Description of the Cover Page

Cover page design was conceptualized by the representative of the PNAC Advocacy Committee last July 13, 2009. Flag colors were used to signify the Philippines’ national response to HIV and AIDS. Graphical representation of HIV and AIDS cases (increasing) and resources put in for the prevention and control program (decreasing) from 1998-2008 are based on data gathered by PNAC. Photographs superimposed on the blue and red panels are lifted from activities of PNAC throughout the years. The timeline covering the last decade 2000 to 2008 is the highlight coverage of this report.

This manuscript is the Third Report to the President produced by the Council since RA 8504’s enactment in 1998.
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MESSAGE OF THE PNAC CHAIRPERSON

Members of the Philippine National AIDS Council (PNAC), in coordination with our sectoral organizations, proudly present the accomplishments as we move on our third decade as the integrator of approaches in the forefront of HIV and AIDS prevention and control in the Philippines. This Report to the President highlights the major achievements and concerns of advocates for this public health and developmental concern from years 1999 to 2008.

We strive to move on as one coordinated body and look forward to better address the varied concerns of people living with HIV and AIDS, the communities they belong to and the public to be healthily aware on the components of HIV and AIDS prevention and control. Evolving and complex challenges confront our catalysts in this area, ranging from waning collaboration and resources to the intricacies of policy development, implementation and evaluation. However, these constraints do not hinder our champions to fulfil their missions, committed to protect the population by demising the spread of the disease and decreasing the stigma attached to it.

May I emphasize that although the prevalence of HIV and AIDS in the country remains at less than one percent (<1%) at this time of the population, studies show that trends are significantly growing and that the increasing force of globalization as well as risky sexual behaviour, put more of our people at risk. I call on support from the main branches of government, the civil society and the general public to further heighten efforts toward effectively addressing the different dimensions of HIV and AIDS. I also challenge the PNAC to continuously look for strategies and lead the nation in this endeavour.

Mabuhay and Congratulations!

FRANCISCO T. DUQUE III, MD, MSc
Secretary of Health
Chairperson of the Philippine National AIDS Council
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>AMTP</td>
<td>AIDS Medium Term Plan</td>
</tr>
<tr>
<td>AO</td>
<td>Administrative Order</td>
</tr>
<tr>
<td>BCC</td>
<td>Behavior Change Communication</td>
</tr>
<tr>
<td>CHED</td>
<td>Commission on Higher Education</td>
</tr>
<tr>
<td>CHO</td>
<td>City Health Office</td>
</tr>
<tr>
<td>CRIS</td>
<td>Country Response Information System</td>
</tr>
<tr>
<td>CSO</td>
<td>Civil Society Organization</td>
</tr>
<tr>
<td>DBM</td>
<td>Department of Budget and Management</td>
</tr>
<tr>
<td>DFA</td>
<td>Department of Foreign Affairs</td>
</tr>
<tr>
<td>DILG</td>
<td>Department of the Interior and Local Gov’t</td>
</tr>
<tr>
<td>DOLE</td>
<td>Department of Labor and Employment</td>
</tr>
<tr>
<td>DOJ</td>
<td>Department of Justice</td>
</tr>
<tr>
<td>GO</td>
<td>Government Organization / Line Agency</td>
</tr>
<tr>
<td>HACT</td>
<td>HIV and AIDS Core Teams</td>
</tr>
<tr>
<td>HAT</td>
<td>HIV Antibody Test</td>
</tr>
<tr>
<td>HAIN</td>
<td>Health Action Information Network</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>HRG</td>
<td>High Risk Group</td>
</tr>
<tr>
<td>ICDP</td>
<td>Int’l Conference on Population and Dev’t</td>
</tr>
<tr>
<td>IDU</td>
<td>Injecting Drug User</td>
</tr>
<tr>
<td>IEC</td>
<td>Information, Education, Communication</td>
</tr>
<tr>
<td>IHSS</td>
<td>Integrated HIV Behavioral and Serologic Surveillance</td>
</tr>
<tr>
<td>IP</td>
<td>Implementing Partner</td>
</tr>
<tr>
<td>IRR</td>
<td>Implementing Rules and Regulation</td>
</tr>
<tr>
<td>ISSA</td>
<td>Institute for Social Studies and Action</td>
</tr>
<tr>
<td>LAC</td>
<td>Local AIDS Council</td>
</tr>
<tr>
<td>LGU</td>
<td>Local Government Unit</td>
</tr>
<tr>
<td>LIP</td>
<td>Lead Implementing Partner</td>
</tr>
<tr>
<td>MARP</td>
<td>Most-at-Risk Population</td>
</tr>
<tr>
<td>M &amp; E</td>
<td>Monitoring and Evaluation</td>
</tr>
<tr>
<td>MDG/s</td>
<td>Millennium Development Goals</td>
</tr>
<tr>
<td>MSM/s</td>
<td>Males having Sex with Males</td>
</tr>
<tr>
<td>MTPDP</td>
<td>Medium Term Philippine Development Plan</td>
</tr>
<tr>
<td>MWW</td>
<td>Migrant Worker Living with HIV</td>
</tr>
<tr>
<td>NASACP</td>
<td>Nat’l AIDS STI Prevention and Control Program</td>
</tr>
<tr>
<td>NCR</td>
<td>National Capital Region</td>
</tr>
<tr>
<td>NEC</td>
<td>National Epidemiology Center</td>
</tr>
<tr>
<td>NEDA</td>
<td>National Economic and Dev’t Authority</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Government Organization</td>
</tr>
<tr>
<td>OFW</td>
<td>Overseas Filipino Workers</td>
</tr>
<tr>
<td>OWWA</td>
<td>Overseas Workers Welfare Administration</td>
</tr>
<tr>
<td>PINOY*</td>
<td>Positive Action Foundation Philippines Inc.</td>
</tr>
<tr>
<td>PIA</td>
<td>Philippine Information Agency</td>
</tr>
<tr>
<td>PIP</td>
<td>People in Prostitution</td>
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<tr>
<td>PLHIV</td>
<td>People Living with HIV</td>
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<tr>
<td>PNAC</td>
<td>Philippine National AIDS Council</td>
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<tr>
<td>POEA</td>
<td>Philippine Overseas Employment Administration</td>
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<tr>
<td>RA 8504</td>
<td>Republic Act 8504, The Philippine AIDS</td>
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<tr>
<td>RITM</td>
<td>Research Institute for Tropical Medicine</td>
</tr>
<tr>
<td>SHC</td>
<td>Social Hygiene Clinic</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
</tr>
<tr>
<td>TCS</td>
<td>Treatment, Care and Support</td>
</tr>
<tr>
<td>TLF SHARE</td>
<td>TLF Sexuality, Health and Rights</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>United Nations Programme on HIV and AIDS</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>UNGASS</td>
<td>United Nations General Assembly Special Session on AIDS</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>VCCT</td>
<td>Voluntary and Confidential Counselling and Testing</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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</table>
EXECUTIVE SUMMARY

<table>
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<td>PNAC</td>
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<td>Financial Statement of the PNAC Secretariat</td>
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<td>Local Response</td>
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<td></td>
<td>Treatment, Care and Support</td>
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<td>Monitoring and Evaluation</td>
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<td>The Future of PNAC</td>
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<td>Directory of Council Members</td>
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<td></td>
<td>Annual Report Tool for PNAC Report</td>
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</tbody>
</table>

“AIDS as a public health issue is peculiar for it recognizes no physical, social, or political boundaries. A comprehensive and unified approach to fight the disease is vital for every nation to take a proactive stance in addressing this dreaded problem marked in recent history.”

As illustrated in the table above, the second Report to the President covers the key accomplishments, challenges, and lessons learned by the Philippine National AIDS Council from 1999 to 2008, with emphasis on the period 2005 to 2008. The first part of the manuscript features the actual picture of HIV and AIDS in the country. The second chapter discusses the structure of our national response using a multi-sectoral approach at the national level, and similar strategies translated to the localities. Efforts to prevent and manage the spread of HIV as a Council and as individually mandated organizations, comprise the bulk of the report in the mid-sections. Latter chapters are devoted to challenges and lessons learned encountered along the way by member organizations while participating in the Council and in delivering their mandated functions. Finally, the last chapter enumerates recommendations on how to move forward in the fight against HIV and AIDS in the Philippines for the next years. Also complementary to this report are list of related manuscripts consulted by the Technical Working Committee in coming up with this report: the highlights of PNAC Operational Plan from 2005 to 2010 which is based on the AIDS Medium Term Plan, a directory of the member organizations including its focal persons and the developed tool for annual reporting.

This report serves as an advocacy material for consumption of the high-level government officials, partners as well as by relevant stakeholders and advocates as a lead for the next steps in this area of work. As stipulated in our MDG Goal 6 Target 8, we anticipate that this document be a guide for continuously coherent initiatives to halt and eventually reverse the spread of HIV and AIDS in the country.
SUMMARY OF PNAC’S PROGRESS:

Highlights of Accomplishments and Future Actions
During the period of 1999-2008, key accomplishments were:

1999
- Developed the 3rd AIDS Medium Term Plan (AMTP) 2000-2005
- Facilitated the formulation of the Republic Act 8504 Implementing Rules and Regulations (IRR)
- DILG-MC No. 99-233, “HIV and AIDS Education in Communities and Related Concerns”
- Supported the AIDS Media Award (1999 to 2003)

2000
- Published the 1st HIV and AIDS Country Profile

2001
- Developed HIV and AIDS Prevention Program in the Philippine Prison
- Developed guidelines for media practitioners regarding responsible reporting of HIV and AIDS-related incidents or cases

2002
- Published the 2nd HIV and AIDS Country Profile
- DOLE, OSHC-DO No. 38-03, “Strengthening Workplace Responses to HIV and AIDS and the Creation of an Inter-Agency Committee on STD, HIV and AIDS in the Workplace” and POEA-MC No. 1, Series of 2002 “HIV and AIDS Education in the Pre-Departure Orientation Seminar.”
- Developed the care and support guidelines, standards and protocols (i.e. hospital-based care, community-based care, DSWD manual for Social Workers, GABAY home/family based care and guidelines on management of HIV infections)

2003
- Joint project of ACHIEVE, an NGO and the Department of Foreign Affairs (DFA) on the integration of HIV and AIDS and Migration topics in the curriculum of the Foreign Service Institute (FSI)

2004
- Developed the 4th AMTP (2005-2010)
- Established the Monitoring and Evaluation System Unit at PNAC
- Initiated the development of the National HIV and AIDS Advocacy Communication Plan

2005
- First report to provide inputs and advice to the Office of the President and Legislative bodies concerning country commitments to International Declarations and Agreements (i.e. MDG, UNGASS Country Reports)

2006
- Adopted the Country Response Information System (CRIS) as tool for HIV and AIDS Reporting
- Facilitated and contributed in the formulation of House Bill No. 1389, An Act Strengthening Further the Philippine Comprehensive Policy on the Prevention and Control of AIDS authored by Honorable Representative Soon-Ruiz

2007
- Second report to provide inputs and advice to the Office of the President and Legislative bodies concerning country commitments to International Declarations and Agreements (i.e. MDG, ASEAN on HIV and AIDS in 2007, UNGASS Country Reports)
- Organizational Development Programme for the Council and its Secretariat
Future advocacy, lobbying and actions of PNAC on the National Response to HIV and AIDS:

- Increase in domestic budget allocation for HIV and AIDS-related intervention programs with support from the Executive Branch and the President. Particularly, making available the 20 million PHP approved budget as provided for in RA 8504

- Enactment of House Bill 1389 in support to R.A. 8504.

- Improvement of existing structures of the Council and the Secretariat through a programmatic approach using a Capacity Development Plan and based on the recommendations of the Organizational Development (OD) programme.

- Proactive promotion and marketing of the AIDS Medium Term Plan (AMTP) among local partners and the international donor agencies as parameters for programming and funding assistance

- Designating a focal person and/or establishment of a unit on HIV and AIDS within the member-government agencies

- Full operationalization of the Monitoring and Evaluation System for HIV and AIDS.

- Enactment and implementation of local ordinances in most at risk and vulnerable areas for HIV and AIDS in the country

- Scaling-up of NGO ‘good practices’ on HIV and AIDS prevention, treatment, care and support

- Greater involvement of people living with HIV (PLHIV) and their affected families to a sustainable and accessible treatment, care and support services.
INTRODUCTION

Small steps, long strides, bold advances in the fight against HIV and AIDS...

Throughout the almost 16 years of its existence, the Philippines AIDS Council (PNAC) has taken various steps to collectively lead the National Response to the HIV and AIDS epidemic. The PNAC’s experiences in addressing HIV and AIDS from 1992-1998 was documented in the 1st “PNAC Report”. The Department of Health (DOH) through its National AIDS-STD Prevention and Control Program (NASPCP) with support from the United Nations Development Programme (UNDP) produced the said report. The first comprehensive report traced the beginnings of PNAC and documented activities of the Council as a multi-sectoral body addressing HIV and AIDS through the formulation of sound policies in an advisory capacity. It also captured the challenges encountered and lessons learned by PNAC at that period.

