

Situation Analysis of Children in the Philippines



Coram International
At Coram Children's Legal Centre (CCLC)

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This report was written by Professor Dame Carolyn Hamilton, Kirsten Anderson, Ruth Barnes, Maurice Dunaiski and Sarah Henderson, with the assistance of Mohammed Sesay.

The report was commissioned by UNICEF Philippines, and written by Coram International, at Coram Children’s Legal Centre. Although this Situational Analysis covers the entirety of the Philippines, a separate Situation Analysis of Children in the Autonomous Region in Muslim Mindanao (ARMM) was commissioned by UNICEF to provide more detail on the region. This has also been written by Coram International. Coram International designed and implemented a methodology for producing the Situation Analysis, and carried out in-country data collection in the Philippines (Manila).

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A National Situation Analysis Management Steering Committee, co-chaired by Govt. Philippines (National Economic Development Authority – NEDA) and UNICEF had oversight for the development of the SitAn, and a Research Reference Group composed of external technical experts and academics were consulted throughout the process.

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Acronyms

AFP	Armed Forces of the Philippines
ALS	Alternative Learning System
APIS	Annual Poverty Indicator Survey
ARMM	Autonomous Region in Muslim Mindanao
ART	Anti-Retroviral Treatment
ASEAN	Association of Southeast Asian Nations
BIAF	Bangsamoro Islamic Armed Forces
BIFF	Bangsamoro Islamic Freedom Fighters
CAR	Cordillera Administrative Region
CCC	Climate Change Commission
CCT	Conditional Cash Transfer
CEACR	Committee of Experts on the Application of Conventions and Recommendations
CEDAW	Convention on Convention on the Elimination of All Forms of Discrimination Against Women
CHERG	Child Health Epidemiology Reference Group
CLJIP	Comprehensive Local Juvenile Intervention Program
CP	Child Protection
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
CRRP	Comprehensive Relief and Recovery Plan
CSE	Comprehensive Sexuality Education
CWC	Council for the Welfare of Children
CWD	Children with Disabilities
DBM	Department of Budget and Management
DCC	Day Care Centre
DENR	Department of Environment and Natural Resources
DepEd	Department of Education
DHS	Demographic and Health Survey
DILG	Department of the Interior and Local Government
DOH	Department of Health
DOJ	Department of Justice
DOLE	Department of Labor and Employment
DPT	Diphtheria, Pertussis and Tetanus
DPWH	Department of Public Works and Highways

DRRM	Disaster Risk Reduction and Management
DSWD	Department of Social Welfare and Development
E-BEIS	Basic Education Information System
ECCD	Early Childhood Care and Development
EPI	Expanded Program on Immunization
FDA	Food and Drug Administration
FHSIS	Field Health Service Information System
FLEMMS	Functional Literacy, Education and Mass Media Survey
GDP	Gross Domestic Product
GLASS	Global Annual Assessment of Sanitation and Drinking-Water
GSHS	Global school-based student health survey
HARP	HIV/AIDS & ART Registry of the Philippines
HDI	Human Development Index
HELP ME	Health, Education and training, Livelihood, Prevention, Protection and Prosecution, and Monitoring and Evaluation
HiB	Haemophilus Influenza type B
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
IACACP	Philippine Inter-Agency Council against Child Pornography
ICESCR	International Covenant on Economic, Social and Cultural Rights
IDP	Internally Displaced Person
IHBSS	Integrated HIV Behavioral and Serologic Surveillance
ILO	International Labour Organisation
INGO	International Non-Governmental Organization
IPs	Indigenous Peoples
IPPF	International Planned Parenthood Federation
IRR	Implementing Rules and Regulations
JMP	Joint Monitoring Plan
KP	Kalusugan Pangkalahatan
LCPC	Local Council for the Protection of Children
LDRRMC	Local Disaster Risk Reduction and Management Councils
LGBT	Lesbian, Gay, Bisexual and Transgender
LGC	Local Government Code
LGU	Local Government Unit
LIS	Learner Information System
MDG	Millennium Development Goal
MHM	Menstrual Hygiene Management
MHPSS	Mental Health & Psychosocial Support

MICS	Multiple Indicator Cluster Survey
MILF	Moro Islamic Liberation Front
MIS	Multiple Indicator Survey
MMR	Measles, Mumps and Rubella
MNLF	Moro National Liberation Front
MSM	Men who have Sex with Men
NBS-VAC	National Baseline Study on Violence against Children
NCR	National Capital Region
NDHS	National Demographic and Health Survey
NDRRMC	National Disaster Risk Reduction and Management Council
NEDA	National Economic and Development Authority
NFEP	National Filariasis Elimination Program
NGO	Non-Governmental Organization
NNC	National Nutrition Council
NNS	National Nutrition Survey
NPA	New People's Army
NSSP	National Sustainable Sanitation Plan
OCD	Office of Civil Defence
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
ODA	Official Development Aid
OFW	Overseas Filipino Worker
OOP	Out-of-pocket Payments
OPARR	Office of the Presidential Assistant for Rehabilitation and Recovery
OPV	Oral Polio Vaccine
PCW	Philippine Commission on Women
PDEA	Philippines Drug Enforcement Agency
PDP	Philippine Development Plan
PhP	Philippine Peso
PHS	Philippines Health Statistics
PNP	Philippine National Police
PPA	Programmes, Projects and Activities
PPAN	Philippine Plan of Action for Nutrition 2017-2022
PSA	Philippines Statistics Authority
PTA	Parent Teacher Association
RA	Republic Act
RDRRMC	Regional Disaster Risk Reduction and Management Councils
RHA	Reproductive Health Act

SDG	Sustainable Development Goal
SES	Socio-economic status
SHIELD	Strategic helpdesks for Information, Education, Livelihood and other Departmental Interventions
SitAn	Situational Analysis
STI	Sexually Transmitted Infections
TB	Tuberculosis
THE	Total Health Expenditure
TVET	Technical and Vocational Education and Training
UNAIDS	United Nations Programme on HIV and Aids
UNCRC	United Nations Convention on the Rights of the Child
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session
UNICEF EAPRO	UNICEF East Asia and Pacific Regional Office
UNICEF	United Nations Children's Fund
UPR	Universal Periodic Review
USD	United States Dollars
VAC	Violence against Children
VAD	Vitamin A Deficiency
VAWC	Violence against Women and Children
WASH	Water and Sanitation Health
WHO	World Health Organization
YAFS	Young Adult Fertility Surveys

1. Introduction

1.1. Purpose and aims

The purpose of this report is to present a comprehensive assessment and analysis of the situation of children in the Philippines, and to provide an evidence base to inform decision-making by governmental and non-governmental bodies whose duty or role, whether statutory or non-statutory relates to children. In particular, this situational analysis is intended to contribute to the development of programmes and strategies to implement, protect, respect and fulfil the rights of children in the Philippines.

The specific aims of this Situation Analysis (SitAn) are as follows:

- To improve the understanding of all stakeholders of the current situation of children's rights in the Philippines, and the causes of shortfalls and inequities, as the basis for developing recommendations for stakeholders to strengthen children's rights;
- To support national planning and development processes including influencing policies, strategies, budgets and national laws to contribute towards establishing an enabling environment for children that adheres to human rights principles, particularly in regard to universality, non-discrimination, participation and accountability;
- To contribute to national research on disadvantaged children and to foster and support knowledge generation with stakeholders; and
- To strengthen the knowledge base to enable assessment of the contribution of development partners, including UNICEF and the UN, in support of national development goals.

This SitAn report focuses on the situation of children (persons aged under 18 years old), adolescents (aged 10–19) and, to a limited extent, youth (aged 15–24).¹ In addition, an assessment and analysis of the situation relating to women is included, to the extent that it directly relates to outcomes for children (for example, regarding maternal health).

1.2. Conceptual framework

The conceptual framework is grounded in the relationship between child outcomes and the immediate, underlying and structural determinants of these outcomes. A rights-based approach was adopted for conceptualising **child outcomes**, which are presented in this SitAn according to rights categories contained in the UN Convention on the Rights of the Child (CRC). Child outcomes are therefore grouped into: Health; Nutrition; WASH ('survival rights'); Education ('development rights'); Child Protection; and Social Protection ('protection rights').

The aim of the **child outcomes assessment** component of this SitAn was to identify trends and patterns in the realisation of children's rights and key international development targets; and any gaps, shortfalls or inequities in the realisation of these rights and targets. The assessment employed an equity approach, and highlighted trends and patterns in outcomes for groups of children, identifying and assessing disparities in outcomes according to key identity characteristics and

¹ These are the age brackets used by UN bodies and agencies for statistical purposes without prejudice to other definitions of 'adolescence' and 'youth' adopted by Member States.

background circumstances (e.g. gender, geographic location, socio-economic status, age, or disability).

A number of analytical techniques were employed in order to **analyse** immediate, underlying and structural causes of child outcomes. These included:

- **‘Causality analysis’**: seeking to uncover and understand the root or original causes of certain effects. This entailed examining the *immediate, underlying* and *structural* causes of gaps and shortfalls in realising child rights. The analysis included a participatory causality analysis of several key priority deprivations in each sector area, and an analysis of key structural barriers or bottlenecks that cut across the different sectors (see below for further details).
- **Bottlenecks and barriers analysis**: A structured analysis of the bottlenecks and barriers that children/ groups of children face in the realisation of their rights, with reference to the critical conditions/determinants² (quality; demand; supply and enabling environment) needed to realise equitable outcomes for children);

The analysis is also informed by:

- **Role-pattern analysis**: The identification of stakeholders responsible for/best placed to address any shortfalls/inequities in child rights outcomes; and
- **Capacity-gap analysis** to understand the capacity constraints (e.g. knowledge; information; skills; will/motivation; authority; financial or material resources) on stakeholders who are responsible for /best placed to addressing the shortfalls/inequities.

The analysis was deliberately risk-informed and took an equity approach. An **equity approach** seeks to understand and address the root causes of inequality so that all children, particularly those that suffer the worst deprivations in society, have access to the same resources and services necessary for their survival, growth and development.³ In line with this approach, the analysis included an examination of gender disparities and their causes, including a consideration of the relationships between different genders; relative access to resources and services; gender roles; and the constraints faced by children according to their gender.

A **risk-informed analysis** requires an analysis of disaster and climate risks (namely, hazards; areas of exposure to the hazard; and vulnerabilities and capacities of stakeholders to reduce, mitigate or manage the impact of the hazard on the attainment of children’s rights). This is particularly relevant to the Philippines where climate change and other disaster risks exist, including natural disasters and complex emergencies, including armed conflict. A risk-informed analysis also includes an assessment of gender and the vulnerabilities of particular groups of children to disasters, armed conflict and climate risks.

A rights-based framework was developed for measuring child outcomes and analysing role-patterns, barriers and bottlenecks. This incorporates the relevant rights standards and development targets (in particular, the Sustainable Development Goals — SDGs) in each of the child outcome areas. This is set out briefly below.

Table 1.1 – Assessment and analysis framework by outcome area

² Based on the 10 critical determinants outlined in Table 3 on page 20 of UNICEF’s SitAn Procedural Manual

³ UNICEF NYHQ, Re-focusing on Equity: Questions and Answers, November 2010, 4

Health	The assessment and analysis of children’s health is framed according to key standards in the Convention on the Rights of the Child (CRC) (particularly the rights to life, survival and development and to health), the SDGs (particularly SDG 3 on ensuring healthy lives and promoting well-being) and the related ‘Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030)’.
Nutrition	Outcomes in the area of nutrition are assessed according to the six thematic areas described in the WHO’s Global Nutrition Targets (child stunting; anaemia; low birth weight; obesity/over-weight; breastfeeding; and weighting). As per UNICEF’s ‘Conceptual Framework of the Determinants of Child Under-nutrition’ ⁴ , an analysis of the underlying causes of malnutrition necessitates a multifaceted approach, including analysis of a range of fundamental rights (e.g. the right of the child to life, survival and development; food; health; adequate standard of living; and care and protection), as well as SDG 2 (end hunger, achieve food security, improve nutrition and promote sustainable agriculture) as the cornerstone of the conceptual framework for this section.
WASH	The assessment and analysis of WASH includes the following interdependent issues: (i) water; (ii) sanitation and (iii) hygiene, using SDG 6 (ensure availability and sustainable management of water and sanitation for all) and the rights to water and sanitation as key measurements. Following the approach of the Committee on Economic, Social and Cultural Rights, ⁵ OHCHR ⁶ and the Independent Expert on the Issue of Human Rights Obligations Related to Access to Safe Drinking Water and Sanitation, ⁷ the assessment and analysis of the rights to water and sanitation addresses the following factors: availability; quality; accessibility; acceptability; and affordability.
Education	Educational outcomes are measured according to the right to education set out in Articles 28 and 29 of the CRC and Article 13 of International Covenant on Economic, Social and Cultural Rights (ICESCR); in addition, the key features of the Comprehensive School Safety Framework is utilized. ⁸ The assessment and analysis, therefore, covers the following interrelated and essential features of the right to education: availability; accessibility; acceptability; and adaptability. ⁹ This approach is used with regard to all tiers of education: early childhood care and education; primary education; all forms of secondary education; and higher education, including vocational training.
Child protection	The child protection analysis adopts UNICEF’s definition of ‘child protection’, namely, the prevention and response to violence, exploitation and abuse against children. It covers the situation relating to all forms of violence against children (physical; psychological; sexual; neglect; and exploitation) in all settings (workplace; home; institutions; community), and related prevention and response interventions. ¹⁰ This includes consideration of birth registration; identification, reporting, assessment, care and follow-

⁴ UNICEF’s Approach to Scaling-Up Nutrition, June 2015, p 9

⁵ CESCR GC No. 15

⁶ Office of the United Nations High Commissioner for Human Rights, Fact Sheet No. 35

⁷ Realising the Human Rights to Water and Sanitation: a Handbook by the UN Special Rapporteur Catarina de Albuquerque, *Legislative, regulatory and policy frameworks*

⁸ UNISDR and GADRRRES, A global framework in support of The Global Alliance for Disaster Risk Reduction and Resilience in the Education Sector and The Worldwide Initiative for Safe Schools, January 2017, retrieved from http://gadrrres.net/uploads/images/pages/CSS_Booklet_2017-updated.pdf on 24 January 2017

⁹ UN Committee on Economic, Social and Cultural Rights, General Comment No. 13 (1999), The Right to Education, 8 December 1999, E/C.12/1999/10 (CESCR GC No. 13 [1999]), para 6

¹⁰ UNICEF, Child Protection Information Sheet: What is Child Protection, accessed via https://www.unicef.org/protection/files/What_is_Child_Protection.pdf on 23 January 2016

	up of children at risk/who have suffered harm; and the treatment of children within in the criminal justice system.
Social protection	Social protection is framed according to UNICEF’s definition: “the set of public and private policies and programmes aimed at preventing, reducing and eliminating <i>economic</i> and <i>social</i> vulnerabilities ¹¹ to poverty and deprivation.” ¹² Numerous rights standards and development targets are relevant in assessing programmes aimed at reducing and eliminating vulnerability to poverty and deprivation, including in particular, the CRC right to survival and development; ¹³ ICESCR rights to social security ¹⁴ and adequate standard of living; ¹⁵ and SGD target 1 (end poverty in all its forms everywhere).

1.3. Methods and limitations

This SitAn includes a comprehensive review, synthesis and examination of available data from a variety of sources. The assessment of child outcomes relied primarily on existing datasets from household surveys, administrative data from Government Ministries and NGOs and other published reports. The authors relied on published reports of existing datasets, and did not engage in examination or analysis of raw datasets.

The analytical techniques used for the analysis phase required a synthesis and analysis of secondary data and literature, including large- and small-scale studies and reports. It also included a mapping and analysis of relevant laws, policies, and Government strategy documents.

In-country data collection was carried out in Manila to gather additional contextual information and primary qualitative data to inform the analysis of causes and determinants of child rights shortfalls in the Philippines. In-country data collection included a series of in-depth key informant interviews with a range of targeted Government representatives, UN organizations and NGOs.

The research also involved a structured participatory causality analysis workshop involving 70 stakeholders from across a range of Government institutions, UN and non-government organisations. The causality analysis involved the selection of a key deprivation/rights shortfall in the following sectors: health; WASH/nutrition; education; child protection; and social protection. Stakeholders were involved in a series of structured small-group workshops to map the immediate, underlying and structural causes of the key deprivation, and identify associated equity issues (identifying the groups of children most at risk of experiencing the deprivation, and how the causes impact on these particular groups of children). They then proceeded to identify common, cross-cutting structural causes among all of the selected deprivations and reflect these structural causes in a revised causality map. The causality maps and key informant interviews have been integrated into the report’s narrative where applicable.

The findings from a previous draft of the report were presented at a series of validation workshops and focus group discussions in August 2017. A workshop was carried out with 100 key stakeholders from Government, civil society and academia at the national level and from the Autonomous Region

¹¹ UNICEF distinguishes between the two as follows: ‘[p]overty reflects current assets or capabilities, while vulnerability is a more dynamic concept concerned with the factors that determine potential future poverty status. Vulnerability considers both an individual’s current capabilities and the external factors that he/she faces, and how likely it is that this combination will lead to changes in his/her status.’

¹² UNICEF, Social Protection Strategic Framework, p 24

¹³ CRC, article 6

¹⁴ ICESCR, article 9

¹⁵ ICESCR, article 11

in Muslim Mindanao (ARMM). The workshop included a discussion, feedback and validation on the report's key findings in small sector workgroups and presentations to plenary. A separate validation workshop was carried out with 60 members of staff at UNICEF Philippines. In addition, two focus group discussions were conducted in Cotabato City with representatives from the ARMM regional government and UNICEF staff members based at the field office in Cotabato. Feedback from the validation exercises have been integrated into this report.

One of the limitations of the methodology is the lack of recent, quality data in relation to some of the areas covered by the analysis. Gaps in the availability of up-to-date, quality data are noted throughout the report. The analysis of causes and determinants of rights shortfalls relied heavily on existing published reports and, therefore, some areas in the analysis had not been the subject of robust and recent research, again, gaps are highlighted as necessary.

1.4. Governance and validation

The development and drafting of this SitAn has been guided by a Management Steering Committee, co-chaired by the Government of the Philippines (through the National Economic Development Authority – NEDA) and UNICEF. The membership of the Committee was made up of government oversight and child focused agencies included the Office of the Cabinet Secretary; the Department of Budget and Management (DBM); the Department of Social Welfare and Development (DSWD); and the Office of the Presidential Adviser on the Peace Process.

A Research Reference Group, composed of external technical experts and academics, who along with UNICEF Philippines staff, were consulted at key milestones in the development of the SitAn.

The report was also the subject of a validation exercise with targeted key stakeholders who work on children's issues across a range of Government sectors, UN institutions and NGOs (see section above). The purpose of this exercise was to validate the findings and identify any gaps and inconsistencies before finalisation of the report.

2. Context

Table 2.1. Map of the Philippines



Source: Geology.com

2.1. Geography and demographics

The Philippines is an archipelago of 7,107 islands situated in South East Asia in the Western Pacific Ocean. It has a total land area of 300,000 km² and, with a population of 100.98 million (2015),¹⁶ is the twelfth most populous country in the world. The three largest groups of islands – Luzon, Mindanao and Visayas – make up 47 per cent, 34 per cent and 19 per cent of the total land area respectively.¹⁷

The country has 18 administrative regions, the most populous of which is Region IV-A (CALABARZON) which has 14.41 million people according to the 2015 census.¹⁸ There are 33 highly urbanized cities in the Philippines, four of which have populations of over 1,000,000, including the capital city of

¹⁶ Highlights of the Philippine Population 2015 Census of Population”, Philippine Statistics Authority, May 19, 2016, <http://psa.gov.ph/content/highlights-philippine-population-2015-census-population>

¹⁷ 2013 Functional Literacy, Education and Mass Media Survey (FLEMMS) Final Report, Chapter 1

¹⁸ “Highlights of the Philippine Population 2015 Census of Population”, Philippine Statistics Authority, May 19, 2016, <http://psa.gov.ph/content/highlights-philippine-population-2015-census-population>

Manila. Metro Manila (the National Capital Region – NCR), along with the urbanized areas surrounding it (Bulacan, Cavite, Laguna, Rizal and Batangas), has a population of just over 24 million, making it one of the largest and most populous urban centres in the world.¹⁹

According to the most recent census, which took place in 2015, the population of the Philippines was 100,981,437,²⁰ up from a total population of 92,335,113 in 2010 and 88,566,732 in 2007.²¹ In the 2010 census, 50.5 per cent of the population were male and 49.5 per cent were female.²² The population increased by 1.72 per cent annually between 2010 and 2015²³ and was predicted to grow to 103.9 million by the end of 2016.²⁴

The Philippines has a large population of children and young people. In 2010, there were 36,615,596 children aged 0–17 in the population which is 39.7 per cent of the total population. About 18,862,159 (51.5 per cent) were male and 17,753, 437 (48.5 per cent) were female.²⁵ Unfortunately, the 2015 census data available does not contain figures on the child population. The fertility rate in the Philippines has been steadily dropping, from 6.0 children per woman in 1973 to 3.5 in 2003 and 2.94 in 2016.²⁶

The major languages spoken in the Philippines are Filipino and English, both of which are used as official languages. There are a number of dialects in the Philippines. According to the 2010 census 24.44 per cent of households have Tagalog as their mother tongue, 11.44 per cent have Bisaya or Binisaya as their mother tongue and 9.91 per cent have Cebuano as their mother tongue.²⁷ The major religion is Christianity (92 per cent) with approximately 80 per cent of the population Roman Catholic. The second major religion is Islam (5 per cent) with the majority of adherents living on the island of Mindanao²⁸ (The census and other data collected by the Philippines Statistics Authority does not appear to be disaggregated by ethnicity, language or religion).

The population of the Philippines is ethnically diverse, and there are estimated to be 14–17 million Indigenous Peoples (IPs) across the Philippines, belonging to 110 ethno-linguistic groups.²⁹ They are mainly concentrated in rural areas of Northern Luzon (Cordillera Administrative Region, 33 per cent) and Mindanao (61 per cent), with some groups also located in the Visayas area (for more information on the unique vulnerability of Indigenous children, see chapter 3).

¹⁹ Demographia, *World urban areas*, 13th edition (2017), p. 18, available at: <http://www.demographia.com/db-worldua.pdf>

²⁰ 2015 Population Census, Philippine Statistics Authority

²¹ “Highlights of the Philippine Population 2015 Census of Population”, Philippine Statistics Authority, May 19, 2016, <http://psa.gov.ph/content/highlights-philippine-population-2015-census-population>

²² “Highlights of the Philippine Population 2015 Census of Population”, Philippine Statistics Authority, May 19, 2016, <http://psa.gov.ph/content/highlights-philippine-population-2015-census-population>

²³ “Highlights of the Philippine Population 2015 Census of Population”, Philippine Statistics Authority, May 19, 2016, <http://psa.gov.ph/content/highlights-philippine-population-2015-census-population>

²⁴ “Philippine Economy Posts 6.6 Percent GDP Growth in the Fourth Quarter of 2016; 6.8 percent in 2016”, Philippine Statistics Authority, January 26, 2017, <http://psa.gov.ph/nap-press-release>

²⁵ 2010 Population Census, Philippine Statistics Authority

²⁶ <http://data.worldbank.org/indicator/SP.DYN.TFRT.IN?locations=PH> accessed 5th May 2017.

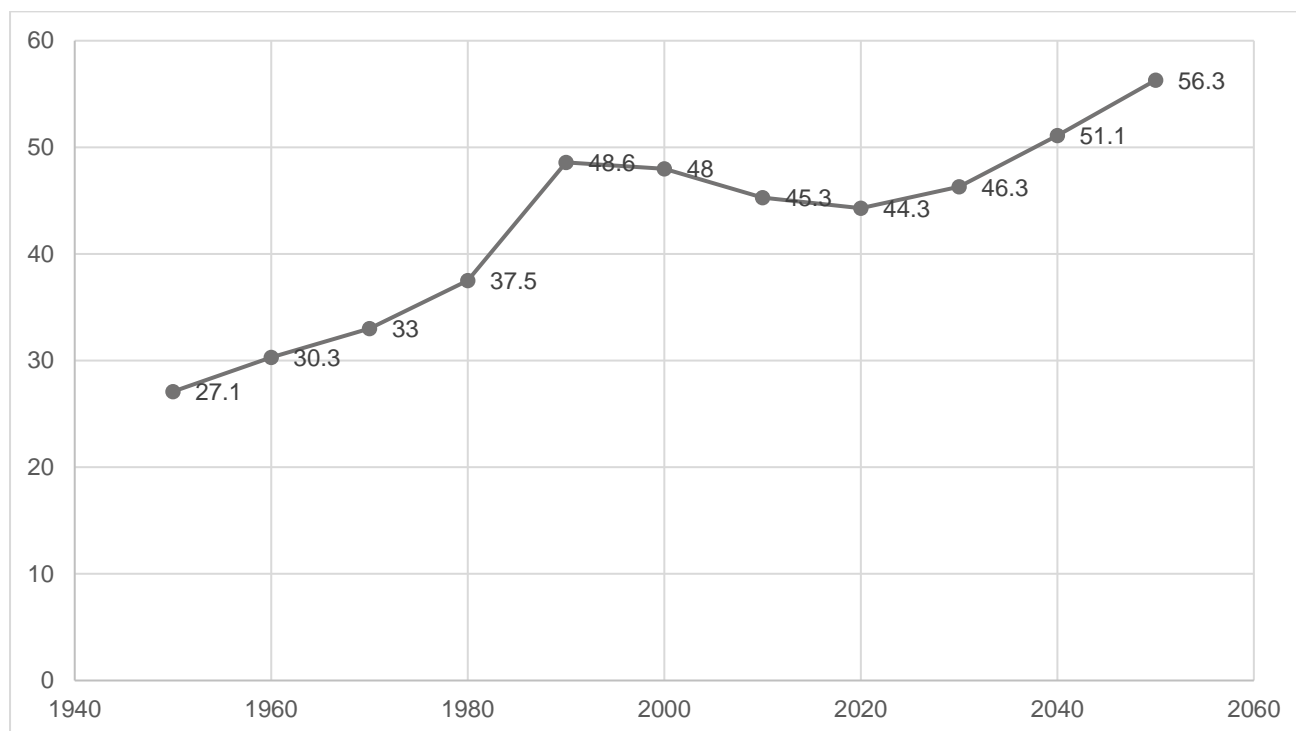
²⁷ Table 5.21, Demography, Philippine Yearbook 2013, Philippine Statistics Authority

²⁸ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF, p 18

²⁹ UNDP, *Fast Facts: Indigenous Peoples of the Philippines* (2013), available at: http://www.ph.undp.org/content/philippines/en/home/library/democratic_governance/FastFacts-IPs.html. Note that population statistics on Indigenous Peoples do not appear to be published with the Census data (which was last carried out in 2015).

The Philippines has a rapidly urbanizing population, with the proportion of the population living in urban areas increasing from 27.1 per cent in 1950 to a predicted 56.3 per cent by 2050.

Table 2.2. Proportion of the population living in urban areas, 1950 - 2050



World Urbanization Prospects 2014, UN Department of Economic and Social Affairs, p208-209

The World Urbanization Prospects Report from the UN Department of Economic and Social Affairs estimated the urban population of the Philippines in 2014 to be 44.4 per cent. While this represents a decrease from 1990 (when 48.6 per cent of the population were living in urban areas), the report predicted that the urban population would increase and reach 56.3 per cent by 2050.³⁰

The average annual rate of change of the rural population in the Philippines decreased from 2.45 per cent between 1990 and 1995 to 2.03 between 2010 and 2015. This decrease is predicted to continue and to become a negative change between 2040–2045.³¹

The Philippines is located on the Pacific Ring of Fire, making it vulnerable to earthquakes, cyclones and volcanic hazards:³² between 2000 and 2017, it experienced 273 disasters caused by natural hazards.³³ It is also ranked among the top 5 countries most vulnerable to climate change impacts.³⁴

Spotlight issue: International and internal migration

³⁰ World Urbanisation Prospects 2014, UN Department of Economic and Social Affairs, p208-209

³¹ World Urbanisation Prospects 2014, UN Department of Economic and Social Affairs, p268-269

³² About the Philippines, UNDP, <http://www.ph.undp.org/content/philippines/en/home/countryinfo.html>.

³³ Data accessed at http://emdat.be/emdat_db/ on 07 July 2017.

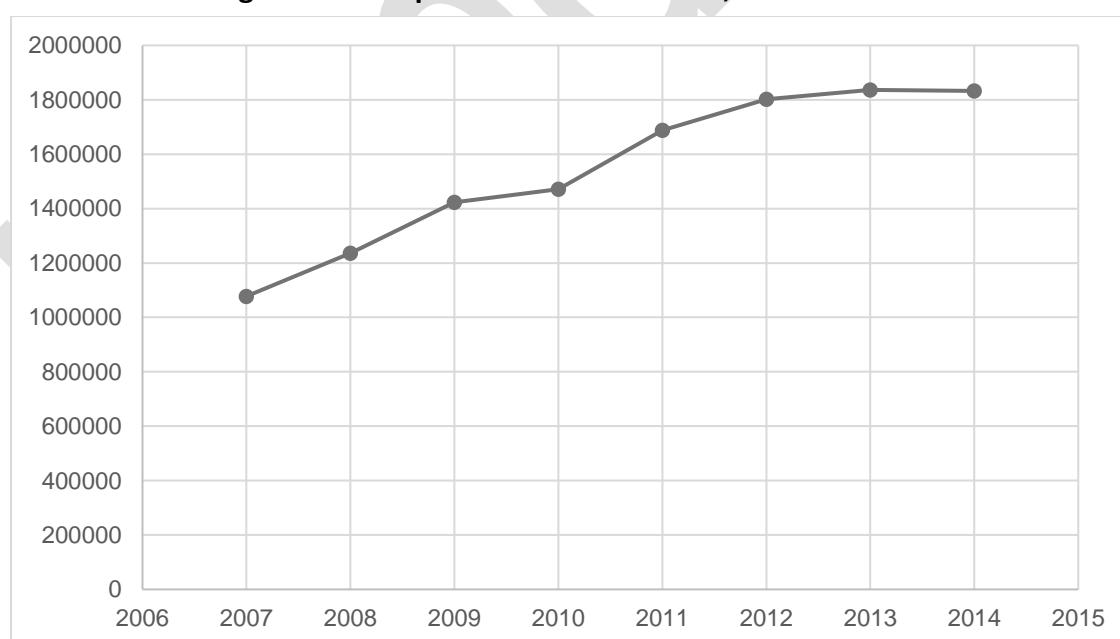
³⁴ Global Climate Risk Index 2015, Germanwatch.

Migration, both within and outside of the Philippines, has had a range of impacts on children and young people. The culture of international migration in particular, which has been promoted by the Philippines Government since the 1970s as a means of increasing labour market opportunities for Filipino workers,³⁵ has shaped the experiences of the many children who have been ‘left behind’ by migrant worker parents. International migration has been institutionalized within the Philippines and it has come to be recognized as an important livelihood strategy for many families. In the past few decades, a comprehensive institutional and legal framework has been developed, governing all stages of the migration process, from pre-departure to return and reintegration. The Migrant Workers and Overseas Filipinos Act was adopted in 1995 (and has been amended several times, most recently in 2010). It includes a range of provisions to ensure the protection of Filipino workers overseas. The legal and policy framework is implemented primarily by two Government agencies – the Philippine Overseas Employment Administration and the Overseas Workers Welfare Administration.

According to the latest data from the Commission for Overseas Filipino Workers, there were an estimated 2.4 million Overseas Filipino Workers in 2015:³⁶ 97 per cent were engaged in contract work, with one third of this total involved in unskilled work.³⁷ It has been estimated that, in total, 11 million persons born in the Philippines are living abroad.³⁸

The number of Overseas Filipino Workers has been increasing in recent years, from 1.07 million in 2007, as illustrated in the graph below.

Table 2.3. Migration of Filipino Workers Overseas, 2006 - 2015



³⁵ Asis, M.M.B, Migration Policy Institute, *The Philippines: Beyond labour migration, toward development and (possibly) return* (2017), available at: <https://www.migrationpolicy.org/article/philippines-beyond-labor-migration-toward-development-and-possibly-return>

³⁶ Philippines Statistics Authority, *Survey on Overseas Filipino Workers* (2016) (including Filipinos who worked abroad anytime during the period April to September 2015).

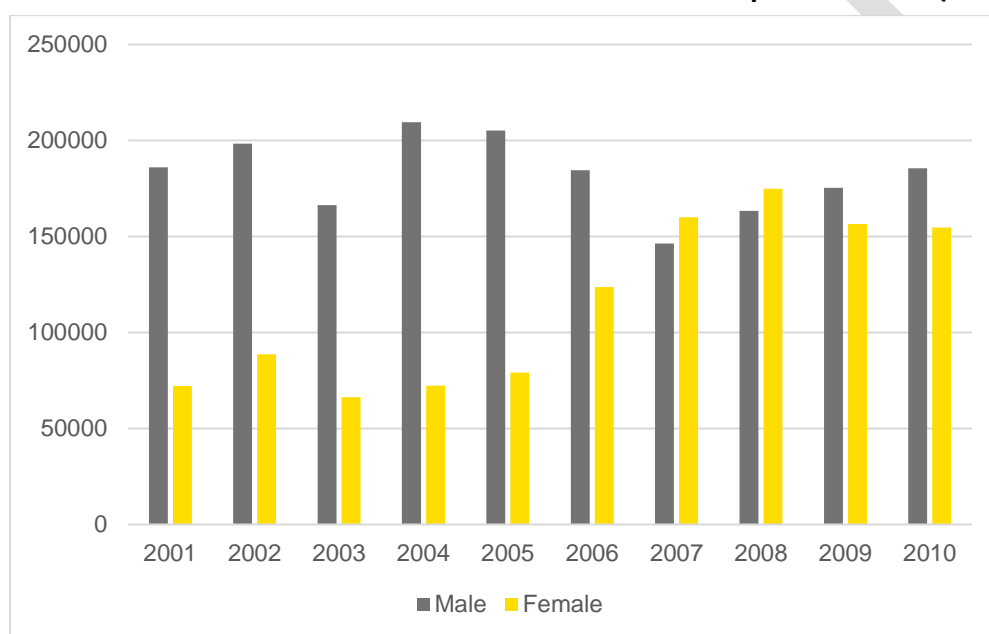
³⁷ Philippines Statistics Authority, *Survey on Overseas Filipino Workers* (2016) (including Filipinos who worked abroad anytime during the period April to September 2015).

³⁸ UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development*, p. 80.

Source: UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development* (data obtained from Philippines Overseas Employment Administration)

In contrast to the trend in other countries in the Asia-Pacific region, women make up slightly more overseas migrants than men (51.1 per cent, compared to 48.9 per cent³⁹), and the majority of overseas migrants are between the ages of 25 and 34 years (48 per cent).⁴⁰ There has been a notable trend toward the 'feminisation' of international migration in the Philippines, with the proportion of migrants who are female increasing significantly since 2001.

Table 2.4. Number of male and female Overseas Filipino Workers (OFWs), 2001 – 2010



International migration has become a recognised, established livelihood strategy for many households and individuals in the Philippines, and “there is no doubt that, on average, families benefit materially from having a member who is an international migrant worker.”⁴¹ It has been reported that, in 2006, 24 per cent of households in the Philippines received contributions from overseas (mainly remittances). Between April and September 2015, OFWs sent an estimated 180.3 million pesos home (mostly in the form of cash sent home – 135.6 billion pesos, or brought home – 37.3 billion pesos).⁴² Remittances have reportedly decreased the incidence of poverty in recipient households and provided income to improve the health and education of children in these households.⁴³ A study conducted in 2008 found that families of migrants tend to have a greater ability to buy food, send children to better schools and have an improved ability to buy school materials and

³⁹ Philippines Statistics Authority, *Survey on Overseas Filipino Workers* (2016) (including Filipinos who worked abroad anytime during the period April to September 2015).

⁴⁰ Philippines Statistics Authority, *Survey on Overseas Filipino Workers* (2016) (including Filipinos who worked abroad anytime during the period April to September 2015).

⁴¹ UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development*, p. 48.

⁴² Philippines Statistics Authority, *Survey on Overseas Filipino Workers* (2016)

⁴³ UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development*, p. 48.

clothing.⁴⁴ They have also provided a cushion against economic shocks caused by crises or disasters: for example, remittances increased during the Asian financial crisis of 1997 and in the aftermath of Typhoon Haiyan (locale name: Yolanda) in November 2013.⁴⁵

Despite these economic benefits, the social costs of international migration, and particularly the effect on children, are being increasingly highlighted, especially among families of the many women who migrate out of the Philippines to pursue work opportunities. While most research has focused on the economic impact of international migration, several studies have explored the social impact. A study carried out in 2013 by UN Women found that migration can cause disruption in the family structure through a 'care drain' or 'emotional gap' caused by the departure of a parent.⁴⁶ This is particularly the case when women migrate: social expectations concerning gender roles dictate that women are primarily responsible for care functions, including child rearing duties. These expectations mean that a "major reconfiguration of family arrangements for managing the household and childcare' often occur when mothers migrate". Where the husband or partner left behind is unwilling to assume a care-giving role, extended family may perform this function (typically grandparents/female siblings).⁴⁷ It can also lead to broken families, as some spouses find another partner while the husband or wife is away.⁴⁸

Migration by a parent has also been found to affect the social behaviour of children. Studies have found that Filipino children with absent mothers showed poorer social adjustment and impeded psychological development, and often bore the pressure of assuming a caring role for other family members (e.g. young siblings), particularly in the case of girls.⁴⁹ The study by UN Women in 2013 found that teenagers of migrant parents who were involved in the study were disposed to engaging in risky behaviours (joining gangs, drug use, drinking alcohol etc.) as a result of spending considerable time away from the home among friends and the difficulties faced by a sole parent in providing adequate supervision.⁵⁰

The volume of migration out of the Philippines may also have less direct impacts on children and families. While the social and economic impacts of migration on children at the macro levels have not been widely explored, it is likely that the massive migration of key professionals, such as nurses, IT specialists and engineers to other countries, has been a drain on human resources in the Philippines making it more difficult for bodies that are required to deliver basic services to children and families (health care, infrastructure development etc.).⁵¹ It has also been reported that the 'culture of migration' acts as a disincentive for children to complete their education in the Philippines, as their plan is to work abroad in jobs that do not require education.⁵²

⁴⁴ Rosemarie Edillon, UNICEF, *The effects of parents' migration on the rights of children left behind* (2008)

⁴⁵ UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development*, p. 48. Though it was found in a study carried out in 2008 that a majority of OFW children were not protected from economic shocks, due to very few having liquid assets and access to private insurance.

⁴⁶ UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁴⁷ UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁴⁸ Center for Migration Studies (2007), in UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁴⁹ Battistella and Conaco (1996) and Tharan (2009) in UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁵⁰ UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁵¹ UN Women Asia Pacific Regional Office, *Valuing the social cost of migration: An exploratory study* (2013).

⁵² UNESCAP, *Asia-Pacific migration report 2015: Migrants' contribution to development*, p. 80.

Movement of persons *within* the Philippines is another dimension of migration which impacts on children at different levels. Unfortunately, there is a very limited amount of nationally representative data on internal migration patterns. However, according to the most recent Census of Population and Housing (2010), around 2.74 million Filipinos changed their place of residence within the last five years, which suggests that the prevalence of internal migration in the Philippines stands at around 3.3 per cent of the total population (aged 5 years and older).⁵³ While the data is not disaggregated by age group or gender, other studies based on older data have found that internal migration is largely a youth phenomenon. For instance, a 2004 study on rural-urban migration flows based on 2000 Census data found that 10 per cent of youth (aged 15–29) in the less urbanized areas and 19 per cent in the NCR (Metro Manila) were inter-provincial migrants. They also used 2000 Census data to show that the age brackets 15–19, 20–24, and 25–29 (i.e. ‘youth’) make up the overwhelming majority of the internal migrant population, especially in the highly urbanized areas.⁵⁴ Mirroring the trends in international migration, young female migrants appear to account for the majority of internal migrants, particular among rural to urban migrants, which is the predominant internal migration pattern within the Philippines more generally.⁵⁵

Internal movement is likely to have much the same impact on children left behind by a migrant parent as it does in the case of international migration. The impacts of internal migration on the young persons who migrate have not been subjected to extensive research. However, one small-scale qualitative study carried out in Greater Manila, Ifugao and Mariveles in 2016 found that migrants experienced a range of impacts, both positive and negative, following migration. While migrants tended to express that migration was, overall, an empowering experience that had helped them achieve independence and allowed them to provide financial support to their families back home, a number of challenges were also identified. In particular, migrants reported a lack of access to benefits and protections in the workplace, particularly in informal sectors or in contract work; the need to accept jobs with poor pay and conditions in order to meet high living costs; vulnerability, isolation and social exclusion in new environments; exposure to sexual exploitation and compromised access to social services owing to feelings of insecurity, illegitimacy and lack of confidence in new environments.⁵⁶

In addition, internal migration has had a number of less direct impacts on children and young people at the macro level. Internal migration is reportedly fuelling rapid and unplanned urbanization and entrenching disparities in economic development across the country. This concern was represented to the United Nations Commission on Population and Development several years ago, where it was noted that the 2000 Census showed that 48 per cent of Filipinos were living in urban areas, compared to 37 per cent more than two decades ago. It is estimated that, by 2030, approximately 8 in 10 Filipinos will be living in a city.⁵⁷ The lack of development of responsive and effective policy interventions and strategic direction on internal migration, along with the lack of robust data on

⁵³ Note that this figure includes long-distance (inter-provincial) and short distance (intra-provincial) movement.

