 27 April 2014.
10. Overall, the ASEAN-ERAT produced 7 assessment reports within 12 days of operation. These reports were analysed and included in the AHA Centre’s Situation Updates.


12. Currently, access to the WebEOC is limited to AHA Centre staff, the ASEAN Secretariat, and two users from each NDMO of all ASEAN Member States. Reference: AHA Centre

13. The ASEAN Member States are represented by National Focal Points, usually coming from the National Disaster Management Organisations.

14. Overall, the AHA Centre produced 3 Flash Updates and 25 Situation Updates related to Typhoon Haiyan operation, from 8 November 2013 until 23 December 2013.

15. The Sentinel Asia Initiative is an international project initially put forward by the Japan Aerospace Exploration Agency (JAXA), and endorsed by the Asia-Pacific Regional Space Agency Forum (APRSAF). Under this Initiative, satellite imagery obtained through the earth observation satellite is delivered through Internet communication to the Asian countries, including those who do not own satellite to support disaster management in the region. Reference: http://www.asean.emb-japan.go.jp/release13_40.html, last accessed 24 April 2014.

16. The RDC is located at the arrival point of international relief teams and relief items to facilitate and coordinate their arrival and further deployment. The RDC’s primary responsibility is to register teams, provide an information briefing, direct teams to the OSOCC, and pass processed information of incoming teams to the OSOCC in order to facilitate its operational planning. Information taken from http://www.unocha.org/what-we-do/coordination-tools/osocc-rdc/rdc dated 13 April 2014.

17. AHA Centre Executive (ACE) programme is an executive training programme for selected disaster management officers from ASEAN countries. Under this programme, the officers will be involved in an intensive six-month training programme that covers wide aspects of disaster management, including emergency management, incident command system, emergency logistics system, international humanitarian system, and emergency communications. Reference: ASEAN Secretariat

18. The AADMER Advocates are the “go-to-persons” and the “people on-the-go” on matters related to AADMER institutionalisation. Advocates can conduct AADMER orientation workshops, briefings, trainings, public awareness and information campaigns to enhance the understanding of AADMER among various stakeholders and the general public at national and sub-national levels and encourage them to be part of the implementation of AADMER. All ASEAN Member States (AMS) have appointed their own AADMER Advocate. Reference: AADMER Partnership Group

19. Life-saving defined as actions that within a short time span remedy, mitigate or avert direct loss of life, physical and psychological harm or threats to a population or major portion thereof and/or protect their dignity. Key life-saving sectors reflected in the Sphere handbook are water supply, sanitation and hygiene promotion; food security and nutrition; shelter, settlement and non-food items; and health action. However, other sectors such as education and protection sometimes also considered as life-saving sectors depending on the context of specific emergency response. Reference: CERF Life-saving criteria
20. ASEAN-CSO Partnership Framework is a multi-stakeholder platform that brings together civil society organisations from 10 ASEAN countries representing national platforms, regional CSOs, INGOs operating in the region, and national CSOs engaged in disaster risk reduction, preparedness and response. ACPF has been adopted at the 22nd ACDM meeting on May 2013.

21. In the 14th ASEAN Summit on 28 February -1 March 2009 in Cha-am Hua Hin, Thailand, the Heads of State/Government of ASEAN Member States “agreed to entrust the ASEAN Secretary-General to serve as ASEAN’s humanitarian assistance coordinator which can be activated any time at the request of the affected ASEAN Member State in the event of a major disaster, whether it be a natural disaster or a pandemic.” This role of ASEAN Humanitarian Assistance Coordinator will be situational, based on the disaster situations and the need or request of the affected Member State.


23. ASEAN Secretariat also manages the funding from Dialogue Partners that supports the AHA Centre, thus AHA Centre needs to follow the Secretariat financial procedures and guidelines, which may not be appropriate to be used during a crisis.

24. APTERR distributed 800 Metric tons of rice donated by the Government of China through APTERR Tier 3 Program to aid the typhoon Haiyan victims in the Philippines. This mechanism was also linked with AADMER. Reference: http://www.apterr.org/events/implementation-asean-plus-three-emergency-rice-reserve-apterr-tier-3-programme-philippines, last accessed 25 April 2014.