From its inception in 1992 until the present, amid difficulties and challenges, PNAC has persevered and continued to take up a proactive stance in the nation’s fight against HIV and AIDS. The second report, which covers the period of 1999-2008, presents the overall experiences of the Council, its Secretariat and Members from Government agencies and Non-Government Organizations which provides continuity to the first PNAC Report.

The second PNAC Report reflects the leadership provided by the PNAC in up scaling the national response to HIV and AIDS epidemic. It provides an overview of the legal basis and mandate of PNAC as a Council, its functions, and its role in the implementation of AIDS Medium Term Plan.

To contextualize the national response, Section 3 of the report discusses briefly the status of the epidemic. The milestones of PNAC from 1999-2004 is summarized as part of Key Accomplishments. This section highlights how the Council has “seized the opportunity” during the period described by its members then as the “Paradox of the Low and Slow.” In Section 4, highlights of PNAC’s accomplishments during the period of 2005-2008 are distilled in terms of the significant contributions of the Council, Secretariat and Members against their mandates and AMTP IV objectives. Challenges need to be understood and lessons have to be appreciated. This embodies the collective sentiment of the Council as they capture these perspectives in this report. Finally, in this report PNAC has synthesized the actions they believe should guide the response to HIV and AIDS in the years to come.

“With the hidden and growing and seemingly invincible trend of the HIV epidemic in the Philippines, to scale up and advocate for more resources to strengthen the national response remains to be a challenge.” There is no other way for PNAC but to Move Forward systematically, proactively and collaboratively in its fight against HIV and AIDS.

Taken from the Foreword of Dr. Francisco T. Duque, Secretary of Health, AMTP IV 2005-2010.
CURRENT SITUATION OF HIV AND AIDS IN THE PHILIPPINES

“The Philippines cannot afford to be complacent...a 52 % increase in HIV cases was reported in December 2008 the highest ever reported in a month since 2000.”

Although the national prevalence remains less than one percent (<1%), the overall situation of HIV in the Philippines has been categorized as “hidden and growing”. HIV cases have significantly increased since 2000. The 2007 estimate of adults living with HIV in the country was 7,490. As of December 2008, 38 HIV cases confirmed by the STD/AIDS Cooperative Central Laboratory (SACCL) and reported to the HIV and AIDS Registry of the National Epidemiology Center of the Department of Health. This figure is 52% increase in reported cases compared to the same period in 2007 (n=25).

From January 1984 to December 2008, there were 3,589 HIV cases reported (Fig. 1). Of this number, 78% (n=2,787) were asymptomatic and 22% (n=802) were AIDS cases. Majority of them were males (70%). Age groups with most number of cases were 25-29 years (21%), 30-34 (20%) and 35-39 (15%). Sexual contact (89%) was the leading mode of transmission.

Risk behaviours are high among men who have sex with men (MSM), people in prostitution (PIP), and injecting drug users (IDUs) as shown by the 2007 IHBSS results. These three groups are considered as the most-at-risk populations (MARPs), and vulnerable populations consisting of young adults, overseas Filipino workers (OFWs), and the partners of all these groups are particularly susceptible to HIV infection (UNGASS Report, 2008:4).

![Graph showing the number of HIV/AIDS cases reported in the Philippines by year, Jan 1984 to December 2008 (N=3,589)]

Source: 2008, HIV and AIDS Registry, National Epidemiology Center, DOH
The integrated and comprehensive response to the growing HIV epidemic is anchored on RA 8504 and guided by the Principle of “Three Ones”: 1) One coordinating authority; 2) One strategic plan; and 3) One monitoring and evaluation framework. As the lead agency, PNAC coordinates all the efforts and initiatives of government agencies, private sector and civil society towards a sustained national response to HIV and AIDS.

As gleaned from the National AIDS Spending Assessment (NASA) report (NEDA, 2008:10-11), “the total spending for HIV and AIDS programs from 2005-2007 is estimated at PhP1.1 billion indicating a general decline in the amount of money spent for AIDS in recent years”. A big portion of AIDS spending came from external sources (65% for 2005-2007) while the share of domestic sources has been relative small (Table 1). As noted in the NASA report, “lot of AIDS-related activities are being carried out by major NGOs, and the expenditures of NGOs are usually sourced from development partners and international NGOs”.

Table 1: AIDS Spending by Year and Source, 2005-2007

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>Total</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic (PhP)</td>
<td>71,300,338</td>
<td>136,643,016</td>
<td>57,027,834</td>
<td>264,971,189</td>
<td>23.79%</td>
</tr>
<tr>
<td>(in US$)</td>
<td>1,294,358</td>
<td>2,662,864</td>
<td>1,193,838</td>
<td>5,151,060</td>
<td></td>
</tr>
<tr>
<td>External (PhP)</td>
<td>305,576,236</td>
<td>257,765,089</td>
<td>165,413,841</td>
<td>728,755,166</td>
<td>65.44%</td>
</tr>
<tr>
<td>(in US$)</td>
<td>5,547,308</td>
<td>5,023,260</td>
<td>3,462,823</td>
<td>14,033,391</td>
<td></td>
</tr>
<tr>
<td>Private (PhP)</td>
<td>66,813,198</td>
<td>44,901,547</td>
<td>8,242,799</td>
<td>119,957,545</td>
<td>10.77%</td>
</tr>
<tr>
<td>(in US$)</td>
<td>1,212,900</td>
<td>875,030</td>
<td>172,557</td>
<td>2,260,487</td>
<td></td>
</tr>
<tr>
<td>Total (PhP)</td>
<td>443,689,772</td>
<td>439,309,653</td>
<td>230,684,475</td>
<td>1,113,683,899</td>
<td>100.00%</td>
</tr>
<tr>
<td>(in US$)</td>
<td>8,054,566</td>
<td>8,561,155</td>
<td>4,829,217</td>
<td>21,444,938</td>
<td></td>
</tr>
<tr>
<td>(exchange rate)</td>
<td>55.0855</td>
<td>51.3143</td>
<td>47.7685</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Presently, the country is implementing the 4th AIDS Medium Term Plan (AMTP-IV) for 2005-2010, which was developed through extensive consultations with the various stakeholders involved in the country’s program on HIV and AIDS. It is aligned with the Philippine Millennium Development Goals, Medium-Term Philippine Development Plan and FOURmula One for Health which is the implementation framework for health sector reforms in the country. The 4th AMTP serves as the comprehensive framework for policy makers, program planners and implementers on what strategies and how to use resources to create impact. The Operation Plan 2007-2008 outlines the targets for this period based on the 4th AMTP.

Figure 3. Philippines’ Total Spending for HIV and AIDS, (by Source of Funds) 2000-2008

Source: National AIDS Spending Assessment 2000-2007; NEDA
Note: Partial

Figure 3 shows the National Spending from year 2000 to 2007 for HIV and AIDS prevention and control initiatives. From the graph, a significant difference between external and internal funding for related initiatives can be noted through the years. There is also a significant decrease in allocation and utilization of resources from both the government and non-government sectors for this public health issue within the last decade.
“The challenge for the Philippines is to prevent the further spread of HIV and to act ahead of the epidemic...”

Legal Mandate and Institutional Structure

The creation of PNAC by virtue of Executive Order No. 39 on December 3, 1992 as an advisory body to the Office of the President on all matters related to AIDS was one of the early responses to the epidemic since the first case was reported in 1984. With the enactment of Republic Act 8504 in 1998, the Council was reconstituted as the central advisory, planning and policy making body on the prevention and control of AIDS in the country. The law established a comprehensive HIV and AIDS monitoring system, instituted information and educational program, and required the submission of a comprehensive annual report to the President and both Houses of Congress.

The PNAC is attached to the Department of Health with the Secretary of Health as its chairperson. It is composed of 26 members from the government agencies, NGOs and community of people living with HIV. The PNAC Secretariat facilitates the provision of technical, financial, and logistical support to member government agencies and CSOs for the development and implementation of plans, programs, and projects on HIV and AIDS response. The vision and mission of PNAC embodies its commitment to an integrated and comprehensive national response to HIV and AIDS.

“PNAC envisions a fully empowered national coordinating body where different individuals and sectors work in partnership to prevent the transmission of the virus and lessen its impact on the affected persons in particular and society in general.”

PNAC’s mission is to lead in developing and sustaining an enabling environment where individuals and sectors can appropriately, effectively and expeditiously respond to the many challenges of HIV and AIDS. It shall foster commitment, coordination, cooperation and collaboration.

Functions of PNAC

The Council is mandated by R.A. 8504 as specified in the Implementing Rules and Regulations (IRR) to perform these functions:

• Secure from government agencies recommendations on how their respective agencies could operationalise specific provisions of the AIDS law. The Council shall likewise ensure that there is adequate coverage of the following:

  - Institutionalization of a nationwide HIV and AIDS information and education program;
  - Establishment of a comprehensive HIV and AIDS monitoring and evaluation system;
  - Issuance of medical guidelines on practices and procedures with potential risk of transmitting HIV;
  - Provision of accessible and affordable HIV testing and counselling services to those who are in need of it;
  - Provision of acceptable health and support services for persons living with HIV (PLHIV) in hospitals and in communities;
  - Protection and promotion of the rights of PLHIVs; and
  - Promote strict observance of medical confidentiality.
Monitor the implementation of these rules and regulations, issue or cause the issuance of orders or make recommendations to the implementing agencies as the Council considers appropriate;

Develop a Strategic Plan (AMTP and its Operational Plan), through a multi-sectoral consultative process, that details a comprehensive national HIV and AIDS prevention and control strategy. The Plan shall be integrated into the Medium-Term Development Plan. It shall include indicators and benchmarks against which PNAC shall monitor its implementation;

Coordinate the activities and strengthen working relationships amongst partners (including GO, NGOs, private sectors, academe, media, vulnerable communities and people with HIV) in the HIV response;

Coordinate and partner with foreign and international organizations regarding data collection, research and treatment modalities concerning HIV and AIDS; and,

Evaluate the adequacy of and make recommendations regarding the utilization of national resources for the prevention and control of HIV and AIDS. The Council shall facilitate and advocate the provision as well as mobilization and use of technical, financial and logistical support to government agencies and NGOs for the development and implementation of plans, programs and projects for the prevention and control of HIV and AIDS in the Philippines.

Roles of PNAC in AMTP Implementation

The Council with the support of the Secretariat is responsible for the overall coordination and execution including monitoring and evaluating the progress of the AMTP. With respect to the 4th AMTP (2005-2010), the member agencies are expected to carry out their respective mandates in the areas of:

- **Policy.** Member agency is expected to develop in a consultative process their respective policies and guidelines on HIV and AIDS. Anchored on the AIDS law, LGUs are expected to formulate ordinances that support HIV and AIDS prevention, treatment, care and support in their respective localities. Further, LGUs are encouraged to adapt or localise national policies and guidelines as appropriate to their respective situation and needs. These shall be subject to the review of the Council. Both the national government and LGUs are expected to enforce these policy statements.

- **Training and other forms of technical assistance.** As required by stakeholders to establish a localize HIV response shall be provided by concerned agencies and partner NGOs. The PNAC Secretariat facilitates the collaboration amongst the members of the Council.

- **Advocacy.** To harmonize advocacy efforts, purpose and messages that are target-groups or audience-focused, PNAC in consultation with concerned stakeholders is tasked to develop a National Marketing and Communication Plan.

- **Information, education and communication.** Each member agency is mandated to undertake HIV and AIDS-related IEC activities for the sectors or groups they represent at the regional or local levels. PNAC is likewise expected to make an inventory of IEC initiatives and enhance existing Communication Plan.

- **Treatment, care, and support (TCS).** To ensure continuity of care, the DOH in consultation with member agencies will lead the review and strengthening of the referral system. The DSWD together with its partner NGOs will be responsible for establishing community and home-based care systems. PNAC shall ensure that policies and guidelines for TCS at the national level are appropriately disseminated to all concerned.

- **Logistics.** The DOH is tasked to coordinate the procurement and acquisition of necessary drugs and medicines for treatment of HIV. It shall establish a procurement and distribution mechanism to facilitate the availability and easy access of these supplies by those in need. The prime responsibility for procuring drugs, supplies and reagents for their SHCs is with the LGUs.

- **Surveillance and research.** DOH shall provide needed technical assistance to LGUs in establishing their surveillance systems. The former shall in turn take care of system operation and maintenance. The review and update of research agenda for 2005-2010 is under the PNAC.
• Resource mobilization. PNAC Chair with support from the Secretariat shall spearhead the mobilization of resources. PNAC shall coordinate and mobilise donor assistance to further increase resources.

• Monitoring and evaluation. This shall be operationalised through the various agencies as part of their mandate. Information from LGUs will be coursed through the DILG. National and local based NGOs will be linked to the M and E System through an NGO data-clearing house. The DOH is in-charge for the collection and analysis of health-related data. A regular dissemination forum of this information shall be done through the National Epidemiology Center (NEC). The PNAC M and E unit overseas the consolidation of a Country Report on AIDS. It also ensures dissemination to stakeholders and submission to the UNGASS.
Picture of IHBSS forum at Heritage Hotel.
December 11, 2009
BUILDING ON OUR STRENGTHS: HIGHLIGHTS OF PNAC’s ACCOMPLISHMENTS 1999-2008

“We’ve learned from gay men that peer education can work, but it only works in populations where there really is a sense of community. You also need organizational skills to make these programmes work.”