⁵⁴ Gultiano, S. and Xenos, P. *Age-structure and urban migration of youth in the Philippines* (2004) CICRED Seminar.

⁵⁵ Gultiano, S. and Xenos, P. *Age-structure and urban migration of youth in the Philippines* (2004) CICRED Seminar; Asis, M. and Battistella, G. (2013), UNICEF Philippines, *The Filipino youth and the employment nexus* (2013).

⁵⁶ Anderson, K, Apland, K, Dunaiski, M and Yarrow, Y, *Women in the wind: analysis of migration, youth economic empowerment and gender in Vietnam and the Philippines* (2017).

⁵⁷ Philippine Statement to the Commission on Population and Development, on its 46th session, 22–26 April 2013, presented by Commission on Filipinos Overseas,

http://www.un.org/en/development/desa/population/pdf/commission/2013/country/Agenda%20item%204/Philippines_Item4.pdf

internal migration patterns and flows is likely to have compounded the negative impacts of this rapid urbanization, which has implications for Government strategic planning and service delivery.

2.2. Socio-economic context

The Philippines is a lower middle-income country⁵⁸ with a fast-growing economy. According to a recent World Bank report (2017), it is the tenth fastest growing economy in the world.⁵⁹ The country's GDP in 2015 was \$292,451 billion,⁶⁰ which grew by 6.8 per cent in 2016.⁶¹ Per capita GDP was \$2904.2.⁶² In 2017, its economy is expected to advance between 6.5 and 7.5 per cent.⁶³

According to a recent World Bank report, capital formation drove overall economic growth, supported by an expansionary fiscal policy focused on infrastructure spending, which generated construction activity.⁶⁴ Household consumption also contributed to economic growth, supported by an increase in remittances in recent years, along with a supportive environment for consumer lending, which boosted household spending power.⁶⁵ However, economic growth in the Philippines has also been constrained by a range of factors, including poor governance and weak institutions⁶⁶, as discussed in the following section.

The industrial and services sector remains strong in the Philippines and has expanded in recent years,⁶⁷ mainly in the trade, real estate and business activities and education, recreational activities and hotels and restaurants. In 2016, the services sector grew by 7.5 per cent, up from 6.8 per cent in 2015.⁶⁸ However, the agriculture sector has performed relatively poorly in recent years, declining by 1.3 per cent in 2016. This can be attributed to low investment levels, inadequate extension services and inefficient transport and logistics linkages, as well as exposure to environmental shocks.⁶⁹ The impact of El Niño, in particular, has affected the yields of palay and sugarcane in recent years.⁷⁰

This growth has led to robust net job creation, as detailed below. However, despite strong economic growth overall, the growth in human development has been very slow. According to the latest Human Development Index (HDI) report, which measures and ranks countries according to three dimensions of human development (a long and healthy life, knowledge and a decent standard of living), the

⁵⁸ World Development Indicators, World Bank: <http://data.un.org/CountryProfile.aspx?crName=PHILIPPINES>

⁵⁹ World Bank, *Global economic prospects: A fragile recovery* (2017), available at: <https://openknowledge.worldbank.org/bitstream/handle/10986/26800/9781464810244.pdf?sequence=13&isAllowed=y>

⁶⁰ <http://databank.worldbank.org/data/reports.aspx?source=2&country=PHL>; Figures in dollars are in United States dollars.

⁶¹ "Philippine Economy Posts 6.6 Percent GDP Growth in the Fourth Quarter of 2016; 6.8 Percent in 2016", January 26, 2017, <https://psa.gov.ph/nap-press-release>

⁶² <http://data.worldbank.org/indicator/NY.GDP.PCAP.CD?locations=PH>

⁶³ World Bank, *Global economic prospects: A fragile recovery* (2017), available at: <https://openknowledge.worldbank.org/bitstream/handle/10986/26800/9781464810244.pdf?sequence=13&isAllowed=y>

⁶⁴ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 2

⁶⁵ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 2

⁶⁶ Mendoz, R.U, Olfindo R., and Poco L.C.R.: Governance and Institutions in the Philippines, ASOG Working Paper 17-002, 2017.

⁶⁷ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 2

⁶⁸ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 3

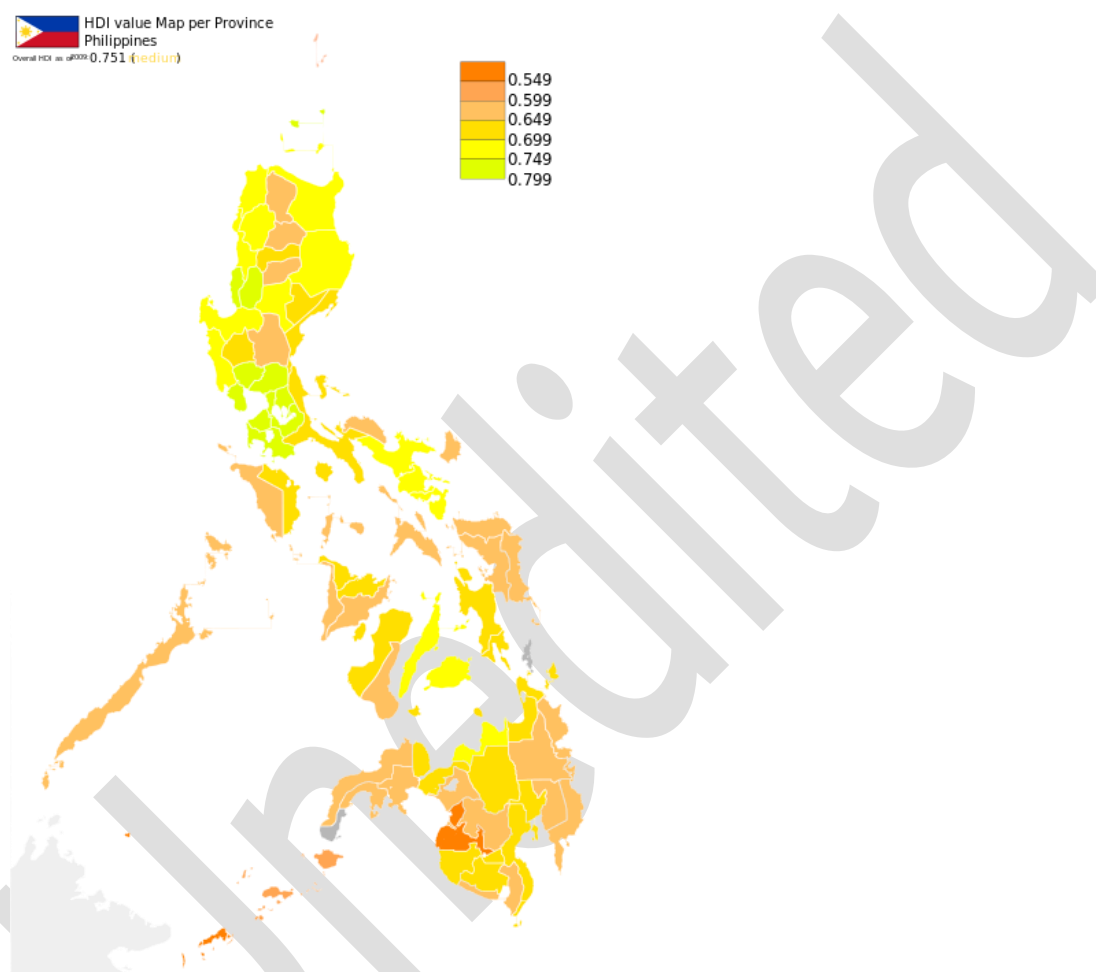
⁶⁹ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 4

⁷⁰ Socioeconomic report 2015, National Economic and Development Authority, p 8

Philippines had a HDI of 0.682 and a rank of 116 out of 188 countries.⁷¹ This placed the Philippines in the ‘medium development’ category, lagging behind its neighbours, Thailand, Indonesia and Vietnam (which has only three fifths of the per capita income of the Philippines).⁷²

Economic and human development has been very uneven across the Philippines, with stark variation in contribution to GDP by region, as shown in the map below.

Table 2.5. Human development index by province, 2009



Source: Philippine Human Development Network, *Philippine Human Development Report, Chapter 3 (2008/9)*

The three most populous regions in the country (CALABARZON–4A, National Capital Region and Central Luzon –3) account for almost two-thirds of the Philippines domestic production. In contrast, the ARMM contributed just 0.7 per cent to GDP.⁷³

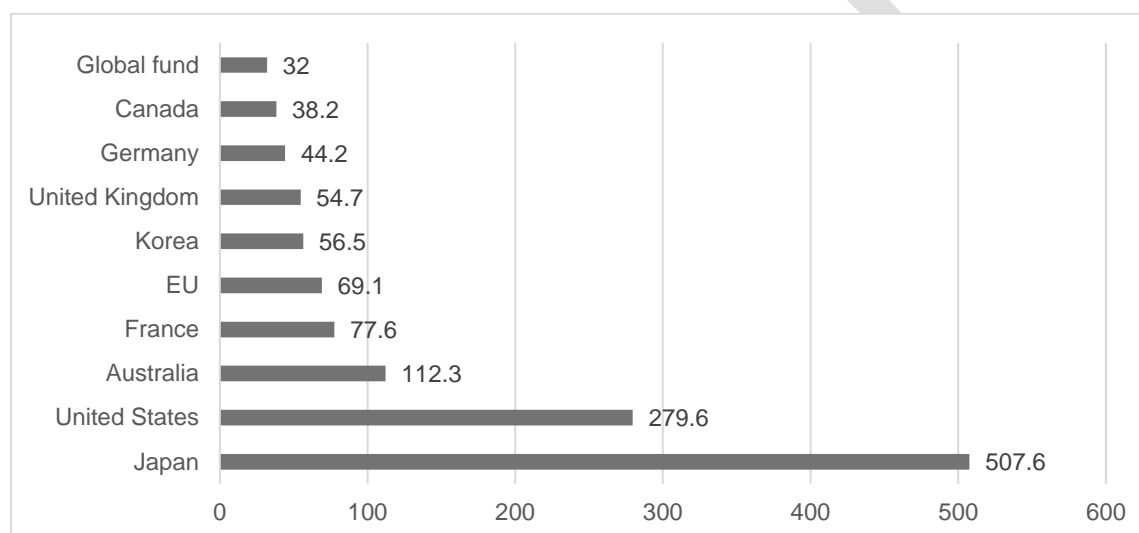
⁷¹ UNDP, *Human development report 2016*, available at: http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf

⁷² UNDP, *Human development report 2016*, available at: http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf, p. 199.

⁷³ PDP, 3-1.

The Philippines continues to receive a significant amount of Official Development Assistance (ODA). The net amount of ODA received increased from US\$ 192.1 million in 2013 to \$677.5 million in 2014, but dropped to \$515.3 million in 2015.⁷⁴ In 2014 to 2015 the Philippines received most of its ODA from Japan (\$507.6 million), followed by the United States (\$279.6 million), Australia (\$112.3 million) and France (\$77.6 million).

Table 2.6. Top 10 donors for gross ODA for Philippines, 2014–2015, USD millions



Source: OECD-DAC

The majority of bilateral ODA was received by the economic infrastructure and services sector (58.42%).⁷⁵

Development planning in the Philippines

Strategic development planning in the Philippines is led by the National Economic and Development Authority (NEDA), which is an institution chaired by the President, mandated to lead the formulation of the national and regional development plans. The current Philippine Development Plan (PDP) runs from 2017-2022, and was launched in June 2017. It is a medium-term plan, setting out the goals and strategies of the Government to meet the long-term (25 year) vision of *AmBisyon Natin* (The Philippine Dream) of “a prosperous, predominantly middle-class society where no one is poor. People live long and healthy lives and are smart and innovative” and where “the Philippines is a high-trust society where families thrive in vibrant, culturally diverse and resilient communities.”⁷⁶

The goals, strategies and targets of the PDP are grouped under the following pillars:

Malasakit (enhancing the social fabric)

⁷⁴OECD-DAC -

https://public.Tableau.com/views/OECDDACAidatag glancebyrecipient_new/Recipients?:embed=y&:display_count=yes&:showTabs=y&:toolbar=no?&:showVizHome=no

⁷⁵OECD-DAC -

https://public.Tableau.com/views/OECDDACAidatag glancebyrecipient_new/Recipients?:embed=y&:display_count=yes&:showTabs=y&:toolbar=no?&:showVizHome=no

⁷⁶ PDP, 1-1.

➤ *Ensuring people-centred, clean and efficient governance*

➤ *Pursuing swift and fair administration of justice*

➤ *Promoting Philippine culture and values*

Pagbabago (reducing inequality)

➤ *Expanding economic opportunities in agriculture, forestry and fisheries*

➤ *Expanding economic opportunities in industry and services*

➤ *Accelerating human capital development*

➤ *Reducing vulnerability of individuals and families*

➤ *Building safe and secure communities*

Patuloy na Pag-unlad (increasing growth potential)

➤ *Reaching for the demographic dividend*

➤ *Vigorously advancing science, technology and innovation*

Enabling and supportive economic environment

➤ *Ensuring sound macroeconomic policy*

➤ *Levelling the playing field through a National Competition Policy*

Foundations for sustainable development

➤ *Attaining just and lasting peace*

➤ *Ensuring security, public order and safety*

➤ *Accelerating infrastructure development*

➤ *Ensuring ecological integrity, clean and healthy environment*

Recently the President, through Executive Order No. 27, directed all Government agencies, including Local Government Units (LGUs), to implement the PDP and Public Investment Programme of 2017-2022. The Regional Offices of NEDA have also started to launch their respective Regional Development Plans.

2.2.1. Poverty⁷⁷

Despite strong economic growth, rates of poverty remain fairly high in the Philippines, and available data indicate pockets of significant and persistent poverty in some areas, suggesting that high economic growth has not reached the bottom quarter of the population. According to a recent report by the Philippine Institute of Development Studies, based on trends in performance against economic and poverty indicators, “we can say that the Philippines is consistent in two things: first, positive economic growth and second, and rather sadly, a high number of poor people.”⁷⁸

⁷⁷ A more in-depth analysis of child poverty is set out in chapter 9.

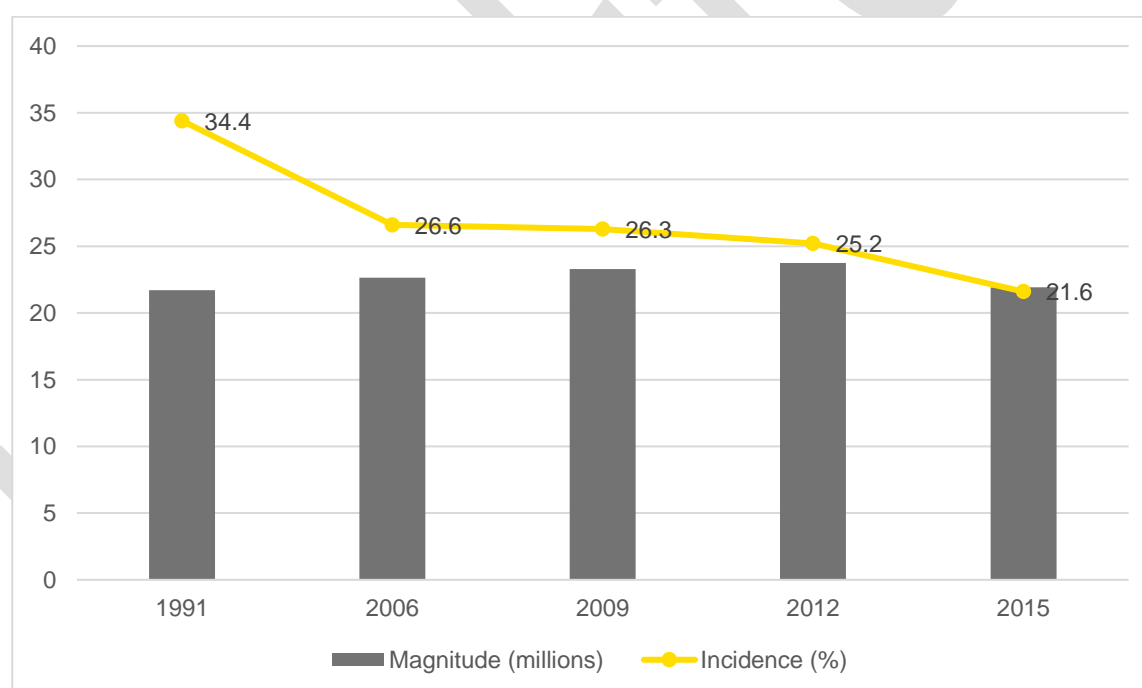
⁷⁸ Philippine Institute of Development Studies, *Unintended consequences: The folly of uncritical thinking* (2017), p. 148.

Poverty levels appear to have decreased overall over the past few decades, which saw a fall in the proportion of the population living below the basic needs poverty line. The incidence of basic needs poverty among the population was found to be 21.6 per cent in 2015, a reduction from the recorded poverty incidence in 2012 of 25.2 per cent.⁷⁹ Subsistence incidence (those living below the food poverty line) was estimated at 8.1 per cent in 2015 – a reduction from the recorded subsistence incidence in 2012 of 10.4 per cent.⁸⁰

The drop in poverty rates from 2012 to 2015 has been attributed to rising employment and income levels and low inflation, along with the expansion of the Government’s conditional cash transfer programme, *Pantawid Pamilyang Pilipino Programme*, which has bolstered the income of around 4.4 million poor households (this programme is discussed in more detail in section 9).⁸¹

The latest Family Income and Expenditure Survey also demonstrates a drop in the magnitude of poverty (absolute number of persons living below the basic needs poverty line), which had been increasing in recent decades, even though poverty incidence (percentage of the population living below the basic needs poverty line) levels decreased. This is illustrated by the graph below.

Table 2.7. Magnitude and Incidence of basic needs poverty in population, Philippines, 1991–2015



Source: National Statistics Office and National Statistical Coordination Board, and PSA, *Official poverty statistics for the Philippines, 2015*

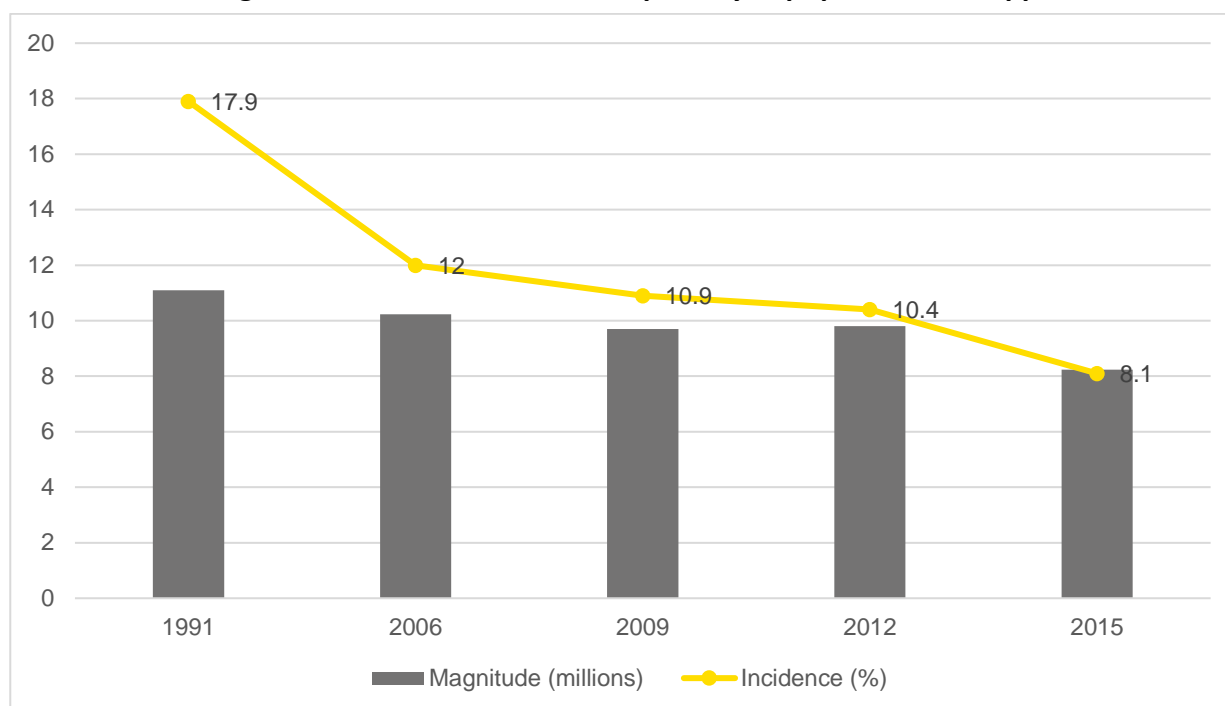
The subsistence incidence (the proportion of Filipinos whose incomes fall below the food threshold) has also declined in the past few decades, and the magnitude of subsistence incidence also declined, following an incline from 1991 to 2012 in magnitude.

⁷⁹ Philippines Statistics Authority, *Poverty incidence among Filipinos registered as 21.6% in 2015*, October 27, 2016, <https://psa.gov.ph/poverty-press-releases>

⁸⁰ Philippines Statistics Authority, *Poverty incidence among Filipinos registered as 21.6% in 2015*, October 27, 2016, <https://psa.gov.ph/poverty-press-releases>

⁸¹ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 17

Table 2.8. Magnitude and incidence of food poverty in population, Philippines, 1991 – 2015

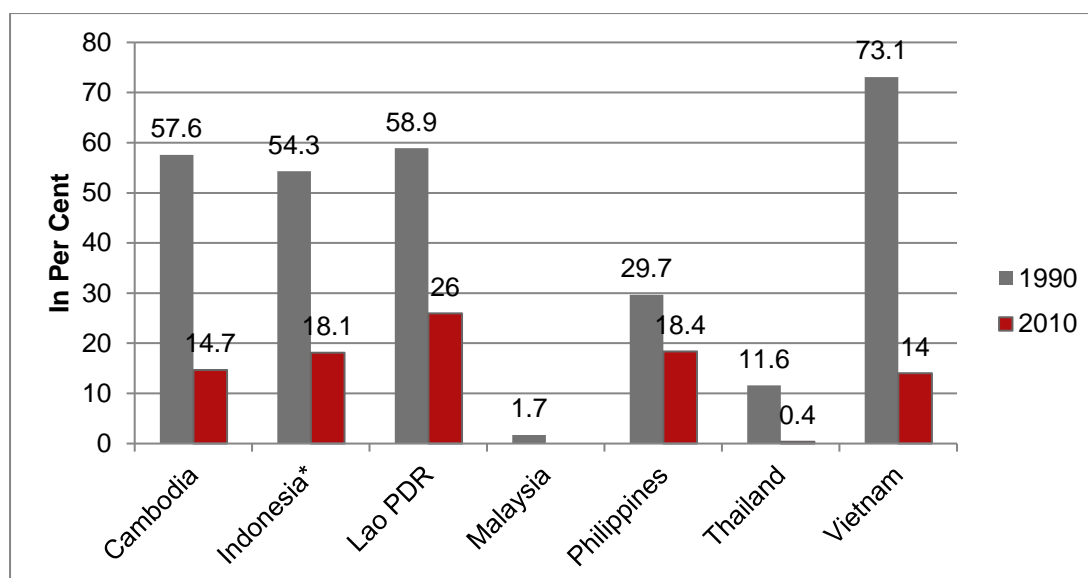


Source: National Statistics Office and National Statistical Coordination Board, and PSA, *Official poverty statistics for the Philippines, 2015*

While poverty incidence has decreased in recent years, progress has been very slow, particularly compared to other countries in the Asia-Pacific Region, indicating that significant pockets of persistent poverty remain in the Philippines. In the two decades from 1990 to 2010, the Philippines reduced its poverty rate by 38 per cent, while neighbouring countries cut theirs by at least 55 per cent and Thailand almost eradicated it, reducing it by 97 per cent.⁸²

Table 2.9. Poverty headcount by country (estimates closest to 1990 and 2010)

⁸² Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 4 (data from National Statistical Coordination Board).



Source: *Child Poverty in the Philippines Report/PovcalNET*, World Bank Website

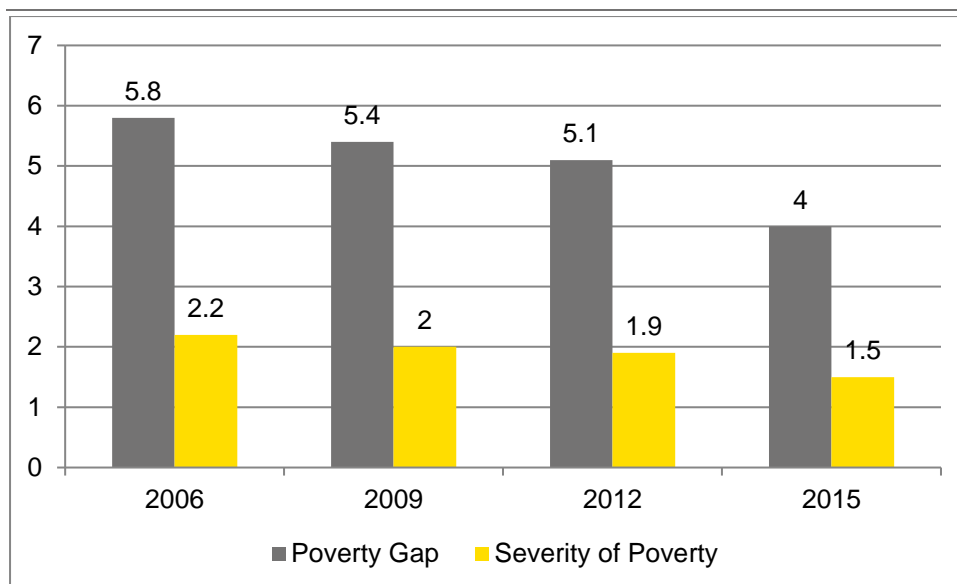
The Philippines has also shown slow progress in addressing the depth and severity of poverty. The poverty gap ratio improved by only 0.7 points from 5.8 in 2006 to 5.1 in 2012, though a more significant improvement was calculated in 2015, in which the poverty gap ratio declined to 4.0.⁸³ The poverty gap refers to the income shortfall of families with income below the poverty threshold. Slow progress in reducing the poverty gap indicates that poor families are still significantly short of having an income that meets the basic needs poverty line. The severity of poverty, which measures the intensity of poverty,⁸⁴ has also showed a slow decline, from 2.2 in 2006 to 1.5 in 2015.⁸⁵

Table 2.10. Poverty Gap and Severity, 2006–2012

⁸³ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 4 (data from National Statistical Coordination Board).

⁸⁴ The total of the squared income shortfall (expressed in proportion to the poverty threshold) of families with income below the poverty threshold, divided by the total number of families.

⁸⁵ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 4 (data from National Statistical Coordination Board).



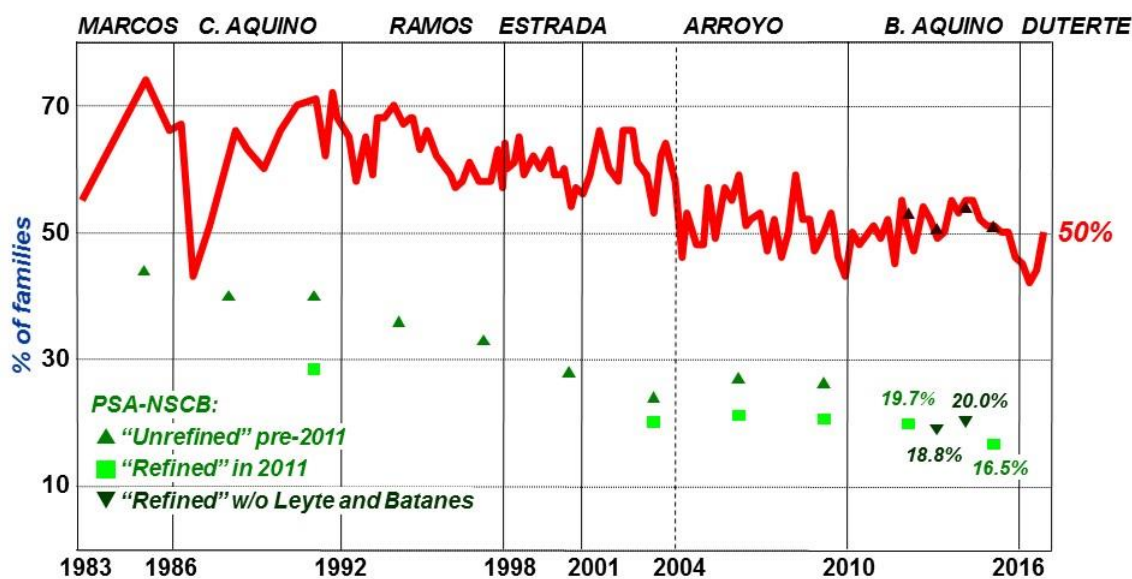
Source: *Child Poverty in the Philippines Report*, source of basic data: National Statistics Office and National Statistical Coordination Board

Moreover, self-reported poverty rates appear to have increased slightly in recent months. A survey on self-reported poverty (Social Weather Stations) found that 50 per cent (an estimated 11.5 million) of families considered themselves *mahirap* (poor) in the first quarter of 2017, representing a rise of six points from the previous quarter (reported in December 2016).⁸⁶ Prior to this most recent survey, self-reported poverty levels had been decreasing, as shown in the Table below.

Table 2.11. Self-rated poverty, April 1983–March 2017

⁸⁶ Social Weather Stations, First quarter Social Weather Survey: Families self-rated as poor goes to 50%; food poor families are 35% (May 2017), available at: <https://www.sws.org.ph/swsmain/artcldisppage/?artcsyscode=ART-20170428131124>

SELF-RATED POVERTY: FAMILIES WHO ARE “MAHIRAP”, PHILIPPINES, APR 1983 TO MAR 2017



Self-Rated Poverty Question: Where would you place your family in this card? (Not poor, On the line, Poor)
**Note: The NSCB figures, which compare income of the year to the official poverty line, are plotted in June of the year.*



First Quarter 2017 Social Weather Report March 25-28, 2017 National Survey

Source: Social Weather Stations: First quarter Social Weather Survey: Families self-rated as poor goes to 50%; food poor families are 35% (May 2017)

The survey also found that 35 per cent of families (8.1 million) considered themselves to be ‘food poor’. The rise in self-reported poverty rates were attributed to a rise in rates across the country.⁸⁷

The Social Weather Stations Survey also found a substantial but declining rate of self-reported hunger among the population: in the first quarter of 2017, 11.9 per cent of families (2.7 million) reported experiencing involuntary hunger at least once in the past three months; 9.7 per cent of families (2.2 million) reported experiencing involuntary hunger ‘a few times’ and 2.2 per cent (510,000) reported experiencing involuntary hunger ‘often’ or ‘always’ in the past three months.⁸⁸

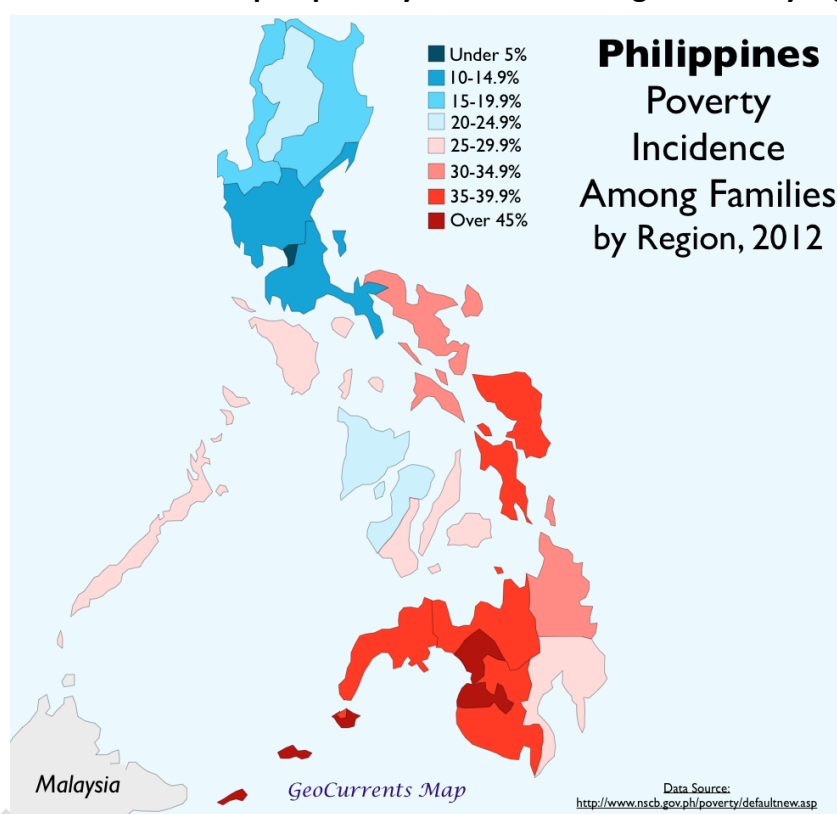
⁸⁷ According to the Social Weather Stations data, the self-rated poverty threshold is ‘the monthly budget that a poor household needs for home expenses in order not to consider itself poor’ – the median threshold is the home expense budget that would satisfy the poorer half of the poor households; the self-reported food poverty threshold is ‘the monthly budget that a food-poor household needs for food in order not to consider itself food-poor’ – the median food-poverty threshold is the food budget that would satisfy the poorer half of the food-poor households: see Social Weather Stations, First quarter Social Weather Survey: Families self-rated as poor goes to 50%; food poor families are 35% (May 2017), available at: <https://www.sws.org.ph/swsmain/artcldisppage/?artcsyscode=ART-20170428131124>.

⁸⁸ Social Weather Stations, First quarter 2017 Social Weather Survey: Hunger at 11.9% of families; moderate hunger 9.7%; severe hunger 2.2% (May 2017), available at: <https://www.sws.org.ph/swsmain/artcldisppage/?artcsyscode=ART-20170502094436>.

While such self-reported data are useful in providing evidence of subjective wellbeing among families, the limitations, including in particular, the potential measurement errors that may result in using subjective, perceptual data to monitor objective deprivations, have been noted.⁸⁹

Poverty in the Philippines is characterized by stark variation at the subnational level. Poverty levels and trends vary considerably across different regions and provinces in the Philippines, mirroring the uneven levels of human and economic development across the country, as illustrated by the map below.

Table 2.12. Map of poverty incidence among families by region, 2012

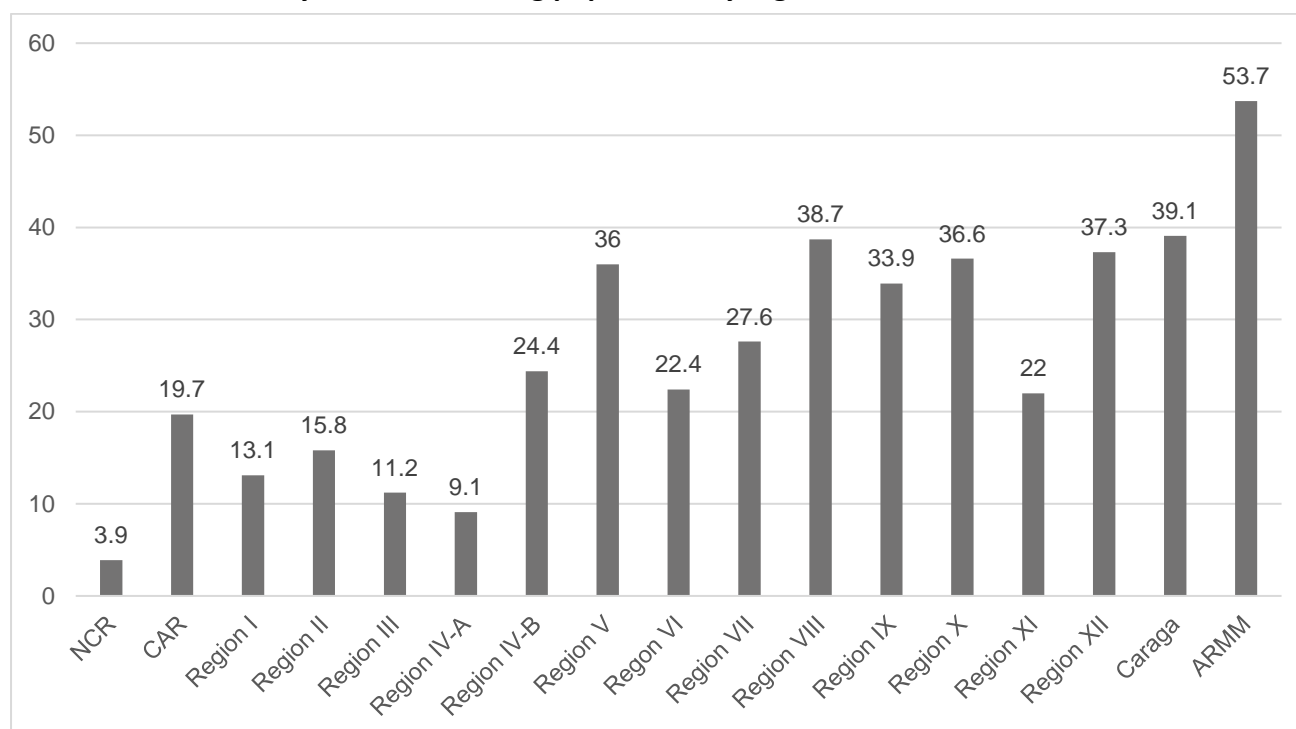


Source: Geomaps (from Family Income and Expenditure Survey, 2012)

Poverty rates vary substantially by region from 3.9 per cent of the population in NCR to 53.7 per cent of the population in ARMM – the region with the highest poverty incidence.⁹⁰

⁸⁹ See e.g. Sabina Alkire and Emma Sammon, 'Mobilising the household data required to progress toward the SDGs, Working Paper No. 72, Oxford Policy and Human Development Initiative (OPHI), University of Oxford, September 2014, p. 18.

⁹⁰ Philippines Statistics Authority, *Poverty incidence among Filipinos registered as 21.6% in 2015* (Table 2), October 27, 2016, <https://psa.gov.ph/poverty-press-releases>

Table 2.13. Poverty incidence among population by region, 2015

Source: Philippines Statistics Authority, *Official poverty statistics of the Philippines (2015)*, Table 2.

Poverty also varies considerably *within* regions. For instance, in ARMM, basic needs poverty rates vary from 10.6 per cent in Tawi-Tawi to 66.3 per cent in Lanao De Sur.⁹¹ It has been noted that poverty incidence in the Philippines is higher in conflict provinces (42 per cent) than in non-conflict provinces (22 per cent). Around 36 per cent of poor Filipinos (8.4 million) live in conflict provinces.⁹²

Poverty trends also vary considerably at the subnational level. Some regions have been able to significantly reduce their poverty rate, such as Cagayan Valley which reduced its rate from 30.6 per cent to 18.8 per cent between 1991 and 2009, compared to ARMM whose proportion of population in poverty increased from 21.5 per cent to 45.9 per cent between 1991 and 2009.⁹³

Poverty-related factors have contributed significantly to the relatively poor rankings of the Philippines in terms of child well-being, health, deprivation and education,⁹⁴ as will be examined throughout this report.

2.2.2. Inequality

Inequality is high in the Philippines: the Gini coefficient was calculated to be 0.43 as at 2013.⁹⁵ This represents a drop in inequality from 2009, in which it was calculated at 0.47 – the same as in 1994,

⁹¹ Philippines Statistics Authority, *Official poverty statistics of the Philippines (2015)*, Tables 1 and 3.

⁹² Philippine Development Report, *Creating More and Better Jobs*, September 2013, World Bank, p 60

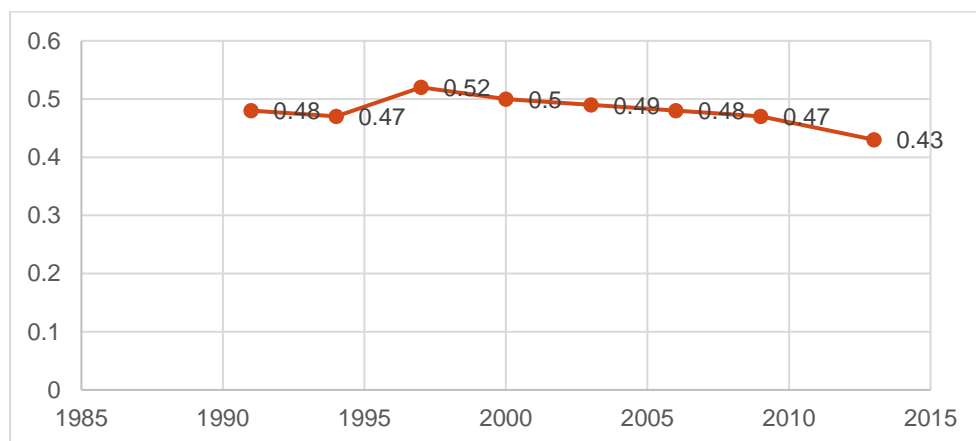
⁹³ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF, p5

⁹⁴ Strengthening Child Protection systems in the Philippines, *Child Protection in Emergencies*, p 19

⁹⁵ UNDP, *Human development reports: Income Gini coefficient*, available at <http://hdr.undp.org/en/content/income-gini-coefficient>

indicating that inequality had not reduced between 1994 and 2009. Nonetheless, 0.43 is generally thought to represent an unreasonable level of inequality (with 0.30 to 0.35 generally accepted as being ‘reasonable’).⁹⁶

Table 2.14. Gini coefficient in the Philippines, 1990 – 2013



Source: *Child Poverty in the Philippines Report*, source of basic data: National Statistics Office and National Statistical Coordination Board and UNDP, *Human development reports: Income Gini coefficient (2013)*

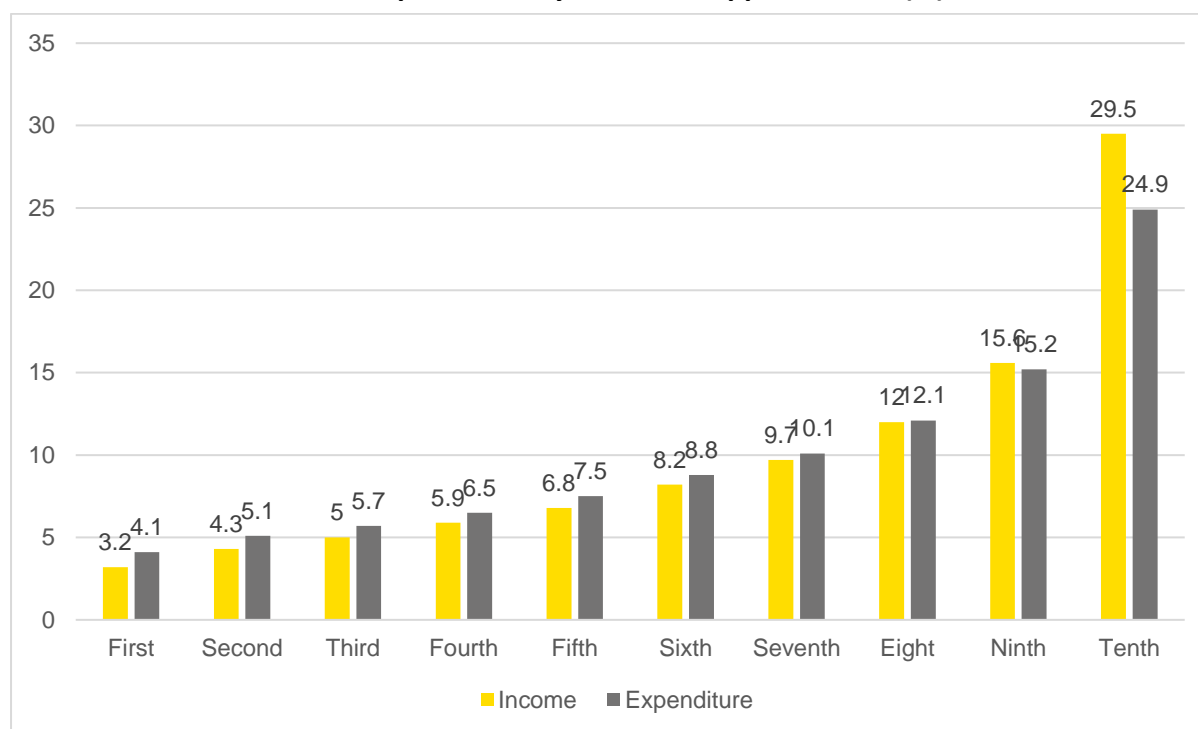
Since 1994, inequality has significantly increased in rural areas: from 0.39 in 1994 to 0.43 in 2009.⁹⁷ It has slightly declined in urban areas, from 0.46 in 1994 to 0.45 in 2009.⁹⁸

Examining income and expenditure by income decile also demonstrates significant economic inequality in the Philippines, as demonstrated by Table 2.15 below. According to this data, the bottom 40 per cent of the population had an income of just 18.4 per cent of the total, compared to the top 20 per cent, who had a share of 45.1 per cent of income. This represents significant economic disparity among poor and wealthier individuals.

⁹⁶ UNDP, *State of Human Development in the Pacific: A report on vulnerability and exclusion at a time of rapid change (2014)*

⁹⁷ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 6.

⁹⁸ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 6.

Table 2.15. Income and expenditure by decile, Philippines, 2015 (%)

Source: Philippines Statistics Authority, *Statistical Tables on 2015 Family Income and Expenditure Survey (2015)*, Table 6

However, the Family Household and Expenditure Survey indicates a decline in inequality since 2012. According to the data, between 2012 and 2015, the household incomes of the bottom 40 per cent of households rose by an average annual rate of 7.6 per cent, a higher increase than that for households in the fifth to eighth deciles (5.4 per cent).⁹⁹

The high level of inequality in the Philippines has had a negative impact on overall human development. According to the inequality-adjusted HDI (which takes into account inequality in all three dimensions of human development by ‘discounting’ each dimension’s average according to its level of inequality), the ‘loss’ in human development due to inequality in the Philippines was 18.4 percentage points in 2015: the HDI score was 0.682 and the Inequality-adjusted HDI score was 0.556.¹⁰⁰ However, this was slightly lower than the Asia-Pacific regional average of 19.3 percentage points loss in human development due to inequality.

2.2.3. Labour market and employment trends

The labour force participation rate in April 2016 was 63.5 per cent of those aged 15 or over.¹⁰¹ Of the 36.5 per cent of those aged 15 and over not in the labour force (a group which includes housewives, students, persons with disabilities and retired persons), 70.2 per cent were women and 43.5 per cent were aged 15–24.¹⁰² Moreover, 93.9 per cent of those in the labour force were employed, 39 per

⁹⁹ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 25

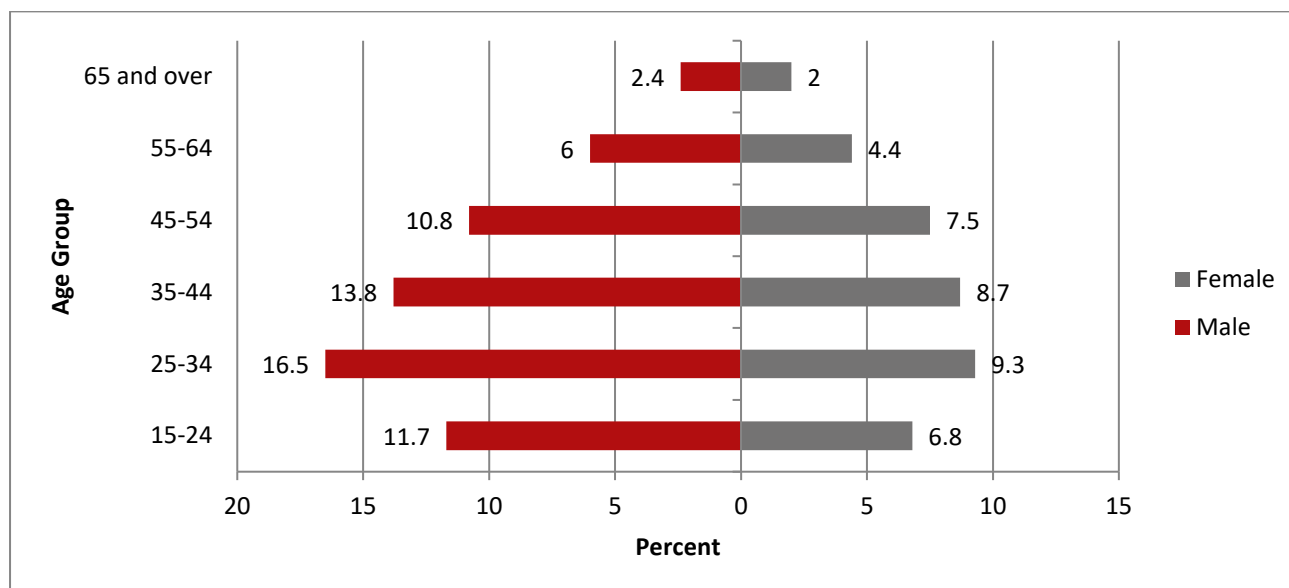
¹⁰⁰ UNDP, *Briefing note for countries on the 2016 Human Development Report: Philippines* (2016), p. 4 – 5.

¹⁰¹ Philippines statistics authority, April 2016 Labor Force Survey - <https://psa.gov.ph/content/employment-situation-april-2016-final-results>

¹⁰² Philippines statistics authority, April 2016 Labor Force Survey, available at: <https://psa.gov.ph/content/employment-situation-april-2016-final-results>

cent of those employed were women and the largest age group of employed persons were those aged 25–34, at 25.8 per cent.¹⁰³

Table 2.16. Per cent Distribution of Employed Persons by Sex and Age Group: April 2016

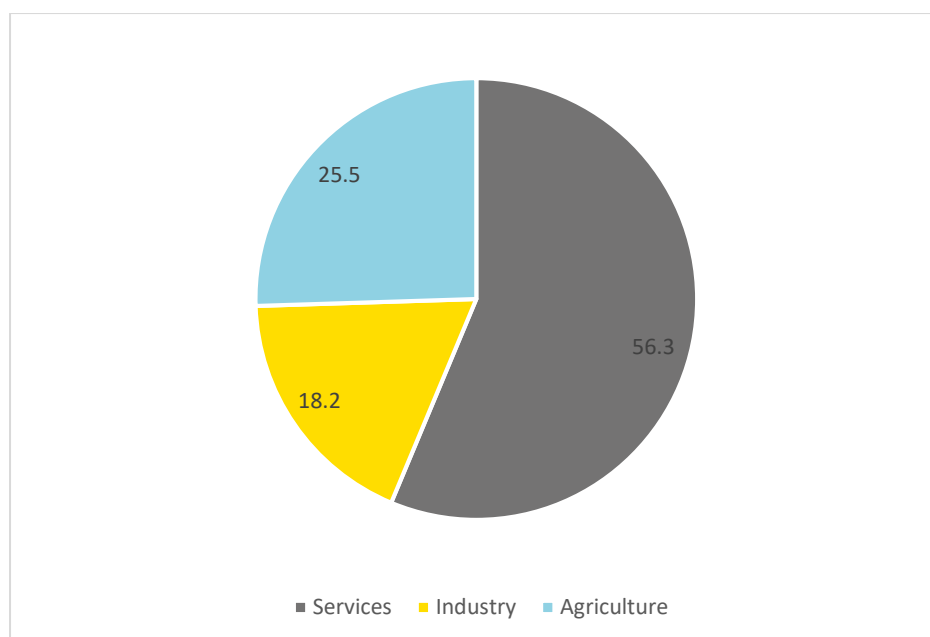


Source: Philippine Statistic Authority, April 2016, Labor Force Survey

The main employment sector in the Philippines in April 2016 was the services sector, making up 56.3 per cent of the employed population. Those employed in the agricultural sector made up 25.5 per cent of the employed population and those in industry 18.2 per cent. The majority of those employed were wage and salary workers (61.7 per cent).

Table 2.17. Labour force participation by sector, 2016 (%)

¹⁰³ Philippines statistics authority, April 2016 Labor Force Survey, available at: <https://psa.gov.ph/content/employment-situation-april-2016-final-results>



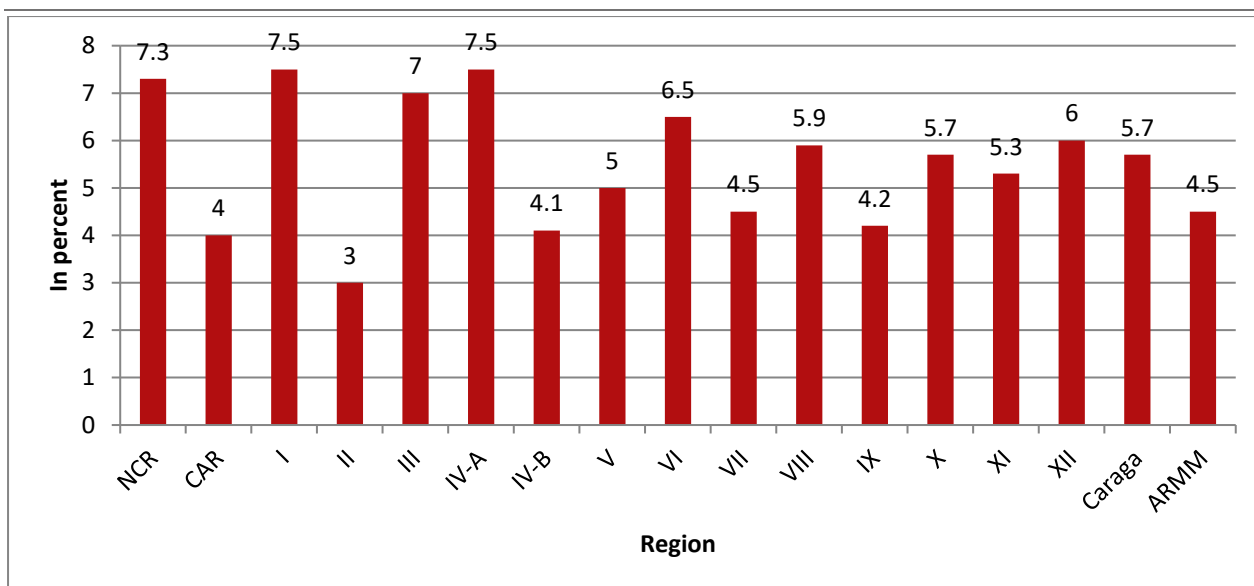
Source: Philippine Statistics Authority, April 2016 Labor Force Survey

The Philippines has recorded relatively high rates of unemployment and underemployment – particularly among young people. However, it has been noted that unemployment decreased in 2016, following a period of economic growth which saw an increase in net job creation. A total of 1.4 million jobs were created in 2016, which contributed to a decrease in the unemployment rate from 5.8 per cent in 2015 to 4.7 per cent in 2016.¹⁰⁴ The unemployment rate was higher among men: 36.7 per cent of unemployed persons in 2016 were women and most were young people (49 per cent were aged 15-24).¹⁰⁵ Unemployment rates vary by region, from three per cent (Region II) to 7.5 per cent (Region IV-A), as shown in the Table below.

Table 2.18. Unemployment Rate by Region: April 2016

¹⁰⁴ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 25

¹⁰⁵ Philippines statistics authority, April 2016 Labor Force Survey, available at: <https://psa.gov.ph/content/employment-situation-april-2016-final-results>



While unemployment was quite low in 2016, rates of *underemployment* are quite high, remaining at around 20 per cent in 2016, indicating that job quality is still a challenge.¹⁰⁶ It has been noted in particular that jobs in the agriculture sector, which account for around a quarter of all employment, tend to be seasonal and low paying, and characterized by significant underemployment: 36.5 per cent of persons working in the agriculture sector were underemployed as at April 2016.¹⁰⁷

2.3. Government and political context

The Philippines has been an independent country since 1946. Before being independent, it was colonised by the Spaniards, and later by the United States. Spanish colonialism started in the mid-sixteenth century and by the end of the sixteenth century most of the Philippines was under Spanish rule, apart from Mindanao and the Sulu archipelago. Spanish rule was maintained until June 1898 when independence was declared. However, independence was fleeting. In peace negotiations following the Spanish-American War, the US demanded that Spain cede the Philippines to the US.¹⁰⁸ The Treaty of Paris, signed in December 1898, and ratified by the US Senate in 1899, made the Philippines a colony once more.

The US began the process of de-colonisation and moved towards greater self-governance for the Philippines within a decade of taking control. By 1916, Filipino nationals dominated the legislative and judicial branches of government, though the US maintained control of the executive and administrative branches. Despite the short period of colonial rule by the US and the increase in Filipino representation in government, the US had a considerable impact over the country in terms of the form of governance, economics, language and education.

Following the passing of the Philippine Commonwealth and Independence Act by the US Congress in 1934, the Philippines started a 10-year transition towards full independence, which was scheduled in the Act to occur in 1946. During these ten years, the intention was that the Philippines would remain a US territory, with foreign affairs, defence and monetary matters remaining under the

¹⁰⁶ World Bank, *Philippines economic update: advancing the investment agenda*, April 2017, p. 25.

¹⁰⁷ Philippines statistics authority, April 2016 Labor Force Survey, available at: <https://psa.gov.ph/content/employment-situation-april-2016-final-results>.

¹⁰⁸ The Spanish received \$20million from the USA for the Philippines.

control of the USA Government. The movement towards independence was interrupted when the Japanese occupied the Philippines in 1941. The Japanese were mostly driven out of the Philippines in 1944, with a final defeat in March 1945. The Commonwealth was re-established in 1944, and in accordance with the Philippine Commonwealth and Independence Act in 1934 the Philippines finally became independent on 4 July 1946.

Under the 1987 Constitution of the Republic of the Philippines, the Philippines is a democratic Republic headed by a President.¹⁰⁹ Power is divided between three branches: the legislature, the executive and the judiciary. The Executive branch is composed of the President and the Vice-President. The President is elected by the public for a six-year term and is the Head of State, Head of Government and Commander-in-Chief of the armed forces.

The current president, Rodrigo Duterte, was elected in May 2016, and the current Vice President (who is also elected) is Maria Leonor G. Robredo. The President has the power to appoint his own Cabinet.

The Philippine Congress is composed of two branches: the Senate (the upper chamber) and the House of Representatives (the lower chamber). The Senate is composed of 24 senators elected by the public at large,¹¹⁰ of which six are currently female.¹¹¹ The House of Representatives can have up to 250 members elected from congressional districts.¹¹² As of 2016, 68 out of 238 representatives (28.6 per cent) are women.¹¹³

In the Philippines, political parties are generally weak, but family political dynasties can be strong at national, regional and local levels.¹¹⁴ The Philippines is 101st in Transparency International's Corruption Perceptions Index 2016 with a score of 35 (anything under 50 indicates a serious level of public sector corruption).¹¹⁵ Since independence, Governments have been marked by political dynasties, despite Article II Section 26 of the 1987 Constitution of the Philippines which provides that *"the State shall guarantee equal access to opportunities for public service, and prohibits political dynasties as may be defined by law."* In a 2014 study,¹¹⁶ it was estimated that 50–70 per cent of all politicians were involved or associated in a political dynasty within the Philippines, including LGUs. The same study found that 77 per cent of legislators between the ages of 26–40 in 2014, were 'dynastic', showing the continuation of 'elite' power.¹¹⁷

It has been argued that the concentration of political power among a few families benefits a narrow set of economic interests over a period of time, institutionalises economic inequalities and perpetuates a culture of dependency between an economically/politically dominant patron and an

¹⁰⁹ Article II, Section 1, 1987 Constitution of the Republic of the Philippines.

¹¹⁰ Article VI, Section 2, 1987 Constitution.

¹¹¹ Taken from: <https://www.senate.gov.ph/senators/sen17th.asp>.

¹¹² Article VI, Section 5(1), 1987 Constitution.

¹¹³ Table 8.2, Women and Men in the Philippines Statistical Handbook 2016, Philippine Statistics Authority.

¹¹⁴ UNICEF Philippines Political Economy Assessment Report, p 16.

¹¹⁵ National Youth Assessment Study 2015, Philippines, p 4.

¹¹⁶ Querubin, *Political Reform and Elite Persistence: Term Limits and Political Dynasties in the Philippines*. Rochester, NY. 2012.

¹¹⁷ Querubin P., *Political Reform and Elite Persistence: Term Limits and Political Dynasties in the Philippines*. Rochester, NY. 2012. See also Simbulan, D., *The Modern Principalia: The Historical Evolution of the Philippine Ruling Oligarchy*, University of Philippines Press, 2005.

otherwise disenfranchised client. It is not accidental that provinces with established political dynasties are also among the poorest.¹¹⁸

It has been stated that it *“is widely acknowledged in the literature that poor governance and weak institutions are among the critical constraints to investment and growth in the Philippines.”*¹¹⁹ Problems with governance, particularly corruption and political instability have resulted in weak investor confidence, a reluctance to invest in the Philippines and a consequent lack of growth, employment and reduction in poverty. Institutions on which good governance relies are also weak with low capacity and a lack of well-trained staff.

The World Bank defines governance as the set of traditions and institutions by which authority in a country is exercised.¹²⁰ This includes (1) the process by which governments are selected, monitored and replaced; (2) the capacity of the government to effectively formulate and implement sound policies; and (3) the respect of citizens and the state for the institutions that govern economic and social interactions among them. The World Bank Governance has six governance indicators:

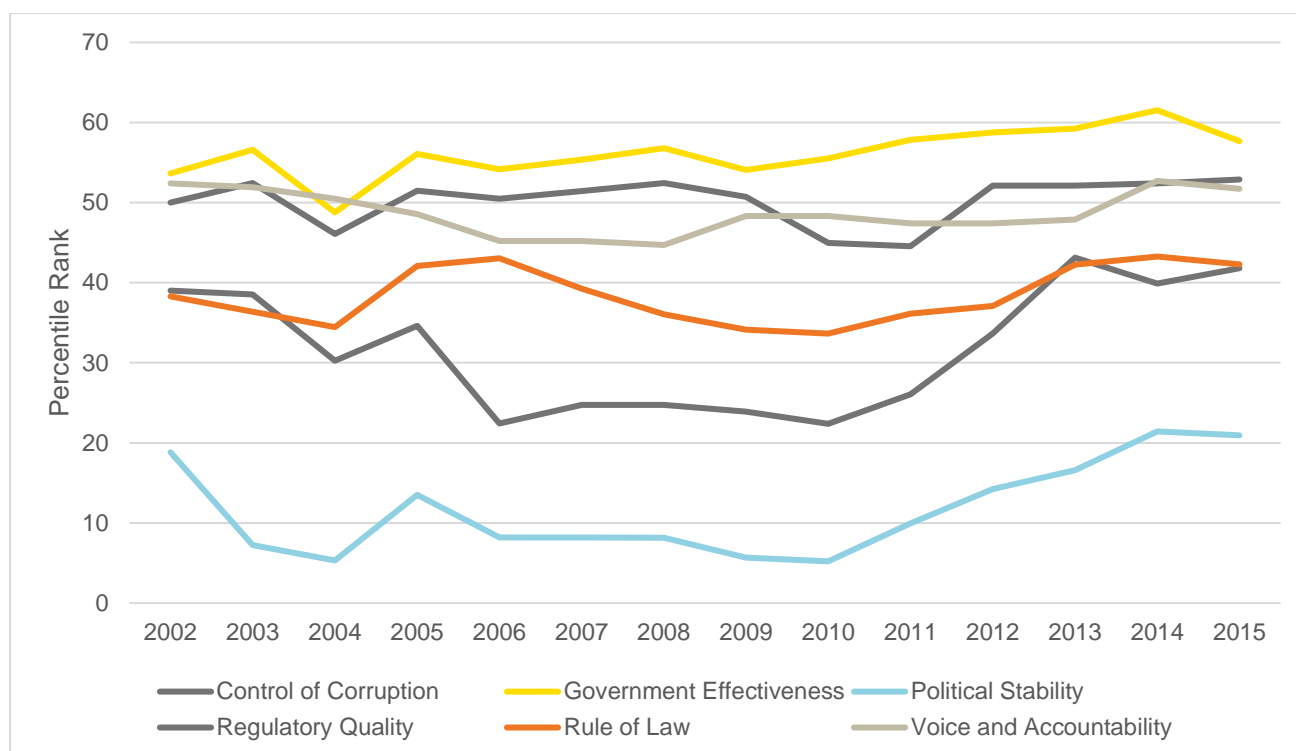
1. Voice and Accountability – capturing perceptions of the extent to which a country's citizens are able to participate in selecting their government, as well as freedom of expression, freedom of association, and a free media.
2. Political Stability and Absence of Violence/Terrorism – capturing perceptions of the likelihood of political instability and/or politically-motivated violence, including terrorism.
3. Government Effectiveness – capturing perceptions of the quality of public services, the quality of the civil service and the degree of its independence from political pressures, the quality of policy formulation and implementation, and the credibility of the government's commitment to such policies.
4. Regulatory Quality – capturing perceptions of the ability of the government to formulate and implement sound policies and regulations that permit and promote private sector development.
5. Rule of Law – capturing perceptions of the extent to which agents have confidence in and abide by the rules of society, and in particular the quality of contract enforcement, property rights, the police, and the courts, as well as the likelihood of crime and violence.
6. Control of Corruption – capturing perceptions of the extent to which public power is exercised for private gain, including both petty and grand forms of corruption, as well as "capture" of the state by elites and private interest.

Table 2.19. Philippines scores in the World Bank Governance Indicators, 2002–2015

¹¹⁸ Simbulan, D., *The Modern Principalia: The Historical Evolution of the Philippine Ruling Oligarchy*, University of Philippines Press, 2005. See also Mendoza, R., E. Beja, V. Venida, and D. Yap. 2012. "Inequality in Democracy: Insights from an Empirical Analysis of Political Dynasties in the 15th Philippine Congress." *Philippine Political Science Journal* 33 (2): 132–14.

¹¹⁹ Mendoz, R.U, Olfindo R., and Poco L.C.R.: Governance and Institutions in the Philippines, ASOG Working Paper 17-002, 2017.

¹²⁰ World Bank, *Governance and development* (1992), available at <http://documents.worldbank.org/curated/en/604951468739447676/Governance-and-development>, p. 1.



Between 2005 and 2014, the Philippines improved its ranking in all six dimensions. However, in 2015 improvements stalled. Government effectiveness actually decreased in 2015, as did voice and accountability, rule of law and political stability. Regulatory quality maintained the level it achieved in 2014, while control of corruption rose in 2015 (though the figure is still below that achieved in 2013). There were no figures available for 2016 at the time of writing.

The Transparency International Corruption Index showed a decline in corruption during the Aquino presidency: from ranking 134 out of 178 countries in 2010, to 95 out of 178 in 2015. In 2016, however, the corruption index showed the Philippines corruption level as having risen, being ranked at 101 out of 176 countries.¹²¹ Although President Duterte was elected on an anti-corruption platform, it has been suggested that the fight against corruption has been ineffective, and corruption could continue to rise as extrajudicial killings, attacks on the media and violent intimidation are perceived as a threat to democracy and democratic institutions.¹²² At present, this does not seem to have had an impact on economic growth. Growth in 2016 was 6.8 per cent, and is expected to remain a top regional performer with growth projected at 6.9 per cent in 2017 and 2018.

National and local officials are subject to oversight by independent constitutional bodies (including the Supreme Court) and by the Ombudsman (in relation to civil, criminal and administrative matters). The Ombudsman in its current form was created by the 1987 Philippine Constitution and Republic Act 6770, the Ombudsman Act of 1989. It is the leading anti-corruption agency of government. The Ombudsman (a woman, with five male deputy ombudsmen) has a wide range of functions, powers and duties, amongst which are the power to investigate and prosecute any act or omission of any public officer or employee, office or agency, when such act or omission appears to be illegal, unjust, improper or inefficient. It has the authority to impose administrative sanctions against certain erring

¹²¹ Transparency International, *Corruption perceptions index*, available at: <https://www.transparency.org/research/cpi/overview>

¹²² See Forbes, Duterte's Philippines is getting more corrupt, January 26th 2017.

officials of government, both elected and appointed. It is also equipped with the authority to prosecute criminal cases against erring public officials and their cohorts and to institute cases for forfeiture of unexplained wealth. In addition, it can direct any officer or employee of the Government, and any government-owned or controlled corporation, to perform any act or duty required by law, or to stop, prevent, and correct any abuse or impropriety in the performance of their duties.

An estimated 343 criminal's information were filed in 2015 for various offences against high-ranking officials, including the Vice-President, a former congressman and the Tawi-Tawi provincial governor. LGUs, House of Representatives, Philippine National Police (PNP), Department of Education and Department of Environment and Natural Resources were the government agencies with the most number of cases filed.¹²³

2.3.1. The Judiciary

The judicial branch of the Philippines is headed by a Supreme Court made up of 15 justices.¹²⁴ Three of the current 15 justices are women, including the Chief Justice.¹²⁵ In the lower courts, in 2015, there were 747 judges, 43.97 per cent of whom were women.¹²⁶

The US State Bureau of Democracy, Human Rights and Labor, noted in a 2013 Country Report on Human Rights Practices, that the Law in the Philippines provides for an independent judiciary, and that the Government has generally respected judicial independence. However, "*corruption through nepotism, personal connections, and sometimes bribery has continued to result in impunity for wealthy or influential offenders in criminal cases and has also impacted on civil cases.*"¹²⁷ The Report finds that overall, the judicial system continues to suffer from a lack of sufficient personnel, inefficient processes, and long procedural delays. The judiciary is underfunded by the state and often depends on local sponsors for resources and salaries, resulting in non-transparent and biased court decisions. These factors continue to contribute to widespread scepticism in the Philippines that the justice system, and especially the criminal justice system, is able to deliver due process and equal justice.¹²⁸

Despite a raft of human rights legislation, the Philippines has a high number of extrajudicial killings and summary executions. Following a much-publicised spate of extrajudicial killings of drug dealers and drug pushers following the election of President Duterte, Senator Leila de Lima introduced Resolution 9 on 13 July 2016, directing the Senate Committee on Justice and Human Rights to investigate the extrajudicial killings. The Resolution noted that in a 13-day period following the inauguration of President Duterte (30^h June to 12 July), a national newspaper reported that there had been 136 extrajudicial and summary killings, while a television company alleged that from 10 May to 12 July the number of bodies had risen to 339.

¹²³ Annual Report, Office of the Ombudsman (2015).

¹²⁴ Article VIII, Section 1, 1987 Constitution

¹²⁵ Taken from: <http://sc.judiciary.gov.ph/aboutsc/justices/>

¹²⁶ Table 8.3, Women and Men in the Philippines Statistical Handbook 2016, Philippine Statistics Authority

¹²⁷ Country Reports on Human Rights Practices for 2013 United States Department of State • Bureau of Democracy, Human Rights and Labor: Philippines 2013 Country Report, p.11.

¹²⁸ Country Reports on Human Rights Practices for 2013 United States Department of State • Bureau of Democracy, Human Rights and Labor: Philippines 2013 Country Report, p.11.

The Senate reported on the investigation on 16 December 2016.¹²⁹ It noted that there had been a reported 4,248 killings all over the Philippines from 1 July 2016 to 11 October, an average of 47 killings per day, and that these were mainly drug-related. The Senate Committee found that there was no proof that there was a State-sponsored policy to commit killings; but took note of the many thousands of killings with impunity that have taken place every year for at least two decades. Under the Arroyo administration from 2001 to 2010, there were 91,762 killings – an average of 29 killings per day; while under the Aquino administration from 2010 to 2016, the rate went up to an average of 40 per day.¹³⁰

The Senate Committee also found that those involved in extrajudicial killing had acted with impunity and that there was an urgent need for law reform to strengthen the criminal law. The police alleged that impunity was not the issue but rather the lack of personnel to investigate and pursue cases and complaints against the police. The hearings were regarded as providing an opportunity to access justice for the victims and their families as well as for the public to be educated and kept abreast of the situation. The evidence given to the Committee is contained in the report and is available online.¹³¹

2.3.2. Administration

The Philippines is roughly divided into three island groups: Luzon, Visayas and Mindanao with an administrative system comprised of regions, provinces and independent cities, municipalities and barangays (all referred to as local government units). There are currently 18 administrative regions,¹³² (including the ARMM) within which there are 81 provinces; each of which is governed by its own elected legislature and an elected governor. National government offices are usually located in the regional centres.¹³³ In addition to the provinces, there are 145 cities,¹³⁴ of which 33 are classified as highly urban cities with a population of 200,000 or more residents, five are independent component cities and the rest are component cities.¹³⁵ Highly urban cities are autonomous LGUs which are administratively separate from the provinces in which they are located. Independent component cities are also administratively separate from the province, but component cities remain under the jurisdiction of the province.

Each province has a number of municipalities, which must have a minimum population of 25,000 inhabitants, which are governed by mayors, who may issue executive orders. There are currently 1,490 municipalities which are headed by mayors. Although mayors have the power to issue executive orders, the governor of the province has the power to review such orders, while the legislative body has the power to review legislation passed by the city council or the municipal council.

¹²⁹ Senate Joint Committee Report on Extra-Judicial Killings: Killing with Impunity: A Time to Act, 16th December 2016.

¹³⁰ Senate Joint Committee Report on Extra-Judicial Killings, Killing with Impunity: A Time to Act 16th December 2016, p 5 and p. 41.

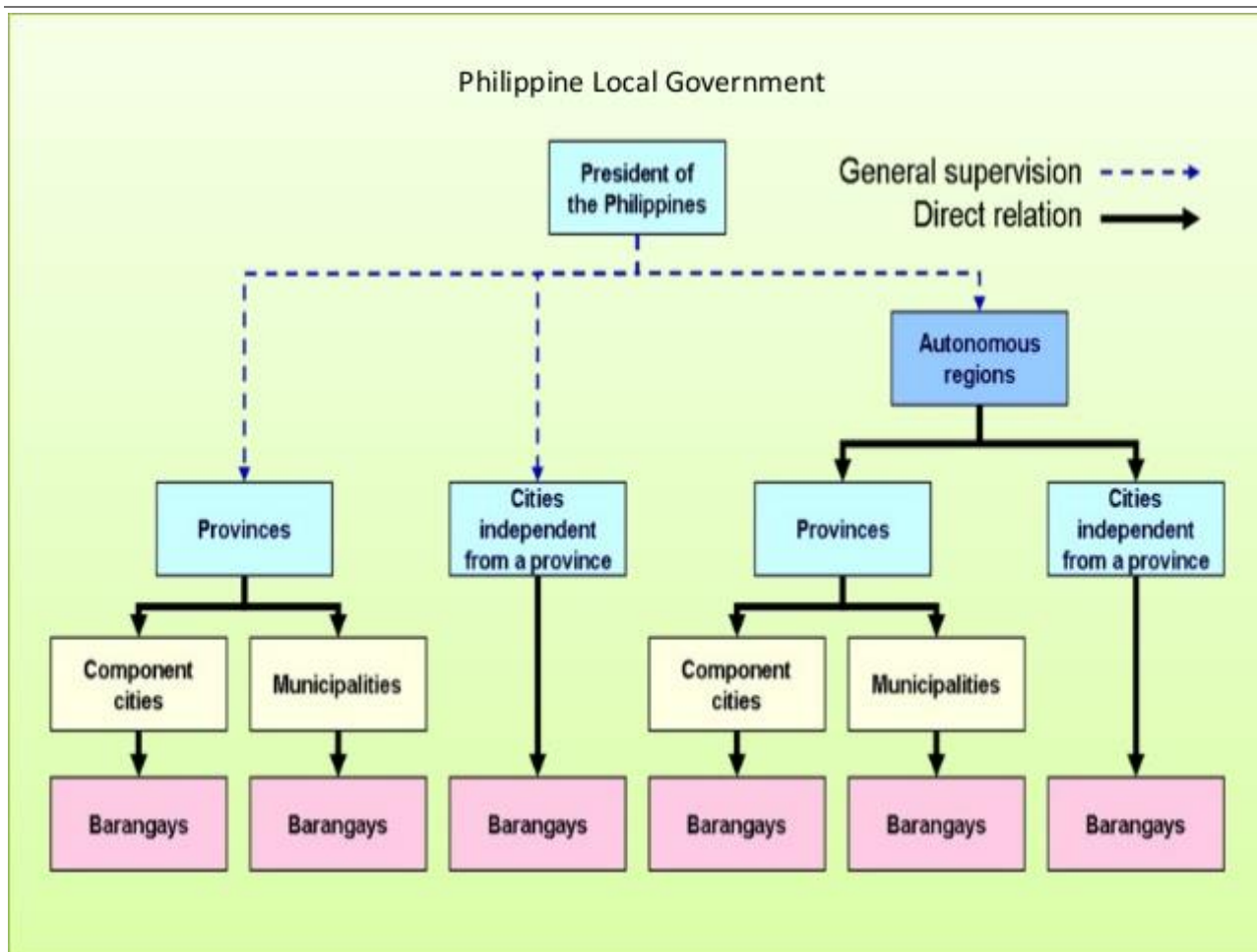
¹³¹ senate.gov.ph CR-18, 12/13/16.

¹³² 2013 Functional Literacy, Education and Mass Media Survey (FLEMMS) Final Report, Chapter 1

¹³³ 2013 Functional Literacy, Education and Mass Media Survey (FLEMMS) Final Report, Chapter 1.

¹³⁴ Philippines Statistics Authority, ActiveStats –PSGC Interactive – List of Cities as of 31st March 2017, available at: <http://nap.psa.gov.ph/activestats/psgc/listcity.asp>

¹³⁵ Philippines Statistics Authority, ActiveStats –PSGC Interactive – List of Cities as of 31st March 2017, available at: <http://nap.psa.gov.ph/activestats/psgc/listcity.asp>



The smallest (and oldest) administrative unit is the barangay, which is generally translated as a village or ward. There are over 42,000 barangays, all of which have elected officials, known as councillors, and led by a chairperson or captain. Funding is provided to all levels of local government, including the barangay, which is funded through a formula which takes the population and the land area into account. There are also a range of local ‘participatory’ bodies which assist local government and undertaken some of their functions, including local development councils, local health boards, local school boards, peace and order councils, as well as committees on nutrition, agriculture, local economy, etc.¹³⁶

The aim of the Republic Act No. 7160 (the Local Government Code of 1991) was to transform LGUs into self-reliant communities and active partners in nation-building by ‘decentralising’ government functions, giving LGUs more powers, authority, responsibilities and resources. Through this, LGUs can enact their own local legislation and have the power to raise taxes. They also have a wide range of powers, which they can exercise where these are essential to the promotion of general welfare, including the preservation and enrichment of culture; the promotion of health and safety, enhancement of economic prosperity and social justice and to maintain law and order.¹³⁷ LGUs

¹³⁶ See Dorotan E., *Decentralisation in the Philippines*, Asian Development Bank, available at [https://wpqr4.adb.org/lotusquickr/cop-mfdr/PageLibrary482571AE005630C2.nsf/0/7E0AEAB811AEB05348257BA30024A265/\\$file/Session%202b_PHILIPPINES,%20Eddie%20Dorotan.pdf](https://wpqr4.adb.org/lotusquickr/cop-mfdr/PageLibrary482571AE005630C2.nsf/0/7E0AEAB811AEB05348257BA30024A265/$file/Session%202b_PHILIPPINES,%20Eddie%20Dorotan.pdf).