Key Accomplishments against Mandates and AMTP IV Objectives, 2005-2008

Our work in 2005-2008 was marked by a definitive focus on accelerating and scaling-up the country’s response to HIV and AIDS epidemic. The 4th AIDS Medium Term Plan 2005-2010 serves as a blueprint for action. Based on the mandates and 4th AMTP objectives, significant contributions were made by the Council together with its Secretariat and Member-agencies to prevent the further spread of HIV infection and reduce the impact of the disease on individuals, families and communities.

The Council and its Secretariat

As central advisory body. The Council with the support of the Secretariat has provided inputs and advice to the Office of the President and Legislative bodies concerning country commitments to International Declarations and Agreements. It has forwarded its recommendations on ways to improve HIV and AIDS prevention and access of PLHIV to treatment, care and support (TCS) services through the member-government agencies. The following outputs demonstrate the specific contributions of PNAC as an advisory body:

1. Provided inputs to country targets for the achievement of Millennium Development Goals by 2015 with respect to Goal 6, Target 8: Halt and reverse the spread of HIV AND AIDS by 2015;

2. Facilitated and supported the formulation of the ASEAN Commitment on HIV and AIDS in 2007 where the Secretariat assisted in organizing the Parliamentary Meeting on HIV and AIDS;

3. Co-organized the 2nd Regional Consultative Meeting on Universal Access to Prevention, Treatment, Care and Support in Low Prevalence Countries in 2008; and

4. Spearheaded the national preparation of UNGASS Country Reports 2005 and 2007 with the Secretariat coordinating the submission of reports from PNAC-Member agencies and organizations.

As planning body. The tasks of the Council as a planning body are:

1. Lead the preparation of AMTP,

2. Coordinate its implementation, and

3. Translate it into an annual operational plan at the start of every year.

PNAC spearheaded the development of 4th AMTP 2005-2010 and its Operational Plan (OpPlan). Consultation meetings for the development of the 4th AMTP OpPlan were conducted from February to October 2006. The Draft 4th AMTP Op Plan was presented and finalised during the January 9, 2007 meeting. The Plan was officially approved by the PNAC during its 24th Plenary Meeting on January 19 2007. This Plan is currently being implemented by government agencies, LGUs, NGOs and CBOs. In 2008, a Mid-Term Review of the AMTP IV was conducted.

FIGURE 5. The Council at work (2005). One of the regular committee meetings

As policy making body. The Council worked to accomplish its functions as a policymaking body that includes popularizing the R.A. 8504 at the national and local levels, operationalizing its provisions, monitoring the implementation of its IRR and issuance of guidelines or orders through the Secretariat and Member-agencies. In summary, PNAC’s key accomplishments include:

1. Working with the House of Representatives for the formulation of House Bill No. 1389 to give it more strength to R.A. 8504 as the country’s highest legal framework on AIDS;

2. Review of agency-specific guidelines on HIV and AIDS (i.e. workplace policy, curriculum integration, medical confidentiality);

3. Provide technical inputs to the Philippine Health Insurance Corporation (PhilHealth) for the development of guidelines on PLHIV Outpatient Benefit Package which was approved in 2006;

4. Enacted four (4) Resolutions (i.e. Resolution No. 1, S 06: Defined Roles and Functions of the PNAC Secretariat, Resolution No. 2, S. 07: The budget of the Operational 4th AMTP Plan for 2007 to 2008, Resolution No. 3, S. 07: Resolution to Create the Regional AIDS Assistance Team (RAAT) to facilitate local response to HIV and AIDS in the Philippines and Resolution No. 4, S 07: Resolution to develop Guidelines on the Prevention, Treatment, Care and Support of HIV among Injecting Drug Users in the Philippines); and

5. Headed the Task Force on AIDS of ASEAN and led the development of 2nd Medium Term Work Program for HIV AND AIDS in the Region.

As implementer of 4th AMTP Objectives. Based on the 4th AMTP OpPlan, the PNAC as a Council is to perform and accomplish four key activities: 1) Management/Program support; 2) Human Resource Development; 3) Organization Development of PNAC; and, 4) Monitoring and Evaluation. These activities are covered by Objective 3: To improve the accepting attitudes towards people infected and affected with HIV and AIDS-related illnesses; and Objective 4: To improve the efficiency and quality of management systems in support to HIV and AIDS-related illness programs and services. Following are the achievements of the Council and its Secretariat in relation to these objectives:


- Supported the enforcement of the local AIDS legislations in some 27 cities.

- Facilitated Organization Development with the Secretariat organising and coordinating activities of the Council (i.e. Preparation of PNAC Secretariat TOR in 2005; Conduct of PNAC Capacity Assessment Project in 2006; Conduct of Mid-Term Review of AMTP IV; and Establishment of M and E System for HIV and AIDS);
- Development of the National HIV and AIDS Advocacy Communication Plan in 2007-2010 for roll out at the national and local levels;
- Served as conduit for major national assistance from international and foreign assistance/partners;
- Facilitated the consolidation of processes and guidelines to be observed by the country in preparing country proposal for international funding mechanism like the Global Fund;
- Facilitated the formulation of Reports through the Secretariat (i.e. Operational Plan of 4th AMTP for 2005-2008; and the 2005 National AIDS Spending Report);
- Provided technical advice to the DOH on procurement of anti-retrovirals (ARVs) drugs in 2005 that were given free of charge to PLHIV;
- Initiated the establishment of the Country Response Information System (CRIS) as part of strengthening the HIV and AIDS Monitoring and Evaluation System;
- Assisted in capacity building for health service providers, both at the local primary health facilities and at hospitals in the management of sexually transmitted infections (STIs), HIV and AIDS (laboratory proficiency, diagnosis and treatment), voluntary counselling and testing (VCT) and surveillance. Policy guidelines were developed such as the Anti-Retroviral Therapy (ART) Guidelines, Voluntary Counselling and Treatment Protocol, Post-Exposure Prophylaxis (PEP) Guidelines and the 100% Condom Use Program (100% CUP);
- Established the Regional AIDS Assistance Teams (RAATS) with collaborative efforts from the NGOs. Local AIDS ordinances were enacted in 29 LGUs to establish Local AIDS Councils (LACs); and
- Established the Monitoring and Evaluation System Unit at PNAC in 2006. Afterwhich, the PNAC in partnership with NGOs (HAIN and HDII) conducted series of M and E trainings with LACs. Initial testing of the M and E system was conducted from October to November of the same. Findings of the initial testing were presented and agreements were reached during the National Consultation Meeting and Workshop in December.

Table 3. Budget for Philippine National AIDS Council Secretariat  2002-2008

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<tr>
<th>Year</th>
<th>TOTAL ALLOTMENT MOOE (PhP)</th>
<th>Allotment Available (PhP)</th>
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Based on AMTP IV MTR Report, 2008.
Milestones in 1999 to 2004

“Seizing the Opportunity” aptly describes our response to HIV and AIDS situation during the period of 1999-2004. With limited resources and confronted by the difficulty of explaining a nascent epidemic or what is viewed then as the “Paradox of the Low and Slow,” the Council exerted efforts to deconstruct the paradigm of “outbreak reactive responses” (Draft PNAC Report 1999-2004). In the face of constraints and challenges, PNAC achieved the following milestones in policy and program management, prevention, TCS, local response, and surveillance and research:

- Facilitated the promulgation of R.A. 8504 Implementing Rules and Regulations
- HIV and AIDS Prevention Program in Philippine Prison in 2001
- Biennial Philippine National Convention on AIDS in 2002 and 2004
- National Consultative and Consensus Meetings with PLHIVs 2001 and 2003
- Creation of PNAC Committees namely: Scientific Committee; Advocacy Committee; Education Committee; Local Response Committee and Executive Committee
- Formulation of the 3rd AIDS Medium Term Plan 2000-2004
- Participation in International Declarations and Commitments: 1) Millennium Development Goals 2000-2015; 2) United Nations General Assembly Special Session, Declaration of Commitment on HIV and AIDS; 3) Joint ASEAN Summit on HIV and AIDS, Brunei, Darussalam; 4) International Labor Organization Code of Practice on HIV; 5) 1st Asia Pacific Ministerial Meeting on HIV and AIDS in Australia; and 6) 2nd Asia Pacific Ministerial Meeting on HIV and AIDS in Thailand
- Annual Commemoration of World AIDS Day and AIDS Candlelight Memorial
- Publication of the HIV AND AIDS Country Profile in 2000 and 2002

FIGURE 7. Pledge of Commitment. An advocate signs on the tarpaulin expressing her support to the HIV AND AIDS prevention and control efforts locally
AIDS Candlelight Celebration at Quezon City Memorial Circle.
May 15, 2009
HIGHLIGHTS OF COUNCIL ACCOMPLISHMENTS (2005-2008)

Policy and Research

Cognizant of the fact that AIDS is a disease which demands strong State action, the PNAC and its member agencies and organizations have undertaken a plethora of activities aimed at enhancing public awareness about the causes, modes of transmission, consequences, means of prevention and control of HIV and AIDS. This was carried out in line with its comprehensive nationwide educational and information campaigns that promote value formation and employ scientifically proven approaches, focus on the family as a basic social unit, and be carried out in all schools and training centers, workplaces, and communities. Being the government agency on the frontline of public education, the Department of Education (DepED), the Commission on Higher Education (CHED) and Technical Education and Skill Development Authority (TESDA) have integrated HIV and AIDS issues and concerns in the Department’s plans and activities for the education curriculum. For the working sector, the Department of Labor and Employment (DOLE) has integrated HIV and AIDS education in the orientation, training and other human resource development programs of the private sector. The National Economic and Development Authority (NEDA) provided valuable technical assistance in formulating the AMTP-IV Operational Plan, and developed reports re: Coverage of Essential HIV/AIDS Services and AIDS Program Index Effort (2005), as well as the Coverage and Costing of HIV Prevention Interventions for Young People (2006).

Realizing that AIDS traverses territorial, social, political and economic boundaries, there was a felt-need to ensure the Philippine’s active input in international efforts to address HIV and AIDS through proper representation and participation. One of the more significant achievements in this regard is the appointment of the Chairman of House of Representatives Special Committee on the Millennium Development Goals (HR SCMDG) as member of the United Nations AIDS Commission for Asia and the Pacific. As such, the Philippines was able represented in high level meetings and conferences regarding HIV and AIDS conducted by the United Nations and other similar engagements.

The Department of Foreign Affairs (DFA) on the other hand, has conducted HIV and AIDS Awareness Courses for its Cadetship programs and Foreign Service Personnel, and has coordinated with PNAC and other government agencies in formulating and articulating the Philippine positions and inputs on HIV/AIDS issues in various multilateral forums. In addition, DFA has seen to it that relevant and timely information about HIV and AIDS available not only to Filipinos going abroad, but also to tourists and transients to the Philippines.

In line with the AMTP and the State’s policy of positively addressing and eradicating conditions that aggravate the spread of HIV and AIDS, extending full protection of the human rights and civil liberties of affected persons, and promoting utmost safety and universal precautions in practices and procedures that carry the risk of HIV transmission.

See Section 2(a), Republic Act No.8504.
See Section 2, Republic Act No.8504.
See HR SCMDG Report.
See DFA Report.
See Section 2(b)(c)(d), Republic Act No.8504.
In terms of research, the NEDA has prepared the relevant HIV and AIDS portions for the 2nd Philippine Progress Report on MDGs, and the Midterm Progress Report thereon. NEDA also provided technical assistance in various research programs and projects, both international and domestic.9

Through the Health Action Information Network (HAIN), the PNAC was able to provide technical support and information to the public through the HAIN publication and Resource Center, particularly with respect to the socio-political dimensions of AIDS.10 The ASP has generated data on relevant behavioural research for the prevention education strategy, as well as content analysis on HIV and AIDS media reporting.11

For the legislature, the House of Representative Special Committee on MDG (HR SCMDG) has conducted nationwide consultations and public hearings in key cities under House Resolution No. 653, which directed it to review the impact and status of the implementation of the AIDS Law. Its outputs were consolidated and translated into an amendatory bill, the HB No. 1389—which is aimed to improve the existing AIDS Law.12

Lastly, in recognition of the potential role of affected individuals in propagating vital information and educational messages about HIV and AIDS,13 the PNAC has joined hands with other organizations such as ASP, the Pinoy Plus Association (PPA+) - an organization of People Living with HIV and AIDS (PLHIV).14

**Advocacy and Education**

To ensure the effective delivery of its outputs and fulfillment of PNAC’s mandates, the Council adopts the advocacy and social marketing strategies. Different activities enumerated below presents the Council’s initiative to promote awareness on HIV and AIDS amongst the general population and create an enabling environment where HIV issues is further addressed the following activities were carried out.

**AIDS Candlelight Memorial (ACM) and World AIDS Day (WAD).**

These international events are the leading occasions in the country that bring GOs, NGOs, CSOs, the positive communities and their families and the public together. AIDS Candlelight Memorial (ACM) recalls the memories of PLHIV who have given HIV and AIDS the human face while the World AIDS Day (WAD) seeks the support of the majority to halt the spread of HIV through prevention.