¹³⁷ See Republic Act No. 7160 (the Local Government Code of 1991), section 16.

receive 40 per cent of national tax receipts, with provinces receiving 23 per cent, cities, 23 per cent, municipalities 34 per cent and barangays 20 per cent of the overall amount available. The funds are released directly to the LGUs, but they have little discretion as to how the funds are to be used.¹³⁸

Decentralisation has not been without its challenges. The Philippine Development Plan 2011-2016 noted that a majority of LGUs at the time the Plan was developed still lacked the ability or the will to raise adequate revenues themselves, leaving them over-dependent upon national government for revenue. The PDP also noted that many LGUs have failed to manage their financial resources effectively and sustainably. Where there has been significant decentralisation of functions, not all local government offices have been able to increase their capacity sufficiently to enable them to prioritise, plan, budget and implement programmes effectively. A lack of training and experience amongst some local government staff has also resulted in poor delivery of medium to large scale projects and programmes, creating bottlenecks in service delivery. Additionally, *“owing to loopholes in the LGC, as well as the lack of capacities of local governments in assuming devolved functions, national government agencies (NGAs) continue to deliver certain services despite the transfer of these services to the local governments. The confused and overlapping performance of functions compromises the lines of accountability for local services.”*¹³⁹ Not only is there a lack of clarity between central and local governments as to which body is responsible for delivery of services, but there is also an overlapping distribution of duties among the different levels of local governments (i.e. province, city, municipality and barangay). Other challenges facing decentralisation in the Philippines include patronage, money politics, the clan system and an inefficient, politically influenced civil service.¹⁴⁰

The Philippine Development Plan of 2017-2022 notes that many of these challenges remain, including an over-reliance on national revenue, and overlapping functions and weak delivery of services. The Development Plan proposes changes to the Local Government Code of 1991 to address the challenges.

Moves toward federalism

Moves to introduce a federal political structure have been gaining ground in the Philippines. Proponents of federalism have argued that it will help promote economic development, address the economic inequalities between regions and facilitate increased political participation.¹⁴¹ Transitioning to a federal structure has also been called for in order to ensure the creation of the autonomous Bangsamoro region and address the discontent among the Moro population in ARMM.¹⁴²

Discussions on federalism and whether and how to transition the Philippines to a federal state were sparked, at least in recent times, by political scientist and professor at the University of the

¹³⁸ For instance 20% of a barangay’s income must be spent on development activities, 10% on Youth Council activities and 1% must be allotted to the local child protection committee etc.

¹³⁹ Philippines Development Plan 2011-2016 at <http://devplan.neda.gov.ph>.

¹⁴⁰ See Dorotan E., Decentralisation in the Philippines.

¹⁴¹ Abueva, J.V., University of Philippines, *Some advantages of federalism and parliamentary government for the Philippines* (2005), available at <http://pcij.org/blog/wp-docs/Abueva-Federalism.pdf>

¹⁴² Abueva, J.V., University of Philippines, *Some advantages of federalism and parliamentary government for the Philippines* (2005)

Philippines, Jose Abueva, who proposed a 10-year roadmap toward federalism in 2000.¹⁴³ Since then, several initiatives by senators have continued the discussions. In 2008, senator Aquilino Pimentel Jr, proposed Joint Resolution No. 10, to amend the 1987 Constitution to create eleven autonomous regions (states) across the country. A Concurrent Resolution No. 15 was introduced, also in 2008, supporting Joint Resolution No. 10 (with some changes) and backed by 16 senators.

President Duterte, a long supporter of the move toward federalism and one issue on which he based his campaign for the Presidency,¹⁴⁴ has made an undertaking to hold a plebiscite on replacing the unitary government structure with a federal one.¹⁴⁵ He also passed Executive Order No. 10 in December 2016,¹⁴⁶ which established a Consultative Committee to study, consult on and review the provisions of the 1987 Constitution relating to the structure and power of the government, local government and economic policies and present a report to the President. The Committee held its first meeting in February 2018.¹⁴⁷

Several initiatives have been introduced since the passing of Executive Order No. 10, including one of House Speaker Pantaleon Alvarez in 2017, which called for the establishment of 14 states: seven in Luzon, two in Vasayas and five in Mindanao, and the establishment of a new administrative capital in a central location.¹⁴⁸ In 2018, the Sub-Committee of the House of Representatives Committee on Constitutional Amendments proposed a federal Philippines composed of five States (Metro Manila, Luzon, Vasayas, Mindanao and Bangsamoro), each led by a Premier and State Assembly; however, this proposal has been criticised due to its lumping together of diverse areas and populations resulting in a lack of representation in some areas. The proposal was also criticised as it does not impose term limits on political leaders.

2.3.3. Child participation in governance

Article 12 of the CRC provides that children should have a right to express their views freely in all matters affecting them, and for these views to be given due weight in accordance with the child's age and maturity.

Child participation has a relatively long, if somewhat troubled, history in the Philippines. Article 4(6) of the Child and Youth Welfare Code of 1974 identified children's 'responsibility' to 'participate

¹⁴³ Abueva, J.V., University of Philippines, *Some advantages of federalism and parliamentary government for the Philippines* (2005)

¹⁴⁴ Reuters, Philippine lawmakers move toward switch to federal system of government, 16 January 2018, available at <https://www.reuters.com/article/us-philippines-politics/philippine-lawmakers-move-toward-switch-to-federal-system-of-government-idUSKBN1F50R1>

¹⁴⁵ Philippines Daily Inquirer, *Duterte: Polls on federalism in two years*, 20 May 2016, available at <http://newsinfo.inquirer.net/786631/duterte-polls-on-federalism-in-2-yrs>

¹⁴⁶ Executive Order No. 10, Creating a Consultative Committee to Review the 1987 Constitution, 7 December 2016.

¹⁴⁷ CNN Philippines, *Constitutional review committee holds first en banc session*, 19 February 2018, available at <http://cnnphilippines.com/news/2018/02/19/Constitutional-review-committee-holds-first-en-banc-session.html>

¹⁴⁸ Arguillas, C.O., Minda News, Alvarez federal Philippines: 14 states, Negros as seat of central government, 28 March 2017, available at <http://www.mindanews.com/top-stories/2017/03/alvarez-federal-philippines-14-states-negros-as-seat-of-central-govt/>

actively in civic affairs in the promotion of the general welfare.¹⁴⁹ The Code also established Barangay Councils for the Protection of Children which were to include a ‘representative of youth’.¹⁵⁰ The participation articles of the Code were based on the premise that providing children with a formal avenue through which to express their views would strengthen policy.

Following ratification of the UN Convention on the Rights of the Child, the articles of the Child and Youth Welfare Code were used as the basis of a policy framework to institutionalise children’s participation rights further. In 1991 the Local Government Code established Youth Assemblies in each barangay. These were intended for 15- to –21-year-olds. In addition, the Local Government Code of 1991¹⁵¹ established elected youth councils, *Sangguniang Kabataan* (SK), to enable youth “to participate more in civic and political affairs and give them opportunities to freely express their views and opinions.”¹⁵² At this time, the Youth Council consisted of a chairman and 7 council members aged 15 –21.

Children’s participation was also institutionalised in key national bodies, including the Council for the Welfare of Children (CWC) established by the Child and Youth Welfare Code.¹⁵³

Youth participation was addressed again in Republic Act 8044, the Youth in Nation-Building Act 1994, which provided for the creation of a National Comprehensive and Coordinated Programme on Youth Development. Youth are defined in this Act as people aged 15–30. The objectives of the Commission established under the Act are to provide leadership in the formulation of policies and in the setting of priorities and direction of all youth promotion and development programmes and activities; to encourage wide and active participation of youth in all governmental and non-governmental programmes and develop the potential of youth in nation-building.

In 1995, the Expanding Children’s Participation in Social Reform Project was established with the objectives of:

- Organizing children as a sector and increasing their participation in public policy making;
- Creating national and local coalitions to address issues affecting children;
- Lobbying for recognition of children’s issues within the legislative process.¹⁵⁴

The same year the National Youth Commission was established as a national government agency initially attached to the office of the President, (though the office was reassigned to the Cabinet Secretary in July 2016 under the *Sangguniang Kabataan* Reform Act 2015).¹⁵⁵ Its vision is broad, with the NYC positioning itself as the policy authority on youth participation and the prime mover in youth development.¹⁵⁶ The core functions of the NYC are seen as research, policy formulation and advocacy; monitoring and evaluation of youth programmes, projects and activities; resource

¹⁴⁹ Bessell, S., Children’s Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009. Bessell suggests that participation rights were not intended to empower children but rather to impose a form of social control.

¹⁵⁰ Article 87, Child and Youth Welfare Code of 1974.

¹⁵¹ Republic Act 7160. The *Sangguniang Kabataan*. Those aged 15-21 on election day could vote for the Youth Council.

¹⁵² The State of Filipino Children 2002: Manila, Council for the Welfare of Children.

¹⁵³ Committee on the Rights of the Child, Consideration of Reports Submitted by States Parties Under Article 44 of the Convention, Third and Fourth Periodic Reports of States parties due in 2007, Philippines, 20 March 2009, CRC/C/PHL/3-4, (CRC State Report Philippines, 2009) para 98

¹⁵⁴ Bessell, S., Children’s Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.304.

¹⁵⁵ Law No. 10742.

¹⁵⁶ National Youth Commission, available at: nyc.xeozone.net/vision-mission.

mobilisation, networking and partnership building; social marketing, public and media relations and education, training and institution-building. In 2014, its budget was PhP41,565,079.83. The Commission has a number of programmes including maintenance of the National Action Plan of Youth Employment and Migration; maintenance of a data base for out of school youth to facilitate reintegration and link them to existing programmes, cultural exchanges; government internship programmes and a National Youth Parliament.

Children also sit on the National Anti-Poverty Commission, which was established in 1998 under Republic Act 8425, and are represented by 15 sectoral representatives on the National Anti-Poverty Commission–Children Basic Sector (NAPC-CBS) Sectoral Council.¹⁵⁷ The Anti-Poverty Commission is responsible for implementing the Social Reform Agenda in the Philippines, in particular strengthening partnerships between the national government and key stakeholders working with the poor and the marginalised (for more detail on the National Anti-Poverty Commission, see chapter 9). It has been argued that “*the children’s basic sector within the National Anti-Poverty Commission is critical – it is a forum for raising issues that are important to children.*”¹⁵⁸ It is unclear, however, how much influence children have on policy in practice.

The Philippines National Strategic Framework for Plan Development for Children (2000–2025) known as Child 21 identifies participation rights as fundamental to successful policies and interventions for children. The vision of the Strategic Framework is that every child will be “*actively participating in decision-making and governance in harmony and in solidarity with others, in sustaining the Filipino nation.*” Following the Development Plan, the National Committee on Child and Youth Participation was formed in 2001. In 2005, the National Committee produced the National Framework on Child and Youth Participation, supported by the CWC and UNICEF.

Bottlenecks and barriers to participation

Despite this range of initiatives, the operation of the Youth Councils has faced numerous difficulties. A 2007 Study by Department of the Interior and Local Government (DILG) and UNICEF¹⁵⁹ found that although the Youth Councils had tremendous potential to develop the next generation of leaders, engage youth in the community and teach them accountability, honesty and creativity, their performance over the previous 10 years had been generally weak. In addition, the UN Committee on the Rights of the Child in their Concluding Observations to the Republic of the Philippines 3rd and 4th periodic reports in 2009 raised concerns about the ability of children, especially those belonging to minority and indigenous populations, to be heard within the family, schools, institutions, the courts and administrative bodies.¹⁶⁰

As a result, a further study was commissioned by the CWC and the National Committee on Child and Youth Participation in 2009. The resulting study: *Case Studies on Child and Youth Participation in the Philippines*,¹⁶¹ found that child participation had had a positive effect; that participation had created changes in the level of awareness children had of their rights, and had also had a positive effect on

¹⁵⁷ CRC State Report, Philippines, 2009, para 98.

¹⁵⁸ Bessell, S., Children’s Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.304.

¹⁵⁹ Balanon, F, UNICEF, *The Impact of Youth Participation in the Local Government Process: The Sangguniang Kabataan Experience* (2007)

¹⁶⁰ Committee on the Rights of the Child, Consideration of Reports Submitted by States Parties Under Article 44 of the Convention, Concluding Observations: The Philippines, 22 October 2009, CRC/C/PHL/CO/3-4 (CRC Concluding Observations, Philippines 2009), para 34-35

¹⁶¹ Ruiz, H., *Case Studies on Child and Youth Participation in the Philippines*, Council for the Welfare of Children, 2011.

parents, teachers and community leaders. However, the Study also found that although the National Framework on Child and Youth Participation was a good document, it was not well-known and its circulation was limited. In addition, the Framework on its own was insufficient to guide institutions and agencies in effective child participation. Further, child participation in formal bodies did not make adequate allowance for children's stage of development and were not child-friendly, restricting the extent to which participation was effective, and in some cases making it tokenistic. Those working with children at all levels also had an 'incomplete understanding' of the concept, principles and practice of child and youth participation, having received little training and without access to appropriate training materials or guidance.

The Study made a number of recommendations including the need to review, revise and re-design the National Framework on Child and Youth Participation and a need to institutionalise it. A further recommendation was that a guidebook on participation be produced. This was acted on and the National Committee on Child and Youth Participation together with the Council for the Welfare of Children, published a Guide for Promoting and Upholding Children's Participation in the Philippines in 2014.

Despite the fact that strides had been made in encouraging and embedding child participation, there remained a range of concerns about the youth councils and their effectiveness in encouraging and implementing child participation put forward by commentators. The most common reason given for ineffectual participation were current social and cultural norms which regard children as incompetent and subordinate to adults. Age-based hierarchies were regarded as playing a significant role, with far greater weight and respect being given to the views of adults, especially those of older adults. However, a number of other barriers were also mentioned: there was a lack of clarity and understanding about what children could contribute and how, which reduced receptiveness to the idea of children's participation and inhibits change in existing rules and norms.¹⁶² There was also a lack of agreement about the age at which children are able to participate effectively. It has been noted that participation of younger children "*is a vexed issue, and issues of competency and capability tend to become more confronting and controversial.*"¹⁶³

The CWC has also raised other issues which impact on children's participation. These include the need for child representatives on the Council and other formal bodies to miss considerable amounts of school in order to participate; that child representatives may be seen as different from other children, regarded as an 'elite' group and suffer ostracism as a consequence; and that setting procedures for the selection of child representatives is often difficult, time-consuming and resource-intensive.¹⁶⁴ Last, there is an issue of 'romanticisation' of child participation: treating children as equal with adults, with formal bodies placing too much responsibility on child members for decisions on issues with which they might not be familiar or knowledgeable. For example, in Barangay Councils a child may be asked to participate in deciding whether a child should be removed from a family for reasons of protection, or to provide support to a child who has been the subject of violence or abuse

162 Bessell, S., Children's Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.309.

163 Bessell, S., Children's Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.310.

164 Bessell, S., Children's Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.312.

in the family. Placing such a burden on children who are not equipped or supported to make such decisions is a barrier to effective participation.¹⁶⁵

These barriers to participation have been compounded by political issues. Elections to the Youth Councils (the SK) were suspended in 2013 under Republic Act No 10632, as a result of allegations of corruption, nepotism, lack of financial transparency, misspending of money and recurring programmes focusing on sport and pageantry.¹⁶⁶ The Act¹⁶⁷ also postponed the SK elections from 2013 to a date which was to be determined, but which was to fall between 28 October 2014 and 23 February 2015. The Act further provided that the SK officials were not to remain in office after 30 November 2013, in effect dissolving the SK.¹⁶⁸

A new Act, the Sangguniang Kabataan Reform Law (Republic Act No. 10742) was passed and came into force in January 2016, with the aim of revitalising the Youth Council to ensure youth development, service and participation. The Law has made some significant changes. Only 18- to 24-year-olds may now stand for election to the Barangay Youth Council, a change from the previous provision which stated that those who were aged 15–21 could stand for election. A further change can be found in Section 10 of the Act. The purpose of the provision is to address the previous allegations that too many of the elected members of the Barangay Youth Councils were related to local and national politicians. Section 10 provides that those standing for election:

“must not be related within the second civil degree of consanguinity or affinity to any incumbent elected national official or to any incumbent elected regional, provincial, city, municipal or barangay official in the locality where he or she seeks to be elected, and must not have been convicted by final judgment of any crime involving moral turpitude.”

Once elected, the person must undergo training before he or she can assume office. The barangay is required to allocate 10 per cent of the general fund to the Barangay Youth Council but under the new Act it must be disbursed solely for youth development, with the money being deposited in a government-owned bank.

Anyone who has lived in the barangay and is aged 15–30 may be a member of the Barangay Youth Assembly which is required to meet once every six months (rather than once every three months) to review the annual performance and financial reports of the Barangay Youth Council.

The new Act is clearly intended to address the barriers to youth participation outlined above. However, in so doing, it has the effect of excluding children from any meaningful participation in local governance and development. Children aged 15–18 are now confined to the Youth Assembly and the Local Youth Development Council, but are no longer eligible for election to the Youth Council.

¹⁶⁵ Bessell, S., Children’s Participation in Decision-Making in the Philippines, *Childhood* Vol. 16(3), 299-316. August 2009 at p.312.

¹⁶⁶ Ladia, C.; *Why the Sangguniang Kabataan needs an overhaul*, rappler.com, September 27th 2014 and Rappler, What’s in the new Sangguniang Kabataan? January 31st 2016 <http://www.rappler.com/move-ph/120205-new-improved-sangguniang-kabataan>.

¹⁶⁷ An Act to postpone the Sangguniang Kabataan elections on October 28th 2013, amending for the purpose Republic Act No 9340 and for other purposes.

¹⁶⁸ In the interim, an 8-member Task Force on Youth Development, ostensibly nominated by youth organizations in the barangay, as well as by the *Katipunan ng Kabataan* (Youth Assembly) and appointed by the *punong barangay* (village chairman) took charge over all community youth concerns and advocacies, as well as over the SK budget, which comprises 10% of the Barangay General Fund (Rappler, What’s in the new Sangguniang Kabataan? January 31st 2016, <http://www.rappler.com/move-ph/120205-new-improved-sangguniang-kabataan>).

It should also be noted that concerns have been raised by the UN Committee on the Rights of the Child that children with disabilities remain ‘invisible’ in Philippine society and that there is a need to ensure the “*participation of children with disabilities and members of their families in the planning, implementation and evaluation of programmes.*”¹⁶⁹

2.4. Legislative and policy framework and monitoring of child rights

Internationally two different approaches are taken by States when they ratify a treaty. In some States, known as ‘monist’ States, a ratified treaty automatically becomes part of the law of the land, and takes precedence over national law. In others, ‘dualist’ States, an international treaty is only treated as having full legal effect when it is incorporated into national law. The Philippines is a dualist State and ratified treaties are not valid or effective unless they have been concurred in by at least two thirds of all the Members of the Senate.¹⁷⁰ However, concern has been raised by the Human Rights Committee and the Committee on the Elimination of Discrimination against Women, that even when a treaty has been concurred in and adopted by the Senate, the supremacy of the provisions of these treaties has not been recognised by the Philippines Supreme Court where there is an irreconcilable conflict between treaty law and national law.¹⁷¹

A Bill of Rights which enshrines a number of the Philippines international human rights obligations was incorporated in the 1987 Constitution.¹⁷² Additionally, the family is protected under the Constitution, including the obligation on the State to defend the right of children to assistance, including proper care and nutrition, and special protection from all forms of neglect, abuse, cruelty, exploitation and other conditions prejudicial to their development.¹⁷³

The policy framework is set out in a number of different strategies, policies and frameworks and reflected in national laws. In order to support the implementation of government policy, there are a number of different sector plans of action. These include the Philippine National Strategic Framework for Plan Development for Children for the period 2000–2025 (Child 21), and the now expired Second National Plan of Action for Children, which ran from 2011–2016. A third National Plan Action Plan for Children is currently being finalised (for further details see Child Protection section of the report). There are also other national action plans which relate specifically to children, including the Philippine Plan of Action on Nutrition (PPAN), Gender and Development (GAD) plans, and the Philippine Plan of Action to end Violence against Children. The challenge for government is to ensure consistency of strategies, programmes, and monitoring frameworks among these sector plans and the PDP.

Spotlight issue: Data collection and use in policy and programming

The collection and use of data has been highlighted as a key challenge in the Philippines that limits the ability of government institutions to design effective policies and programmes and target

¹⁶⁹ UN Committee on the Rights of the Child, *Concluding Observations: Philippines* (2009), CRC/C/PHIL/CO3-4, para. 54.

¹⁷⁰ Section 21, Article VII Constitution.

¹⁷¹ Committee on the Elimination of Discrimination against Women, *Concluding observations on the combined seventh and eighth periodic reports of the Philippines*, 25 July 2016, para 10 and 11; Human Rights Committee *Concluding observations on the fourth periodic report of the Philippines*, adopted by the Committee at its 106th Session (15 October–2 November 2012), 13 November 2012, para 5.

¹⁷² Article III Constitution.

¹⁷³ Article XV, Constitution.

resources effectively and efficiently. Operational challenges in the effective implementation of data collection systems, including the lack of capacity at the local level in data collection and the lack of effective systems to ensure vertical and horizontal flows of information contribute to a lack of robust data on the situation of children in the Philippines,¹⁷⁴ as is highlighted throughout this report. In addition, *“good information and evidence are lacking for properly crafting and vetting proposed interventions. This problem is exacerbated by government failure to systematically conduct impact evaluations to measure the ex-post effects on outcomes of approved interventions.”*¹⁷⁵ Effective use of data has also been highlighted as a challenge: *“even when relevant information is available, policymakers are often blinded by factors such as biases due to ingrained values and beliefs, lack of critical thinking and open-mindedness, and failure to think independently.”*¹⁷⁶

The lack of data and lack of use of data, where available, can lead to poor programming at the national and local levels.

In addition, lack of data on particularly vulnerable and marginalised groups of children, for example, children with disabilities, children from indigenous communities, street-connected children and children living in poor urban settlements, compounds the marginalisation of these children. Lack of data on outcomes and well-being among these groups of children effectively renders them invisible in policy and programming and results in an inability to target resources and programmes effectively to meet their needs.

According to key stakeholders and experts that participated in the validation workshops for the report in August 2017, the key underlying challenge with data collection, management and use is a lack of clear accountability within government for ‘data’ and therefore an absence of a government framework for overall leadership, quality control and oversight of government generated. Accountabilities for data collection and management appear to be agency specific, with ad hoc agency specific solutions (and ad-hoc support from development agencies). The oversight agencies (NEDA and DBM) tend to view data from their specific oversight role, and, while the Philippines Statistics Authority (PSA) has the technical capacity to collect household data and implement national surveys, it remains an implementation agency that needs to be funded and tasked by another government agency. Data collection and management is therefore highly fragmented in the Philippines, and this has undermined the quality and use of data.

2.4.1. Monitoring mechanisms

Congress can be described as the main monitoring body. It exercises oversight, passes laws and the General Appropriations Act. Congress can call for an inquiry about how laws and policies are being implemented by the Executive, including laws relating to children.

The NEDA leads in planning and monitoring of the overall socio-economic development of the Philippines. It also monitors the implementation of the UNICEF-GPH Country Programme and the UN Development Assistance Framework. The DBM is responsible for monitoring expenditure, the impact

¹⁷⁴ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 14

¹⁷⁵ Vincente B. Paqueo, Aniceto C. Orbeta Jr. and Gilberto M. Llanto, Philippine Institute of Development Studies, *Unintended consequences: The folly of uncritical thinking* (2017), p. 19.

¹⁷⁶ Vincente B. Paqueo, Aniceto C. Orbeta Jr. and Gilberto M. Llanto, Philippine Institute of Development Studies, *Unintended consequences: The folly of uncritical thinking* (2017), p. 19.

of government programmes funded under the General Appropriation Act and assessing the outcome of such expenditure.

The Presidential Human Rights Committee was established under Administrative Order No. 29 on 27 January 2002. Its role is to act as the primary advisory body to the President on human rights concerns and issues in the country; to assess and monitor all aspects of human rights within the Philippines; to assist victims of human rights violations and their families; and perform other functions and duties as directed by the President.¹⁷⁷

Additionally, the CWC, whose mandate was affirmed by Executive Order 806 signed 8 June 2009, is the inter-agency body for children in the Philippines. It has a mandate to coordinate the implementation and enforcement of all laws, policies, programmes and measures for children and is the main institutional mechanism for implementing and monitoring the National Plan of Action for Children, formulating policies for children and monitoring implementation of the Convention on the Rights of the Child .

Local Councils for the Protection of Children (LCPCs) have been established at barangay, municipal, city and provincial levels, and 17 Regional Sub-Committees for the Welfare of Children (RSCWCs) have also been established to link National Government with the LGUs. However, in 2007 although LCPCs had been organized in 97 per cent of barangays, they were only functional in 19.8 per cent.¹⁷⁸ Furthermore, the UN Committee on the Rights of the Child has raised concern about the lack of human and financial resources allocated to the CWC, LCPCs and RSCWCs which may affect their ability to function effectively.¹⁷⁹

2.4.2. National Human Rights Institutions

The Constitution created the Commission on Human Rights,¹⁸⁰ which was established on 5 May 1987 under Executive Order No. 163. It is the National Human Rights Institution of the Philippines. It has the power to: investigate human rights violations involving civil and political rights, either following a complaint or on its own initiative; provide legal measures for the protection of human rights of all persons within the Philippines as well as Filipinos residing abroad; provide for preventative measures and legal aid services to the underprivileged; visit prisons and detention facilities and to monitor the Philippine Government's compliance with international treaty obligations on human rights.¹⁸¹ The Commission has a Child Rights Center, which was mandated under Presidential Memorandum Order No. 257 dated 7 February 1995. The Center acts as the focal point of coordination and facilitation of functions, programmes and activities relating to child rights, and acts as the Ombudsman for Children with a mandate to receive complaints from children. There is also a Center for Gender Equality and Women's rights in the Commission which acts as the central point of coordination for the role of Gender Ombudsman.¹⁸²

The UN Committee on the Rights of the Child has raised concerns that the Child Rights Center does not have sufficient human and financial resources or an adequate legal basis to exercise its mandate effectively and independently.¹⁸³

¹⁷⁷ Section 4, Administrative Order 29, 27 January 2002.

¹⁷⁸ CRC State report, Philippines 2009, para 23.

¹⁷⁹ CRC Concluding Observations, Philippines, 2009, para 13.

¹⁸⁰ Section 17(1), Article XII Constitution.

¹⁸¹ Section 18, Article XII Constitution.

¹⁸² <http://198.23.173.74/chr/what-does-the-commission-do/specialized-thematic-human-rights-program/> .

¹⁸³ CRC state report, Philippines, 2009, para 17 and 18.

2.4.3. Ratification of Treaties¹⁸⁴

The Philippines has ratified all the core Conventions on children's rights, other than the 3rd Optional Protocol on a Communications Procedure.

The UN Convention on the Rights of the Child was ratified by the Philippines on 21 August 1990. The Philippines does not have a consolidated piece of legislation covering children's rights, but instead has a number of laws containing relevant provisions relating to children and children's rights. These include the Anti-Violence Against Women and their Children Act 2004 (Republic Act No. 9208), the Juvenile Justice and Welfare Act 2006 (Republic Act No. 9344), the Children's Television Act of 1997 (Republic Act No. 8370), the Child Protection Act 1992 (Republic Act No. 7610) as amended, and the Child and Youth Welfare Code 1974 (Presidential Decree 603). However, the UN Committee on the Rights of the Child has raised concerns about the lack of implementation and enforcement of legislation relating to children in the Philippines, in particular the Child Protection Act 1992.¹⁸⁵

The Convention for the Elimination of all forms of Discrimination Against Women (CEDAW) was ratified by the Philippines on 5 August 1981. In similar fashion to the CRC, CEDAW has not been directly incorporated into Philippine Law. Instead, there are a number of pieces of legislation dealing with women's rights in the Philippines. In particular, the Philippines enacted Republic Act 9710, the Magna Carta of Women in 2009 to strengthen the legal and institutional framework in accordance with CEDAW.¹⁸⁶ However the CEDAW has raised concerns that a number of Bills needed to harmonise national legislation with CEDAW have been pending for a long time.¹⁸⁷ The Philippines has also adopted a Women's Empowerment, Development and Gender Equality Plan for 2013-2016, and a national action plan on women and peace and security for the period 2010-2016. At the time of writing of this assessment report, there did not appear to be a new Gender Equality Plan.

The Philippine Commission on Women (PCW) has been established to advance the legislative agenda and monitor the implementation of a Women's Empowerment, Development and Gender Equality Plan.¹⁸⁸ However, concerns have been raised by the CEDAW Committee that the current level of resources available to the Commission are not sufficient for its mandate.¹⁸⁹

The Convention on the Rights of Persons with Disabilities (CRPD) was ratified by the Philippines on 15 April 2008. The National Council on Disability Affairs was established by Executive Order 709 and is the central government agency tasked with forming policies and proposing legislation on the rights of persons with disabilities.¹⁹⁰ There are a number of laws which have been introduced to promote, respect and protect the rights of persons with disabilities including Republic Act No. 7277 as amended by Republic Act No. 9442, the Magna Carta for Persons with Disabilities.¹⁹¹

¹⁸⁴ For a full list of ratified treaties, see Annex 1, which sets out the reporting status of the core human rights treaties in the Philippines including the past and upcoming reporting requirements.

¹⁸⁵ CRC Concluding Observations, Philippines, 2009 para 11.

¹⁸⁶ Human Rights Council, Report of the Working Group on the Universal Periodic Review, Philippines, 9 July 2012, para 15.

¹⁸⁷ Committee on the Elimination of Discrimination against Women, Concluding observations on the combined seventh and eighth periodic reports of the Philippines, 25 July 2016, (CEDAW Concluding Observations, Philippines, 2016) para 12.

¹⁸⁸ CEDAW Concluding Observations, Philippines, 2016, para 5.

¹⁸⁹ CEDAW Concluding Observations, Philippines, 2016, para 17.

¹⁹⁰ Committee on the Rights of Persons with Disabilities, Consideration of reports submitted by States parties under article 35 of the Convention, Initial Report of State Parties due in 2010, The Philippines, 3 November 2015, (CRPD State Report, Philippines, 2010) para 17.

¹⁹¹ (CRPD State Report, Philippines, 2010), para 14.

Overall, the Philippines has kept up with its treaty body reporting requirements, although most State Party reports have been submitted late. The 5th and 6th periodic reports on the implementation of the CRC is due in September 2017.

The Philippines has undergone three Universal Periodic Review (UPR) processes (in 2008, 2012 and 2017); 95 State delegations engaged in inter-active dialogue with the Government of the Philippines at the third UPR hearings in 2017. The focus of the recommendations was on the need for the Government to address human rights abuses in the 'drug-war' and in particular, extrajudicial killings, and resistance to the re-introduction of the death penalty. These issues took up much of the attention of the delegates as did one particular issue in relation to children: the proposed reduction in the minimum age of criminal responsibility, with a recommendation from a number of States that this Government proposal should not be enacted. Further recommendations included taking further steps to end violence against children, the need to continue the reform of the juvenile justice system and to ensure separate detention facilities for children and adult; raising the age of sexual consent, the prevention of trafficking and ensuring access to education, particularly of Indigenous children, as well as the prevention of recruitment by armed groups.

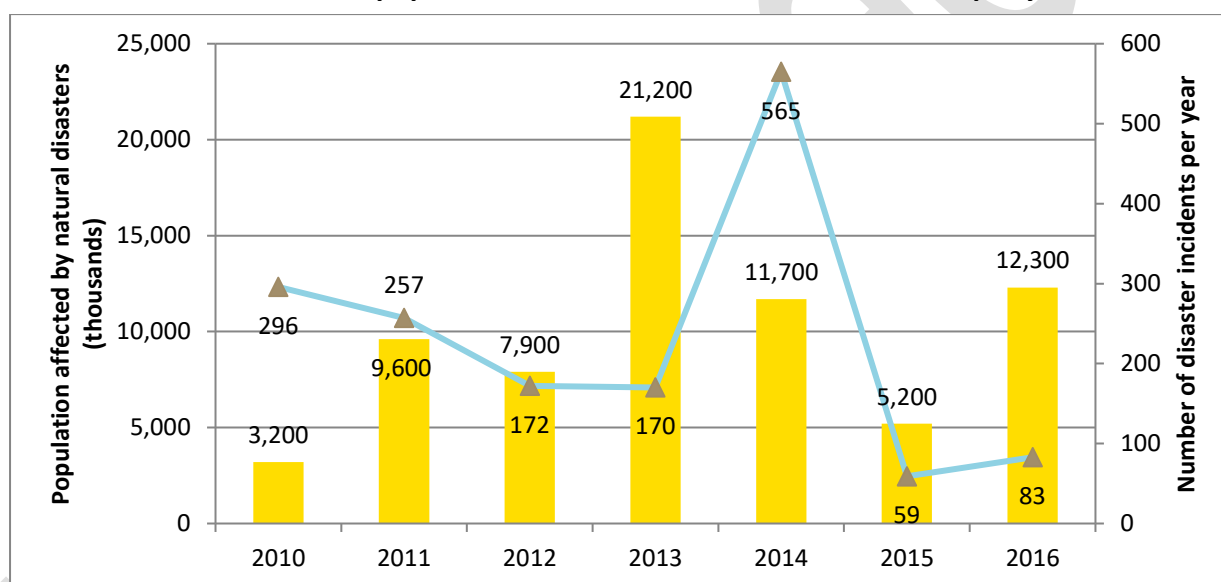
3. Cross-cutting issues impacting on children’s rights

3.1. Climate Change and Risks from Natural Disasters

The Philippines is vulnerable to both natural and man-made disasters. This section primarily deals with the cross-cutting issues and impacts of natural disasters on children, while the major man-made disaster risks flowing from armed conflict are dealt with in section 3.2.

The Philippines is located on the Pacific Ring of Fire, making it vulnerable to earthquakes, cyclones and volcanic hazards.¹⁹² There are around 20 tropical storms per year, approximately five of which are destructive,¹⁹³ and around seven to nine typhoons make landfall every year.¹⁹⁴ The Philippines is in the top five countries considered to be most vulnerable to climate change impacts.¹⁹⁵ Between 2000 and 2017 the Philippines experienced 273 disasters caused by natural hazards.¹⁹⁶ The Philippines is distinct from some other countries in that natural disasters tend to be widely distributed across its regions affecting a large proportion of the overall population.¹⁹⁷

Table 3.1. The affected population and number of disaster incidents per year



Source: OCD/NDRRMC as referenced in Philippines Profile, OCHA

The location of the Philippines leaves it highly exposed to recurrent hydro-meteorological and geophysical hazards, including tropical storms and typhoons, floods, landslides, earthquakes, tsunamis, volcanic eruptions and droughts. These hazards can result in disasters based on circumstances such as where they impact and the level of preparedness for such hazards. Island

¹⁹² UNDP, About the Philippines, <http://www.ph.undp.org/content/philippines/en/home/countryinfo.html>.

¹⁹³ Philippines country profile, Internal Displacement Monitoring Centre, accessed at <http://www.internal-displacement.org/countries/philippines/> on 30 August 2017.

¹⁹⁴ Second National Communication to the United Nations Framework Convention on Climate Change, Philippines, p 15.

¹⁹⁵ Global Climate Risk Index 2015, Germanwatch.

¹⁹⁶ Data accessed at http://emdat.be/emdat_db/ on 07 July 2017.

¹⁹⁷ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 37.

coastlines are vulnerable to tsunamis and sea surges.¹⁹⁸ Floods occur during the rainy season from June to November and during the southwest Monsoon from November to April.¹⁹⁹ Some areas of the country, including Sulu, Basilan, Maguindanao, Lanao Del Sur and Lanao Del Norte are prone to drought resulting in water shortages and crop failure as well as increased risk of forest fires and a reduction in hydropower generation and access to electricity.²⁰⁰

The El Niño (Southern Oscillation) regularly affects the Philippines, resulting in droughts. Around 50 per cent of the time this is followed by La Niña, bringing unusually cold and wet conditions leading to heavy rainfall, flooding, a strong monsoon and more typhoons.²⁰¹ In 2016, El Niño lasted from January to June 2016 and was characterised by significantly below normal levels of rainfall, warmer than average air temperature, dry spells and drought. The impact was felt in 16 provinces, 65 municipalities and 6 cities across the Philippines; 285,000 farmers and 379,000 hectares of farmland were affected, resulting in agricultural production losses of \$258,000,000.²⁰²

The Philippines is vulnerable to the impacts of climate change and has experienced noticeable adverse effects in recent years which are expected to intensify over the medium and long term.²⁰³ Between 1951 and 2010, the Philippines' observed mean temperature increases of 0.64 degrees Celsius, which equates to 0.01 degrees Celsius per year.²⁰⁴ Using a mid-range emissions scenario, the climate predictions by the Philippine Atmospheric, Geophysical and Astronomical Services Administration for 2020 and 2050 indicate that all areas of the Philippines will get warmer by 0.9–1.1 degrees by 2020 and 1.8–2.1 degrees in 2050.²⁰⁵ Alongside this there will be a reduction in rainfall in most of the country in the summer, but an increase in rainfall during the monsoon seasons.²⁰⁶ This is likely to result in increased droughts in the summer months, and increased flooding during monsoon seasons.

Sea level rise, at a rate faster than the global average, has already been observed in some coastal areas of the Philippines.²⁰⁷ The sea levels in the Philippines are projected to continue to rise by between 7.6 and 10 centimetres every 10 years, which is significantly more than the average worldwide sea level rise of 3.1 centimetres per decade.²⁰⁸ Based on satellite observations of sea level rise between 1993 and 2015, the largest sea level rise in the Philippines was in coastal areas to the east of Leyte, Samar and Mindanao islands; south of Zamboanga; and along the south western coasts of the Central and Western Visayas.²⁰⁹ This suggests that these areas are likely to be at a higher risk from future sea level rises.²¹⁰ Cagayan province and Palawan Island are also at high risk from future

¹⁹⁸ Philippines country profile, Internal Displacement Monitoring Centre, Accessed at <http://www.internal-displacement.org/countries/philippines/> on 7 July 2017.

¹⁹⁹ Philippines country profile, Internal Displacement Monitoring Centre, Accessed at <http://www.internal-displacement.org/countries/philippines/> on 7 July 2017.

²⁰⁰ UNICEF, Climate Landscape Analysis for Children in the Philippines, UNICEF Working Paper, 2017, p 9.

²⁰¹ UNICEF, Climate Landscape Analysis for Children in the Philippines, UNICEF Working Paper, 2017, p 9.

²⁰² Philippines: 2016 Highlights of Displacement and Effects Snapshot, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha-phl-2016-snapshot_31jan2016.pdf.

²⁰³ National Climate Change Action Plan 2011-2028, Climate Change Commission, p i.

²⁰⁴ National Climate Change Action Plan 2011-2028, p 2.

²⁰⁵ National Climate Change Action Plan 2011-2028, p 2.

²⁰⁶ National Climate Change Action Plan 2011-2028, p 2.

²⁰⁷ Philippines Development Plan 2017-2022, p 40.

²⁰⁸ Climate Landscape Analysis for Children in the Philippines, UNICEF Working Paper, 2017, p 10.

²⁰⁹ Projections of mean sea level change for the Philippines, December 7 2016, Met Office, p 9.

²¹⁰ Projections of mean sea level change for the Philippines, December 7 2016, Met Office, p 8.

sea level rises due to factors related to the nature of their coastlines.²¹¹ Coastal cities, such as Manila, are also at an increased risk from potential sea level rises due to subsidence.²¹² It is difficult to predict accurately where and when the impacts of sea level rise will affect the Philippines due to the uncertainties around future emissions and the magnitude of future ice sheet and glacial melting.²¹³

The majority of the population of the Philippines live in the immediate vicinity of the coast, with 60 per cent of the population living in large coastal cities, and so are at risk from sea level rises.²¹⁴ The National Climate Change Action Plan 2011-2028 recognises the future human security risks of displacement and migration as a result of sea-level rise,²¹⁵ and the risks from rising sea levels are referenced in the National Framework Strategy on Climate Change 2010-2022²¹⁶ and the Philippine Development Plan 2017-2022.²¹⁷ However, there do not appear to be any publicly available Government plans to address the potential displacement and migration that may be caused by sea level rise, nor are there accurate estimates of the affected population and timeframes. This suggests that there may be a lack of long-term planning for these slow onset consequences of climate change.

As the impacts of climate change increase, storm surges²¹⁸ are becoming more frequent and stronger, increasing the risk to those living on the coast.²¹⁹ Large tropical cyclones create storm surges which can devastate crowded coastal regions and low lying areas. Evidence suggests that climate change will intensify storm surges in the future, both due to rising sea levels and due to intensified cyclone activity as a result of warmer oceans.²²⁰ This will lead to greater destruction as storm surges move further inland threatening larger areas than in the past.²²¹ The Philippines is one of the top 10 countries at risk from intensified storm surges based on the fact that areas prone to storm surges in the Philippines account for around 52.3 per cent of coastal GDP.²²² Four cities, including the capital city Manila, as well as Butuan and Cotabato are considered to be in the top 10 cities most vulnerable to storm-surge disasters in the East Asia and Pacific region.²²³ In terms of population vulnerability, Manila has the largest population at risk of exposure to future storm surges based on future urban

²¹¹ Projections of mean sea level change for the Philippines, December 7 2016, Met Office, p 10.

²¹² Projections of mean sea level change for the Philippines, December 7 2016, Met Office, p 1.

²¹³ Projections of mean sea level change for the Philippines, December 7 2016, Met Office, p 22-23.

²¹⁴ Climate Landscape Analysis for Children in the Philippines, UNICEF Working Paper, 2017, p 11.

²¹⁵ National Climate Change Action Plan 2011 – 2028, Philippines Climate Change Commission p 16.

²¹⁶ National Framework Strategy on Climate Change, 2010-2022, Climate Change Commission, April 2010, p 10.

²¹⁷ Philippines Development Plan 2017-2022, p 27.

²¹⁸ “The temporary increase, at a particular locality, in the height of the sea due to extreme meteorological conditions (low atmospheric pressure and/or strong winds). The storm surge is defined as being the excess above the level expected from the tidal variation alone at that time and place.” Climate Change 2007 Synthesis Report, A Report of the Intergovernmental Panel on Climate Change

²¹⁹ Second National Communication to the United Nations Framework Convention on Climate Change, Philippines, p2

²²⁰ Climate Change and the Future Impacts of Storm-Surge Disasters in Developing Countries, Centre for Global Development Working Paper 182, September 2009, p 16.

²²¹ Climate Change and the Future Impacts of Storm-Surge Disasters in Developing Countries, Centre for Global Development Working Paper 182, September 2009, p 16.

²²² Climate Change and the Future Impacts of Storm-Surge Disasters in Developing Countries, Centre for Global Development Working Paper 182, September 2009, p 16.

²²³ Brecht, H., Dasgupta, S., Laplante, B., Murray, S., & Wheeler, D. (2012). Sea-level rise and storm surges: High stakes for a small number of developing countries. *Journal of Environment Development*, 21(1), 120–138; Crepin, Christophe. 2013. Getting a grip on climate change in the Philippines: extended technical report, Public Expenditure Review (PER). Washington DC ; World Bank, p xxvi. See also, Development Working Paper 182, September 2009, p

growth and coastal characteristics.²²⁴ The risks in cities are likely to be particularly severe in poorer neighbourhoods where there is no infrastructure or it is badly maintained,²²⁵ for example, where there is a lack of storm water drainage infrastructure, or poorly built houses which cannot withstand storm surges.

Although Disaster Risk Reduction and Management (DRRM) can mitigate the immediate impacts of disasters, as climate change continues the number, frequency and impact of disasters are likely to get worse. Thought needs to be given to long term planning to deal with, for example, the relocation of populations from low lying islands.²²⁶

3.1.1. Typhoons

There have been three major tropical storms or cyclones which have hit the Philippines since 2011. Tropical Storm Washi (Sendong) made landfall on 17 December 2011 affecting 624,600 people, leaving over 1,900 people dead,²²⁷ displacing 430,500 and destroying 40,000 homes.²²⁸ The total amount of damage was estimated to be USD 293 million made up of damage to housing (\$75 million), transport infrastructure (\$6.3 million), education (\$ 2.2 million), health (\$16.1 million), agriculture (\$10.8 million), power \$14.3 million), water (\$5.6 million) and telecommunications (\$600,000).²²⁹ The macroeconomic impact was low but negative economic effects of the disaster were felt at by individual households and small businesses.²³⁰

Typhoon Bopha (Pablo) made landfall in the Philippines in December 2012. Over 216,000 houses were damaged or destroyed, 6.2 million people were affected, 835,934 people were displaced²³¹ and 1,268 people were killed.²³² It caused \$1.04 billion in damages.²³³

Typhoon Haiyan (Yolanda) which made landfall in the Philippines in November 2013 was one of the most powerful tropical storms on record. It brought flooding, landslides and widespread damage, particularly in East Samar and Leyte Provinces.²³⁴ Haiyan affected more than 14 million people including 5.9 million children.²³⁵ Nearly 4.1 million people were displaced from their homes, including 1.7 million children and over 6,000 people were killed.²³⁶ 5.9 million workers lost income sources,

²²⁴ Climate Change and the Future Impacts of Storm-Surge Disasters in Developing Countries, Centre for Global Development Working Paper 182, September 2009, p 9.

²²⁵ Climate Change and the Future Impacts of Storm-Surge Disasters in Developing Countries, Centre for Global Development Working Paper 182, September 2009, p 9.

²²⁶ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

²²⁷ OCHA Philippines destructive Tropical Cyclones from 2006-2016

http://reliefweb.int/sites/reliefweb.int/files/resources/ocha_phl_destructive_typhoons_2006_to_2016.pdf.

²²⁸ Philippines (Mindanao) Human Action Plan 2013, Typhoon BOPHA/PABLO Response – an Action Plan for recovery, January 2013, OCHA, p 2.

²²⁹ Disaster-induced internal displacement in the Philippines – the case of tropical storm Washi/Sendong, Internal Displacement Monitoring Centre, January 2013, p 9.

²³⁰ Disaster-induced internal displacement in the Philippines – the case of tropical storm Washi/Sendong, Internal Displacement Monitoring Centre, January 2013, p 9.

²³¹ Philippines (Mindanao) Human Action Plan 2013, Typhoon BOPHA/PABLO Response – an Action Plan for recovery, January 2013, OCHA, p 2.

²³² OCHA Philippines destructive Tropical Cyclones from 2006-2016,

http://reliefweb.int/sites/reliefweb.int/files/resources/ocha_phl_destructive_typhoons_2006_to_2016.pdf.

²³³ OCHA Philippines destructive Tropical Cyclones from 2006-2016,

http://reliefweb.int/sites/reliefweb.int/files/resources/ocha_phl_destructive_typhoons_2006_to_2016.pdf.

²³⁴ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF, p 23.

²³⁵ One Year After: Typhoon Haiyan, Philippines, Progress Report, UNICEF, December 2014.

²³⁶ One Year After: Typhoon Haiyan, Philippines, Progress Report, UNICEF, December 2014.

with agriculture and fishing communities worst affected.²³⁷ 571 health facilities, and 2,500 schools and 2,500 day centres were damaged or destroyed.²³⁸ Many children in relocation sites and urban centres stopped going to school following the Typhoon due to the distance from their original schools, lack of transport and children's reluctance to attend new schools.²³⁹ Schools were also used for evacuation and accommodation and were not therefore available for classes to be run.²⁴⁰ Water networks were badly damaged, water sources were contaminated and there was a high risk of waterborne diseases.²⁴¹ It caused USD 2.2 billion in damages.²⁴²

In 2016 two serious typhoons made landfall in the Philippines. Typhoon Haima (Lawin) lasted from 17–20 October 2016 and intensified into a super typhoon, affecting 22 provinces in five regions in the north of the Philippines. It affected 2.4 million people, 2.3 million people were displaced, 271,000 houses were damaged and USD 74 million in damage was caused to agriculture and infrastructure.²⁴³ 197,000 hectares of farmland and 41,300 farmers were affected, with 154 million in total losses in the agriculture sector, mainly in rice production where there were USD 111 million in losses.²⁴⁴

From 23–27 December 2016 Typhoon Nock-Ten (Nina) made 8 landfalls affecting 15 provinces in 4 regions in central Philippines. 2.88 million people were affected, with 2.6 million displaced, 393,000 homes damaged (98,900 of which were destroyed)²⁴⁵ while 1,548 classrooms were destroyed, and 3,797 classrooms were damaged.²⁴⁶ USD 122 million damage was caused to agriculture and infrastructure, with 125,500 farmers affected and 138,300 hectares of agricultural land damaged.²⁴⁷

3.1.2. Earthquakes

Historically, the Philippines has been prone to earthquakes with around 100–150 earthquakes of magnitude 4.0 and above per year occurring between 1600 and early 2000.²⁴⁸ More recently, between January and April 2017 there were 122 earthquakes with a magnitude of 4.0 or above, 59 of these occurring in April 2017. In April 2017, there were 946 seismic events in the Philippines, 64 per cent of which were off shore, and the majority of these were between 2.1 and 3.0 in magnitude.

²³⁷ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, 2016, UNICEF, p 24.

²³⁸ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, 2016, UNICEF, p 25.

²³⁹ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, 2016, UNICEF, p 25.

²⁴⁰ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, 2016, UNICEF, p 49.

²⁴¹ One Year After: Typhoon Haiyan, Philippines, Progress Report, UNICEF, December 2014, p 8.

²⁴² OCHA Philippines destructive Tropical Cyclones from 2006-2016, http://reliefweb.int/sites/reliefweb.int/files/resources/ocha_phl_destructive_typhoons_2006_to_2016.pdf.

²⁴³ Philippines: 2016 Highlights of Displacement and Effects Snapshot, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha-phl-2016-snapshot_31jan2016.pdf.

²⁴⁴ Philippines: Typhoon Haima (Lawin) – Agricultural Damage as of 8 December 2016, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/humanitarian_snapshot_lawin_8dec2016.pdf.

²⁴⁵ Philippines: 2016 Highlights of Displacement and Effects Snapshot, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha-phl-2016-snapshot_31jan2016.pdf.

²⁴⁶ Philippines: Typhoon Nock-Ten (Nina) January 2017, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha_phl_ty_nock-ten_infographic_31jan2017.pdf.

²⁴⁷ Philippines: Typhoon Nock-Ten (Nina) January 2017, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha_phl_ty_nock-ten_infographic_31jan2017.pdf.

²⁴⁸ Philippines: Seismic Events in April 2017, OCHA, https://www.humanitarianresponse.info/system/files/documents/files/ocha_phl_seismic_events_april_2017.pdf.

There were three significant earthquakes in April 2017 which, along with their aftershocks, caused minor to severe damage to structures and displaced several people in the affected provinces.²⁴⁹

In October 2013, a magnitude 7.2 earthquake struck Bohol Island in the Visayas. As of 3 February 2014, 1,134 classrooms were completely destroyed, 79,217 homes were damaged or destroyed, 17 health stations, one hospital and 8 rural health units were destroyed. 3 months after the event 367,580 people were living in damaged houses or tents near their homes, while 2,681 people remained in evacuation centres. 17 child friendly spaces were set up by 3 February 2014 with 28 more planned.²⁵⁰ 3.5 million people were affected, 227 were killed and 976 were injured.²⁵¹ Classes were suspended in a number of areas after the earthquake, but all areas had resumed classes by 5 November 2013.²⁵²

3.1.3. Volcanoes

The Philippines also faces a high risk from volcanic eruptions. 45 of 47 volcanoes in the Philippines are of a generally explosive type which, when they erupt, often cause mudflows and pyroclastic flows which have high human impacts. 40 of the volcanoes have over 100,000 people living within 30 km of their summits and Manila is only 37 km from the nearest volcano. 3 per cent of the population of the Philippines live within 10 km of a volcano, 33 per cent within 30 km of a volcano and 92 per cent within 100 km of a volcano.²⁵³

The eruption of Pinatubo volcano in 1991 was one of the largest in the world in the 20th century.²⁵⁴ Although it had heavy socio-economic impacts, a relatively low 800 lives were lost (with half of those due to disease in camps of those displaced by the eruption) due to successful monitoring and evacuation.²⁵⁵

The majority of high-risk volcanoes are monitored in the Philippines, but there is still a lot of uncertainty about their behaviour and associated risks for a number of the volcanoes and so there is a need for more geological knowledge and research on these volcanoes.²⁵⁶

3.1.4. Legislation and policy on climate change and disasters

Legislation

The Philippines has a reputation for having a strong and comprehensive legal framework on disaster response and climate change. The Special Representative of the UN Secretary-General on Disaster Risk Reduction (DRR) has noted that the Philippines law on climate change adaptation and disaster

²⁴⁹ Philippines: Seismic Events in April 2017, OCHA,

https://www.humanitarianresponse.info/system/files/documents/files/ocha_phl_seismic_events_april_2017.pdf.

²⁵⁰ Philippines: Earthquake in Bohol province, Situation Report No.11 (as of 3 February 2014), OCHA.

²⁵¹ NDRRMC Final Report re effects of Magnitude 7.2 Sagbayan Bohol Earthquake, 4 November 2013.

²⁵² NDRRMC Final Report re effects of Magnitude 7.2 Sagbayan Bohol Earthquake, 4 November 2013.

²⁵³ GFDRR Volcano Risk Study, Volcano Hazard and Exposure in GFDRR Priority Countries and Risk Mitigation Measures, 3 May 2011.

²⁵⁴ GFDRR Volcano Risk Study, Volcano Hazard and Exposure in GFDRR Priority Countries and Risk Mitigation Measures, 3 May 2011.

²⁵⁵ GFDRR Volcano Risk Study, Volcano Hazard and Exposure in GFDRR Priority Countries and Risk Mitigation Measures, 3 May 2011.

²⁵⁶ GFDRR Volcano Risk Study, Volcano Hazard and Exposure in GFDRR Priority Countries and Risk Mitigation Measures, 3 May 2011.

risk reduction are the “*best in the world*”, and has recognised the shift from a reactive to a proactive stance on disasters.²⁵⁷

Presidential Decree No. 1566 on Strengthening the Philippines Disaster Control and Capability and establishing the National program on Community Disaster Preparedness was the foundation for disaster management in the Philippines from 1978 until 2010.

Following the Hyogo Framework for Action (a 10-year plan to reduce disaster risks adopted by 168 UN member states in 2005) the Philippines reformed its disaster law and adopted Republic Act 10121, the Philippines Disaster Risk Reduction and Management Act in May 2010 (the 2010 Act). The 2010 Act restructured the risk reduction and emergency management bodies and functions at all levels of Philippines Government and moved the focus from disaster response to disaster preparedness. The 2010 Act has made it the formal responsibility of Government at national, provincial and local levels to develop policies and plans relating to all aspects of DRRM, reduce underlying risk factors and prepare for effective response and early recovery.²⁵⁸

As well as the Hyogo Framework for Action the Philippines has affirmed the Sendai Framework for Disaster Risk Reduction 2015–2030. Further the Philippines ratified the ASEAN Agreement on Disaster Management and Emergency Response in 2009, which is a legally binding agreement among ASEAN states.

In addition, the Philippines has ratified the United Nations Framework Convention on Climate Change on 31 October 1994²⁵⁹ and the Paris Agreement which seeks to implement the Convention.²⁶⁰ The Paris Agreement acknowledges that when parties are taking action to address climate change they should respect, promote and consider their existing international obligations including in relation to the rights of children.²⁶¹ When taken together with the Convention on the Rights of the Child it has been argued that there is now an international obligation on States to take action to protect the rights and best interests of children from the impacts of climate change.²⁶²

The 2010 Act created the National Disaster Risk Reduction and Management Council (NDRRMC), which is in charge of the general oversight of the DRRM system in the Philippines. The NDRRMC is the highest policy-making body on DRRM, advising the President of the Philippines on the status of disaster preparedness, prevention, mitigation, response and rehabilitation. The Chair of the NDRRMC is the Secretary of National Defence, and there are four vice chairs each responsible for disaster prevention/mitigation, preparedness, response and rehabilitation and recovery.²⁶³ The NDRRMC is the central coordinating mechanism for disaster preparedness and has the mandate to bring together

²⁵⁷ ‘UN lauds Philippines’ climate change laws ‘world’s best’, Michael Lim Ubac, 4 May 2012, Inquirer.net, <http://globalnation.inquirer.net/35695/un-lauds-philippines%E2%80%99-climate-change-laws-%E2%80%98world%E2%80%99s-best%E2%80%99>.

²⁵⁸ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 4.

²⁵⁹ Status of ratification of the Convention, http://unfccc.int/essential_background/convention/status_of_ratification/items/2631.php, accessed 30 August 2017.

²⁶⁰ Paris Agreement – Status of Ratification, http://unfccc.int/paris_agreement/items/9444.php, accessed 30 August 2017. The Paris Agreement was agreed with the purpose of enhancing the implementation of the United Nations Framework Convention on Climate Change and entered into force in the Philippines on 22 April 2017.

²⁶¹ Preamble to the Paris Agreement, adopted by the Conference of the Parties to the United Nations Framework Convention on Climate Change at its 21st session, FCCC/CP/2015/10/Add.1, 29 January 2016.

²⁶² Human Rights Council Thirty-fourth session, Relationship between climate change and the full and effective enjoyment of the rights of the child, Informal Summary of inputs received, A/HRC/34/CRP.2, 27 February 2017.

²⁶³ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 5-7.

agencies for the purposes of disaster risk reduction and management.²⁶⁴ The National Disaster Risk Reduction and Management Plan 2011-2028 was issued shortly after the 2010 Act became law.

The NDRRMC is also responsible for declaring a state of calamity (involving mass casualty and/or major damage to property, disruption of means of livelihoods, roads and day-to-day lives)²⁶⁵ and can advise the President to call for international humanitarian assistance. The declaration of a state of calamity allows for the appropriation of calamity funds, price freezes on basic necessities and the granting of no-interest loans to help people rebuild homes destroyed by disasters.²⁶⁶

Under the National DRRM Plan, the Department of Science and Technology is responsible for monitoring, forecasting and early warning systems for natural disasters.²⁶⁷ The early warning system includes provisions regarding children: when a weather disturbance is expected within 24 hours (tropical cyclone with winds of between 60 and 100 kph) children's outdoor activities should be postponed.²⁶⁸ When a weather disturbance is expected within 18 hours (tropical cyclone with winds of between 100–185 kph), classes should be suspended and children should stay in the safety of strong buildings.²⁶⁹

The 2010 Act also creates regional and local bodies. It established the Regional Disaster Risk Reduction and Management Councils (RDRRMCs), which are under a statutory duty to coordinate, integrate, supervise and evaluate the activities of the Local Provincial, City, and Municipal Disaster Risk Reduction and Management Councils (LDRRMCs). The Barangay Development Councils (BDCs) are to serve as the LDRRMCs in every barangay.²⁷⁰ Local membership includes the local chief executive, the local planning and development officer, and heads of other local departmental officers, as well as 4 accredited CSO members and one private sector representative.²⁷¹ The function of the LDRRMCs is to:

- (1) Approve, monitor and evaluate the implementation of the LDRRMPs and regularly review and test the plan consistent with other national and local planning programs;
- (2) Ensure the integration of disaster risk reduction and climate change adaptation into local development plans, programs and budgets as a strategy in sustainable development and poverty reduction;
- (3) Recommend the implementation of forced or preemptive evacuation of local residents, if necessary; and
- (4) Convene the local council once every three (3) months or as necessary.

In addition to the LDRRMCs, the 2010 Act also establishes the Local Disaster Risk Reduction and Management Offices (LDRRMO) in every province, city and municipality (under the governor, city or municipal mayor) and a Barangay Disaster Risk Reduction and Management Committee (BDRRMC)

²⁶⁴ NDRRMC National Disaster Preparedness Plan 2015-2028, volume 1, p 36.

²⁶⁵ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 16.

²⁶⁶ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 17.

²⁶⁷ National Disaster Risk Reduction and Management Plan 2011-2028, p 3.

²⁶⁸ Philippines Disaster Management Reference Handbook, 2015.

²⁶⁹ Philippines Disaster Management Reference Handbook, 2015.

²⁷⁰ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 12.

²⁷¹ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 11.

in every barangay. The LDRRMO and BDRRMC are responsible for setting the direction, development, implementation and coordination of disaster risk management programmes within their territorial jurisdiction, including raising public awareness and organizing, training and supervising the local emergency response team.²⁷²

The 2010 Act complements Republic Act 9729, the Climate Change Act of 2009, which was introduced to mitigate the impact of climate change in the Philippines, promoting a coordinated approach to climate change and disaster response and reduction.²⁷³ The Climate Change Act requires the State to protect and advance the right of the people to a healthful ecology in accord with the rhythm and harmony of nature.²⁷⁴ It adopts the strategic goals of Hyogo Framework for Action to build national and local resilience to climate change-related disasters, and recognises that climate change and disaster risks are closely related such that effective DRRM will enhance climate change adaptive capacity.²⁷⁵ Children are specifically recognised in the Climate Change Act as one of the groups particularly vulnerable to climate change threats.²⁷⁶

The Climate Change Act established the Climate Change Commission to mainstream climate change alongside DRRM into national, sectorial and local development plans. It liaises with NDRRMC to reduce people's vulnerability to climate-related disasters.²⁷⁷ A number of members from the NDRRMC, including its chair, sit as members of the Climate Change Commission's advisory board. Additionally, a panel of technical experts constituted by the Climate Change Commission is made up of those with DRRM and Climate Change expertise.²⁷⁸

In order to build on the Climate Change Act, the National Climate Change Action Plan 2011-2028 was prepared. It includes the objective of reducing the risks of vulnerable groups, including children, through Climate Change Adaptation and DRRM programs, making health and social protection delivery systems responsive to climate change risks and having climate change adaptive human settlements and services developed, promoted and adopted.²⁷⁹

Following Typhoon Haiyan, the Philippines introduced Republic Act 10821, the Children's Emergency Relief and Protection Act 2016. Under this Act a comprehensive and strategic programme of action is required to provide children, pregnant and lactating mothers affected by disasters and other emergency situations with the support and assistance necessary for their immediate recovery and protection.²⁸⁰ The DSWD is responsible for formulating a Comprehensive Emergency Programme for Children, taking into consideration humanitarian standards for their protection.²⁸¹ The Plan must ensure children's rights are promoted through child centred training for all responders, provide children with information during and after disasters, including children in community disaster risk reduction programmes and consult with children on their needs and priorities for post-disaster relief

²⁷² Philippines Disaster Risk Reduction and Management Act, RA 10121, section 12.

²⁷³ Disaster-induced internal displacement in the Philippines – the case of tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 32.

²⁷⁴ Climate Change Act 2009, RA 9729, section 2.

²⁷⁵ Climate Change Act 2009, RA 9729, section 2.

²⁷⁶ Climate Change Act 2009, RA 9729, section 2.

²⁷⁷ Climate Change Act 2009, RA 9729, section 9(j).

²⁷⁸ Climate Change Act 2009, RA 9729, section 10.

²⁷⁹ National Climate Change Action Plan 2011-2028, Climate Change Commission, p 17.

²⁸⁰ Children's Emergency Relief and Protection Act 2016, RA 10821, section 2.

²⁸¹ Children's Emergency Relief and Protection Act 2016, RA 10821, section 4.

and recovery.²⁸² LGUs are required to identify safe locations for evacuation centres for children and families, and provide for immediate delivery of basic necessities and services for children in emergencies.²⁸³

Republic Act 7610, the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1992, considers disasters to be a circumstance that endangers the normal survival and development of children. It does not specify how to protect children following disasters, but there are provisions for their evacuation, preservation of family life and temporary shelter as well as monitoring and reporting of the situation of children during armed conflict.²⁸⁴

The Local Government Code of 1991 requires LGUs to provide immediate basic relief assistance including food, shelter clothing, emotional support and temporary shelter to those displaced due to conflict or disaster. This supports the role of the LDRRMCs in preparing for, responding to and facilitating recovery from the effects of any disaster. Additionally, the Local Government Code gives municipal and city government legislatures the power to reduce property taxes and interest rates after a calamity on recommendation of LDRRMCs.²⁸⁵ LGUs are also responsible for identifying people with special needs in an emergency including children, infants, pregnant women and persons with a disability and their locations so they can be provided with assistance.²⁸⁶

The DILG carried out a disaster preparedness assessment of LGUs in 2014. They found that the country had a preparedness rate of 73.9 per cent in the 1,676 LGUs assessed (composed of 77 provinces, 143 cities and 1,456 municipalities).²⁸⁷ About 99 per cent had organized LDRRMCs;²⁸⁸ 76 per cent of LGUs were considered to be operationally ready for a disaster and had an early warning system in place, evacuation centres identified and a system for registration and information guide for evacuees; and 92 per cent had a DRRM plan and budget in place.²⁸⁹

In responding to disasters, the Philippines follows the global model cluster approach introduced at international level by the UN in 2005.²⁹⁰ However, the Philippines cluster approach differs in that the cluster leads are Philippine state institutions as opposed to UN agencies. The National Disaster Coordinating Council (predecessor to the NDRRMC) designated cluster leads and laid down terms of reference at national, regional and provincial levels.²⁹¹ Other national agencies and the private sector have become involved as well.

Human rights have been factored into the discourse on the legislative framework on disaster response. The Implementing Rules and Regulations of the Philippines DRRM Act include the guiding principles contained in the Universal Declaration on Human Rights, the UN Guiding Principles on Internal Displacement, the Convention on the Elimination of Discrimination Against Women and the

²⁸² Children's Emergency Relief and Protection Act 2016, RA 10821, section 4.

²⁸³ Children's Emergency Relief and Protection Act 2016, RA 10821, section 4.

²⁸⁴ Special Protection of Children against Abuse, Exploitation and Discrimination Act, RA 7610, section 3(c).

²⁸⁵ Climate Change Act 2009, RA 9729, section 276.

²⁸⁶ DILG Compendium of Disaster Preparedness and Response Protocols, 2012.

²⁸⁷ NDRRMC National Disaster Preparedness Plan 2015-2028, volume 1.

²⁸⁸ NDRRMC National Disaster Preparedness Plan 2015-2028, volume 1.

²⁸⁹ NDRRMC National Disaster Preparedness Plan 2015-2028, volume 1.

²⁹⁰ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 19.

²⁹¹ National Disaster Coordinating Council, Circular No. 5, series of 2007, as amended by Memorandum No. 12, series of 2008 as referenced in Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 19.

Convention on the Rights of the Child.²⁹² There is, however, still a lack of legislation relating to the rights of people who have been internally displaced in the Philippines. Although a Bill on the rights of internally displaced persons (IDPs) was approved by Congress in February 2013, it was vetoed in May 2013 by the then President. A new version of the law, enshrining certain rights for IDPs is currently working its way through the Congress once more.²⁹³

The National Disaster Preparedness Plan is the strategic plan for the Philippines to ensure that various government and non-government institutions and their constituents work together to increase the awareness and capacity of communities to anticipate, avoid, reduce and survive the threats and impacts of all hazards; equip communities with the necessary skills and capability to face and survive hazards and cope with the impacts of disasters; increase DRRM and the climate change adaptation capacity of local government; develop and implement comprehensive national and local preparedness and response policies, plans and systems; and strengthen partnership and co-ordination among all key players and stakeholders.²⁹⁴ It aims to contribute to the broader vision of reducing the loss of lives and assets due to hazards.²⁹⁵

The National DRRM Framework was adopted on 16 June 2011 by the NDRRMC. Its purpose is to raise awareness and understanding among governments and people on the Philippines's DRRM goals and how they contribute to sustainable development; help to develop a common understanding of DRRM; and provide criteria for benchmarking the effectiveness of disaster risk reduction measures.²⁹⁶ It reinforces the shift from disaster response to disaster risk reduction and disaster risk management principles.²⁹⁷

The Philippine Development Plan 2017-2022 includes a target for individuals and communities to become more resilient including reducing exposure to hazards, mitigating the impact of the risks and accelerating recovery if and when the risk materialises. An index will be developed to consider these issues generating a baseline in 2018 and reviewing it in 2022.²⁹⁸ There are also strategies for expanding economic opportunities in agriculture, forestry and fishing, such as ensuring irrigation systems are disaster and climate resilient.²⁹⁹

Children's participation in DRRM is seen as important in the Philippines and local government rules allow for children's participation, in order to prepare a generation of young people to confront the increase in disaster risks that will occur as a result of climate change. The Joint Memorandum Circular No 2015-01 between the National Youth Commission and DILG dated 2 July 2015 institutionalises the participation of youth in NDRRMC. All local chief executives are enjoined to engage the youth sector as a member of the LDRRMC, integrate and allocate support for youth-oriented disaster activities in the Local Disaster Risk Reduction and Management Plan and to encourage youth volunteering on DRRM.

²⁹² Implementing Rules and Regulations of Republic Act No 10121, section 3(b).

²⁹³ Aquino vetoes bill on internally displaced persons, May 29, 2013, <https://www.rappler.com/nation/30200-aquino-vetoes-internally-displaced-persons-bill>.

²⁹⁴ National Disaster Preparedness Plan 2015-2028, Volume 1, National Disaster Risk Reduction and Management Council, p 1.

²⁹⁵ National Disaster Preparedness Plan 2015-2028, Volume 1, National Disaster Risk Reduction and Management Council, p 1.

²⁹⁶ National Disaster Risk Reduction and Management Framework, 16 June 2011, p 3-4.

²⁹⁷ Philippines Disaster Management Reference Handbook, 2015, p 42.

²⁹⁸ Philippines Development Plan 2017-2022, p. 48.

²⁹⁹ Philippines Development Plan 2017-2022, p. 116.

However, it is the attitude of elected officials towards children's participation which determines the implementation of these rules. In the Municipality of St Bernard in Southern Leyte, for instance, the Mayor sees the value in having children involved in DRRM and there are children's representatives on all the village and municipal disaster management councils,³⁰⁰ but this is by no means the case in all municipalities across the Philippines.

As part of the legislative agenda in the PDP 2017-2022 there is a plan to introduce legislation to provide for the mandatory establishment of women and child friendly spaces in all evacuation centres in the country, and an Evacuation Centre Act to establish permanent and typhoon resilient evacuation centres to avoid the need to use classrooms during calamities.³⁰¹

The Philippines legal and policy framework on DRRM is recognised as being one of the best in the world. However, as can be seen, there are a large number of committees, plans and frameworks which have been established and have to be resourced, with many appearing to have overlapping functions. Given the geographic spread of the Philippines and the wide number of people involved in the implementation of the legislative and policy framework, it may be difficult to ensure consistency of approach. In a disaster situation, the practical implementation of the law and policy is likely to be challenging: there is a risk that number of bodies involved will impact on providing a coherent and holistic approach to disaster prevention and management.

Funding

The 2010 Act established a series of DRRM funds, accessible to the national and sub-national governments.³⁰² Under section 21 of the 2010 Act a minimum of five per cent of estimated local government revenue from regular sources is to be set aside in the Local DRRM Fund for disaster risk management activities.³⁰³ Thirty per cent of the LDRRMF is allocated to a Quick Response Fund to permit rapid release of funds to LGUs for disaster.³⁰⁴ The remaining 70 per cent is allocated to disaster prevention and mitigation, preparedness, response, rehabilitation and recovery.³⁰⁵

The LDRRMF funds are included in the General Fund Annual Budget and/or Supplemental Budget of each LGU,³⁰⁶ and any projects for which LDRRMF funds are used are integrated into the Annual Investment Programme of the LGU.³⁰⁷ The Quick Response Fund can be released following the declaration of a state of calamity either by the local *Sanggunian* or the President of the Philippines.³⁰⁸

Section 22 of the 2010 Act also establishes a National DRRM Fund to be used for disaster risk reduction and mitigation; prevention; and preparedness activities.³⁰⁹ Thirty per cent of the National

³⁰⁰ Children on the frontline: Children and Young People in Disaster Risk Reduction, 2009, World Vision and Plan International, p 15.

³⁰¹ Philippines Development Plan 2017-2022, p 178.

³⁰² Philippines Disaster Risk Reduction and Management Act, RA 10121, section 21.

³⁰³ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 21.

³⁰⁴ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 21.

³⁰⁵ National Disaster Risk Reduction and Management Council Department of Budget and Management and Department of the Interior and Local Government, Joint Memorandum Circular No. 2013-1, March 25, 2013.

³⁰⁶ National Disaster Risk Reduction and Management Council Department of Budget and Management and Department of the Interior and Local Government, Joint Memorandum Circular No. 2013-1, March 25, 2013, para 6.1.

³⁰⁷ National Disaster Risk Reduction and Management Council Department of Budget and Management and Department of the Interior and Local Government, Joint Memorandum Circular No. 2013-1, March 25, 2013, para 6.2.

³⁰⁸ National Disaster Risk Reduction and Management Council Department of Budget and Management and Department of the Interior and Local Government, Joint Memorandum Circular No. 2013-1, March 25, 2013, para 6.3.

³⁰⁹ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 22(a).

DRRM Fund is allocated to the Quick Response Fund,³¹⁰ with the NDRRMC determining distribution.³¹¹ All Government departments, agencies and LGUs have to account to the NDRRMC monthly for their utilisation of DRRM funds.³¹²

In the 2016 budget the allocation given to the National DRRM Fund was PhP38.9 billion, a threefold increase from the 2015 figure.³¹³ However, this was reduced again in the 2017 budget to PhP15.755 billion.³¹⁴ Individual government departments can allocate additional budgetary resources to DRRM. For example, in 2015, 21 per cent of the Department of Agriculture's budget was allocated for climate change adaptation and risk reduction strategies.³¹⁵

Due to the high levels of funding required for comprehensive recovery and rehabilitation following a disaster, the President of the Philippines established the Office of the Presidential Assistant for Rehabilitation and Recovery in early December 2013. It is mandated to "[a]ct as over-all manager and coordinator of rehabilitation, recovery, and reconstruction efforts of government departments, agencies, and instrumentalities in the affected areas, to the extent allowed by law."³¹⁶ The Office of the Presidential Assistant for Rehabilitation and Recovery subsequently spearheaded the development of the Comprehensive Relief and Recovery Plan and coordinated government, private sector, non-governmental and international assistance related to recovery from Typhoon Haiyan. However, responsibility for funding allocations and implementation of projects remains the domain of the specific departments and government agencies concerned.³¹⁷

The Philippines has benefited from international support for disaster response and preparedness. During the Haiyan response, a total of USD 468 million was raised and spent by international agencies and INGOs, with the largest amounts being spent on food security and agriculture (USD 182 million), emergency shelter (USD 173 million) and early recovery and livelihoods (USD 115 million).³¹⁸

3.1.5. Impact of disasters on children and families

Although natural hazards cannot be prevented, strengthening national capacities can reduce and manage the impacts of these hazards on children, and can lessen the likelihood of humanitarian crises when they hit. However, the challenges in terms of disaster proofing infrastructure and systems; developing national prevention and response capacities; and educating the population on risk reduction, are enormous. It has been suggested that the Philippines is not as prepared as other countries for disasters. For example, an earthquake hitting central Manila is likely to cause a far greater death toll than a similar earthquake in Tokyo due to the fact that few buildings are

³¹⁰ Philippines Disaster Risk Reduction and Management Act, RA 10121, section 22(c).

³¹¹ Implementing Rules and Regulations of Republic Act No. 10121, Rule 19, section 3.

³¹² Philippines Disaster Risk Reduction and Management Act, RA 10121, section 22(d).

³¹³ 2017 People's Proposed Budget, Philippines Department of Budget and Management, September 2016, p 11.

³¹⁴ 'A look at the 2017 budget: Will it help Duterte fulfil his promises?', Pia Ranada, 21 January 2017,

<http://www.rappler.com/newsbreak/in-depth/159002-2017-national-budget-duterte-promises>.

³¹⁵ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015).

³¹⁶ Memorandum Order No. 62, s. 2013. 6 December 2013. Sec. 1(a).

³¹⁷ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 18.

³¹⁸ OCHA financial tracking service, as quoted in Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 25.

earthquake proof. It has been suggested that re-prioritisation of resources and planning would create greater resilience.³¹⁹

Reducing the vulnerabilities of individuals, households and communities is also a major development challenge. Although everyone in the path of a disaster is affected by it, rich and poor alike, the wealthy tend to recover fastest.³²⁰ Those who live in poverty tend to be more vulnerable to disasters and less able to prepare for and respond to them. Those living in poverty are generally unable to build or rent safe accommodation and are more likely to live in informal settlements in high risk areas, including no-build zones.³²¹ In Metro Manila, 4 million (30 per cent) of the city's population live in informal settlements and shanty towns, often in flood plains, or poorly sheltered from the sea, placing families and children at high risk.³²² Protective infrastructure, such as storm drains, sea walls and paved roads are unlikely to be installed in such settlements, and the poorly built homes cannot stand up to high winds, rushing water or earthquakes.³²³ Post-disaster conditions, especially in urban areas, intensify the risk of sanitation related illnesses and school dropout.³²⁴

Many vulnerable communities are repeatedly exposed to natural hazards placing enormous strain on local communities and authorities. For example in 2014, the Eastern Visayas, MIMAROPA Region, Bicol, Central Luzon, CALABARZON and the NCR were affected by typhoons in 2014 having previously been affected by Haiyan in 2013.³²⁵ Some of these communities are also been exposed to man-made hazards such as armed conflict, which increases their vulnerability and reduces their resilience in responding to disasters.

Recurrent and protracted displacements are of particular concern when they occur in the poorest areas of a country. Displacement makes access to employment and livelihoods more difficult, especially for those whose livelihood is based on the land.³²⁶ These individuals may not have the capacity to 'disaster-proof' their livelihood, and this inevitably exacerbates their poverty.³²⁷ Displaced families also find credit more difficult to obtain.³²⁸

The Philippine Development Plan 2017-2022 aims to reduce the proportion of the urban population living in slums, informal settlements and inadequate housing, in line with SDG 11.1.1. In 2009, 40.9 per cent of the population lived in slums, informal settlements or inadequate housing. The goal is to reduce this to 22 per cent by 2022.³²⁹ There is also a goal under the PDP to reduce the number of deaths and missing persons due to disaster to zero by 2022, and to ensure that 100 per cent of those affected by disaster have emergency shelter provided.³³⁰ There is also a target to increase the proportion of families affected by natural or human-induced calamities provided with relief assistance from 54 per cent in 2015 to 100 per cent in 2022.³³¹

³¹⁹ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³²⁰ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³²¹ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre p 23-24.

³²² The State of the World's Children 2012, Children in an Urban World, UNICEF, p 45.

³²³ The State of the World's Children 2012, Children in an Urban World, UNICEF, p 45.

³²⁴ The State of the World's Children 2012, Children in an Urban World, UNICEF, p 45.

³²⁵ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 37.

³²⁶ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 37.

³²⁷ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 37.

³²⁸ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 37.

³²⁹ Philippines Development Plan 2017-2022, National Economic and Development Authority, p 187.

³³⁰ Philippines Development Plan 2017-2022, National Economic and Development Authority, p 172.

³³¹ Philippines Development Plan 2017-2022, National Economic and Development Authority, p 172.

One of the goals in the National Shelter Program 2011-2016 was to provide direct housing assistance to households. Between 2011 and 2016 this was provided to 730,000 households, an accomplishment rate of 83 per cent. Although this appears to be a high accomplishment rate, it includes the housing units constructed after super typhoon Yolanda and the Bohol earthquake (to replace destroyed homes), which were not part of the original target. As a result, the accomplishment rate is overstated.³³²

Hazards such as cyclones, floods, mudslides and earthquakes can increase the vulnerability of children, whether they are major, large-scale disasters, or small-scale events: children are among the most susceptible to injury and death in both cases.³³³ According to the 2016 NBS-VAC, 94.6 per cent of respondents had been affected by natural and man-made disasters in the previous two years.³³⁴ Thirty-one per cent of children had been affected by Typhoon Yolanda (Haiyan), of which around 30.9 per cent were children aged 13–17 years old. The main reported consequences of Haiyan were damaged homes, physical sickness and wiped-out communities.³³⁵

Existing vulnerabilities, such as poor health and nutrition can also increase the disaster risk for children, hamper recovery and, if not addressed, leave children more vulnerable after a disaster. Such factors also create additional stress and strain on families and can exacerbate issues such as family violence.³³⁶

Many older children want to be part of the response effort and to help their families recover. In order to do this a sizeable proportion stop attending school (or school is closed for a period of time) and find paying work.³³⁷ Few of these, children return to school once the community has recovered from the disaster, often taking on unsuitable work or becoming involved in hazardous labour or one of the worst forms of child labour, including the sex industry.