The Council is a staunch supporter of the ACMs and WADs. Both events serve as platforms and venues for PNAC and partners to launch activities and even programs to capture the attention and win the support of the public and the most at risk population (MARPs).

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9See NEDA Report.
10See HAIN Report.
11See ASP Report.
12See HR SCMDG Report.
13See Section 2(e), Republic Act No.8504.
14PPA+ Report.
The festive mood of WAD, complete with pop artists, singers and bands, has always attracted the youth and youthful audiences. Other areas in the country observed WAD with parade of entertainment establishment owners (Zamboanga), Walk for A Cause marches (Tacloban City) and mass jogging (Catbalogan City)

The AIDS Media Awards (AMA) the grandest yearly activity ever produced pertaining to advocacy work on HIV by media practitioners. From 1999 to 2003, more than 200 articles were produced. During this period, stories about HIV and AIDS exploded in newspapers, broadcast networks, magazines, documentaries, comics, advertisements, radio drama scripts and teleplays.

Some notable outputs of the AMA were the Maalala Mo Kaya drama “Family Tree” of ABS-CBN 2; “Fernando” of Kontak 5 news program aired over ABC 5; “Pang-unawa at Hindi Awa ang Kailangan namin” of Bantay OCW then in DZXL; “AIDS in RP: Myths and Misconception” of Queena Lee Chua of Inquirer, and the first Children’s Short Story on HIV and AIDS entitled “Ang Mga Laruan ni Obet” by Eden Concepcion of Liwayway Magazine.

“Ang mga Laruan ni Obet” was used in the children storytelling caravan headed by veteran thespian Bodjie Pascua between 2002 and 2003. Over 3,000 students in Luzon have seen the performances of the caravan. In 2004, the first Visayan children storybook on HIV and AIDS entitled “Bangkang Papel ni Paulo” was developed and launched for teachers and advocates. Even after AMA has ended, training continued to be conducted for local media including those working in Capiz. To date, these materials are continuously being used in advocacy and education initiatives for HIV and AIDS.

First National Youth People’s Planning Forum (NYPPF). The forum in 2008 gathered young leaders (from 15 to 24 years old) from various organizations and LGUs nationwide to cull out the youth sector’s contribution in improving the HIV and AIDS prevention campaign. Based on young people’s experiences in the HIV and AIDS advocacy, this activity drew out plans and recommendations for the 4th AMTP. The output was forwarded to PNAC.

Among the recommendations of youth leaders were the strengthening of peer counselling, more classroom discussions on HIV and AIDS and better linkages among public offices, NGOs and faith-based organizations (FBOs).

Treatment, Care, and Support

People living with HIV can access free treatment to both HIV and its associated opportunistic infections in 13 Treatment Hubs geographically distributed in the country. With the DOH and GFATM support, key medical investigations and other medical examinations are also being provided free through the treatment Hubs. Furthermore, early infant diagnosis is now being done centrally to ensure that treatment is provided at the earliest opportune time for infants and children infected.

The HIV infection is a lifetime diagnosis. As such, people afflicted need continuing support for a better quality of life. Psychosocial, spiritual, self-empowerment and values orientation training, micro-financing/livelihood support, and even burial assistance are currently being provided by the Department of Social Welfare and Development, the Department of Health, Positive Action Foundation, Phil (PAFPI) and PinoyPLUS Association. The National AIDS and STI Prevention and Control Programme (NASPCP) of DOH thru the GFATM project also support the care and support activities of PAFPI and Pinoy PLUS Association. Care and support activities include hospital, home and community visits, peer education and counselling.

With GFATM support, the National Health Insurance System enrolled 200 PLHIVs. The Philhealth, DOH and positive community at present are currently lobbying to PhilHealth to finalize the implementing rules and regulations of HIV OPD Benefit Package.
DOH and DSWD provide continuous capacity buildings to hospitals and community-based physicians, community leaders, social workers and volunteers.

To ensure that treatment services are at par with national standards, the Secretary of the DOH recently approved the *Guidelines on the Use of ARV, Paediatric AIDS Care Management, Implementation of Prevention of Mother-To-Child Transmission of HIV*.

DSWD likewise institutionalized a treatment, care and support program under its own mandate. Services facilitated by this agency ranges from policy development and capability building of local leaders and volunteers who provide care and support to PLWHAs; as well as direct livelihood and care support for PLHIVs.15

**Local Response**

To date, there are 39 Local AIDS Councils (LACs) established throughout the country. Most of the LACs are located in Megacities – such as Metro Manila, Cebu, and Davao. Similar to PNAC, each of these LACs uses a multi-sectoral approach to HIV and AIDS prevention and management. LACs’ functions range from coordination and sustaining services related to STI, HIV and AIDS, advocacy to local officials and stakeholders; to policy recommendations.

DILG, DOH and DSWD spearhead the promotion and initiation of a local HIV response (with its affiliate organizations – LCP and LPP). This is done through their regional offices nationwide where a technical team for HIV and AIDS was organised to comprise the Regional AIDS Assistance Teams (RAATS). Systematizing the local response network is led by PNAC and is a work in progress. Overall, related accomplishments from 1999 – 2008 are the following:

**FIGURE 11. News Article on AIDS from a local newspaper.**

1. Creation of 16 RAATS led by Centers for Health Development (CHDs)

2. Advocacy and promotion of AMTP to local government officials to support in terms of implementation and legislations (local enactments)

3. Development of manuals and guides for sectoral response teams such as for the men in uniform, local officials, health workers, teachers, migrant workers, and those of the most-at-risk population groups16

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15See DSWD report page 29-30.
16See DILG, PAFPI, DOLE, and PPA reports for details on local response initiatives
Monitoring and Evaluation

Deliberate efforts to set up a national HIV and AIDS M and E system earnestly begun in 2003 and is still continuing. A remarkable feature of the development of the M and E System is the fact that it is truly an exercise involving the participation of different sectors. The ongoing institutionalization of the system at various levels is marked by challenges—be it technological, structural, human resource and sometimes political—at almost every level.

So far, the following have been accomplished:

1. Developed the Monitoring and Evaluation Manual: Philippine Response to HIV and AIDS;
2. Trained and oriented NGOs and LACs on M and E;
3. Installed CRIS and trained its users at the national and local sites;
4. Pilot-tested the proposed M and E system; and,

The PNAC through its Secretariat manages the Philippine HIV and AIDS Monitoring and Evaluation System. The DOH-NEC collects and validates STI and HIV reports from social hygiene clinics and hospitals; conducts active and passive HIV and AIDS surveillance and furnishes the PNAC with its findings. Reports emanating from other government agencies go directly to PNAC Secretariat M and E Unit while a designated NGO focal point for M and E collects reports submitted by civil society. These reports are eventually submitted to the PNAC.

Since 1987, the DOH through the NEC has put in place both passive and active surveillance systems in order to keep track of how the epidemic progresses. The active surveillance monitors the most-at-risk populations: People in Prostitution (PIP), Men Having Sex with Men (MSM), and Injecting Drug Users (IDU). Included in the PIP are Registered Female Sex Workers (RFSW), Freelance Female Sex Workers (FFSW) and clients of FSWs.

Overseas Filipino Workers (OFW), due to circumstances that may put them at risk to HIV infection while abroad, have been classified as vulnerable group and have been included in the passive surveillance surveys (AIDS Registry). OFW include seafarers, domestic helpers, and medical and health personnel.

The three (3) types of surveillance systems in place are the following:

1. HIV and AIDS Registry - a passive surveillance system established in 1987, it continuously logs Western Blot-confirmed HIV cases reported by DOH-accredited hospitals, laboratories, blood banks and clinics.
2. Integrated HIV Behavioural and Serologic Surveillance (IHBSS) - started in 2004 to serve as early warning for increases in HIV sero prevalence. IHBSS consistently monitored what it considered as MARPs for HIV.
3. Sentinel STI Etiologic Surveillance System (SSESS) - set up in December 2001 and made operational in 2003. Since some sexually transmitted infections (STI) are considered as co-factors for HIV transmission, monitoring STI trends guide program intervention to prevent transmission of HIV.
PNAC Secretariat at work - Taken from one planning workshop for organizational development initiative
HIGHLIGHTS OF ACCOMPLISHMENTS OF
INDIVIDUAL AGENCIES MEMBER TO THE COUNCIL
(2005-2008)

Member-Government Agencies

Public sector involvement is critical to the success of the national response against HIV and AIDS. This is mentioned clearly in RA 8504; Section 3d states that the State is required “to positively address and seek to eradicate conditions that aggravate the spread of HIV infection, including but not limited to poverty, gender inequality, prostitution, marginalisation, drug abuse and ignorance.” For the period of 2005 to 2008, the member-government agencies have made significant contributions in preventing and controlling the HIV and AIDS epidemic in line with their respective missions and mandates as members of PNAC.

Commission on Higher Education (CHED)

The CHED’s mission is to provide effective central policy direction and implement programs and mechanisms to ensure affordable quality higher education accessible to all. As mandated by the “AIDS Law” HIV and AIDS Topics as to its cause, modes of transmission and ways of preventing HIV and AIDS and other sexually transmitted infections should be taught in the Philippine learning systems. From 2005 to 2008, CHED’s activities vis-à-vis the HIV and AIDS epidemic fall under developing and reviewing relevant and timely policies, standards and guidelines for the integration of HIV and AIDS in various higher education disciplines. The following lists some of the issuances CHED has released in line with the integration of HIV and AIDS in various higher education disciplines:

- CMO No. 33, s.2006: Policies, Standards and Guidelines for Dental Education (PSG integrating the subject of AIDS in the subject Oral Pathology II)
- CMO No. 54, s.2006: Policies, Standards and Guidelines for Nutrition and Dietetics Education (PSG integrating HIV in the subject Nutrition Therapy II)
- CMO No. 9, s.2007: Policies, Standards and Guidelines Bachelor of Science in Respiratory Therapy (PSG integrating HIV infection and the Lung on the subject Cardiopulmonary Anatomy and Patho-physiology)

Department of Education (DepED)

The mission of DepEd is to provide quality basic education that is equitably accessible to all and lay the foundation for lifelong learning and service for the common good. The DepEd is particularly mandated by RA 8504 (AIDS Law) to integrated HIV and AIDS issues and concerns into the education curriculum. The DepEd’s most significant activities in the fight against the spread of HIV and AIDS in 2005 to 2008 include:

- Promoted policies and programs on HIV and AIDS between and among agencies and organizations to include public, civil society and private sector groups.
- Coordinated the integration of HIV and AIDS in the Department’s planning activity by designating a focal person from the DepEd Health and Nutrition Center (DepEd HNC); putting in place a monitoring mechanism; and undertaking activities that will ensure the agency’s initiatives are being interfaced with the AMTP IV.
- Other related activities are:
  - yearly inclusion of the HIV and AIDS Program in the training of newly hired Medical Officers, Dentists, Nurses and Nutritionists;
  - integration of HIV and AIDS into the curriculum of Bureau of Elementary Education (BEE), Bureau of Secondary Education (BSE), and Bureau of Alternative Learning System (BALS) on an annual basis;
  - annual issuance of memoranda on HIV and AIDS; the advocacy of HIV and AIDS prevention by school health personnel, especially during World AIDS Day and AIDS Candlelight Memorial celebrations, as well as its attendance in national and international conferences;
- developed resource and training materials as well as conduct the following activities for the integration of HIV and AIDS in the curriculum:

  - Power of You project with UNICEF in 2009
  - the training of school health personnel on reproductive health and HIV and AIDS in Regions III, V, VII, VIII, XI, XII, NCR, CAR, and ARMM in 2007
  - National Work-Conference on HIV and AIDS Education with the theme “Bridging Shared Vision to Cooperative Action” with UN organizations in 2005
  - conduct of a Regional Workshop on Youth and Teachers Participation in STI, HIV and AIDS Initiatives at the Bacolod City Convention Center, in collaboration with SEAMEO,TROPMED and GTZ, in 2003
  - Training of Trainers on the Integration of AIDS Education in the Basic Education Curriculum with the UNAIDS, PNAC, and HEAP in 2003
  - Resource Materials on HIV AND AIDS for Teachers with Control of STI, HIV and AIDS/STD Partnership in Asia Region (CHASPAR) in 2002; Field testing of the Materials for Teachers on STI, HIV and AIDS Prevention Education with SEAMEO, Tropical Medicine and Public Health (TROPMED), and German Agency for Technical Cooperation (GTZ)
  - Training of Trainers Manual on AIDS Education in 2002, with Southeast Asian Ministers of Education Organization (SEAMEO) and the University of the Philippines (UP)

Department of Foreign Affairs (DFA)

The Department of Foreign Affairs (DFA) is particularly tasked to educate Filipinos going abroad about the cause, prevention and consequences of HIV and AIDS. DFA provides relevant and timely information regarding HIV and AIDS to tourists and transients. In lieu with DFA’s mission and its mandate as specified in RA 8504, the agency has conducted the following key activities:

  - Coordinated with PNAC/relevant Philippine Government Agencies in the formulation/articulation of coherent and consistent Philippine position/inputs vis-à-vis HIV and AIDS issues discussed in multilateral fora, particularly the UN.
  - Transmit to PNAC/concerned agencies relevant reports on HIV and AIDS issues as discussed in the multilateral fora.
  - Conducted awareness Course on HIV and AIDS entitled “Strengthening Perspective and Capacity Building for Foreign Service Personnel on Migration and HIV and AIDS issues in PDOS/Cadetship program.
  - On the part of the Department of Labor and Employment (DOLE), a module on HIV and AIDS has been integrated into the required training program for labor officials, welfare officers and personnel who will be assigned overseas.