Displacement

From 2008–2016 an average of 3.7 million people were displaced by natural disasters in the Philippines each year, 84 per cent as a result of typhoons and the storm surge, floods and strong winds that usually accompany them.³³⁸ Typhoon Haiyan in 2013, a Category 5 typhoon, was the largest single displacement event in the Philippines in recent years, displacing four million people. Three years later, 200,000 households (880,000) people were still without permanent housing and thousands had set up makeshift homes in exposed coastal slums.³³⁹ Although the massive scale of the displacement from Typhoon Haiyan inflated the average displacement figure in the Philippines between 2008–2016, when displacements from 2013 are excluded, the average number of people displaced per year is still substantial at 3.3 million.³⁴⁰

³³² Philippines Development Plan 2017-2022, National Economic and Development Authority, p 181.

³³³ The State of the World's Children 2012, Children in an Urban World, UNICEF, p 45.

³³⁴ National Baseline Study on Violence against Children: Philippines, Executive Summary, October 2016 p 11.

³³⁵ National Baseline Study on Violence against Children: Philippines, Executive Summary, October 2016 p 11.

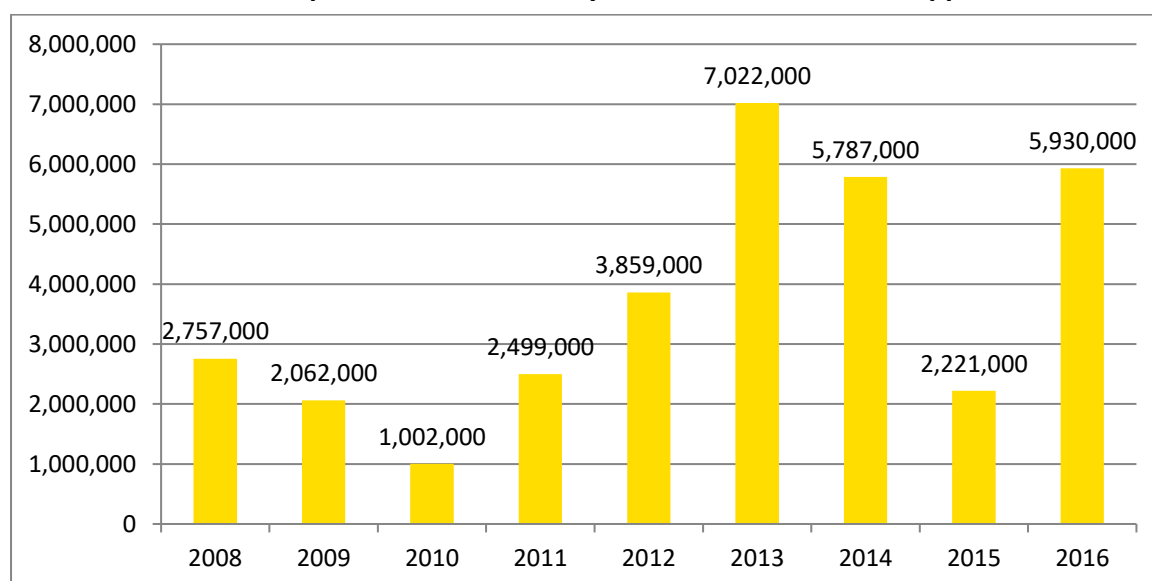
³³⁶ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³³⁷ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³³⁸ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

³³⁹ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

³⁴⁰ Data taken from Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

Table 3.2. New displacements caused by natural disasters in Philippines, 2008–2016

Source: Internal Displacement Monitoring Centre (<http://www.internal-displacement.org/countries/philippines/>)

The Philippines had one of the top three highest levels of displacement globally due to natural disasters in both relative and absolute terms between 2008–2014.³⁴¹ In 2014 the top two displacements caused by natural disasters globally, based on the absolute number of people displaced, were in the Philippines and were caused by Typhoons.³⁴² Between 2008 and 2014 the vast majority of displacements occurred due to storms (81.6 per cent), followed by floods (15.8 per cent), volcanic eruptions (0.4 per cent) and earthquakes (0.1 per cent).³⁴³

In 2016, there were 5.93 million new displacements caused by natural disasters in the Philippines, second only worldwide in absolute numbers that year to China. The two largest events for disaster related displacement worldwide in 2016 also occurred in the Philippines – Typhoon Nock-Ten (Nina) in December 2016 where 2.592 million people were displaced and Typhoon Haima (Lawin) in October 2016 where 2.377 million people were displaced. Two other medium-scale events displaced over 100,000 people in 2016: the southwest monsoon which displaced 527,994 people and Typhoon Sarika, which displaced 207,832 people. There were also numerous other smaller-scale displacements, which individually displaced much smaller numbers of people including flash floods, forest fires, landslides and a cold front. The numbers displaced by these smaller events ranged from 13 displaced by a flash flood in Barangay Sumbakil, to almost 80,000 displaced by the Eastern, Northern and Western Samar flash flood. In total, the number of people displaced by other smaller-scale disasters in the Philippines in 2016 amounted to 225,053.³⁴⁴

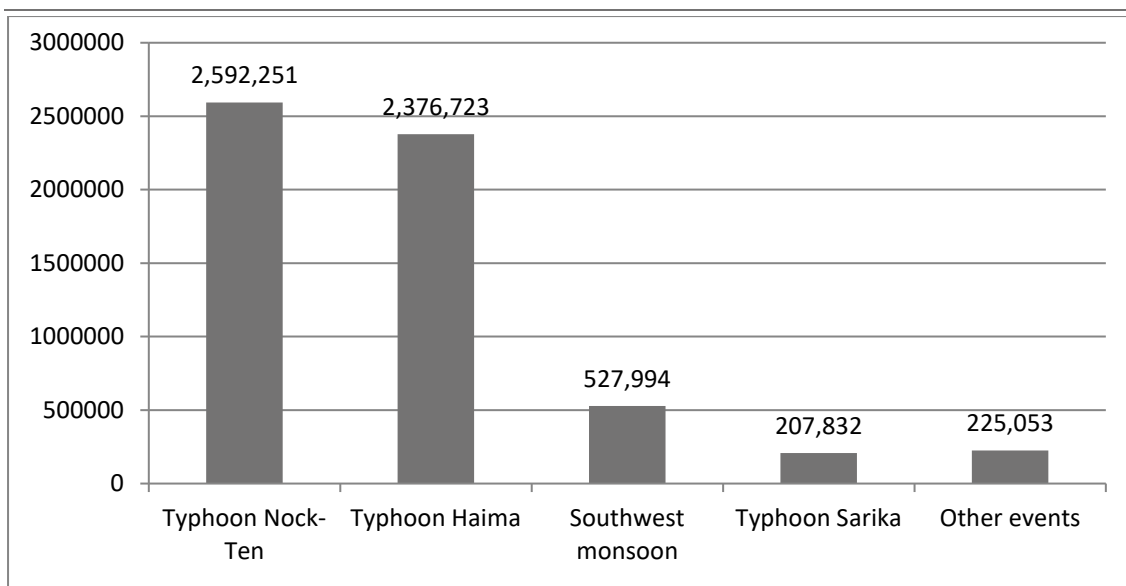
Table 3.3. New displacements by disaster in the Philippines, 2016

³⁴¹ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 9.

³⁴² Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 20.

³⁴³ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 36.

³⁴⁴ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.



Source: Internal Displacement Monitoring Centre (<http://www.internal-displacement.org/countries/philippines/>)

Although the numbers of people displaced in response to individual incidents can be high, many people return to their homes relatively quickly. Only 30,651 were still displaced a month after Haima struck.³⁴⁵ Nock-Ten, which was a Category 4 storm, triggered the mass evacuation of around 2.6 million people making it the largest disaster displacement event of 2016. However, within 6 days only 230,000 people were still displaced, and this dropped to 78 families (368 persons) by the end of January 2017.³⁴⁶ However, some of those who were displaced will have returned to destroyed or damaged homes and disrupted or destroyed livelihoods rather than remain displaced. They continue to need assistance just as those displaced do, but may not be prioritised.³⁴⁷

Despite the fact that the majority of families return home quickly after a natural disaster, some remain displaced for a number of years. Three years after Haiyan, many of those displaced were still living in collective shelters or bunkhouses, with a lack of support for vulnerable persons, including older people and those with disabilities.³⁴⁸ Similar patterns were seen after Typhoon Bopha, where 3 years after the 2012 disaster, 140,000 people were still living in temporary bunkhouses and tents.³⁴⁹ In addition to a poor standard of housing, they often also lack access to livelihoods and basic services, including education.³⁵⁰

³⁴⁵ DSWD DROMIC Report 31A on Super Typhoon Lawin, 14 November 2016 (accessed at - <https://docs.google.com/document/d/1hPAW-ydtwNIV0ydKa2F5KHlgXIT6kWq-2PfgdXOxoWM/edit>) DSWD. DROMIC Report No. 29 on Typhoon Nina (accessed at - <https://docs.google.com/document/d/1kLdXu4EOv7aMokOpo0TFK6skZAmVb2B8eHJhkYvPNLw/edit>)

³⁴⁶ DSWD DROMIC Report No. 29 on Typhoon Nina (accessed at - <https://docs.google.com/document/d/1kLdXu4EOv7aMokOpo0TFK6skZAmVb2B8eHJhkYvPNLw/edit>).

³⁴⁷ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

³⁴⁸ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

³⁴⁹ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

³⁵⁰ Internal Displacement Monitoring Centre Philippines Country Information, Accessed at <http://www.internal-displacement.org/countries/philippines/>.

Displacement increases the risk of gender-based violence, trafficking, prostitution and sexual exploitation,³⁵¹ particularly for children and young people who may be separated from their families and support networks. The areas affected by Haiyan were areas which were already known to be hot-spots for trafficking of women and girls prior to the disaster.³⁵² Post-Haiyan, conditions in evacuation sites were extremely overcrowded, posing considerable protection risks for vulnerable groups including children and women.³⁵³ Over time, protection measures were put in place: including women and child-friendly spaces, 24-hour security, providing lighting in bathrooms and paths to bathrooms.³⁵⁴ As a result, the number of protection issues raised decreased over time.³⁵⁵

3.1.6. Climate change and disaster: Barriers and Bottlenecks

Enabling environment

The Philippines has strong law and policy on DRRM and frequent and extensive experience in responding to disasters, including the collection of data. The NEDA ensured the inclusion of the DDR into the Philippine Development Plan in its 2011-2016 version and again in the 2017-2022 Plan, while a wide range of government departments have mainstreamed climate change and national disaster plans into their own policies and plans.

Although much progress has been made in developing the national policy and legal framework there are still limitations in implementation and enforcement. Although there are legal rights available, the extent to which they are justiciable (i.e. enforceable), particularly socio-economic rights such as the right to adequate housing and food for disaster victims is unclear.³⁵⁶

There are extensive laws and powers in relation to housing and zoning which LGUs are responsible for enforcing, such as no-build zones in hazardous areas.³⁵⁷ These were not enforced in advance of Sendong.³⁵⁸ In some cases, local authority policies allowed individuals to stay living in informal settlements in high risk areas in contravention of the extensive legal framework.³⁵⁹ This contributed to the severity of the impact of the storm, as the areas which were identified as unsafe, such as along the banks of the Cagayan river, were those which were most affected by the storm.³⁶⁰

After Haiyan, no-build zones were established and a commitment was made to build more resistant housing in safe areas.³⁶¹ However, this has not been consistently enforced, and because relocation of

³⁵¹ Save the Children See Me, Ask Me, Hear Me: children's recommendations for recovery three months after Typhoon Haiyan, February 2014, p 3.

³⁵² Save the Children See Me, Ask Me, Hear Me: children's recommendations for recovery three months after Typhoon Haiyan, February 2014, p 3.

³⁵³ The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, p 29.

³⁵⁴ The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, p 36.

³⁵⁵ The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, p 36.

³⁵⁶ Edsel Tupaz, Disaster in the Philippines: The Need to Clarify Socioeconomic Rights, 28 December 2011, <http://www.jurist.org/sidebar/2011/12/edsel-tupaz-sendong.php>.

³⁵⁷ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 25.

³⁵⁸ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 25.

³⁵⁹ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 25.

³⁶⁰ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 26.

³⁶¹ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 51.

residents does not happen quickly, many people return to the unsafe areas,³⁶² leaving them vulnerable to future disaster events. In addition, there has been limited success in enforcing forest and environmental protection laws to prevent issues such as illegal logging and mining.³⁶³ These practices reduce forest cover, leaving soil, boulders and rocks exposed, exacerbating the effect of large amounts of rainfall and resulting in increased incidence of flooding and landslides.³⁶⁴

Data

The National Disaster Risk Reduction and Risk Management Council and Department of Social Welfare and Development publish situation reports for several days after each disaster and twice daily reports for the first 9–10 days after large ones.³⁶⁵ The Philippines is one of a few countries where data collection generally continues until the number of people displaced has reduced to zero thus enabling identification of both those who need help, and those providing the help.³⁶⁶ There is, however, a lack of disaggregated data available on the impacts of disasters on different groups in the Philippines. Although some gender-disaggregated data is collected, it is not used in the DRRM planning process,³⁶⁷ and although there has been monitoring and mapping of hazards there has not been as much assessment of vulnerabilities which may be differentiated across sectors, socio-economic status, age, gender and state of health.³⁶⁸ Additionally, while data is collected on IDPs in tent cities or evacuation centres, much less is gathered (and therefore is known) about those displaced into host families etc.³⁶⁹ It has been more of a challenge to gather data on 'risk'. This is partly due to a dearth of knowledge and familiarity with hazard phenomena. For instance, before Typhoon Haiyan the concept of a 'storm surge' was not well understood and, as a result, it has not been addressed in systematic manner.³⁷⁰

Capacity and coordination

There is considerable technical capacity to reduce and manage disaster risks in the Philippines, but there are a number of challenges. There is a need for central government to encourage greater cross-sectoral and cross-departmental working, especially in light of the fact that government departments produce their own DRRM and climate change plans in relation to their sphere of responsibility.³⁷¹

³⁶² Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 51.

³⁶³ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 26.

³⁶⁴ 'Extensive logging, unrestricted mining blamed for flooding', IRIN news, 23 January 2009, <http://www.irinnews.org/news/2009/01/23>.

³⁶⁵ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 8.

³⁶⁶ Global Estimates 2015, People displaced by disasters, Internal Displacement Monitoring Centre, p 8.

³⁶⁷ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), NDRRMC 2015p 53. A National HFA Monitor update published by PreventionWeb <http://www.preventionweb.net/english/hyogo/progress/reports/>

³⁶⁸ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), NDRRMC 2015p 16. A National HFA Monitor update published by PreventionWeb <http://www.preventionweb.net/english/hyogo/progress/reports/>.

³⁶⁹ The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, May 2014, p.19.

³⁷⁰ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), p.14, A National HFA Monitor update published by PreventionWeb. <http://www.preventionweb.net/english/hyogo/progress/reports/>.

³⁷¹ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

A further challenge is posed by the decision to decentralise responsibility for DRRM. Much of the expertise on DRMM is to be found in central government rather than local government institutions, but it is the latter who have responsibility under the 2010 Act for implementing DRRM programmes and plans. The 2010 Act places responsibility on the national and regional offices of the Office of Civil Defence to oversee the implementation of the law through the National DRRM Plan. Although the National Risk Reduction and Management Council has been constituted, establishing the regional and local equivalents been slower, due largely to financial constraints and operational capabilities.³⁷² The Office of Civil Defence at central government level has experience in responding to disasters, but lacks experience in the formation and training of local bodies in disaster response.³⁷³

LGUs lack sufficient capacity and technical expertise to manage disaster risks, and this has been identified as a major impediment to effective implementation of DRRM policies.³⁷⁴ LGUs are often understaffed or lacking in capacity and professionalization. This leaves a significant gap as the NDRRMC cannot supervise all the local councils.³⁷⁵ Local effectiveness is also dependent upon the level of support from local political leaders who are often more focused on electoral considerations than evidence or technical considerations.³⁷⁶

Availability of funds

Although there is provision for funds to be set aside for DRRM activities, funds have still flowed towards response and not prevention activities. When money is released, it is often delayed and not always fully utilised due to the limited absorptive capacities of agencies.

Because the LGU fund is a percentage of the LGU's budget, funding does not follow risk profile, with poorer, often high risk LGUs having less, and an inadequate degree of access to money.³⁷⁷ LGUs largely lack knowledge on how to determine the appropriate amount to set aside for their calamity funds commensurate to the risks that they face.³⁷⁸ It has also been suggested that LGUs have trouble prioritising expenditure and there is little monitoring of how money is spent, despite the legal requirements for reporting. For example, an LGU may choose to spend money may on pre-positioning of supplies rather than on training and capacity building of staff or simulations to enable preparedness.³⁷⁹ This allows LGUs to maintain the focus on being reactive to disasters rather than proactive in reducing vulnerabilities.

³⁷² Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), NDRRMC 2015p 9, A National HFA Monitor update published by PreventionWeb <http://www.preventionweb.net/english/hyogo/progress/reports/>.

³⁷³ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 28.

³⁷⁴ Disaster-induced internal displacement in the Philippines – the case of Tropical Storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 28.

³⁷⁵ Alcayna T., Bollettino V., Dy, P. and Vinck P., Resilience and Disaster Trends in the Philippines: Opportunities for National and Local Capacity Building, PLoS CURR, 2016, September 14; 8.

³⁷⁶ Paul D. Hutchcroft, Reslicing the pie of patronage: the politics of the internal revenue allotment in the Philippines, 1991-2010, The Philippine Review of Economics Vol XLIX No 1, June 2012, p 109.

³⁷⁷ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), NDRRMC 2015p 49.

³⁷⁸ DisasterNet Philippines Scoping Study Report, Harvard Humanitarian Initiative Resilient Communities Program, 2015, p 6.

³⁷⁹ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

In some cases, disaster response funding takes a long time to be distributed. After Haiyan, there was slow disbursement of the social services cluster cash distribution programme for those living in safe zones with partially damaged or destroyed houses. By Feb 2015, only \$15 million of over \$600 million had been distributed, and by April 2015 only 15 per cent has been distributed.³⁸⁰ However, the livelihoods cluster had distributed \$250 million of \$750 million in projects planned to support livelihoods by February 2015.³⁸¹ The infrastructure cluster had distributed over \$500 million of \$800 million for critical construction projects.³⁸² Slow dispersal of funds can exacerbate and prolong the effects of a disaster, as families cannot repair and return to their homes and they cannot earn money to support themselves.

In some cases the deluge of international assistance can compound already chaotic situations, particularly in the wake of a disaster.³⁸³ Post-Haiyan the international relief effort was described as a “flood” and, although well intentioned, did not understand the local context or recognise the experience and capacity of the Philippines officials responding to such disasters.³⁸⁴ As a result aid was distributed without following the protocol and without reference to government structures.³⁸⁵ Immediately after Haiyan, protocols were set up with the Foreign Ministry to regulate the entry of humanitarian aid and workers from abroad.³⁸⁶ While this was done to aid co-ordination and prevent confusion and chaos, it may make the international response to future disasters slower and more complicated.

International actors and private donors have provided funding for disaster response, but LGUs are not always required to, or able to, account for how this money was used to rehabilitate disaster victims and survivors.³⁸⁷ At national level there is a resistance to asking for development assistance, although much less so at local level. The expectation is that when an LGU declares a state of calamity they should be able to access national funds.³⁸⁸ However, in practice, LGUs are expected to get support from municipal and regional government structures before seeking funding from national government. Only having done this, should assistance be sought from development partners.³⁸⁹ This slows down the process of getting much needed funds. The national government has to approve any help given by international partners such as UNICEF, as it is the national government that has the lead on the response.³⁹⁰

³⁸⁰ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 24.

³⁸¹ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 24.

³⁸² Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 24.

³⁸³ Philippines National Progress Report on the implementation of the Hyogo Framework for action (2013-2015), NDRRMC 2015p.19.

³⁸⁴ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 2.

³⁸⁵ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³⁸⁶ Key Informant Interview with representative from UNICEF, 23 June 2017, Manila.

³⁸⁷ Disaster-induced internal displacement in the Philippines – the case of Tropical storm Washi/Sendong, January 2013, Internal Displacement Monitoring Centre, p 29.

³⁸⁸ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³⁸⁹ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

³⁹⁰ Key Informant Interview with representative from UNICEF, 22 June 2017, Manila.

Participation of the affected community

One of the barriers to reducing the impact of disasters on individuals is the lack of understanding of the needs and wishes of the community when developing and implementing DRRM plans. For those displaced by disasters, the focus of the government for durable solutions has mostly been on the individual needs, whereas survivors of Haiyan highlighted the importance of community-based approaches preserving and recognising the value of social networks through which families are then more able to meet their needs.³⁹¹ After Haiyan many IDPs felt that the government recovery and reconstruction plans did not reflect their needs and preferences and less than half felt they could actively participate in the design and implementation of aid provided by international actors, and only 45.5 per cent felt this had been fairly distributed.³⁹² In particular, children are rarely consulted in planning and implementing community-based projects and humanitarian programmes.³⁹³ This results in plans being less likely to meet the needs of the community, reducing their likely participation in them and sustainability of such programmes.³⁹⁴

When individuals and families were relocated after Haiyan the main focus of the government has been on rehousing them with much lesser attention being paid to livelihoods.³⁹⁵ Relocation away from coastal areas and their local neighbourhood has meant families no longer have a sustainable livelihood option. This often results in the breadwinner spending time and money returning to their livelihood base. For many, robust evacuation centres would be preferable to relocating away from their communities and livelihoods.³⁹⁶

3.2. Armed conflict

The Southern Philippines, and particularly Mindanao,³⁹⁷ has a long history of conflict, stretching back centuries to the time of colonisation by the Spanish. The Mindanao Development Plan explains that the root cause of the conflict is *“historical injustice caused by colonisation, annexation of the Moro homeland to the Philippine State and a series of government policies that lead to the minoritization of the Moro and indigenous inhabitants on to newer and various forms of injustice perpetuated by the present.”*³⁹⁸

The extent to which conflict has existed, and continues to exist, has varied, as has the intensity of the conflict and its geographical location. Some of the conflicts have been sufficiently serious to be considered ‘armed conflicts’ (i.e. protracted armed violence between Government forces and non-State armed groups, or between two or more non-State armed groups), while others could best be

³⁹¹ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 2.

³⁹² Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 2.

³⁹³ Save the Children See Me, Ask Me, Hear Me: children’s recommendations for recovery three months after Typhoon Haiyan, February 2014, p 5.

³⁹⁴ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 33.

³⁹⁵ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 53.

³⁹⁶ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, p 4.

³⁹⁷ There is also a history of conflict in the Visayas islands and on Luzon island.

³⁹⁸ Mindanao 2020, Peace and Development Framework Plan (2011-2030) p.19 available at minda.gov.ph.

described as ‘internal tensions’ or ‘disturbances’.³⁹⁹ The conflict has had a severe, wide-ranging and lasting impact on the population, particularly in ARMM. The UNDP estimated the numbers of deaths resulting from the conflicts in the Philippines over a 35-year period to be within 140,000 to 220,000.⁴⁰⁰ For the period 1969 to 2004, total military expenditures amounted to \$24 billion. Impact on the economy is estimated conservatively at \$17.5 billion in lost Gross Domestic Product (GDP).⁴⁰¹

Table 3.4. The Mindanao Problem



The Mindanao 2020 Peace and Development Framework Plan 2011-2030

The conflict involves a number of different groups, with different aims and objectives, though many

³⁹⁹ Where conflicts do not reach the qualification of either an international or non- international armed conflict, they are generally referred to as ‘internal tensions’ or ‘disturbances’. These can include riots, demonstrations or sporadic acts of violence. Even if the State uses force to restore public order, this may be insufficient to trigger the application of international humanitarian law. In such instances, national laws and human rights conventions continue to apply, though some provisions, such as certain provisions of the ICCPR may be derogated from.

⁴⁰⁰ UNDP (2006). Policy Paper Report.

⁴⁰¹ See Mindanao Development Plan 2011 - 2030, p.93.

are overlapping.⁴⁰² The objective of the armed groups, generally referred to as ‘separatists’, is independence for the Moro people.⁴⁰³ The groups falling into this category include the Moro Islamic Liberation Front (MILF)/Bangsamoro Islamic Armed Forces (BIAF), the Moro National Liberation Front (MNLF) and the Bangsamoro Islamic Freedom Fighters (BIFF). BIFF splintered from MILF in 2010 to continue the armed struggle for full independence from the Philippines following the initiation of a peace agreement between the Government and MILF.

Peace negotiations have taken place, mainly with the MILF and the MNLF for many years. Following his election, President Duterte met with the Moro Islamic Liberation Front and the Moro National Liberation Front in June 2016 to discuss the next steps in the peace process. The two Moro groups agreed to undertake an intra-Moro dialogue with the objective of arriving at an inclusive solution for the Bangsamoro. On 7 November 2016, the President signed an executive order creating a new Bangsamoro Transition Commission, whose task was to draft a new version of the Bangsamoro Basic Law. Formal talks were held in August and October 2016, but there has not been any permanent ceasefire reached. Despite this, conflict between the MILF/MNLF and the Armed Forces of the Philippines (AFP) has declined significantly, though less so in the case of the MNLF.

A second grouping includes the Abu Sayyaf Group (named on the UN Sanctions list for its links with Al Qaeda and ISIS)⁴⁰⁴ and the Maute Group (essentially a clan group), who have joined forces with Abu Sayyaf, and who have also pledged allegiance to ISIS. Both of these groups, generally referred to as Islamic extremists, are actively involved in hostilities with government forces in Marawi in Lanao del Sur province in ARMM at the time of writing of this situational analysis. There is evidence that foreign terrorist fighters have joined in these hostilities.⁴⁰⁵ This conflict led to President Rodrigo Duterte declaring martial law across the whole of Mindanao on 23 May 2017.⁴⁰⁶

The New People’s Army (NPA),⁴⁰⁷ the military wing of the Communist Party of the Philippines, has been fighting to establish what it describes as ‘a socialist democracy.’ The conflict with the NPA and its supporting groups is generally referred to by the Government as a communist ‘insurgency’. Although the NPA is designated as a foreign terrorist organization by the United States State Department and as a terrorist group by the EU Common Foreign and Security Policy, the Government of the Philippines delisted the NPA as a terrorist organization in 2011 and resumed peace talks pending formal negotiations with the Communist Party of the Philippines.⁴⁰⁸ These faltered and there have been an increased number of clashes between the AFP and pro-government armed groups and

⁴⁰² The 6 categories are set out in Adriano F., and Parks T., *The Contested Corners of Asia: Subnational Conflict and International Development Assistance, the Case of Mindanao, Philippines*, The Asia Foundation 2013. The categories remain relevant to the present day.

⁴⁰³ For more detail on the armed conflict in ARMM, see the SitAN on ARMM, UNICEF 2017.

⁴⁰⁴ The List was established and is maintained pursuant to Security Council res. 1267/1989/2253.

⁴⁰⁵ BBC News ‘Philippines Violence: IS-linked Fighters among militants in Marawi,’ May 26 2017, bbc.co.uk and Philippines, Foreign Fighters Invade Marawi, ‘VOA News, May 26 2017, voanews.com; the Philippine Star, May 30 2017: ‘At least 4 foreign fighters killed in Marawi Clash,’ Philstar.com

⁴⁰⁶ Felipe Villamor, ‘Duterte Suggests Martial Law Across Philippines, Citing Islamist Threat’, 24 May 2017, https://www.nytimes.com/2017/05/24/world/asia/philippines-duterte-martial-law.html?_r=0

⁴⁰⁷ The NPA is designated as a foreign terrorist organization by the US State Department and as a terrorist group by the EU Common Foreign and Security Policy.

⁴⁰⁸ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017, para.12. However, during 2015, there were an increase number of clashes between the AFP and pro-government armed groups and the NPA

the NPA in 2015. The Government resumed formal peace negotiations in July 2016. However, the security situation deteriorated to such a degree from that time, that peace talks were suspended in May 2017 and it is not clear at the time of writing, what further steps will be taken to end the conflict.

The AFP – the Government forces, are supported by the Citizen’s Armed Forces Geographical Unit, an auxiliary force under the control of the AFP, composed of army reservists and civilians. This Unit functions as a force multiplier to regular government forces in the battle against the NPA. In September 2015, the Commission on Human Rights of the Philippines raised concerns over the use of these auxiliary forces owing to their lack of proper training and sufficient orientation in the conduct of military functions.⁴⁰⁹

The New Indigenous Peoples Army for Reform (NIPAR), a paramilitary group, and the Magahat paramilitary group (an anti-communist paramilitary group) as well as the Alamara group have been actively engaged in conflict with the NPA in Surigao del Sur, Bukidnon and Davao del Norte provinces, allegedly supported by the AFP.⁴¹⁰ The Government, however, has denied any association with those groups. Most of the attacks by the paramilitary groups are against indigenous peoples, who are accused of collaborating with the NPA.

Other conflicts, which do not reach the threshold of an armed conflict, are frequently referred to as clan disputes (between families) or are competition-related, between local elites competing for political posts in elections in order to consolidate political power. In both cases, the aim is generally control over natural resources (e.g., land) and assets (such as mines). The Dela Mance Group (described as a group of former bandits) are affiliated with the Almara paramilitary group and are engaged largely in a clan conflict.⁴¹¹

There are also inter-communal (ethnic or tribal) conflicts, though on a far smaller scale, taking place between groups affiliated to different religions, or between groups within the same ethnic group or different ethnic groups or tribes. In addition, there are conflicts which consist of violence caused largely by criminal elements. Many of these groups are made up of members of the military or paramilitary groups who have defected from their original body. These groups often engage in kidnap for ransom, drug and people trafficking, etc.

Up until recently, clan feuds and ‘elite’ competition between different groups seeking political power have been the most common cause of conflict in Mindanao, but in 2017, conflict between the State and Abu Sayyaf Group and the Maute Group has been the more serious form of armed conflict, causing a greater level of displacement and violation of the rights of women and children.

The Secretary-General in his annual report on the situation of children in armed conflict covering the period December 2009-November 2012,⁴¹² noted that although there was a decline in the number of large scale hostilities during this time, conflict was still occurring in more than one-quarter of the barangays in the Philippines, mainly in Mindanao. In a later report covering 1st December 2012 to 31 December 2016, the Secretary-General again stated that there was a general decrease in large-scale armed engagements, but that sporadic, low-intensity clashes and a number of incidents continued

⁴⁰⁹ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017, para. 19.

⁴¹⁰ See Philippines: Paramilitaries Attach Tribal Village Schools, Human Rights Watch, September 23rd 2015.

⁴¹¹ Aviles, M. G., and Dumas L.G., Mindanao Interfaith Institute on Lumad Studies available at miils.org.

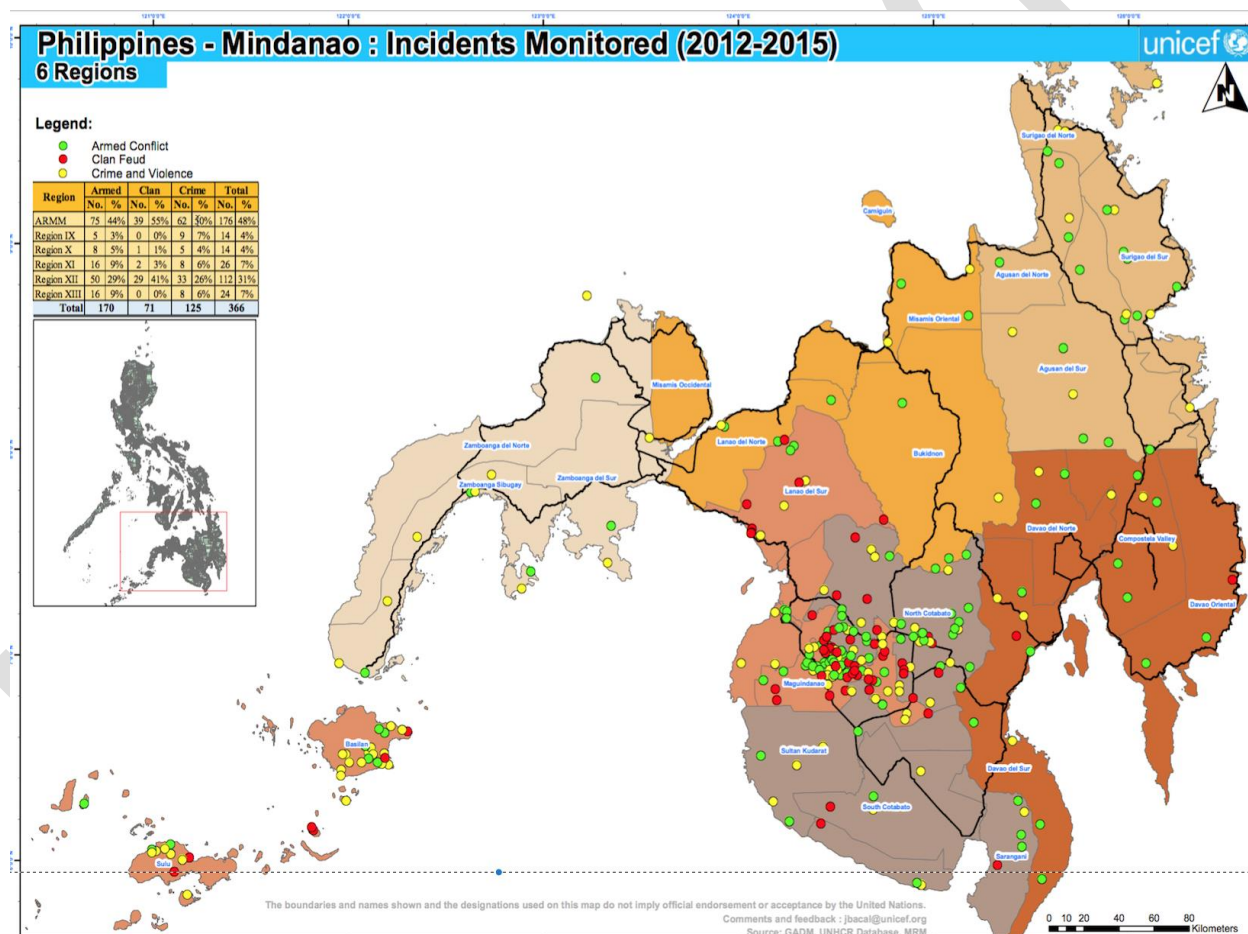
⁴¹² Un Doc. S/2013/419 12 July 2013.

to affect the overall security situation.⁴¹³

The National Baseline Study on Violence against Children (NBS-VAC),⁴¹⁴ which studied a nationally representative sample of 2,303 children between 13 and 24 found that 2.6 per cent had been forced to live in another place because of war, ethnic conflicts, organized crimes, terrorism or other similar incidents while a child. Among the children who had experienced armed conflict, 3.5 per cent lost a parent, sibling or close family member. About 1.6 per cent were personally injured or beaten, while 2 out of 30 (0.7 per cent) admitted that they were combatants or warriors in a war or community violence, or assisted older warriors in their fight against their enemies.

The following Table shows the number of conflict ‘incidents’ occurring between 2012 and 2015.

Table 3.5. Conflict incidents in Mindanao, 2012 – 2015



source: Conflict Affected Areas Philippines – Mindanao, 2012-2015, UNICEF

3.2.1. Grave violations committed against children⁴¹⁵

In 2005, the UN Security Council established a Working Group on Children and Armed Conflict and a Monitoring and Reporting Mechanism (MRM) to monitor, document and report on heinous abuses

⁴¹³ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017

⁴¹⁴ The National Baseline Study on Violence against Children, Council for the Welfare of Children and UNICEF, 2016, Executive Summary, p.11.

⁴¹⁵ UNSC Res. 1612 of 2005.

of the rights of children in situations of armed conflict. A subsequent Security Council resolution has further expanded and strengthened the MRM.⁴¹⁶ Although the full panoply of rights contained in the CRC continue to apply during armed conflict, the MRM mechanism focuses on collecting information on what have been termed ‘the six grave violations’ committed against children during armed conflict.⁴¹⁷ These are

1. Killing or maiming of children
2. Recruitment or use of child soldiers
3. Rape and other forms of sexual violence against children
4. Abduction of children
5. Attacks against schools or hospitals
6. Denial of humanitarian access to children

Grave child rights violations have been perpetrated by all parties to the conflict. In his report in April 2017, the Secretary-General noted that the denial of humanitarian access was the only grave violation that was not reported during the period under review.⁴¹⁸ However, humanitarian access to children has been a challenged in relation to conflict between the Abu Sayyaf Groups/Maute Group and the AFP in Marawi.

Most verified violations against children occurred on Mindanao (93 per cent), with the other violations taking place in the Visayas islands and on Luzon island (2 and 5 per cent, respectively). On Mindanao, most of the verified violations took place in ARMM and in SOCCSKSARGEN (Region XII) (46 and 19 per cent, respectively). However, since 2015, an increasing number of violations were verified in the regions of Davao, Northern Mindanao and Caraga, affecting predominantly children in indigenous communities. The increase is linked to intensified counter-insurgency operations involving alleged pro-government armed groups, fighting the NPA.⁴¹⁹

The number of violations is likely to be significantly higher than that recorded, as access restrictions and security constraints makes monitoring and verification of violations in remote rural areas difficult. In addition, violations occurring in the latest conflict involving Abu Sayyaf and the Maute group are not included, as they fall outside the reporting period.

Recruitment and use of child soldiers

International humanitarian law contained in the four Geneva Conventions and the two Additional Protocols,⁴²⁰ all of which have been ratified by the Philippines, prohibits the recruitment and use of children in hostilities by both armed forces and armed groups under the age of 15. The term ‘hostilities’ has been interpreted widely by the International Criminal Court and covers both children used as combatants but also children who act in a supporting role, such as spies or lookouts, as well as those who support through service, such as porters, cooks, etc. In addition, the Optional Protocol

⁴¹⁶ UNSC Res. 1882 of 2009.

⁴¹⁷ See Working Paper No 1, Special Representative to the Secretary-General on the Children and Armed Conflict available at childrenandarmedconflict.un.org

⁴¹⁸ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017 para. 22

⁴¹⁹ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017 para. 23

⁴²⁰ Protocol Additional to the Geneva Conventions of 12 August 1949 and relating to the Protocol Additional to the Geneva Conventions of 12 August 1949 and relating to the Protection of Victims of Non-International Armed Conflicts (Protocol II), 8 June 1977.

to the UN Convention on the Rights of the Child, which was ratified by the Philippines in 2003, prohibits both the forced recruitment of children under the age of 18 by armed forces and all recruitment and use of children under the age of 18 by armed groups.⁴²¹

Domestic law on the recruitment of children

Republic Act No. 7610, the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991, Article X, section 2.2 reflects the Optional Protocol provision by providing that *“children shall not be recruited to become members of the Armed Forces of the Philippines or its civilian units or other armed groups, nor be allowed to take part in the fighting or used as guides, couriers or spies.”*

Republic Act No. 8371, the Indigenous Peoples Rights Act of 1997, provides for the non-recruitment of children of indigenous cultural communities/indigenous peoples into the armed forces

Despite the legal provisions prohibiting the recruitment and use of children, it continues to be an on-going and continuing problem. The report of the Secretary-General covering the period 1 December 2012 to 31 December 2016 noted that the country task force verified 17 incidents of recruitment involving 72 children, with the majority of children being used as human shields. Fifteen children were used by the BIFF in one incident, and 32 were used by the MNLF in the other.⁴²² The United Nations also verified the recruitment and use of a further 10 boys by the MNLF.⁴²³ In 2016, the country task force verified the recruitment and use of five boys between 13 and 17 years of age by MNLF and six children (five boys and one girl) by the NPA.

The Secretary-General’s report of 2017 continues to list Abu Sayyaf,⁴²⁴ NPA⁴²⁵ and BIFF⁴²⁶ as bodies that recruit and use children.⁴²⁷

In August 2009, MILF signed an action plan with the United Nations to end and prevent recruitment and use of children. The group’s general order No. 2 (2006), the code of conduct of the BIAF and, following the action plan, the supplemental general order in 2010, prohibits the recruitment of children into the MILF/BIAF and outlines sanctions for non-compliance. There were no verified reports of recruitment of children by MILF during the reporting period, but evidence from other sources indicate that children have been recruited and used, albeit voluntarily, contrary to the plan.⁴²⁸ However, the fact that the group remains primarily a community-based organization, and its members live with their families, complicates the identification of children associated with the group.

⁴²¹ Article 4 Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict.

⁴²² Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017 para. 25.

⁴²³ 5 of whom were used in support roles during the Zamboanga siege in September 2013, leading to the death of 2 of them.

⁴²⁴ The Abu Sayyaf Group has been listed since 2003 owing to its recruitment and use of children. The group remains active in Basilan and Sulu Provinces and in the Zamboanga Peninsula and continues to carry out bombings, extortions, kidnappings for ransom and assassinations.

⁴²⁵ The NPA has been listed since 2013.

⁴²⁶ The Bangsamoro Islamic Freedom Fighters has been listed for the recruitment and use of children since 2014.

⁴²⁷ The List is contained in the Report of the Secretary-General on Children and Armed Conflict in the Philippines, [A/70/836-S/2016/360, 20 April 2016, Annex II.](#)

⁴²⁸ See Assessment of the Drivers of Children’s Association with Armed Groups and Entry Points to Prevent Association, UNICEF and Transition International, 20 December 2016. MILF was commended for its attempt to demobilise children

The NPA, the armed wing of the Communist Party of the Philippines and part of the National Democratic Front of the Philippines coalition, has been listed for recruitment and use of children since 2013. The NPA issued a Declaration in 2012 that it would not recruit children under the age of 18 to take a direct part in hostilities. However, the Declaration allows children as young as 15 years of age to join the NPA as trainees or apprentices and permits them to be assigned to self-defence and other non-combat units and tasks. This clearly violates the Optional Protocol to the CRC and Article X, section 2.2 of Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991.

The Secretary-General's report in 2017 notes that, according to credible sources, the Abu Sayyaf Group recruited around 30 children in Basilan Province in April 2015. There have also been media reports that children have been recruited and used by Abu Sayyaf as combatants and in support roles in the Marawi conflict.⁴²⁹

The verified number of children recruited is likely to be an underestimate of the total number of children recruited. Recruitment is not always reported and it is difficult to access rural areas or to verify the age of those recruited. Recruitment appears to disproportionately affect boys. While it is likely from the evidence that is available that far more boys are recruited and used than girls, it is particularly difficult to obtain information about children used in 'support' roles by armed groups, such as cooks and those who clean up the camp, and even more difficult to obtain data on the recruitment and use of girls.

Research on children engaged with MILF/BIAF has shown that recruitment by these groups is inextricably linked with the structural and political issues that continue to affect Mindanao and is deeply linked to poverty and marginalisation. The stalled peace talks with the Bangsamoro groups and the National Democratic Front and NPA, together with the recent increase in conflict with Abu Sayyaf makes it unlikely that the current structural and political difficulties will be resolved in the near future.

Research on recruitment by MILF/BIAF has shown that many children joined the MILF-BIAF with their parents, and many families consider the involvement of children in MILF-BIAF as an obligation and contribution to the Bangsamoro cause.⁴³⁰ Parents of children who are engaged with MILF, took the view that it was better for their children to be actively engaged with MILF if they were not in education or work, as this would protect them from becoming involved in negative social activities, particularly drug-taking, or even re-association with an armed group. A further 'push' factor for child recruitment into MILF is the lack of contact between local government and the MILF communities, with a corresponding lack of services and support. MILF frequently provides the only services that are available.⁴³¹

A notable pull factor in a region that suffers from endemic poverty is the payment of children who join Abu Sayyaf. Payment to recruits is not uncommon and may constitute the only regular income

associated with the group, and was removed from the List of non-State bodies that recruit children: sUN Doc A/72/361 – S.2017/821 24 August 2017, para.230 and Annex II.

⁴²⁹ Richard Lloyd Parry, *The Times* (London) June 10 2017.

⁴³⁰ See Assessment of the Drivers of Children's Association with Armed Groups and Entry Points to Prevent Association, UNICEF and Transition International, 20 December 2016

⁴³¹ It should be noted that there were no verified cases of recruitment into MILF in the last annual report of the SRSG on Children and Armed Conflict.

that a child's family receives. Membership of an armed group may also give the child status in the community and amongst his peers, as well as regular food.

The Mindanao 2020: Peace and Development Framework Plan recognises that peace, while necessary for any sustainable development, is not in and of itself sufficient and should not be the only goal. The plan also includes poverty reduction, growth of the economy, an increase in school enrolment, reaching 100 per cent enrolment in primary school by 2030 and fully equipped classrooms and well-trained teachers. In addition to the Mindanao 2020 Framework, the Bangsamoro Development Plan and the Comprehensive Reform Development Agenda launched in ARMM in 2016 seek to reduce poverty and stimulate growth in the region.

The Mindanao 2020 Peace and Development Framework Plan recognises that the involvement of children is essential to achieve peace, security and social cohesion, but provides no further details of what form this involvement will take.⁴³² At the time of writing there is no update on the implementation of the Mindanao 2020 Plan.

Mindanao 2020: Peace and Development Framework Plan (2011-2030) sets out the following actions to achieve peace and security:

1. Peaceful and negotiated political settlement with MNLF and MILF, and a similar political settlement with the National Democratic Front/ NPA, marked by attainment of satisfactory autonomy and genuine self-determination for Mindanawons, and redress and elimination of age-old injustices in various forms.
2. Successful implementation and completion of a generally acceptable disarmament and re-integration of all former combatants from all sides of the conflict.
3. An entrenched policy environment for sustained peace, development and human security in Mindanao, supported by massive public investments and consolidated and effective institutions for sustained peace and development.
4. Wholesale reconstruction of conflict areas, with vital social and economic infrastructures and facilities restored and enhanced, thereby transforming them into focal points of development.
5. A firmly-entrenched culture of peace and social healing sustained through the integration of peace education in curricula at all levels.
6. Supremacy of the rule of law within a justice system widely perceived to be fair, responsive and equitably accessible to all.

Killing or maiming of children

Figures from the UN Country Task Force for the period 1 December 2012 to 31 December, verified 74 incidents of killing and maiming, involving 116 children. Forty children were killed (28 boys and 11 girls with one child of unknown gender); and 76 were injured (40 boys, 34 girls and 2 of unknown gender). The incidents involved targeted shootings, crossfire, airstrikes, shelling, indiscriminate attacks, summary executions, unexploded ordnance and/or the mistreatment of children during

⁴³² Mindanao 2020: Peace and Development Framework Plan 2011-2030, p. 121.

detention. While all armed groups and forces were involved in incidents leading to the killing and maiming of children, almost half of all child casualties were attributed to either the AFP (30 child casualties) or the Abu Sayyaf Group (24 child casualties). Most of those cases were crossfire incidents between the AFP and armed groups.⁴³³ The number of children killed or maimed is likely to be higher in 2017 due to the hostilities between the AFP and the Abu Sayyaf and Maute groups, with reports that children have not been able to leave Marawi during the fighting. No figures on casualties were available at the time this analysis was written.

Rape and other forms of sexual violence

The Secretary-General, in his 2017 report on Children and Armed Conflict in the Philippines,⁴³⁴ found that based on available information, rape and other forms of sexual violence were not systematically carried out against children by any of the armed groups, and only one rape was verified by the UN Country Task Force between 1 December 2012 and 31 December 2016. This is however, unlikely to represent the total level of rape and other forms of sexual violence: there is reluctance to report sexual assaults, particularly in indigenous communities, as the child may be stigmatised and his or her future prospects damaged. Cases of rape and sexual assault are often dealt with informally, with compensation paid by the perpetrator. There are no figures available on the number of cases of rape and sexual assault dealt with through the informal system.

Attacks on schools and hospitals

The targeting of civilian objects, and the deliberate targeting of schools and hospitals in the absence of military necessity is prohibited under the general legal principle of distinction, meaning that civilian objectives must be distinguished from military objectives and protected against the consequences of military operations. This is a customary norm of international law, which means that it is applicable to all parties to a conflict in all situations.⁴³⁵ In addition, under Article 8(2)(e)(iv) of the Rome Statute of the International Criminal Court, intentionally attacking a school or a hospital where the building is not a military objective is a serious violation of the common article 3 to the Geneva Conventions and constitutes a war crime.

Under Article X, Section 22 of Republic Act 7610, the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991, military use of schools, hospitals and rural health units for military purposes such as command posts, barracks, detachments and supply depots is prohibited. The purpose of this section is to ensure that schools, hospitals and health units cannot be treated as a military objective and will benefit from protection in the conflict. Despite this, between 1 January 2012 and the 31 December 2016, the UN Country Task Force verified 32 attacks on schools and hospitals, which resulted in 24 schools being damaged. Six incidents were attributed to the NPA, five to the Magahat group, four to BIFF and two each to the Alamara group, the AFP and the Abu Sayyaf Group.⁴³⁶ In addition, the country task force verified, but could not attribute, attacks on 11 schools in Maguindanao and Lanao Del Sur Provinces that were being used as polling stations during the national election in May 2016.⁴³⁷

⁴³³ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017 para. 35.

⁴³⁴ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017 para. 41

⁴³⁵ See Article 48 and 52, Additional Protocol I, Article 13(1) Additional Protocol II, Common Article 3 to the Geneva Conventions and ICRC Customary Rule 7.

⁴³⁶ Twelve incidents could not be attributed to a specific entity.

⁴³⁷ Report of the Secretary-General on children and armed conflict in the Philippines, S/2017/294, 5 April 2017. Para 42.

The verified attacks on schools are, once again, likely to be a significant underestimate of the level of damage to schools on the ground. According to the Child Protection Cluster Philippines, 52 cases of attack and military use of schools were reported between 2014 and mid-2015 alone. Most of these reports concerned private schools in remote indigenous communities, and most of the attacks were allegedly perpetrated by paramilitary groups in Mindanao.

Displacement

Armed conflicts between the government and armed groups, between armed groups or between clans have, over the years, caused prolonged and multiple displacements of the civilian population. The armed conflict is overwhelmingly internal armed conflict (i.e. takes place between groups within the Philippines); though in March 2013, a conflict between the Philippines and Malaysia over the territory of Sabah led to 19,000 Filipinos who had resided in Sabah being displaced to ARMM.

The Protection Cluster in the Philippines which coordinates humanitarian efforts amongst its neighbours has been collecting information on displacement in Mindanao since 2007,⁴³⁸ and provides a displacement dashboard every month. It considers that conflicts have displaced some 3.5 million people since 2000, some of them multiple times. Between 1 January 2017 and 31 March 2017, 50,109 persons were displaced, 22,972 of whom were displaced in the month of March 2017. Many displaced persons were able to return to their homes after a period of time. However in March 2017, there were a total of 53,036 IDPs in Mindanao, some of whom had been displaced more than once.

Table 3.6. March 2017 Dashboard of the Protection Cluster on displacement month

Province	Nature of conflict	Numbers displaced (each family has on average 5 members)
Sultan Kudarat	Clan feud	35 families
Sulu	AFP v Aby Sayyaf	1,290 families
Compostela Valley	AFP v NPA	155 families
Maguindanao and North Cotabato	AFP v BIFF	1,218 families
Agusan del Norte	AFP v NPA	91 families
Maguindanao	Clan feud	200 families
North Cotabato	AFP v NPA	200 families
Davao City	AFP v NPA	160 families
Maguindanao	Clan feud	86 families
North Cotabato	Clan feud	20 families
Davao Oriental	AFP v NPA	809 families

Following the outbreak of hostilities in Marawi in May 2017 when the Maute Group ambushed a military vehicle that was reportedly on a mission to serve a warrant of arrest on the leader of the Abu

⁴³⁸ See protectionclusterphilippines.org.

Sayyaf Group, there has been intense fighting in the city. This has led to another round of significant displacement. On 30 June, the government estimated that there were 72,897 families (349,989 individuals) displaced. At that time 3,437 families (16,070 individuals) were in 77 evacuation centers and 69,460 families (333,919 individuals) were with host families.

3.2.2. Barriers and bottlenecks

Displacement and especially repeated displacement means loss of livelihood for the family, disruption of agricultural activity placing food security and income generation at risk, as well as loss of education for children and potentially loss of their home, family networks and community. The protection cluster figures do not provide any detail on how many of the displaced are women and children; but as children form over 40 per cent of the population, it is not unreasonable to assume that those displaced are at least 40 per cent children and possibly more.

UNHCR noted in its report that the displaced population, particularly those who in host communities (95 per cent), continued to face mounting protection concerns such as the non-recognition of informal settlements, congestion in the evacuation centers, lack of identification, lack of prioritization of persons with specific needs in the relief assistance, and a lack of information for IDPs. There were also particular concerns relating to displaced children, including the risk of gender based violence due to the lack of privacy and security in evacuation centres; separation from the family; lack of clean drinking water and food; lack of sanitation, acute diarrhea, chicken pox and colds. There were further concerns relating to access to education. Some of the children displaced from Marawi were not able to attend school, either because the schools were being used as evacuation centres, the lack of familiarity with the language of instruction (Bisaya instead of Maranaw) and in some cases parents were unwilling to allow their children to attend due to concern about the conflict erupting once more. There are no specific figures on the number of children in the camp, nor on the ages or gender of the children.

The UNHCR IDP Assessment for 30 June 2017 notes that the Philippine government had established the National Emergency Operations Center, to serve as the central coordination hub for government and humanitarian responders, and that the different clusters have been activated at sub-national level. The government had already identified areas for possible relocation of IDPs and reconstruction plans had been discussed by government officials. A decision had been made to establish a tent city in Marawi City as soon as the fighting stopped. An oversight committee to focus on a reconstruction program for Marawi was formed by the Office of the President, and it was stated that a multi-agency task force would soon be convened to assess the situation. By mid-July, fighting was continuing and no resolution had been reached.

Providing for such large numbers of IDPs over a long period of time is costly and places a significant burden on duty bearers and stakeholders who are tasked with providing for IDPs. The information contained in the publications from the Protection Cluster provide regular information on barriers and bottlenecks to protection of IDPs and sets out the action needed to address them. For instance, in relation to the IDPs from Marawi, there was initially a requirement that they produce identification in order to be able to access relief, but many had left with nothing, leaving all their belongings behind. The members of the Protection Cluster were able to advocate with government to draw their attention to these issues, setting out what needed to be done, and linking up the relevant bodies.

3.3. The particular vulnerability of indigenous children: exclusion, discrimination and unfulfilled rights

Indigenous people in the Philippines continue to face marginalization, exclusion and discrimination, and are particularly impacted by conflict and displacement – especially in Mindanao. As examined throughout this report, children from indigenous communities appear to have some of the worst development outcomes of all children in the country.

There are no accurate data on the number and distribution of indigenous peoples in the Philippines, due to variations and lack of consensus on how to define indigenous peoples/populations, and also due to a lack of comprehensive mappings of indigenous populations.⁴³⁹ Further, the tenuous ways in which indigenous peoples' identities have been constructed by themselves and others (for political, religious and other reasons) has made it difficult to identify and map indigenous populations in a meaningful way.⁴⁴⁰ Insufficient data on indigenous peoples and lack of disaggregated data on child rights and outcomes for children has rendered the particular deprivations and issues faced by indigenous children largely invisible. This lack of data is evidence of the low priority given to these issues by the Government. It has also limited the ability of Government policies and programmes to respond effectively to issues facing indigenous populations, including indigenous children.

While the number of indigenous people in the Philippines is unknown, estimates put them between 14 to 17 million, belonging to 110 ethnolinguistic groups.⁴⁴¹ According to recent estimates by the National Commission on Indigenous Peoples, indigenous people represent around 15 per cent of the population.⁴⁴² Indigenous peoples are mainly concentrated in Northern Luzon (Cordillera Administrative Region, 33 per cent) and Mindanao (61 per cent), with some groups also located in the Visayas area.

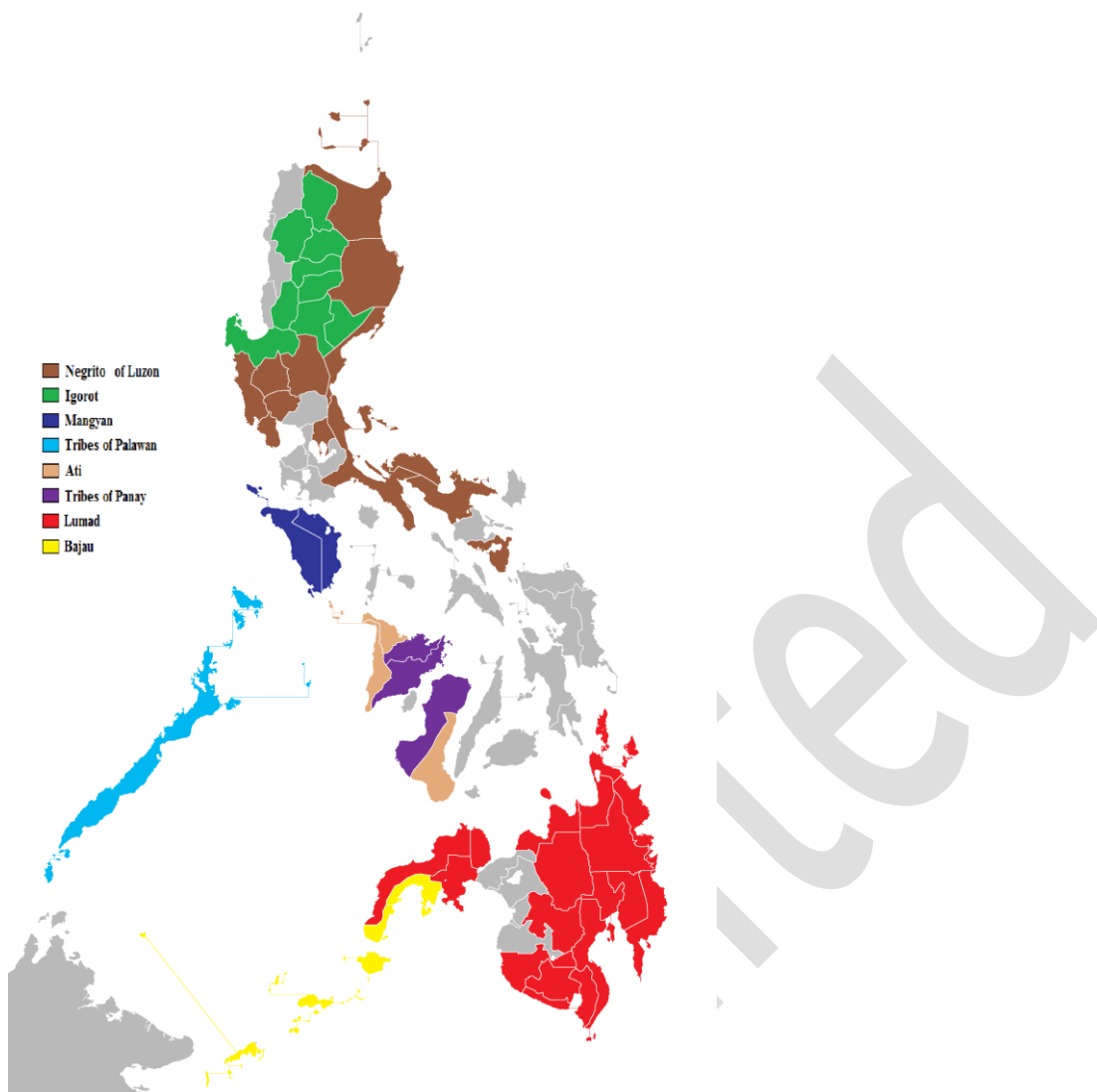
Table 3.7. Map of distribution of Indigenous Peoples in the Philippines

⁴³⁹ Asian Development Bank, *Indigenous Peoples / ethnic minorities and poverty reduction: Philippines (2002)*, p. 4; TEBTEBBA, *Situation of Indigenous Peoples in the Philippines: Submission to the 59th Session of CESCR*, 26 September 2016.

⁴⁴⁰ Asian Development Bank, *Indigenous Peoples / ethnic minorities and poverty reduction: Philippines (2002)*, p. 4

⁴⁴¹ UNDP, *Fast Facts: Indigenous Peoples of the Philippines (2013)*, available at: http://www.ph.undp.org/content/philippines/en/home/library/democratic_governance/FastFacts-IPs.html. Note that population statistics on Indigenous Peoples do not appear to be published with the Census data (which was last carried out in 2015).

⁴⁴² Government of the Philippines, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21: Human Rights Council, Working Group on the Universal Periodic Review, 27th Session, 1 May 2017, para. 83.



Source: Foundation for Philippine Environment (2000)

The Indigenous peoples residing in the northern mountains of Luzon are collectively known as Igorot, and groups residing in Mindanao are known collectively as *Lumad*.⁴⁴³ There are also a number of smaller groups in the central highlands known collectively as Mangyan, along with a number of smaller and more scattered groups in the central islands and Luzon.⁴⁴⁴

Table 3.8. Major Indigenous Groups in Philippines

Location and (major grouping)	Indigenous Groups
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⁴⁴³ International Work Group for Indigenous Affairs, *Indigenous Peoples in the Philippines*, available at: <http://www.iwgia.org/regions/asia/philippines>.

⁴⁴⁴ International Work Group for Indigenous Affairs, *Indigenous Peoples in the Philippines*, available at: <http://www.iwgia.org/regions/asia/philippines>.

Luzon - Cordillera (Igorot)	Bontoc, Ibaloi, Ifugao, Isneg, Kalinga, Kankanay, Tingguian, Yapayao
Luzon – central mountains (Caraballo)	Agta, Gaddang, Ibanag, Ikalahan, Ilongot, Isinai
Luzon – central hinterland	Aeta / Negrito, Agta
Mindanao (Lumad)	Bagobo, Banwayon, B’laan, Bukidnon, Dibabawon, Higaonon, Mamanua, Mandaya, Manguangan, Mansaka, Manobo, Subanon, Tagkaolo, Talaandig, T’bolo, Tiruay
Vasayas – Mindoro Islands (Mangyan)	Alangan, Batangan, Buhid, Iraya, Hanunoo, Ratagnon, Tadyawan
Vasayas – Palawan hills	Batak, Cuyonin, Kalamianes, Ken-uy, Tagabanna,

Source: Jose Mencio Molintas, 'The Philippine Indigenous Peoples' struggle for land and life: Challenging legal texts', *Arizona Journal of International and Comparative Law*, Vol. 21 (1) (2004), p. 274 – 6

Indigenous peoples have retained much of their traditional, pre-colonial cultural practices, institutions and livelihoods.⁴⁴⁵ However, it has been noted that there is wide disparity among different Indigenous groups in terms of social organization and cultural expression, and also in terms of the level of integration with other Filipinos.⁴⁴⁶

Historical discrimination, land dispossession and marginalisation from political processes and economic benefits has had a profound impact on indigenous populations that continues today. Before colonization by the Spanish, indigenous communities had customary concepts of land use and ownership, based on collectivism (though this concept took different forms among the many different Indigenous groups). Notions of private land and resource ownership were not recognised.⁴⁴⁷ Following colonization, the Spanish crown claimed rights over the Philippine islands, including the authority to dispose of land. Later, US authorities claimed the right to dispose of all land, and voided previous land claims made by Indigenous peoples. The US authorities instituted a land title system that only allowed land to be held by individuals or corporations.⁴⁴⁸ In Mindanao, a steady migration of Christian lowland Filipinos into areas previously dominated by the Lumad and Moro occurred throughout the twentieth century, encouraged by US authorities. Following independence, “the development of plantation agriculture, logging concessions and hydro-electric and geothermal energy schemes” gave further impetus for this trend and contributed to the ‘minoritisation’ of the Lumad in their ancestral lands.⁴⁴⁹

⁴⁴⁵ International Workgroup for Indigenous Affairs, *Indigenous Peoples of the Philippines*, available at: <http://www.iwgia.org/regions/asia/philippines>.

⁴⁴⁶ Minority Rights Group, *Philippines – Indigenous Peoples*, available at <http://minorityrights.org/minorities/indigenous-peoples-6/>.

⁴⁴⁷ Asian Development Bank, *Indigenous Peoples / ethnic minorities and poverty reduction: Philippines* (2002)

⁴⁴⁸ Minority Rights Group, *Philippines – Indigenous Peoples*, available at <http://minorityrights.org/minorities/indigenous-peoples-6/>.

⁴⁴⁹ Minority Rights Group, *Philippines – Indigenous Peoples*, available at <http://minorityrights.org/minorities/indigenous-peoples-6/>; Asian Development Bank, *Indigenous Peoples / ethnic minorities and poverty reduction: Philippines* (2002).

Several significant developments in the 1980s and 1990s recognised the legal identity of indigenous people and provided them with a range of human rights. In 1987, the Constitution provided legal recognition of indigenous people through two key provisions. Article XII(5) obliges the Government to “*protect the rights of indigenous cultural communities to their ancestral lands to ensure their economic, social and cultural wellbeing*”, and Article XIV(17) obliges the State to “*recognize, respect and protect the rights of indigenous cultural communities to preserve and develop their cultures, traditions and institutions.*”

The Indigenous Peoples Rights Act (IPRA) was passed in 1997 (Republic Act 8371). At the time, the Act was the first of its kind in the South-East Asia region. It recognises the collective and individual rights of indigenous people, including the right to manage their ancestral lands/domains (Chapter III); and provides rights to self-governance and empowerment (Chapter IV) including rights to participate in decision-making in decisions affecting them (section 16) and to decide on priorities for development (section 17), rights to social justice and human rights (Chapter V) and rights to cultural integrity (Chapter VI). The National Commission on Indigenous Persons was created with a mandate to facilitate full delineation of Indigenous ancestral lands and domains through the issuance of Certificates of Ancestral Domain Title.

Despite these legal developments, IPs continue to be vulnerable to land dispossession and an inability to access their collective cultural rights. The process for issuing Certificates of Ancestral Domain Title is burdensome and overly bureaucratic.⁴⁵⁰ Only 182 Certificates had been issued as of 2016 out of the 248 ancestral domain claims, and less than 50 of these had been registered with the Registry of Deeds.⁴⁵¹ This represents a problem as it means indigenous peoples are less able to prevent intrusion into their ancestral domains by migrants and corporations.⁴⁵² The National Commission of Indigenous Persons, which is the organization mandated to implement the IPRA, lacks influence and capacity. According to an assessment by World Bank in 2007, the National Commission experiences organizational challenges due to inadequate human, logistics and financial resources, limiting its ability to carry out its functions effectively.⁴⁵³

Even where certificates are issued, economic development projects and activities of extractive industries can compromise access to ancestral domains. In order for such activities to be carried out in Indigenous peoples’ territories, companies are required to obtain a Compliance Certificate for Free and Prior Informed Consent; however, in practice, this consent is often not obtained by mining

⁴⁵⁰ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵¹ Nester Castro, University of the Philippines, Assessing the status of Indigenous People’s rights during the Aquino administration (2016), available at <http://www.halalan.up.edu.ph/viewpoints/by-experts/248-assessing-the-status-of-indigenous-people-s-rights-during-the-aquino-administration>; UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵² UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵³ World Bank, Philippines: The Indigenous People’s Rights Act: Legal and institutional frameworks implementation and challenges (2007).

companies.⁴⁵⁴ Community leaders and human rights defenders who lead community processes of obtaining consent have reported facing harassment, threats and attacks.⁴⁵⁵ This has included 76 documented cases of killings of Indigenous human rights defenders from 2010 to 2016.⁴⁵⁶

This encroachment of corporate mining operations onto the lands of Indigenous people has limited their ability to work their land and has caused indigenous children to drop out of school.⁴⁵⁷ Mining has also resulted in environmental degradation, causing a reduction of agricultural production, water pollution, decreased fish catch and health problems.⁴⁵⁸ The Special Rapporteur on the Right to Food has noted that the loss of ancestral lands by Indigenous people in the Philippines caused by economic development projects and extractive industries has undermined their capacity to survive.⁴⁵⁹

Indigenous people have also been heavily impacted by conflict and displacement, particularly in Mindanao. The Special Rapporteur on Internally Displaced Persons noted in 2016 that Indigenous people in Mindanao had been “*disproportionately affected by the long-standing conflict between the Government and the New People’s Army.*”⁴⁶⁰ Many Indigenous people are located in areas of Mindanao in which the NPA and the counter-insurgency are active, and Indigenous people are often stigmatized and harassed, and sometimes attacked for their perceived association with or support for the NPA’s agenda. In addition, many Indigenous communities have been negatively impacted by ‘the militarization of their territories’: the military are permanently based within some Indigenous territories and have conducted operations including unwarranted searches of homes, imposition of food blockages and curfews.⁴⁶¹ The activities of the military and para-military in Lumad communities in Eastern Mindanao have included conducting raids on schools and villages, extrajudicial killings and displacement of thousands of Indigenous people.⁴⁶²

The historical and continuing exclusion and discrimination faced by Indigenous people in the Philippines has had a profoundly negative impact on Indigenous children. As examined throughout this report, Indigenous children suffer severe forms of deprivation, including poor educational and

⁴⁵⁴ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵⁵ UN Human Rights Council, Working Group on Universal Periodic Review, Summary of stakeholders’ submissions – the Philippines, 27 February 2017, A/HRC/WG.6/27/PHI/2, para. 121.

⁴⁵⁶ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵⁷ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵⁸ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples’ International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

⁴⁵⁹ UN Human Rights Council, Working Group on Universal Periodic Review, Compilation on the Philippines: Report of the Office of the United National High Commissioner for Human Rights, 27 February 2017, A/HRC/WG.6/27/PHI/2, para. 91.

⁴⁶⁰ UN Human Rights Council, Working Group on Universal Periodic Review, Compilation on the Philippines: Report of the Office of the United National High Commissioner for Human Rights, 27 February 2017, A/HRC/WG.6/27/PHI/2, para. 91.

⁴⁶¹ UN Human Rights Council, Working Group on Universal Periodic Review, Summary of stakeholders’ submissions – the Philippines, 27 February 2017, A/HRC/WG.6/27/PHI/2, para. 123.

⁴⁶² UN Human Rights Council, Working Group on Universal Periodic Review, Summary of stakeholders’ submissions – the Philippines, 27 February 2017, A/HRC/WG.6/27/PHI/2, para. 124.

health outcomes and exposure to violence and abuse. They tend to be concentrated in the most disadvantaged parts of the country, and their vulnerability is compounded by a lack of Government services in areas where Indigenous people live – these areas are often geographically isolated and remote, with limited economic opportunities.⁴⁶³ Government policies and services have also been recognized as lacking sensitivity to Indigenous cultural practices and traditions, resulting in exclusion of IPs from essential services, including health, education and protection services.

Unedited

⁴⁶³ International Workgroup for Indigenous Affairs, *Indigenous Peoples in the Philippines*, available at: <http://www.iwgia.org/regions/asia/philippines>.

4. Health

Key Health-related SDGs

SDGs	Targets	Indicators
3.1	By 2030, reduce the maternal mortality ratio to less than 70 per 100,000 live births	Maternal mortality ratio
		Proportion of births attended by skilled health personnel
3.2	By 2030, reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births	Under-five mortality rate
		Neonatal (0-28 days) mortality rate
3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases	Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations
		Tuberculosis incidence per 1,000 population
		Malaria incidence per 1,000 population
3.6	By 2020, halve the number of deaths and injuries from road traffic accidents	Death rate due to road traffic injuries
3.7	By 2030, ensure universal access to sexual and reproductive health-care services	Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods
		Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group

Key CRC Articles

Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child's or his or her parent's or guardian's race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status

Article 6 (1): Every child has the inherent right to life; (2) States parties shall ensure to the maximum extent possible the survival and development of the child

Article 17: States shall ensure that the child has access to information aimed at the promotion of his or her social, spiritual and moral well-being and physical and mental health

Article 24 (1) Every child has the right to the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health; (2) In particular, States must: (a) diminish infant and child mortality; (b) Ensure necessary health care for all; (c) Combat disease and malnutrition, including through the provision of adequate nutritious foods and clean drinking-water, taking into consideration the dangers of environmental pollution; (d)

Ensure appropriate pre- and post-natal health care for mothers; (e) Ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents; (f) Develop preventative health care, guidance for parents and family planning education and services.

Article 27: States recognize the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development

Article 33: States shall take all appropriate measures to protect children from the illicit use of narcotic drugs and psychotropic substances

According to the CRC and ICESCR, every child has the right to *'the highest attainable standard of physical and mental health'*.⁴⁶⁴ The right to health is an inclusive right, encompassing not only the right to appropriate and timely health care, but also to the 'underlying determinants' of health, including access to safe and potable water and adequate sanitation, an adequate supply of safe food, nutrition and housing, healthy occupational and environmental conditions, and access to health-related education and information, including on sexual and reproductive health.⁴⁶⁵ The right to health encompasses a number of components, and the analysis accordingly covers the following broad areas: child mortality, communicable disease and immunisation, maternal health, sexual and reproductive health, HIV/AIDS, substance abuse and mental health.

4.1. Legislative and policy framework

The right to health is protected under the Philippine Constitution in Article II, Section 15 which states that *"The State shall protect and promote the right to health of the people and instil health consciousness among them."* Article XIII, Sections 11-13 of the Constitution sets out further provisions related to health. In the PDP for the 2017–2022 period, the State has committed to accelerating Human Capital Development and this includes improvements to health. The targets set out in the PDP are reflected in the Philippines Health Agenda 2016-2022.⁴⁶⁶ There are a number of laws on health in Philippines, including legislation of broad reach such as RA 10606, the National Health Insurance Act of 2013, and legislation that is more targeted, such as RA 10152, the Mandatory Infants and Children Health Immunization Act of 2011 and RA 8504, the Philippine AIDS Prevention and Control Act of 1998. Additional 'subject specific' laws are set out in the relevant sub-sections within this Chapter.

In the Philippines there is a government mandate to ensure Universal Health Care, also referred to as *Kalusugan Pangkalahatan (KP)*. KP mandates the *"provision to every Filipino of the highest possible*

⁴⁶⁴ CRC, article 24, ICESCR, article 12.

⁴⁶⁵ CESCR General Comment No 14: The Right to the Highest Attainable Standard of Health (Art 12), 11 August 2000, E/C.12/2000/4, para 11.

⁴⁶⁶ The Philippines Youth Development Plan 2017-2022 also contains sector specific information, including in relation to health.

quality of health care that is accessible, efficient, equitably distributed, adequately funded, fairly financed and appropriately used by an informed and empowered public.”⁴⁶⁷

PhilHealth, the Philippines’ national health insurance programme, is governed by the National Health Insurance Act of 1995 which replaced the Medicare Act of 1969.⁴⁶⁸ In 2012, there was a landmark tobacco and alcohol excise tax increase (the Sin Tax Law) which earmarked the majority of revenues for health insurance for the poor. This meant that, in 2014, coverage was extended to 14.7 million poor families under the 2013 Amendment to the National Health Insurance Act of 1995 (RA 10606).

Republic Act 10645, passed in November 2014, grants automatic coverage in PhilHealth to Filipino citizens who have reached the age of 60, extending coverage further.⁴⁶⁹ As of December 2016, 91 per cent of the total population were covered by PhilHealth: 36 per cent of PhilHealth members were indigents; 35 per cent were in the formal economy; 15 per cent were senior citizens; 8 per cent were in the informal economy; 3 per cent were lifetime members; and 3 per cent were sponsored.⁴⁷⁰

PhilHealth benefits include inpatient care; maternity and newborn care; outpatient treatment for tuberculosis, rabies and leptospirosis. The catastrophic ‘z-benefit’ package includes coverage for certain cancers, cardiovascular surgeries, dialysis and kidney transplants; primary care benefits include screening for breast cancer and cervical cancer; and small medicines benefit.⁴⁷¹

Indigent PhilHealth members benefit from no-balance billing, which prohibits providers from charging the poor any fees or charges over and above what is reimbursed by PhilHealth.⁴⁷² There have been initiatives to reduce the price of drugs through the Cheaper Medicines Act 2008 and improve the availability of cheap medicines through the *Botikang Barangay*, *Botikang Bayan* and P100-treatment pack initiatives.⁴⁷³

Policy around health services in Philippines is also shaped by an acute awareness of the impact of climate change upon the health sector, and public health outcomes. The National Climate Change Adaptation in Health Strategic Plan 2014-2016 was developed following an assessment of Climate Change Adaptation for Health (CCA) initiatives that highlighted both strengths and gaps in CCA, and which settled upon three main objectives: 1) improving the adaptive capacity of the health care delivery system; 2) enhancing support mechanisms to adaptation and mitigation efforts on climate change in the health sector; and 3) empowering communities to manage health impacts of climate change.⁴⁷⁴

In May 2017, in response to the destruction caused by Super-Typhoon Yolanda (Haiyan), the Department of Health (DOH) issued Guidelines on the Provision of Essential Health Service Packages in Emergencies and Disasters. The Guidelines set standards for the delivery of essential health services in emergencies and disasters, define essential service components (for health, nutrition,

⁴⁶⁷ DoH. Universal Health Care <http://www.doh.gov.ph/universal-health-care>

⁴⁶⁸ WHO & DoH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1

⁴⁶⁹ Universal Health Coverage in the Philippines- Progress on Financial Protection Goals, Policy Research Working Paper 7258, World Bank Group

⁴⁷⁰ https://www.philhealth.gov.ph/about_us/statsnTables/snc2016.pdf

⁴⁷¹ Universal Health Coverage in the Philippines- Progress on Financial Protection Goals, Policy Research Working Paper 7258, World Bank Group, p 3

⁴⁷² Universal Health Coverage in the Philippines- Progress on Financial Protection Goals, Policy Research Working Paper 7258, World Bank Group, p 3

⁴⁷³ Universal Health Coverage in the Philippines- Progress on Financial Protection Goals, Policy Research Working Paper 7258, World Bank Group, p 4

⁴⁷⁴ DoH, National Climate Change Adaptation in Health Strategic Plan 2014-2016, ix.

WASH, and mental health), and delineate roles and responsibilities between different national and LGUs and non-governmental actors.⁴⁷⁵ These 2017 Guidelines were developed in addition to a series of emergency preparedness policies developed as part of the 2012 DOH-HEMS (Health Emergency Management Staff), which included, for example ‘Public Health Policies in Emergencies and Disasters’ and ‘Implementing Guidelines on Safe Hospitals in Emergencies and Disasters’.⁴⁷⁶

Children with disabilities

In 2016, a UNICEF commissioned and validated study attempted to estimate prevalence rates of disabilities among children in the Philippines. This study, which included children and young people below the age of 19, found the following prevalence rates, among this age group:

- Visual impairment of some form: approximately 80,000 (0.2 per cent)
- Hearing impairment of some form: approximately 1.5 million (3.9 per cent),
- Profound hearing impairment: 16,000 (0.03 per cent)
- Difficulty moving around: 140,000
- Neurodevelopmental impairment of some form: 1.6 million⁴⁷⁷

In conclusion, the study noted that around 80,000 children with visual impairment, 1,516,000 children with hearing impairment, all 140,000 children with mobility impairment, and all 1,600,000 children with neurodevelopmental impairment would require some form of medical or health-related intervention.⁴⁷⁸

4.2. Child Mortality

Article 24(2)(a) of the Convention on the Rights of the Child (CRC) states that States Parties shall take appropriate measures to diminish infant and child mortality. SDG 3.2 includes the target to end, by 2030, preventable deaths of newborn and children under 5 years of age, with all countries aiming to reduce neonatal mortality (0–28 days) to at least 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.

4.2.1. Child mortality trends

Neonatal (0–28 days) mortality in the Philippines has decreased slightly over the last decades. While in 1993 neonatal mortality stood at 18 deaths per 1,000 live births, it stood at 13 deaths per 1,000 live births as of 2013, which is still one percentage point above the SDG target for 2030.⁴⁷⁹ The goal in the PDP is to reduce neonatal mortality to 10 per 1,000 live births by 2020;⁴⁸⁰ and goes beyond the requirement in SDG 3.2 to reduce neonatal mortality to 12 per 1,000 live births by 2030.

⁴⁷⁵ DoH. May 23, 2017. Administrative Order No. 2017-0007. Guidelines in the Provision of Essential Health Service Packages in Emergencies and Disasters.

⁴⁷⁶ DoH Policy and Standards Development, Dissemination and Monitoring Committee, DOH-HEMS Policy Agenda, January 2012.

⁴⁷⁷ John Q. Wong, MD, MSc, commissioned by UNICEF and Physicians for Peace, Prevalence of Children with disabilities in the Philippines, 2016, p. 25.

⁴⁷⁸ John Q. Wong, MD, MSc, commissioned by UNICEF and Physicians for Peace, Prevalence of Children with disabilities in the Philippines, 2016, p.27-28.