Department of the Interior and Local Government (DILG)

Local response to HIV and AIDS is the core of the national prevention and control programs. This involves multi-sectoral collaboration between Local Government Units (LGUs), civil society groups, people living with the disease and vulnerable communities in the development of HIV and AIDS interventions that are appropriate and specific to the area. DILG also collaborated with its attached organizations such as the Local Government Academy (LGA), and affiliate non-government organizations such as the League of the Cities of the Philippines (LCP) and the League of Provinces of the Philippines (LPP) to pursue its initiatives in both advocacy and local responses areas of work.
The DILG is a government organization committed to the promotion of peace and order to ensure public safety and to the strengthen capabilities of Local Government Units (LGUs) through active participation of people and professionalized corps of public servants. As a member of the Philippine National AIDS Council (PNAC) and Chair of the Committee on Local Response, DILG takes the lead in strengthening LGU responses to HIV and AIDS. This includes mobilizing local communities and providing technical assistance to identify policy champions, programs gaps as well as developing appropriate interventions. To date, the following are some of the Department’s milestones.

- Identified, mapped and profiled 42 localities in the Philippines that are highly vulnerable to HIV and AIDS infection.


- Identification of local Champions and Local Consultation/Planning on HIV and AIDS.

- Promote minimum standards on HIV and AIDS responses and advocated for the inclusion in the LGU ordinances the creation of a) Local AIDS Councils b) Organization of Entertainment Establishments c) Education/Information Package d) Provisions of STI Drugs e) No Hiring of Minors f) 100% Condom Availability and g) System of Surveillance. To date there are 37 LGUs who formed their LACs.

- Conducted Leadership Programs for HIV and AIDS champions and advocates through the Local Government Academy. Since 2005, 30 local chief executives have been trained and actively promoting LGU action on HIV and AIDS.

- Led the institutionalization of Regional AIDS Assistance Teams (RAATs)

- Implementing Partner of the WHO Zonal Capacity Building for 100% Condom Use Program in priority cities in Region 1 (Laoag, San Fernando, Dagupan, and Urdaneta), which resulted to passage of local ordinances requiring all entertainment establishments to have a Health Corner wherein STI, HIV, and AIDS IEC materials are available including prophylactics.

- Implementing Partner of the GFATM Round 3, 5, and 6

- Popularized RA 8504 through provision of technical assistance to LGUs for local response

- Advocated for LGUs sustained observance of the Annual Candlelight Memorial and World AIDS Day Celebration

- Sustained partnership with development partners (e.g. UNAIDS, UNICEF, WHO, UNDP among others) whose support enabled PNAC to continue its various localization efforts and developed a sustained partnership with the League of Cities of the Philippines (LCP).

**Department of Health (DOH)**

The main mission of DOH is to guarantee equitable, sustainable and quality health especially the poor and to lead the quest for excellence in health. As the main steward for ensuring health, it is mandated under RA 8504 to institutionalize the comprehensive prevention, health promotion, treatment, and care and support program under the ambit of health system reforms. It is mandated further to provide technical support to other government and non-government agencies as they develop and implement respective agency-specific education and awareness, care and support program.

As early as 1986, the Department of Health firmly put in place its STI and HIV and AIDS control programs which continually evolved through the years to anticipate, adapt and respond to the dynamic nature of the epidemic. Different centers for responses to HIV and AIDS within the agency includes surveillance, health promotion, and disease control and prevention through development of comprehensive service packages for intended population, and blood safety as coordinated by the National AIDS and STI Prevention and Control Program.
The agency gathered pieces of evidence as basis for program. Data information is made available by the institutionalized STI and HIV passive and active surveillance system. With the assistance of ADB and the UN Systems, NCDPC was also able to gather vital information on the vulnerabilities of migrant workers and their families, and disseminate to key stakeholders including DOLE, OWWA, Owners of Manning Agencies, various local government units and Non-Government Organizations.

HIV and STI programming entails full cooperation and support from various partners at local and international levels. As such, DOH sustained coordination and collaboration with Philippine National AIDS Council, its members, and the Council for the Welfare of Children – Committee on HIV. It has hosted the 2nd Regional Forum on Universal Access to Prevention, Treatment and Care for Low Prevalence Countries, and co-hosted the 1st National Young People’s Forum for HIV and AIDS both in 2008. In the same year, two Provincial AIDS Councils were also strengthened on top the regular capacity – building activities of Local AIDS Council (LAC).

Policies and guidelines have been made in place to ensure standards of quality diagnosis and treatment. These are STI and HIV counselling, diagnosis, and treatment and use of Anti-Retroviral for children and adults. Continued capacity building have been provided to health personnel in hospitals, service providers of other government and non-government organizations on rights and gender-based Voluntary Counselling and Testing, STI diagnosis and treatment and the continuing comprehensive follow-up care for PLHIV. The NASPCP regularly provides support for laboratory reagents, test kits, STI and ARV drugs to Social Hygiene Clinics (SHCs), National Referral Laboratory, and the 13 Treatment Hubs (established in 2004)

NASPCP receives support to its program plan from various agencies including the UN and its Secretariat, WHO, ADB, USAID and GFATM.

**Department of Justice (DOJ)**

The DOJ is the government’s principal law agency, and its legal counsel and prosecution arm. Its mandate includes the administration of the criminal justice system consisting in the investigation of crimes, prosecution of offenders and administration of the correctional system; the implementation of laws on the admission and stay of aliens, citizenship, and settlement of land problems involving small landowners and members of indigenous cultural minorities; and the provision of free legal services to indigent members of the society.

As the government’s prosecution arm, DOJ is tasked to investigate crimes and prosecute offenses, including acts that are punishable under RA No. 8504. Pursuant to its mandate, and in line with the provisions of RA 8504, the Department has conducted regional Gender and Development (GAD) training workshops for its prosecutors. For the period of 2005 to 2008, 197 prosecutors from ten (10) regions have participated in the said workshops. The workshops are aimed at updating and orienting the prosecutors on the various penal laws related to women and gender; training them to be more gender-sensitive; and teaching them to effectively handle gender-related issues in the conduct of their investigation and prosecution of criminal offenses. The conduct of GAD workshops is an ongoing Departmental effort, which now includes in its scope other DOJ personnel.

**Department of Labor and Employment (DOLE)**

The Philippine AIDS Prevention and Control Act of 1998 (RA 8504) specifically mandated DOLE to oversee the HIV and AIDS education in the private sector, in collaboration with the Department of Health (DOH). It is mandated further to ensure that all overseas Filipino Workers attend an HIV and AIDS education seminar prior to their departure by making it a part of the Pre-Employment and Pre-Departure Orientation Seminars. Likewise, the Department is directed to integrate HIV and AIDS education into the existing training programs for labor officials and personnel who will be assigned overseas. Moreover, the DOLE is tasked to provide opportunities for PLWHAs to participate in skills training and livelihood programs.

In keeping up with these mandates and to fully support the Philippine National AIDS Council as the overseer of an integrated and comprehensive approach to HIV and AIDS prevention and control in the Philippines, the DOLE, through its bureaus and attached agencies, carried out the following:

- Integration of HIV and AIDS prevention and control education into the “Basic Occupational Safety and Health Course” for safety and health supervisors of establishments
• Continuous provision by Occupational Safety and Health Center (OSHC) of technical assistance in policy and program development on HIV and AIDS concerns in the workplace

• Implementation by the Bureau of Women and Young Workers (BWYW) of the Family Welfare Program which integrated HIV and AIDS prevention into the reproductive health education for women and young workers, by virtue of DOLE Department Order 56-03

• Incorporation by the Bureau of Working Conditions (BWC), through its revised inspection system (i.e. Labor Standards and Enforcement Framework), of the HIV and AIDS education program as a mandatory requirement for work establishments with more than 200 workers. This is being monitored by regional offices

• Development and dissemination of posters on HIV and AIDS, primer on workplace provisions of RA 8504, and articles in the Philippine Occupational Safety and Health Newsletter

• Development by the Overseas Workers Welfare Administration (OWWA) of referral system with partners from DFA, DOH, and DSWD which includes areas of cooperation and coordination, flow chart of case management, flowchart of reporting system, and directory of partners

• Implementation of pre-departure intervention package for Overseas Filipino Workers through:
  - Pre-Employment Orientation Seminars (PEOS) at the grassroots level by the Philippine Overseas Employment Administration
  - Pre-Departure Orientation Seminar (PDOS) by OWWA and its partner PDOS providers
  - Seafarers Refresher Course
  - HIV course in Marina

• Implementation of on-site intervention package for prevention, treatment and care support through the Philippine Overseas Labor Offices / OWWA, which includes:
  - Facilitation for medical testing and re-testing of OFWs as required by labor-receiving countries
  - Referral to partner private and public institutions
  - Facilitation of repatriation and airport assistance

• Reproduction of HIV and AIDS materials for various OWWA overseas posts and regional offices to increase awareness of OFWs and stakeholders

• Institutionalization by OWWA of capability-building efforts such as:
  - Care counselling and trainers training among leaders of community organizations both locally and overseas
  - Briefing/orientation for Welfare Officers to be assigned in the regional welfare offices and overseas posts

• Implementation by OWWA of reintegration package for returning PLWHAs which includes disability assistance, financial assistance, insurance benefits, scholarships for dependents, reintegration assistance, and referral to partners and medical institutions

• Partnership with the UNDP in its Joint Program on HIV and AIDS and Migration with POEA, OWWA, NRCO, OSHC, Institute of Labor Studies (ILS) as the core agencies. This program aims at strengthening institutional capacities and initiatives on HIV and migration

• Incorporate HIV and AIDS topic in the general curriculum regular in ten (10) big maritime schools (4 in Iloilo and 6 in Luzon) in the country.

• Integration of HIV and AIDS topic in the capability enhancement of Public Employment Service Office Managers of LGUs nationwide.
Department of Social Welfare and Development (DSWD)

The DSWD’s mission is to provide social protection and promote the rights and welfare of the poor, vulnerable and the disadvantaged individuals, families and communities that will contribute to poverty alleviation and empowerment through social welfare development policies, programs, projects and services implemented with or through local government units (LGUs), non-government organizations (NGOs), people’s organizations (POs), other government organizations (GOs) and other members of civil society.

From 1999 to 2008, activities of DSWD regarding HIV and AIDS prevention, control and management are focused on policy development, capability building and education activities and providing treatment care and support services to PLHIV and their families. The following are the highlights of DSWD’s key activities and achievements for the years 1999 to 2008 with funding from the United Nations Development Program:

- Development and adoption of a manual entitled *Gabay sa HIV at AIDS Para sa mga Lider at Boluntaryo ng Pamayanang*. The manual was developed in partnership with PNAC and the Remedios AIDS Foundation in 2002.

- **Care and Support**: A Self-Instructional Manual for Social Workers on STI, HIV and AIDS was developed in partnership with PNAC, the manual focused on three (3) modules: (1) Self-awareness: The Social Worker’s Being; (2) Case Management Process: The Social Worker and the PHA; and (3) Integrating the PHA in the Community.

- **Manual on Unlad Kabataan Program** including topics on STI, HIV and AIDS

- One module on the Manual Empowerment and Reaffirmation of Paternal Abilities (ERPAT) focusing on fathers as advocates in HIV and AIDS prevention.

- A program entitled: Care and Support Services for Persons Living with HIV and AIDS, their Families and Children is being implemented. Through this program thirty-two (32) cases of PLHIVs and their affected families were managed in NCR and Region III. Access of PLHIVs to other services under the Crisis Intervention Units of DSWD was also facilitated and they were also provided such as livelihood, educational, and burial services.

- Developed a guide for trainers entitled, HIV AND AIDS Youth Advocacy (HAYAP) in partnership with Children and AIDS Network – Philippines, UNICEF, UNAIDS, Member of Pag-as Youth Association of the Philippines were organized as advocates.

- Conducted orientation to 30 Local official/community leaders and volunteers on HIV and AIDS in Olongapo and Quezon City in July and October 2007.

- Trained 20 social workers and house parents of residential care on the Prevention and Case Management of PLHIV- Angeles City, Pampanga, April 2007

- Conducted Values Orientation to 32 PLHIVs and their Families as support group on home based care on December 14-15, 2007, Angeles City, Pampanga and 2nd batch on June 19-20, 2008 in SWADCAP, Taguig City

- Conducted **Home based Care Approach Training Workshop** for 32 PLHIVs and their Families on June 11-13, 2008, Century Resort Hotel, Angeles City Pampanga.

- Conducted capability building/skills training of 32 PLHIVs

- Managed 32 cases of PLHIVs and their affected families in NCR and Region III

- Facilitated the access of PLHIVs to other services under the Crisis Intervention Units of DSWD.

- Provided assistance to target PLHIV beneficiaries e.g. livelihood, educational and burial assistance.
Department of Tourism (DOT)

The mission of DOT is to encourage, promote and develop tourism as a major socio-economic activity to generate foreign currency and employment and to spread the benefits of tourism to both the private and public sector. DOT together with other agencies such as DOLE, DOH and DOJ (through the Bureau of Immigration) is mandate by RA 8504 to provide relevant and timely information about the cause, prevention and consequences of HIV and AIDS to Filipinos going abroad and immigrants and transients. From 2005 to 2008, DOT, guided by their mission of promoting tourism in the Philippines and the task of contributing in the prevention and control of the HIV and AIDS epidemic, has conducted several activities. DOT is active in participating in annual advocacy activities for HIV and AIDS such as the HIV and AIDS Candlelight Memorial Celebration and World AIDS Day. The Department is also active in conducting advocacy activities and providing relevant information about HIV and AIDS (issues, concerns and programs) for their Regional Offices and employees. Examples of such activities are as follows:

- Disseminated primers on HIV and AIDS for hotel workers to DOT Regional Offices
- Issued medical bulletins on HIV and AIDS for DOT employees

House of Representatives - Special Committee on the Millennium Development Goals (HR SCMDG)

The HR SCMDG is responsible for the creation of relevant and timely laws, the House of Representatives held round table discussions (with the support of the United Nations Country Team) about the development of laws for the Millennium Development Goals, of which HIV and AIDS is a concern. The said discussions led to the creation of the House of Representatives Special Committee on the Millennium Development Goals. The committee is tasked to discuss bills, enact laws and monitor the implementation of laws that support the achievement of the Millennium Development Goals. Following are the HR SCMDG’s accomplishment vis-à-vis the prevention and control of the HIV and AIDS epidemic.

- Conducted nationwide consultations and public hearings by the virtue of House Resolution No. 653 directing the SCMDG to review the impact and status of the implementation of the AIDS law. Hearings were conducted in key cities where the HIV and AIDS epidemic was perceived to be of high incidence. These cities are Cebu City, Davao City and Angeles City.

- The outputs and data gathered from the consultations held in key cities were consolidated and translated into an amendatory bill – House Bill No. 5989 – by the technical working group composed of the SCMDG, PNAC, DOJ, DOH, Representatives from LGUs, NGOs and UNAIDS.

- Appointment of the SCMDG’s Chairperson (Hon. Soon-Ruiz) as member of the United Nations AIDS Commission for Asia and the Pacific in 2006.

- Attendance of the Chairperson of the SCMDGs in high-level meetings and conferences regarding HIV AND AIDS conducted by UN and other similar engagements held locally and abroad.

- House Bill No. 5989 was refilled with some amendments introduced by PNAC and DOH in the 14th Congress.

- A new bill (House Bill No. 1389) containing amendments to the law was already approved by the Committee on Health and is pending with the Committee on Appropriations for the approval of its appropriate provision.
The mission of NEDA is to formulate development plans and ensure that plan implementation achieves the goals of national development. For the years 2005 to 2008, NEDA provided technical assistance in the formulation of the AMTP-IV Operational Plan. In terms of monitoring, NEDA prepared the National AIDS Spending Assessment (NASA 2000-2004, 2005-2007). This report tracks the total amount of resources spent for HIV and AIDS in aid of planning. Other achievements of NEDA include:

- Provided technical assistance in the preparation of the UNGASS Report, Universal Access Roadmap; Research Agenda 2005-2010
- Prepared write up for the HIV and AIDS portion of the 2nd Philippine Progress Report on MDGs, and Mid-term Progress Report on MDGs
- Provided technical assistance in the development, monitoring and evaluation of the following projects: UNDP-assisted Care and Support Services for Persons with AIDS and the Family/Children Project; PLDT-PNAC Project; RH/Safe motherhood and HIV and AIDS prevention program; GFATM-assisted HIV and AIDS projects
- Developed the report entitled: Coverage of Essential HIV and AIDS services and AIDS Program Index Effort (2005); Coverage and Costing of HIV Prevention Interventions for Young People (2006).

Philippine Information Agency (PIA)

The PIA shares its communication expertise and media resources with PNAC and other partners to popularize R.A. 8504 as well as to disseminate information on the prevention, treatment, care, and support programs for HIV and AIDS. PIA envisions a well-informed citizenry who are able to understand, discuss, and vote on vital issues propelling the nation toward lasting peace and development. To achieve this, PIA provides the people with adequate information to help them make better decisions and better opportunities to improve the quality of their lives. Among its key activities as PNAC member are:

- Contributed communication techniques and strategies in the development of communication plans (included are: the five-year Communication Plan presented at the UNAIDS workshop entitled Workshop of Agencies and Implementing Institutions: Communication for Behavior and Social Change...” held in Geneva, Switzerland in July 2000; and the Sectoral Communication Plans: A Campaign on HIV and AIDS Prevention which the current Advocacy Committee is working on for 2007-2010
- Collaborated with ASP to mainstream HIV and AIDS in media by holding the AIDS Media Awards (1999-2001) which generated storylines, articles, comics, broadcast scripts about the disease
- Launched and promoted the Awards at PIA’s flagship news forum: Ugnayan sa Hotel Rembrandt (Ugnayang Pambansa) which aired over NBN 4, RPN 9, IBC 13, DzRB Radyo ng Bayan, Global, Home, Destiny Cable TV Networks, Las Piñas Cable Channel 18, KTV-3 Lucena, KTV-12 San Fernando, Pampanga; and
- Tackled the Awards in news fora organized by PIA in Zamboanga, Bacolod (Kapihan sa Sugarland), Cebu (Kapihan sa PIA), Davao (Kapihan sa Dabaw), and in other regions.
- PIA Head and Regional Offices produced news releases and public service announcements for print, broadcast, and electronic media, as well as coordinated interviews and news coverage for PNAC HIV and AIDS, AIDS Candlelight Memorial, World AIDs Day, and the first National Young Persons Planning Forum (2008);
- By sharing its media outlets with PNAC and partners, PIA helped the Council reduced costs for publicity and news fora (estimated at P10,000 - 40,000 each depending on the venue) and media campaign are almost free for PNAC except for logistical expenses used for meetings, transportation, communications (telephone, fax, internet services) and food, etc.; and
- PIA is currently using the TV Program “One Morning” as an instrument for HIV and AIDS prevention through advocacy.
Technical Education and Skills Development Authority (TESDA)

The mission of TESDA is to provide direction, policies, programs, standards towards quality technical education and skill development. RA 8504 particularly tasks TESDA to integrate instruction on the causes, modes of transmission and ways of preventing HIV and AIDS and other sexually transmitted diseases in subjects taught. Along with its mission and its task as a member of the PNAC, TESDA conducted the following key activities:

- Integrated information on HIV and AIDS during the job induction program at training centers in Region IX
- Conducted counselling with trainees regarding the safe sex practices to avoid infection
- Advocacy on HIV and AIDS at off-center or community based training programs

Member-Non Government Organizations

As stated in Section 3f of the Implementing Rules and Regulations (IRR) of RA 8504, multi-sectoral involvement is essential to national and local responses to HIV infection. This means that not only the public sector, but also the private sector, NGOs, faith-based organizations and community-based organizations have to be involved in the implementation of the law. Non-government organizations in PNAC have used their time, resources and skills to realize the intent of the law as shown by their key accomplishments in 2005 to 2008.

AIDS Society of the Philippines (ASP)

The mission of ASP is to promote and support activities directed towards the prevention and control of HIV and AIDS. Since its establishment in 1996, ASP has worked with PNAC in crafting a concerted national response to the epidemic. Key achievements of the ASP in 2005 to 2008 include:

- Generated data in 2005 for AIDS planning and policy development: (1) among teachers and volunteers through LEVIS’ funded Behavioural Research on the Effectiveness of Children Storytelling as a Prevention Education Strategy; and (ii) a regional project is on Content Analysis on HIV and AIDS Media Reporting among Mekong Countries (Cambodia, Thailand Laos, Myanmar, Vietnam) to include Philippines and Indonesia. This is supported by Rockefeller Foundation.
- Implemented the program Linking HIV Prevention and Care through Strengthening HIV Counselling and Testing Services for OFW’s in 2005 to up-scale the prevention and TCS services for OFWs. ASP has also conducted Clinical Management of HIV and AIDS training for medical professionals, and Parenting Workshops, and Story telling workshops with teachers and volunteers. ASP was previously involved in the 6th Country Program (2005-2007) of UNFPA through the Vulnerability and Susceptibility of MSMs and IDUs to HIV Transmission: An Intervention Work. ASP likewise is actively involved with Global Fund Round 6 in strengthening the provision of HIV and AIDS capacity building initiatives among LGU and partner institutions in the Philippines, through VCT and Blood Safety.
- Collaborative activities were done with other CSOs in undertaking the Philippines National Conference on AIDS and Inter-faith Workshop on HIV and AIDS: Leadership thru Partnership. These were supported by PNAC, UNAIDS, UNFPA and UNICEF.
- Currently, ASP professional members are invited to deliver HIV specific lectures in various scientific meetings/conferences of various professional societies such as Philippine Society Microbiology and Infectious Diseases (PSMID), Philippine Society Venereologist Inc. (PSVI), Philippine Paediatrics Society (PPS) and Philippine Obstetrical and Gynaecological Society (POGS). The society is currently recruiting professionals from different disciplines as members of the society.
- Mainstreaming human rights issues in activities such as the International AIDS Candlelight Memorial, AIDS Media Awards, Launching of FVR Excellence Awards and World AIDS Day.
The mission of HAIN is to contribute to the empowerment of people and communities by making available and accessible objective, accurate and timely information on health and health-related issues. As a member of PNAC, it provides practical and relevant information on research needs of its partners regarding HIV and AIDS. It also provides technical support to NGOs through its publications and its Resource Center can be accessed by the public. At the core of HAIN’s accomplishments is the provision of critical information and analyses on the socio-political dimensions of AIDS as illustrated in the following research reports and publications in 2005 to 2008:

- Development of AIDS Research Agenda (2005-2010)
- KAPB on HIV and AIDS Among Out of School Youth (2007-2008)
- Knowledge, Attitude, Behaviour and Practices on HIV and AIDS Among Filipino Youth and Health Workers (2005)

Aside from researches and publications, HAIN has also conducted trainings on HIV AND AIDS, sexual and reproductive health, religion gender and sexuality to address the HIV AND AIDS epidemic from different perspectives. The published pamphlets, books, and newsletters of HAIN also provide practical information on how to strengthen AIDS response at the community level.

**Lunduyan para sa Pagpapalaganap, Pagtataguyod at Pagtatanggol ng Karapatang Pambata Foundation, Inc. (LUNDUYAN)**

The mission of LUNDUYAN is to ensure that children, young people and adults can and are actively involved in the plan, design, implementation, monitoring and evaluation of mechanisms, programs, structures and systems at all levels in response to all forms of child rights issues and concerns/violations. It represents the Children and Young People sector in PNAC. Lunduyan’s key accomplishments in 2005 to 2008 include:

- Conduct of the 1st National Young People’s Planning Forum in 2008 where data was generated through a pool of Children and Young People advocates and partners. The information gathered was used in identifying priorities for the 2009-2010 AMTPIV Operational Plan. A Rapid Appraisal of the Situation of Children Affected by and living with HIV was done in 2005, of which the “Deafening Silence” was produced and disseminated. It served as the launching material for the Global Campaign on Children and HIV entitled “Unite for Children, Unite against AIDS”, and provided evidence on impact of State Response to HIV and Children.

- Led the advocacy for the reconstitution of the Sub Committee on Children and HIV into the Committee on Children and HIV under the Council for the Welfare of Children during the period of 2005-2006.

- Represented PNAC and children’s interests in national and international meetings. It launched the issue on Children affected by HIV and AIDS in numerous advocacy events i.e. WAD, ACM, PNCA and the recent Global Campaign for Children and HIV supported by UNICEF in Dec 2005. Represented the PNAC to the Change Management Committee of the DOH with regard the strengthening of the PNAC Secretariat. It also represents the PNAC in the CCM since 2005. Lunduyan facilitated the Pre-Consultation Workshop of the Under 18 Delegates from different countries to the East Asia and the Pacific Consultation on Children and HIV and AIDS held in Hanoi, Vietnam.

Lunduyan translated and disseminated RA 8504 to children and young people to peers, families, communities and institutions; ensured that children and young people’s concern are gradually and increasingly considered in the plans and activities in all the AMTPs; increased the number of collaborating partners for children among the PNAC NGO members i.e. DSWD, DOT thru the Child Wise Tourism Initiatives, DILG thru the NBOO, DepEd thru Regional and Provincial Offices and the Alternative Learning Program, DOLE thru the BWYWs Child Labor Program, DOH – NASFPCP and Adolescent Repro Health Program; Increased the number of collaborating partners for children among the PNAC NGO members i.e. Pinoy Plus, PAFPI, ASP, ISSA, WHCF

Mainstreamed children and young people in all the GFTAM and other proposals. They are now seen as a distinct sector that is most vulnerable and most at risk considered for projects.

**Institute for Social Studies and Action (ISSA)**

Represents women issues in PNAC and central to its work is the integration of RH and HIV AND AIDS. Its mission is to ensure that women and youth especially those belonging to the more vulnerable sectors of society will be empowered to enjoy their right to health, gender equality and justice. The highlights of ISSA’s accomplishments in 2005 to 2008 were:

- Collection of HIV and AIDS related data for ReproWatch articles and HIV and AIDS Statistics for StatWatch with fund support from Embassy of Finland, that was distributed to Academe, Legislators, Local Executives, CSOs, LGUs, NGOs nationwide in 2008; ReproWatch in 2005 and 2006 was funded by UNFPA as part of the UNFPA-assisted project Enhancing Capacity of Partner NGOs, POs and LGUs in Identifying, Analysing and Combating Gender-Based Violence. Both the ReproWatch and StatWatch are awaited publications by GOs and NGOs especially of Women NGOs for updates in RH that includes HIV and AIDS.

- Coordinated with the Provincial Government of La Union in ‘Developing a Local Monitoring System on the Millennium Development Goal 5: Target 7’ (2006-2007) which was funded by EU; and with GOs and NGOs in Establishing a Monitoring and Evaluation System for HIV Response (2005-2006) in partnership with WHCF and assisted by UNAIDS. In La Union, HIV and AIDS indicators were integrated in the mechanism in monitoring MDG 5 target 7.

- Partnered with the Student Council of the University of the Philippines, Dillman-Gender Committee and the General Assembly of Gender Advocates (USC-GC GAGA) from 2006 to 2007 in giving basic orientation courses about HIV AND AIDS to both high school and college students in the campus. This was financed by ISSA’s General Fund. Champions for AIDS advocacy were recruited among the students.

- With support from UNAIDS, it also co-authored the 2006 UNGASS Report in partnership with WHCF.

- Chairs the Girls, Women, HIV and AIDS Network (GWHAN) a multi-sectoral network composed of 21 government agencies and NGOs that integrates gender issues in HIV and AIDS advocacy from 2007 to present. As chair, the network came out with position papers in support or against policy papers such as the support for RH Bill and opposition to ban condoms in media advertisements.

- Conducted HR advocacy and mainstreaming through different fora for the participation in World AIDS Day and the international AIDS Candlelight Memorials.

The Institute for Social Studies and Action (ISSA)17 also provided technical assistance through representation in various international partnerships and events. Its CEO was recognized in various international events related to her exemplary contribution in ICPD implementation, health research, and public health. She also represented the Philippines as resource person in a number of international strategic and planning workshops for HIV AND AIDS prevention and control. Significant studies on women’s health, PLWHAs, and reproductive health were also made possible to be conducted in the country through ISSA’s efforts. Representatives to bi-regional conferences of health practitioners, disaster-risk prevention, policy-makers’ symposia, and conferences on reproductive health; made it possible for ISSA’s participation mainstreaming the HIV and AIDS agenda. Participation in cross-country and community-based projects, presentations and lectures advocating for HIV and AIDS prevention are also additional contributions of ISSA to this initiative.

17 For detailed contribution of ISSA’s leadership in AIDS advocacy – please refer to Annexes.
Positive Action Foundation Philippines Inc. (PAFPI)

An organization created to guide and provide support services for persons living with HIV AND AIDS and their families. It is committed to contribute to the national response to HIV AND AIDS through advocacy, prevention, treatment, care and support. During 2005 to 2008, key actions were accomplished by PAFPI:

Systematic collection of information such as: (a) National Profiling and Master list of clients reached and provided services in the treatment, care and support programs; (b) Identification of OI medications reported to DOH for Philippine National Drug Formulary; (c) Reporting of number of PLHIV receiving prophylaxis treatment and OI treatment as indicator for the 2005 Country report; and (d) Baseline research on Health Seeking Behaviour among PLHIV – 1st and 2nd NCCM.

Coordinated PLHIV community with Country Response Information System (CRIS) as network member, TCS NGO Coalition building for proper client referral, and Membership to the TWG, CCM and PNAC.

Strengthens partnership with other sectors that resulted to influencing their adoption of HIV and AIDS related activities such as:

- Kongreso ng Pagkakaisa ng mga Maralita ng Lungsod (KPML) has implement their own HIV AND AIDS program in the Urban Poor sector
- Standard Chartered bank developed a program on HIV and AIDS
- Creation of Local HIV AND AIDS Council in Eastern Samar, Bohol, Bauang, Baguio, Bicol, Iloilo and Bacolod
- Department of Social Welfare and Development (DSWD) – Care and Support Pilot Project under UNDP
- STI/HIV AND AIDS Education to departing 66,609 OFWS in seven PDOS agencies
- Validation and assessment among returning OFWs with OWWA accredited recruitment/manning agencies
- Forming the TCS NGO coalition
- Training of Trainers/Directors of accredited training agencies by the MARINA

Provided services to PLHIV through the 3 drop-in centers (Manila/Visayas); capacity-building on Peer education and counselling; HIV / AIDS in PDOS (TOT); ARV Adherence, Self-empowerment, Home-based care; Enrolment to Philhealth; Employment Opportunities; Provision of services on peer education and counselling, health information, HIV AND AIDS lecture, personal testimonies; home and hospital visits; mass media advocacy; technical assistance to LAC; inclusion of programs and services into the Local AIDS Council Policies.

Engagement with positive community through representation of their interests in regional and national networks; Referral of target clients for support services; Establishment of Treatment Action Group of the Philippines (TAGOP) and Positive Speakers Bureau (PSB); Participated in the development and review of country project proposals for GFATM; Spearheading the advocacy for universal access to HIV and AIDS treatment reported in UNGASS.

Pinoy Plus Association (PPA+)

An organization of People Living with HIV and AIDS (PLHIV) in the Philippines. It is a support group dedicated to the welfare of PLHIV in the country. PPA’s mission is to build the capacity of PPA+ members and to provide comprehensive care and support services to PLHIVs, affected families and significant others. PPA responses to the treatment, care and support needs of PLHIVs while upholding their human rights. Key accomplishments of PPA from 2005 to 2008 are:

- Data base information was developed- by getting as many number of PLHIV individuals as possible who may be in need of psychosocial support and community based TCS provided by peer support
- Consistent coordination with partnership agencies and other stakeholders to ensure complementation of initiatives and to avoid duplication and to support scaling up and out of intervention
• Partnered and worked closely with NGOs and other partners with expertise on policy advocacy and development

• Provided treatment care and support thru home and hospital visitation and capacity buildings initiatives such as Peer Education and Counselling, HIV Treatment Literacy and Education and Home based Care Training.

• Advocacy initiatives to integrate GIPA principles in all aspects of interventions (Program Planning, Design, Implementation and Monitoring and Evaluation)

• Represented PLHIV community in recommendatory and decision-making bodies. This includes PPA+ representation at the PNAC Plenary level-bringing the voice of the members and provision of inputs and suggestions to different bodies related to the programming specifically program components affecting TCS for PLHIV.

• Pinoy Plus Association, Inc. is a member of international networks of HIV and AIDS NGOs like Global Network of People Living of HIV and AIDS (GNP+) and the Asia Pacific Network of People Living with HIV and AIDS (APN+)

TLF Sexuality Health and Rights Educators Collective, Inc. (TLF-SHARE COLLECTIVE)

TLF Share Collective envisions a Filipino community of free, healthy, safe and empowered lesbians, gays, bisexuals and transgenders (LGBT) living in a society that respects diversity and recognizes human rights for all. Its primary constituency comprises of individuals, peer groups and local communities of gay and bisexual males, transgenders (GBT) and other males who have sex with males (MSM). As an organization of members who are likewise (GBT), it aims to (1) promote sexual health among its primary constituency through education and advocacy; (2) advocate human rights without regard for sexual orientations and/or gender identities; and (3) organize, mobilize and build capacities of like local communities towards similar ends. Key accomplishments of TLF from 2005 to 2008 are as follows:

• Through the GFATM projects (Rounds 3 and 5), mobilization and outreach for sexual health promotion (mainly, prevention of STI and HIV) have scaled up reach in project sites in Metro Manila, Batangas City, San Pablo City, and contiguous municipalities in Quezon, Legazpi, Tabaco cities, Daraga and contiguous municipalities in Albay. The primary beneficiaries: men who have sex with other men (MSM), migrant workers and People in prostitution (PIP). Currently sits as member of the local AIDS councils of Gumaca, Quezon; San Pablo City, Laguna and Legazpi City, Albay. (Outcome of GF Round 3)

• IPG-BBC Project: Bayanihan sa Kaunlaran: Citizens Shaping Good Urban Governance: Enabled marginalized sectors (women and MSM) to engage and participate in barangay development planning in Daraga, Albay with special emphasis on reproductive health and sexual health and rights.

• ACCENTURE PROJECT: Capability Building for the FLAG Sexuality and Gender Program: Enabled ACCENTURE’S Friends, Lesbians, and Gays (FLAG) community and developed in house subject matter experts on sexuality and gender diversity programs and STI/HIV and AIDS peer educators

• UNGASS 2007 (in partnership with HAIN): Developed country report to the follow-up on the Declaration of Commitment on HIV and AIDS in UNGASS 2007

• AmFaR Project: Trained and capacitated through organizational development, governance and advocacy, monitoring and program planning the following groups: Independent Gay Organization (Indigo) of Bulacan, Tabak Sangre and GAYon of Albay.

• Involved in the Anti-Discrimination Campaign both in local and national levels of legislation.

• Established on line partnerships with cyber MSM oriented communities: such as Single Guys Online, Virus Clan, Discreet Males, Dugong Berde, etc.

• Conducted school based advocacy and lectures (Batangas State University, Colegio Lungsod ng Batangas, San Pablo Colleges, Canossa High school, San Pablo National High school, Laguna State Polytechnic University, STI College, San Pablo Medical Center, AMA, Saint Anne College, Enverga University, Eastern Quezon College, Gumaca National High School, Panikihan National High School)
Trade Union Congress of the Philippines (TUCP)

A federation composed of trade unions, worker’s organizations and other groups of workers. TUCP is dedicated to build democratic organizations led by its members; strengthen the workers movement – build capacities; instill nationalism, solidarity, equity and social responsibility; promote equal rights and opportunities for all and improve conditions of work and life of workers and their families. Since its induction to the PNAC, TUCP has actively sought to represent and address issues and concerns of the workers regarding HIV and AIDS. Key accomplishments in 2005 to 2008:

- Conducted research through: (i) Baseline Survey on the RH KAPP of Informal Sector; (ii) End line Survey; and (ii) An Operations Research for a Better Understanding and Information on HIV and AIDS Among Workers in the Informal Sector (Survey on the risks and vulnerabilities of Informal Sector Workers to HIV and AIDS and FGD on the status of HIV and AIDS service delivery for the informal Sector Workers.

- Adoption of a Trade Union Policy and Action Plan for 400,000 workers and Yearly Conference to review Core Programs and Projects

- Promotion of HIV and AIDS Programs and Policies on Workplaces through collective bargaining
  - Negotiation for HIV and AIDS provisions on the Collective Bargaining Units
  - Advocacy by unions within companies to adopt HIV and AIDS Programs and Services
  - National Advocacy for HIV and AIDS program in the workplace (in partnership with other trade unions and stakeholders)
  - Inclusion on HIV and AIDS as part of Occupational Safety and Health Programs

- Intensifying Advocacy for Family Planning and Reproductive Health at the Workplace
  - RH Advocacy on Board (Education Sessions for domestic seafarers done aboard their domestic voyages)
  - Interactive discussion Sessions on STI to include HIV and AIDS (conducted by the trained YAPes)
  - Week-end Seminars for Workers
  - RHAPWID on Air (DLYA) – weekly radio program aired in Visayas and Mindanao discussing issues on Reproductive Health
  - Training of Young Adult Peer Educators (YAPes) (4 Batches); Training for Union CBA Negotiators
  - Service Provision – STIC detection and Management to include counselling, motivation of contraceptive users to include condom use (Union – run Family Welfare Clinics, TUCP Family welfare Clinics, Referral networks)

- Promoting Family Planning and Reproductive at the Workplace through Public-Private Partnership
  - RH Advocacy on Board (Education Sessions for domestic seafarers done aboard their domestic voyages); Company level education sessions
  - RH Leadership Training of Shop Stewards
  - Service Provision – STIC detection and Management to include counselling, motivation of contraceptive users to include condom use (Union – run Family Welfare Clinics, TUCP Family welfare Clinics, Referral networks)
  - RH and HIV and AIDS program as Corporate Social Responsibility

- HIV and AIDS @Work: Strengthening the Peer Education Program in Workplaces
  - Development of the “Training Manual for Peer Educators on HIV and AIDS at the Workplace”
  - Training on HIV and AIDS Peer Education at the Workplace (2 batches)
  - In-plant HIV and AIDS Education Sessions by the trained HIV and AIDS Peer Educators (15 sessions)

- HIV and AIDS Prevention and Control@Work: Reaching-out to the Sunshine Industry
  - Orientation Session on Prevention and Control: HIV and AIDS In the Workplace (30+ sessions)

- Engagement with CSOs:
  - Creation of “Five (S) Regional RH Coalitions” that advocates for Reproductive Health Programs in the Workplace
  - Technical Assistance and dialogues with Companies in implementing HIV and AIDS program in the workplace
  - Technical Assistance to Unions in promoting HIV and AIDS programs in the workplace
  - Tripartite Discussions on Workplace HIV and AIDS Advocacy
  - National Tripartite Workshop on HIV and AIDS in the World of Work
  - Local Representation – ICHRSM, AIDS Conference, WAD, ACM
  - International Representation - Meeting of the ASEAN Labour Ministries Focal Points on HIV Prevention and Control at the Workplace, International Symposium “Fighting Against HIV and AIDS at Workplace”
• Mainstreaming of human rights through:
  - Adoption of the ILO Code of Practice
  - Advocacy for the adoption of an ILO Recommendation on HIV and AIDS in the 2009 International Labour Conference
  - Recommended the inclusion of anti-discrimination clauses on the provisions for HIV and AIDS programs and services in Collective Bargaining Agreements (CBAs).

**Women's Health Care Foundation (WHCF)**

The mission of WHCF is to provide quality, gender and rights-based, comprehensive sexual and reproductive health services, information and training. WHCF represents women in the PNAC. Key accomplishments include:

• Establishment of a National Monitoring and Evaluation System on HIV and AIDS (in partnership with PNAC).

• Implemented Multisectoral STI, HIV and AIDS Prevention and FP Participatory Program for PIPs’
  - Provision of quality RH services (includes: medical, laboratory (gram staining, pap smear) FP, Counselling services, VCCT Referral)
  - STI, HIV and AIDS Orientations and Seminars, Partnership with Manila Social Hygiene for the VCT of the PIP clients
  - IEC materials development and reproduction
  - Strengthened Local Collaboration among Multi-stakeholders for SRH services for sex workers
  - Mobilized health facilities and SRH service providers (training of SP)
  - Involvement of PIP support groups in the project implementation
  - Development of Trainers’ Toolkit on Adolescent Sexual and Reproductive Health and Rights focused on RTI, STI and HIV and AIDS

• Development and Production of Trainers’ Toolkit on STI and HIV and AIDS

• Conduct of Baseline Study for the RH Status and Needs of Women and Youth in Metro Manila (including knowledge about HIV and AIDS) and Informal survey on PIPs within a QC area bordered by Quezon Avenue, Kalayaan, Quezon Circle, and Timog Avenues (Multi-sectoral STI, HIV and AIDS Prevention and FP Participatory Program for PIPs).

• Capability Building Needs Analysis of Community Youth Volunteers

• Consultation with Community Youth Leaders
Frontcover of the 4th AIDS Medium Term Operational Plan of the Philippines for 2009-2010. Developed by UNAIDS and Philippine National AIDS Council
UNDERSTANDING THE CHALLENGES, APPRECIATING THE LESSONS

While we have worked hard to accomplish the PNAC’s vision, mission and mandate much still needs to be done in HIV and AIDS prevention, treatment, care and support. There are internal challenges facing the PNAC that impact national response to HIV and AIDS and how well Goal 6, Target 8 of the MDGs will be achieved. In the course of responding to the epidemic and in working as a Council, its Member-agencies and Secretariat have also learned important lessons that will guide PNAC’s collective journey in the years ahead.

Challenges

**Inadequate mainstreaming of HIV and AIDS in agency programming.** Except for the appointed official representatives and assigned focal persons (technical staff), most member-government agencies do not have focal units on HIV and AIDS response. This inadequacy limited the extent of HIV and AIDS mainstreaming in agency programming and budgeting, and in realizing agency mandate in relation to the epidemic. Member-government agencies and LGUs have yet to mainstream orientation and advocacy of HIV and AIDS-related issues particularly the AMTP IV strategies and activities among the agency and LGU constituents. The promotion and marketing of AMTP as entry point and basis for negotiations with international donor agencies is not fully implemented by Council members. There were instances when some NGO and government member-agencies overlooked in informing the Council that they are involved in donor-funded HIV and AIDS programmes in the country. As a whole, the positioning of PNAC as focal body in negotiation for HIV and AIDS donor-funding is yet to be realized.

**Organizational structure and human resource limitations.** To date, given that the Executive Committee is not yet fully functional, the large membership of the Council poses a challenge on the decision-making processes, especially on occasions where immediate decisions need to be done but there is lack of quorum.18 Shifts in agency representatives during plenary meetings also affect the speed of decision-making, especially when the person attending the plenary meeting does not carry sufficient authority to take action. At the same time, the fast turn over of agency representatives leads to lack of continuity on agreements reached and loss of information. Both the AMTP IV MTR in 2008 and 2006 Capacity Assessment Project or Organization Development (OD)19 have noted that the downsizing of PNAC Secretariat staff, absence of competency-based personnel development program and lack of strategic orientation on the Secretariat functions constraint PNAC’s performance of its role and responsibilities in the National Response to HIV and AIDS. The capacity of most member-agencies in terms of HIV and AIDS advocacy is limited too and more training is needed.

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18Noted in the AMTP IV MTR, 2008:30.
Financial constraints. As pointed out in the National AIDS Spending Assessment (NASA) Report of 2000-2007, there is a general decline in AIDS spending in recent years. RA 8504 mandates that PhP 20 million will be allocated to PNAC through DOH, but according to the findings of AMTP IV MTR, “due to past performance and budget utilization, only about PhP 9 million has been made available for its operations. It is noted that PNAC has yet to come up with financial projections to determine the funding requirements for programs and administrative operations and serve as sound basis for budget allocation. This has apparently hampered the functioning of the PNAC Secretariat and the Council itself”.20 Considering the status of the epidemic and the extent of needed interventions, both member-government agencies and NGOs are constrained by lack of funds to support HIV and AIDS programs and activities. “Good practices” in HIV and AIDS response are not scaled-up (i.e. workplace policy and programs, local responses and community-based approaches) and interventions are not sustained. Some government agencies do not have specific budget allocation for targets indicated in AMTP IV, and NGOs rely on project-based funding to implement programs. PinoyPlus, for instance, lacks core-funding support for administrative and operations-related expense that will allow it to expand and sustain delivery of care and support services to PLHIV and affected families.

Lessons Learned

The effectiveness of agency-level mainstreaming is dependent on the political will of the leadership. The presence of Champions is integral in facilitating and ensuring the sustained integration of HIV and AIDS-related concerns in programming, allocation of budget, advocacy within the homefront to reduce stigma, and promotion of strong linkages between agency interventions and the national response.

Tapping the experiences, expertise and network of PNAC members through collaborative activities helps in strengthening or building the capacity of the agency or organization in implementing sustainable HIV and AIDS response.

Agency mandate is not sufficient to generate outputs and outcomes for HIV and AIDS response. PNAC members need technical assistance and guidance on how to identify measurable targets based on their understanding of their mandates, develop a workplan according to their “deliverables”, and monitor and evaluate their performance against these parameters.

The Council’s inability to take advantage of the findings of the Capacity Assessment Project or Organizational Development (OD) study have constrained its capacity to improve governance of the national response and management of the Secretariat. In retrospect, the members perceived that the OD study should have been used for self and group reflection towards greater improvement of PNAC’s programs, interpersonal relationships and sustainable operations.

Collective marketing and promotion of AMTP by the PNAC members is highly necessary to ensure that HIV and AIDS response will be harmonized and realized at the national and local levels. This is a good way to facilitate the effective utilization of AMTP objectives, strategies, activities and targets by donors, NGOs, CBOs, business sector, government agencies and other stakeholders in HIV and AIDS programming, implementation of interventions, budget allocation, and monitoring and evaluation.
MOVING FORWARD

“In June 2006, the UN General Assembly made a commitment to the goal of universal access to HIV prevention, treatment, care and support. The declaration commits UN member states to ‘pursuing all necessary efforts to scale up nationally driven, sustainable and comprehensive responses to achieve broad, multi-sectoral coverage for prevention, treatment, care and support, with full and active participation of people living with HIV, vulnerable groups, most affected communities, civil society and the private sector, towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010.’”

As the central advisory body, planning and policy-making body for the comprehensive and integrated HIV and AIDS prevention and control program in the Philippines, PNAC will continue to exert its best effort to provide a strong leadership in the National Response. It will serve as a venue for intensive policy discussion between government, NGOs and community of PLHIV to ensure that policies and actions taken truly respond to HIV) and AIDs as a social development issue requiring multi-sectoral attention. To achieve our collective goal of preventing the further spread of HIV and AIDS infection and reduce the impact of the disease on individuals, families and communities, the Council Members and Secretariat commit to work for:

**TABLE 4. Recommendations for Action to PNAC**

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Proposed Course of Action</th>
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| • Increase in domestic budget allocation and spending for HIV and AIDS-related programs and interventions with the support of the Executive Branch and the President | • This includes making available the PhP 20 million approved budget as provided for in RA 8504.  
• The Secretariat will develop a workplan and budget that will serve as basis for financial projections |
| • Speedy and judicious amendment of RA 8504 and enactment of House Bill 1389 by working collaboratively with both Houses of Congress, national government agencies, NGOs, community of PLHIV and LGUs | • Lobby at Congress / invoke House of Representative focal person to liaise fast-tracking of amendments to the RA  
• Dissemination of amendments to stakeholders |
| • Improvement of existing structures of the Council and Secretariat through a programmatic approach using a Capacity Development Plan | • The findings of the OD study in 2006 will be revisited and used as a basis in developing and in implementing capacity building activities for the Council members and Secretariat, including restructuring where necessary |
| • Proactive promotion and marketing of the AMTP among the international donor agencies as parameters for programming and funding assistance | • Strengthen advocacy campaign for AMTP to local and international development partners |
| • Establishment of focal units on HIV and AIDS within the Member-government agencies that will facilitate mainstreaming of PNAC’s programs and activities, ensure budget allocation and institutionalize national response to the epidemic | • Identify permanent representatives - focal units per member organization, starting last quarter of 2009  
• Active partnership of major line agencies with sectoral representatives for effective and efficient implementation of services and interventions |
| • Enhancement and utilization of the M and E monitoring and evaluation system | • Focal points from each Member agency will be identified. Baselines, targets and performance indicators will be defined and capacity building on operating and using M and E systems will be conducted |
| • Enactment and implementation of local ordinances in areas where no initiatives have been done yet | • PNAC will provide technical support to LGUs in need of guidance and skills on policy development. Through the Secretariat, the Council will monitor the activities of LGUs on HIV and AIDS to ensure that local response is being carried out  
• In collaboration with DILG, LCP, and LPP – come up with a database of local enactments related to HIV and AIDS prevention and control and monitor implementation of the same |
| • Scaling-up of ‘good practices’ on HIV and AIDS prevention, treatment, care, and support response by NGOs | • Showcase these practices to be adopted by other LGUs and stakeholders  
• Evaluation mechanism of classification for these exceptional implementation strategies be put in place through the M and E Committee |
| • Sustainable access of PLHIV and affected families to treatment, care and support. | • Strengthen capacity of service providers and  
• Increase resources and collaboration among service providers to ensure efficient delivery of services to PLWHAs to widen coverage |

21http://www.un.org/ga/aidsmeeting2006/declaration.htm (paragraph 20)
### 2005 to 2008 Accomplishment Report:

<table>
<thead>
<tr>
<th>Components of Response</th>
<th>Activities (bullet form)</th>
<th>Target Beneficiaries (number and sector/audience by sex—Male or Female)</th>
<th>Time Frame (duration of the activity)</th>
<th>Funding and Source</th>
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| Programmes (Prevention, Treatment, Care and Support) | - Establishment of a Referral System  
- Training on HIV and AIDS  
- Projects on HIV and AIDS  
- Policies and guidelines  
- VCT in the workplace  
- Livelihood  
- Home-based care  
- Support groups organised |
| Civil Society engagement | - CSOs activities that reflect the civil society participation in: (1) policy formulation; (2) implementation and (3) monitoring  
- Activities that reflect the CSOs efforts to represent the sector’s concern to the PNAC and vice-versa  
- Activities that reflect the CSOs initiatives to develop sector empowerment |
| Mainstreaming Human Rights to include Gender Issues (Stigma and Discrimination) | - Refers to key activities that emphasised on raising the level of awareness on Gender and Human Rights of the Marginalized and vulnerable Population.  
- Presence of policy statement and programmes that address Gender and Human Rights of the Marginalized and vulnerable Population.  
- Integration of stigma reduction and mitigation of discrimination on HIV and AIDS-related activities |
2000 to 2004

- Highlight of your agency's/organisation's activities on HIV and AIDS (bullet form)

- Lessons learned (include PNAC's role in CCM for GTATM)
- Reflections as to what PNAC as a Council take on as looking forward (example ADB project on migration) – social marketing of PNAC (in case there are PNAC members involved in HIV projects)
  (bullet form)

Submitted by:

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PNAC Reporting Tool
REFERENCES

- DOH- NEC, July 2008, “Philippine HIV and AIDS Registry,” Manila, Philippines
- 5-8 November 2007, “HIV and AIDS Asia Regional Program, Regional Technical Coordination Unit. Aide Memoire CFP Scoping Mission: Philippines,”
- SNAPSHOT, HIV and AIDS in the Philippines.
- Department of Budget and Management, August 2006, FY 2007 Performance Budget of 20 Departments, Manila
- PNAC, June to July 2009, Report Matrices from all member organizations highlighting 1999-2008 accomplishments, Manila
- PNAC, February 2009, Survey answers from all member organizations, Manila
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