⁴⁷⁹ Table 10.1, Philippine Development Plan 2017-2022, National Economic and Development Authority, 2017, (PDP) p139

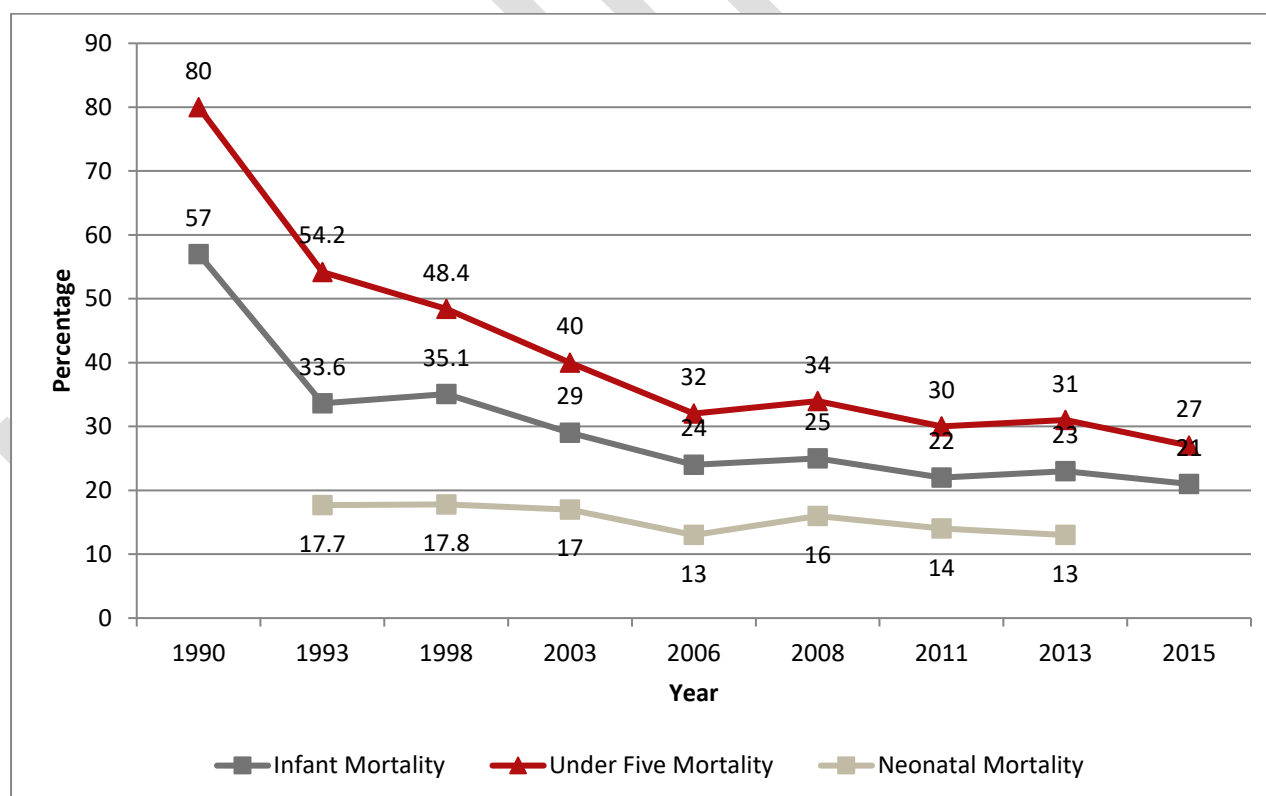
⁴⁸⁰ Table 10.4, PDP, p147

Infant (under-1 year) mortality also decreased over the last decades. The infant mortality rate was 41 deaths per 1,000 live births in 1990⁴⁸¹ and had reduced to 21 deaths per 1,000 live births in 2015.⁴⁸² In the PDP, the goal is to reduce the infant mortality rate to 15 deaths per 1,000 live births by 2020.⁴⁸³ The SDGs do not include an explicit target linked to infant (under-1) mortality, but instead focus on under-5 mortality and neonatal mortality.

The under-5 mortality rate has been decreasing in similar fashion, from 59 deaths per 1,000 live births in 1990,⁴⁸⁴ to 27 per 1,000 live births in 2015, which is still above the SDG target of 25 per 1,000 live births by 2030.⁴⁸⁵ In the PDP, the goal is to reduce the under-5 mortality rate to 22 deaths per 1,000 live births by 2022.⁴⁸⁶

Overall, child mortality rates in the Philippines compare unfavourably to the wider regional averages for East Asia and Pacific, where, as of 2015, neonatal mortality was estimated to stand at 9 deaths per 1,000 live births, infant mortality stood at 15 deaths per 1,000 live births, and under-5 mortality stood at 18 deaths per 1,000 live births.⁴⁸⁷ Table 4.1 below shows the progress achieved by the Philippines in terms of reducing child mortality rates since the early 1990s.

Table 4.1. Progress on under-5, infant and neonatal mortality in the Philippines



Source: UNICEF Philippines/UNDP/PDP

⁴⁸¹ Table 1, The State of the World’s Children 2016, A fair chance for every child, UNICEF, 2016 (SOWC 2016)

⁴⁸² Table 10.1, PDP, p139

⁴⁸³ Table 10.4, PDP, p147

⁴⁸⁴ Table 1, SOWC 2016

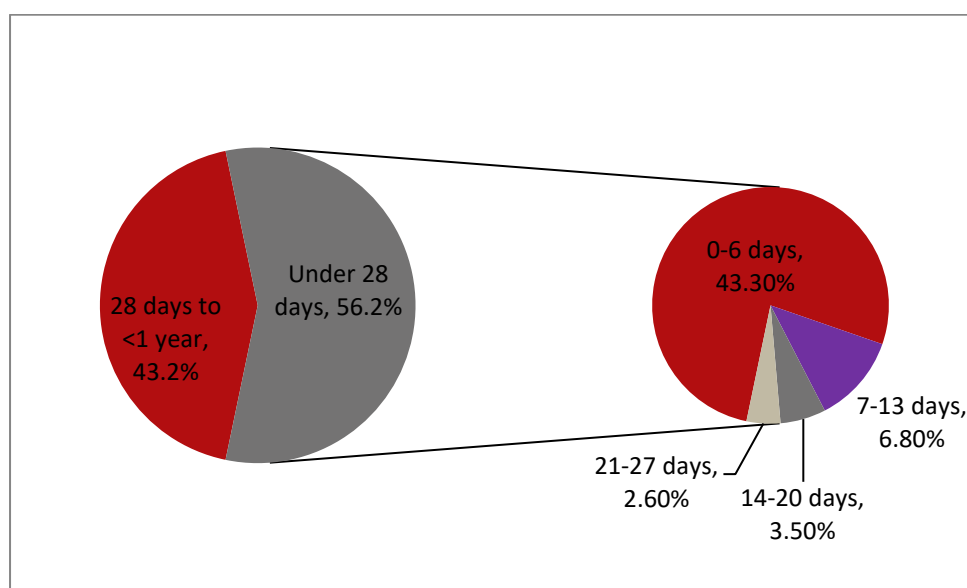
⁴⁸⁵ Table 10.1, PDP, p139

⁴⁸⁶ Table 10.4, PDP, p147

⁴⁸⁷ State of the World’s Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-tables/> [03.07.17]

Existing data suggest that interventions aimed at reducing (infant and under-5) child mortality will need to target the underlying causes of neonatal mortality in particular, as deaths shortly after birth account for a large proportion of childhood deaths in the Philippines. Table 4.2 below shows that the largest proportion of overall infant deaths (56.2 per cent) occur in the first 27 days after birth. Furthermore, within the first 27 days after birth, the greatest proportion of infants die in the first six days of life (43.3 per cent), and proportions decrease relative to age.

Table 4.2. Infant Mortality by Age Groups, 2012



Source: PHS 2012

4.2.2. Disparities in child mortality

Existing data suggest that child mortality rates are significantly higher in rural areas compared to urban areas. According to the Philippines National Demographic and Health Survey 2013 (NDHS) the neonatal mortality rate was 9 deaths per 1,000 live births in urban areas, but stood at 18 deaths per 1,000 live births in rural areas. The region with the highest neonatal mortality was SOCCSKSARGEN at 29 deaths per 1,000 live births. The lowest rate was found in NCR and Cordillera Administrative Region (CAR), with 7 deaths per 1,000 live births each.⁴⁸⁸

Similar to the neonatal mortality rate, the infant mortality rate is higher in rural areas, at 28 deaths per 1,000 live births, as of 2013, compared to 19 deaths per 1,000 live births in urban areas. The region with the highest infant mortality was (again) SOCCSKSARGEN at 37 deaths per 1,000 live births. The lowest rate was (again) in NCR and CAR, with 16 deaths per 1,000 live births each.⁴⁸⁹

Lastly, the under-5 mortality rate was also found to be higher in rural areas, at 38 deaths per 1,000 live births, as of 2013, in comparison to 25 deaths per 1,000 live births in urban areas.⁴⁹⁰ The region

⁴⁸⁸ Table 8.2, Philippines National Demographic and Health Survey, 2013, Philippines Statistics Authority, (NDHS) <http://dhsprogram.com/pubs/pdf/FR294/FR294.pdf>

⁴⁸⁹ Table 8.2, NDHS, 2013,

⁴⁹⁰ Table 8.2, NDHS, 2013,

with the highest under-5 mortality rate was ARMM with 55 deaths per 1,000 live births. The lowest was the Cagayan valley with 21 deaths per 1,000 live births.⁴⁹¹

Existing data shows that the educational status of the mother has an impact on child mortality in the Philippines. The highest rate of under-5 mortality in 2013 was found to be among those children born to mothers with no formal education (61 deaths per 1,000 live births). For those children born to mothers with elementary education the under-5 mortality rate stood at a lower 53 deaths per 1,000 live births, dropping to 30 deaths per 1,000 live births for those children whose mothers went to high school, and again to 16 deaths per 1,000 live births for those whose mothers went to college.⁴⁹²

Household wealth is also a significant predictor of child mortality in the Philippines. Children born in the lowest wealth quintile have a higher level of under-5 mortality, at 52 deaths per 1,000 live births, than those children in the highest wealth quintile, where the rate stood at 17 deaths per 1,000 live births, as of 2013.⁴⁹³ A similar association exists between household wealth and infant mortality: According to 2013 NDHS data the infant mortality rate amongst households in the poorest wealth quintile stands at 36 deaths per 1,000 live births, dropping significantly to only 13 deaths per 1,000 live births for infants on the richest wealth quintile.⁴⁹⁴

Across the East Asia and Pacific region, child mortality rates are, on average, somewhat higher for male children than for female children.⁴⁹⁵ This typical pattern of higher mortality for male children is not strongly reflected in the gender-disaggregated NDHS data on child mortality from 2013.⁴⁹⁶

4.2.3. Causes of child mortality

According to a report by the Philippines Child Health Epidemiology Reference Group (CHERG) in 2010, the main causes of death for children under 1 month were pre-term birth complications (39.3 per cent), intrapartum complications (25.4 per cent), congenital abnormalities (14.6 per cent) and sepsis, meningitis or tetanus (13.2 per cent). For children under 5 years, the main causes of death in 2010 were pneumonia (27.4 per cent), injury (15.1 per cent) and diarrhoea (10.7 per cent) according to the CHERG estimates.⁴⁹⁷

More recent estimates from WHO Global Health Observatory (2015) suggest that the main causes of death for children under 1 month were prematurity (32.7 per cent), birth asphyxia and trauma (23.1 per cent), congenital abnormalities (17.2 per cent) and sepsis and infections (13 per cent).⁴⁹⁸ For children under 5 years, the main causes of death were acute lower respiratory infections (29.5 per cent), injuries (15 per cent), diarrhoeal disease (13.6 per cent), and other communicable, perinatal and nutritional conditions (12.2 per cent), according to WHO estimates from 2015.⁴⁹⁹

⁴⁹¹ Table 2, National Statistics Office, Family Health Survey, 2011, <http://psa.gov.ph/sites/default/files/attachments/hsd/pressrelease/Table%20%20Infant%20and%20Under-Five%20Mortality%20Rates%20by%20Region%2C%20Philippines%202011.pdf>

⁴⁹² Table 8.2, NDHS, 2013, p.93

⁴⁹³ Table 8.2, NDHS, 2013, p.93

⁴⁹⁴ Table 8.2, NDHS, 2013, p.93

⁴⁹⁵ State of the World's Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [03.07.17]

⁴⁹⁶ NDHS, 2013, p.94

⁴⁹⁷ CHERG Child Causes of Death Annual Estimates by Country 2000-2010

⁴⁹⁸ Global Health Observatory data repository - <http://apps.who.int/gho/data/view.main.ghe3002015-PHL?lang=en>

⁴⁹⁹ Global Health Observatory data repository - <http://apps.who.int/gho/data/view.main.ghe3002015-PHL?lang=en>

The impacts of road traffic accidents and air pollution on child mortality

Under SDG 3.6 the Philippines should, by 2020, halve the number of deaths and injuries from road traffic accidents. According to the Philippine Health Statistics, transport accidents caused 8.7 deaths per 100,000 population in 2012. For children under 1 year transport accidents accounted for 1.2 per 100,000 deaths, and for those aged 1–4 they accounted for 1.8 per 100,000 deaths. For children aged 5–9 years old transport accidents are the sixth most common cause of death, and for those aged 10–14 they are the fourth most common cause of death.⁵⁰⁰

While up-to-date data on the impacts of air pollution on child mortality in the Philippines are limited, existing evidence suggests that air pollution is a significant concern in relation to child health. Estimates from the WHO Global Health Observatory indicate that ambient air pollution (for example, from traffic, industrial sources, waste burning or residential fuel combustion) accounted for a total of 129 deaths in under-5-year-olds in 2008 (a rate of 1 death per 100,000). The WHO data also suggest an upward trend in relation to under-5 deaths attributable to air pollution in the Philippines: in 2004 air pollution was estimated to account for a total of 81 deaths, suggesting an increase by around 38 per cent within only four years.⁵⁰¹

4.3. Communicable disease and immunisation

Article 24(2)(c) of the UNCRC obliges States Parties to take appropriate measures to combat disease. The target under SDG 3.3 is, by 2030, to end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases, and combat hepatitis, water-borne diseases and other communicable diseases.

4.3.1. Malaria

The goal set out in the PDP is to reduce the malaria prevalence in the Philippines to less than 1 case per 100,000 population by 2022.⁵⁰² The Philippines appear to be on good track to meet this goal. The mortality and morbidity rates attributable to malaria have been decreasing relatively steadily since the early 1990s (see Table 4.3 below). Indoor residual spraying with Dichloro-diphenyl-trichloroethane, which was the primary vector control measure until the late 1980s, and scale-up of case finding and treatment, are reported to be among the contributing factors that led to the eventual decline of malaria mortality and morbidity in the Philippines.⁵⁰³

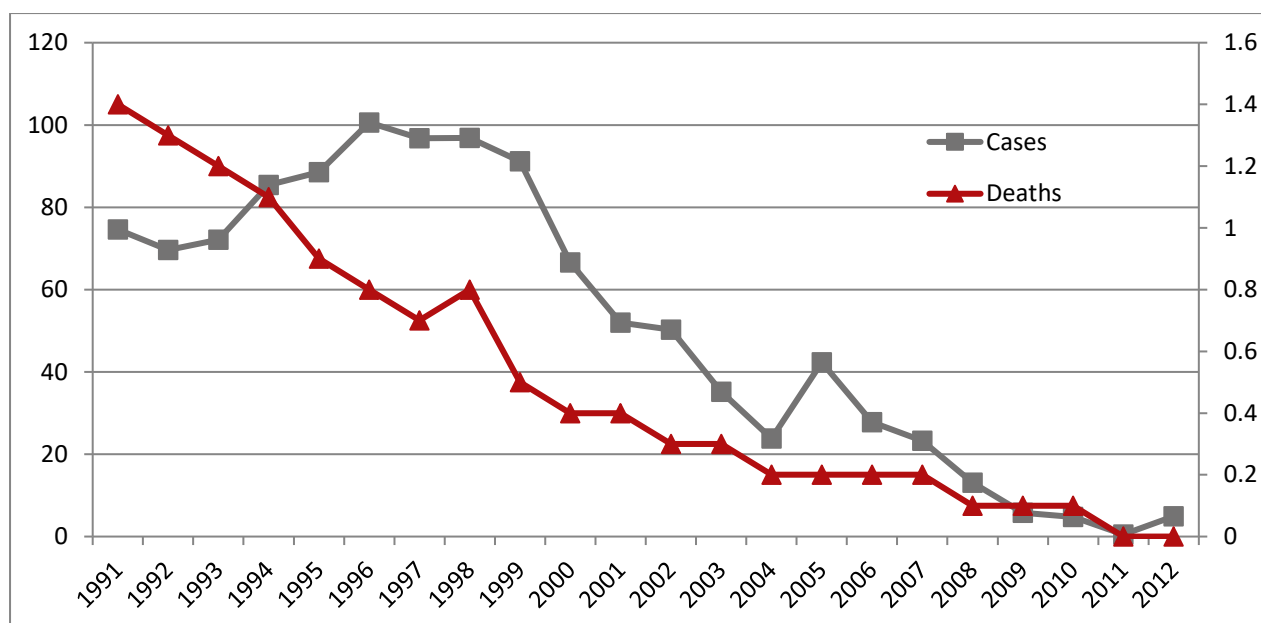
Table 4.3. Malaria Morbidity and Mortality rate/100,000 Population, Philippines, 1992-2012

⁵⁰⁰ PHS 2012, p.106

⁵⁰¹ Global Health Observatory data repository - http://www.who.int/gho/phe/outdoor_air_pollution/burden/en/

⁵⁰² Table 10.4, PDP, p139

⁵⁰³ WHO. 2012. Eliminating Malaria. Case-study 6 Progress towards subnational elimination in the Philippines <http://www.wpro.who.int/philippines/mediacentre/features/phileliminationmalaria.pdf> p.6



Source: PHS 2012

The malaria mortality rate in the Philippines decreased from 0.01 deaths per 100,000 in 2011 to 0.008 deaths per 100,000 in 2014. However, this increased again slightly, to 0.019 deaths per 100,000 in 2015. The malaria morbidity rate in 2011 was 9.5 cases per 100,000, and this decreased to 4.9 cases per 100,000 in 2014, but increased again slightly to 8 cases per 100,000 in 2015.⁵⁰⁴ According to the PDP, the relatively small increases in malaria morbidity and mortality between 2014 and 2015 were concentrated in endemic areas and among indigenous peoples and mobile populations.⁵⁰⁵

The geographic range and incidence of malaria is dependent on weather and climate. With increasing temperatures and shifting agro-ecological zones, the geographic prevalence of malaria is likely to spread into higher altitudes. Climatic events such as El Niño may also contribute to malaria epidemics.⁵⁰⁶

4.3.2. Tuberculosis

Tuberculosis (TB) has been one of the leading causes of mortality in the Philippines, although the mortality rate attributable to TB has been decreasing steadily over the last decades. In 1992, TB accounted for 23,356 deaths in total (or 35.7 per 100,000 deaths), but decreased to 22,693 deaths in total (or 23.6 per 100,000 deaths) by 2012.⁵⁰⁷ The 2015 MDG goal in relation to TB reduction was met by the Philippines. Much of the decrease in TB-related mortality can be attributed to efforts by the National TB Control Programme to improve access to diagnostic and treatment services, especially for the vulnerable sectors. Examples of these initiatives include the expansion of laboratory services

⁵⁰⁴ Table 10.1, PDP, p. 139.

⁵⁰⁵ PDP, p. 138.

⁵⁰⁶ UNICEF. 2015. Unless we act now,

[https://www.unicef.org/publications/files/Unless we act now The impact of climate change on children.pdf](https://www.unicef.org/publications/files/Unless_we_act_now_The_impact_of_climate_change_on_children.pdf)

⁵⁰⁷ The 2012 Philippine Health Statistics, Department of Health Epidemiology Bureau, (PHS 2012) Figure 20, p 200

and establishing partnerships with public and private health providers.⁵⁰⁸ The TB case detection rate was 82 per cent in 2012, and increased to 94 per cent by 2015.⁵⁰⁹

The target in the PDP in relation to TB incidence (new cases per year) is a rate of 225 per 100,000 by 2022.⁵¹⁰ The TB incidence was 322 cases per 100,000 population in 2015, which is still significantly above the PDP target. It was estimated that children aged 0–14 years accounted for 9.5 per cent of all TB incidence in 2015.⁵¹¹

4.3.3. Immunisation

The Expanded Program on Immunization (EPI) was launched in the Philippines in 1976 to ensure that all Filipino children and mothers have access to routinely recommended vaccines. The current standard immunization schedule includes BCG, OPV, DPT, Hepatitis B, Haemophilus Influenzae type B (HiB), IPV and Measles (MMR) vaccines. This year has also seen a policy shift from the provision of Tetanus (TT) to Tetanus and Diphtheria (Td) vaccines for pregnant women and women of reproductive age.⁵¹² PCV, Rotavirus and Dengue vaccines have been piloted in some regions. School-based immunization was introduced in 2013 to deliver routine immunizations to school-aged children and catch up on missed doses.⁵¹³

The Philippines has been cited by the WHO Strategic Advisory Group of Experts on Immunization as being among the group of five countries in the world (together with Nigeria, Pakistan, Indonesia and the DRC) with the highest number of unimmunized children for three doses of Diphtheria-tetanus-pertussis (DTP3) in 2015.⁵¹⁴ DTP3 is used by UNICEF as an indicator of how well countries are providing routine immunization services. Worryingly, the nationwide DTP3 coverage rate has dropped from 89 per cent in 2013 to around 60 per cent in 2015.⁵¹⁵ Only 70 per cent of children were fully immunized according to the FHSIS report 2014.⁵¹⁶ Table 4.4 presents trend data on immunisation coverage for 12 universally recommended vaccines from the WHO Global Health Observatory.⁵¹⁷

Low immunization coverage rates (and in some cases declining immunization coverage rates) have resulted in increased incidence of vaccine-preventable diseases in the Philippines with, for example, two major outbreaks of Rubella in 2001 and 2011, and a measles outbreak in 2014.⁵¹⁸ Underlying causes of low vaccination coverage are discussed in the barriers and bottlenecks chapter below.

⁵⁰⁸ Vianzon R et al. 2013. The tuberculosis profile of the Philippines, 2003–2011: advancing DOTS and beyond. *Western Pacific Surveillance and Response Journal*. http://www.wpro.who.int/wpsar/volumes/04/2/2013_VBD_SR_Vianzon/en/

⁵⁰⁹ Table 10.1, PDP, p. 139.

⁵¹⁰ Table 10.4, PDP.

⁵¹¹ WHO Tuberculosis country profiles - https://extranet.who.int/sree/Reports?op=Replet&name=%2FWHO_HQ_Reports%2FG2%2FPROD%2FEXT%2FTBCountryProfile&ISO2=PH&LAN=EN&outtype=html.

⁵¹² Information provided by UNICEF Philippines.

⁵¹³ UNICEF internal briefer on national immunisation program of the Philippines, p 5.

⁵¹⁴ UNICEF internal briefer on national immunisation program of the Philippines, p 2.

⁵¹⁵ WHO and UNICEF estimates of immunization coverage – 2015 revision -

http://www.who.int/immunization/monitoring_surveillance/data/phl.pdf.

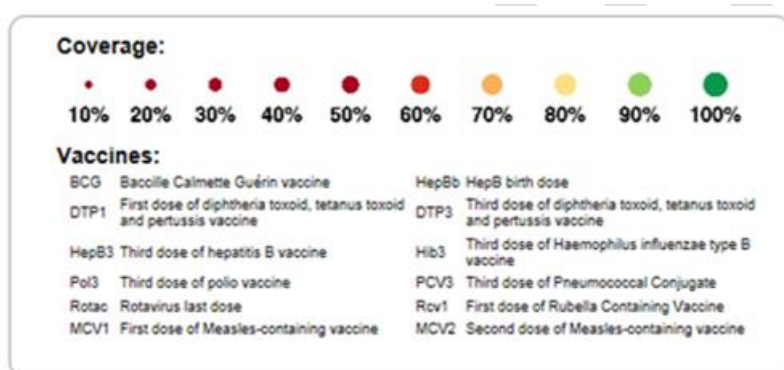
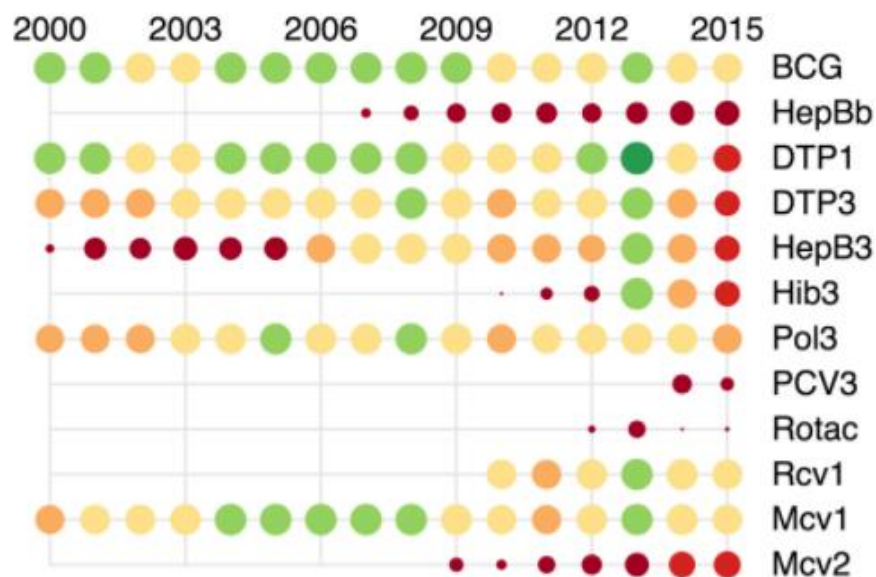
⁵¹⁶ Figure 2D.1, Field Health Service Information System 2014 Annual Report, Philippines Department of Health (FHSIS)

⁵¹⁷ WHO Global Health Observatory data repository - <http://www.who.int/gho/immunization/en/>

⁵¹⁸ UNICEF internal briefer on national immunisation program of the Philippines, p 3; see also <http://news.abs-cbn.com/nation/regions/08/20/15/why-immunization-campaign-armm-delayed> [19.05.17].

Table 4.4. Immunization coverage in the Philippines, 2000-2015

Philippines



Source: WHO Global Health Observatory

Disparities in immunization coverage

According to 2013 NDHS data, there are significant disparities in vaccination coverage based on geographical location. Urban children were more likely to have had all basic vaccinations⁵¹⁹ (72.7 per cent) in comparison to rural children (64.7 per cent). However, these aggregate findings in relation to rural-urban disparities in immunization coverage need to be qualified, as there are some pockets of unimmunized children in urban and peri-urban settlements, particularly in the metropolitan area of Manila. For example, of a total of 64 diphtheria cases reported throughout the Philippines between 1 January and 30 July in 2016, around one third of all cases (21) were reported in NCR.⁵²⁰ The majority

⁵¹⁹ Basic vaccinations are: BCG, measles and three doses each of DPT, polio and Hepa-B vaccine (either Hepa-B0, B1, and B2 or Hepa-B1, B2 and B3); excludes HiB vaccine. See also WHO vaccine-preventable diseases: monitoring system. 2017 global summary, http://apps.who.int/immunization_monitoring/globalsummary/estimates?c=PHL.

⁵²⁰ DoH 2016 Diphtheria Morbidity Week 30 <http://www.doh.gov.ph/sites/default/files/statistics/DIPHThERIA%20MW30.pdf>.

of reported diphtheria cases (in the same time period) were found in males (52 per cent) and the majority were found in young children (in the 1- to 5-year-old age group).⁵²¹

The rapid urbanization experienced in the Philippines poses an added challenge to immunization coverage, complicating the urban/rural divide such that children in urban slums experience lower immunization rates and, therefore, higher risk of illness and death. A recent working paper on Urban Health and Immunization in East Asia highlights a very high risk for vaccine preventable diseases outbreak in the urban slums; noting, for example, that *“tuberculosis has been confirmed to be much worse in the urban slum population as compared to the general population.”*⁵²²

According to 2013 NDHS data, the region with the highest level of children who had all their basic vaccinations was CAR with 83.6 per cent, compared to ARMM where only 29.4 per cent of children had all their basic vaccinations.⁵²³

According to the 2013 NDHS data there are also differences in vaccination coverage based on the child’s and mother’s background characteristics. Where the child is the firstborn it is more likely to have had all its basic vaccinations (73.6 per cent) compared to the sixth or higher child (52.8 per cent). The NDHS data also suggest that mothers with no education are less likely to have their child receive all basic vaccinations (30 per cent) compared to mothers with college education (75 per cent). There is very little difference in immunization coverage between male and female children, with 69.6 per cent of male children and 67.5 per cent of female children having received all basic vaccinations.⁵²⁴

4.3.4. Neglected tropical diseases

Neglected tropical diseases (NTDs) such as Schistosomiasis, Lymphatic Filariasis, or Soil-transmitted helminths are endemic in many of the poorest provinces in the Philippines.⁵²⁵ Because NTDs do not cause instant death, they tend to be neglected by policymakers.⁵²⁶ Nevertheless, the DOH has implemented the Soil Transmitted Helminthiasis Control Program in 2002, the National Filariasis Elimination Program (NFEF) in 2000 and, the Schistosomiasis Control Program in 2001.⁵²⁷

Somewhat outdated DOH estimates from 2005 suggest that lymphatic filariasis, also known as elephantiasis, is endemic in 40 provinces in the Philippines: 76 per cent of the municipalities in these provinces are considered ‘poor’, and 56 per cent of all reported lymphatic filariasis infections were in Mindanao.⁵²⁸ As of 2011, only nine provinces have been able to eliminate lymphatic filariasis completely.⁵²⁹

⁵²¹ DoH 2016 Diphtheria Morbidity Week 30

<http://www.doh.gov.ph/sites/default/files/statistics/DIPHThERIA%20MW30.pdf>.

⁵²² UNICEF, Working Paper on Urban Health and Immunization in East Asia (Draft), p. 48, citing Tupasi TE(1), Radhakrishna S, Quelapio MI, Villa ML, Pascual ML, Rivera AB, Sarmiento A, Co VM, Sarol JN, Beltran G, Legaspi JD, Mangubat NV, Reyes AC, Solon.

Tuberculosis in the urban poor settlements in the Philippines. *Int J Tuberc Lung Dis.* 2000 Jan;4(1):4-11.

⁵²³ NDHS 2013, p.125.

⁵²⁴ NDHS 2013, p.125.

⁵²⁵ http://www.wpro.who.int/philippines/areas/communicable_diseases/mvp/story_ntd/en/.

⁵²⁶ http://www.wpro.who.int/philippines/areas/communicable_diseases/mvp/story_ntd/en/.

⁵²⁷ http://www.wpro.who.int/philippines/areas/communicable_diseases/mvp/story_ntd/en/.

⁵²⁸ DoH. 2008. Health Policy Notes. Volume 1: Issue 4 (April 2008). Department of Health, Manila, Philippines.

http://www.doh.gov.ph/sites/default/files/publications/Vol1Issue4April2008_1.pdf.

⁵²⁹ http://www.wpro.who.int/philippines/areas/communicable_diseases/mvp/story_ntd/en/.

According to the 2006 data, schistosomiasis (a disease caused by parasitic flatworms) remains endemic in 12 regions in the Philippines, affecting 28 provinces, 15 cities, and 190 municipalities.⁵³⁰ The national schistosomiasis prevalence rate has declined slightly from 4.5 per cent in 1997 to 3 per cent in 2006.⁵³¹ Mass drug administration aimed at combatting lymphatic filariasis and schistosomiasis have been hampered due to lack of political and financial support in the endemic regions, as well as insufficient drug supplies and a lack of reliable and accurate disease surveillance data.⁵³²

4.4. Maternal Health

4.4.1. Maternal mortality

According to SDG 3.1, the Philippines should aim to reduce the maternal mortality ratio to less than 70 maternal deaths per 100,000 live births by 2030. The PDP in turn sets a target of 90 maternal deaths per 100,000 live births by 2022.⁵³³

Maternal mortality in the Philippines has declined somewhat since the early 1990s, but remains at a relatively high level, suggesting that the country is unlikely to achieve this important international development target. Estimates from the UN Maternal Mortality Estimation Inter-Agency Group suggest that as of 2015, maternal mortality ratio in the Philippines stood at 114 deaths per 100,000 live births, which is significantly higher than the regional average for East Asia and Pacific of 62 deaths per 100,000 live births, and still short of the reduction targets set out in the PDP and SDGs.⁵³⁴ The Inter-Agency Group produces internationally comparable sets of maternal mortality data that account for the well-documented problems of under-reporting and misclassification of maternal deaths by national authorities.⁵³⁵

The Philippines' progress in reducing maternal mortality has been relatively limited over the last decades, as the ratio stood at 152 deaths per 100,000 live births in 1990, suggesting a decrease of only 25 per cent over a period of 25 years (see Table 4.5 below).⁵³⁶ However, it should be noted that the data between 2010 and 2015 showed the first decrease in maternal mortality ratio since 1995. Underlying factors contributing to the Philippine's relatively slow progress in reducing maternal mortality are explored in the barriers and bottlenecks chapter below.

Table 4.5. Maternal Mortality Ratio in the Philippines, 1990–2015

⁵³⁰ DoH. 2008. Health Policy Notes. Volume 1: Issue 4 (April 2008). Department of Health, Manila, Philippines. http://www.doh.gov.ph/sites/default/files/publications/Vol1Issue4April2008_1.pdf.

⁵³¹ DoH. 2008. Health Policy Notes. Volume 1: Issue 4 (April 2008). Department of Health, Manila, Philippines. http://www.doh.gov.ph/sites/default/files/publications/Vol1Issue4April2008_1.pdf.

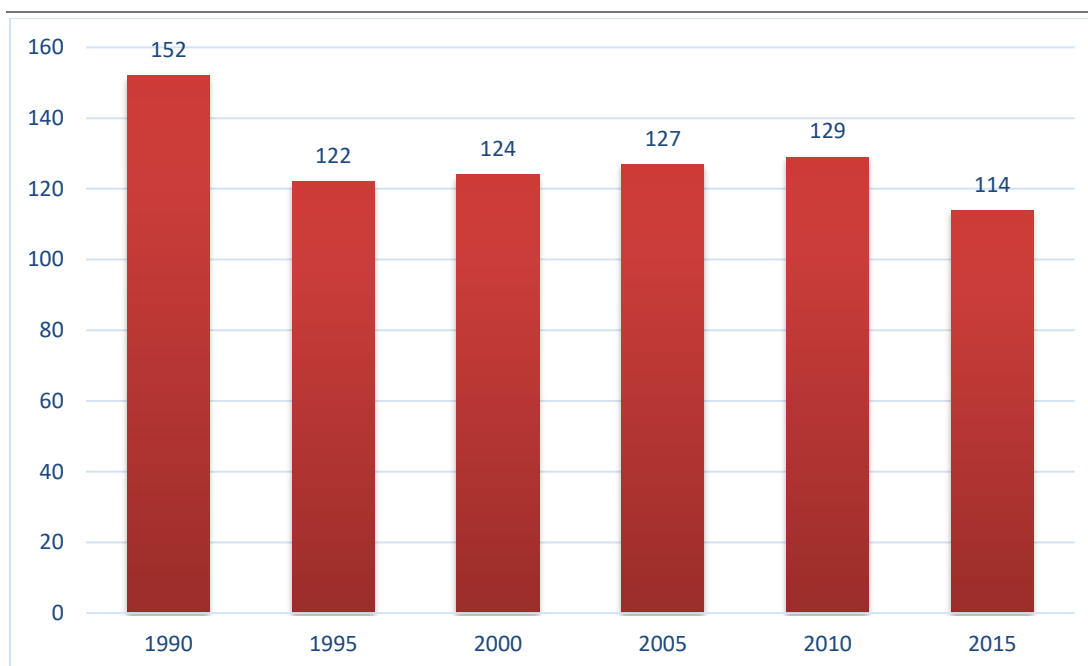
⁵³² DoH. 2008. Health Policy Notes. Volume 1: Issue 4 (April 2008). Department of Health, Manila, Philippines. http://www.doh.gov.ph/sites/default/files/publications/Vol1Issue4April2008_1.pdf.

⁵³³ Table 10.4 PDP.

⁵³⁴ State of the World's Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-tables/> [27.06.17].

⁵³⁵ See <https://data.unicef.org/topic/maternal-health/maternal-mortality/> [25.04.17].

⁵³⁶ Data are available at: http://www.who.int/gho/maternal_health/countries/phl.pdf?ua=1 [27.06.17].



Source: UN Maternal Mortality Estimation Inter-Agency Group

Data from the 2012 Philippines Health Statistics (PHS) report show that almost two in five maternal deaths were from complications related to pregnancy occurring in the course of labour, delivery and the puerperium.⁵³⁷ These complications were the leading cause of maternal deaths in the Philippines as of 2012 (accounting for 39.9 per cent of all maternal deaths). Other leading causes of maternal death were hypertension complicating pregnancy, childbirth and the puerperium (34.8 per cent), postpartum haemorrhage (15.3 per cent) and pregnancy with abortive outcome (9.7 per cent).⁵³⁸ Note that the PHS figures are based on administrative data transmitted by the City or Municipal Civil Registrars, and may be susceptible to misclassification and underreporting.⁵³⁹ 2012 PHS data also suggest that women in older age groups (40–49 years) had higher risk of dying from complications of pregnancy, childbirth and puerperium, than those women at the beginning of their reproductive years (15–39).⁵⁴⁰

4.4.2. Antenatal care

Under Article 24(2)(d) of the UNCRC and CRC GC No.15 paras 51-57, the Philippines has an obligation to ensure appropriate pre- and post-natal health care for mothers.

Antenatal care in the Philippines has improved markedly over the last decades: the percentage of women who had at least one antenatal care visit from a health professional increased from 83 per cent in 1993 to 95 per cent in 2013, according to National Demographic and Health Survey (NDHS) data. Similarly, the percentage of women with four or more antenatal care visits rose substantially

⁵³⁷ The period of about six weeks after childbirth during which the mother's reproductive organs return to their original non-pregnant condition.

⁵³⁸ PHS 2012 p.79.

⁵³⁹ PHS 2012 p.79.

⁵⁴⁰ PHS 2012, p.79.

from 52 per cent in 1993 to 84 per cent in 2013.⁵⁴¹ Note that data from the 2014 Field Health Information System (FHSIS) records an antenatal care coverage rate for at least four visits of only 58.99 per cent in (which is much lower than the rate in the 2013 NDHS).⁵⁴² However, the FHSIS data is limited as it only covers pregnant women who access care through the public health sector and not data from private health providers.⁵⁴³

According to 2013 NDHS data, there is not much variation in antenatal care coverage rates across regions (rates for at least one visit are above 90 per cent throughout); except for ARMM, where only 52.8 per cent of women received at least one antenatal care visit from a skilled healthcare provider.⁵⁴⁴ However, the NDHS data reveal that the educational status of the expectant mother is a significant predictor of access to antenatal care. While 98 per cent of women with a college degree received at least one visit by a skilled healthcare provider, this proportion drops to a much lower 61 per cent for women with no formal education.⁵⁴⁵

4.4.3. Delivery care

One of the guiding principles of the DOH is that “every delivery is facility-based and managed by skilled health professionals”.⁵⁴⁶ Existing data suggest that there has been a remarkable increase in the proportion of live births delivered in a health facility as well as the proportion of births attended by a skilled health professional. However, the Philippines is still far from the goal of achieving universal coverage for skilled birth attendance and institutional delivery.

According to NDHS data, the proportion of deliveries in a health facility (institutional delivery) increased from a very low 44 per cent in 2008 to 61 per cent in 2013 – an increase by more than 30 per cent over only five years.⁵⁴⁷ However, this is still a long way from universal coverage and significantly below the regional average for East Asia and Pacific of 88 per cent (as of 2015).⁵⁴⁸ Table 4.6 below shows that, as of 2013, the proportion of births delivered in a public facility (43 per cent) is more than two times higher than those delivered in a private facility (19 per cent). However, home deliveries make up a significant proportion (38 per cent) of all births in the Philippines, as of 2013.⁵⁴⁹

⁵⁴¹ Table 2, <https://psa.gov.ph/content/six-ten-births-are-delivered-health-facility-preliminary-results-2013-national-demographic>.

⁵⁴² Table 2G.1 FHSIS report 2014.

⁵⁴³ FHSIS report 2014.

⁵⁴⁴ NDHS 2013 p.100.

⁵⁴⁵ NDHS 2013 p.100.

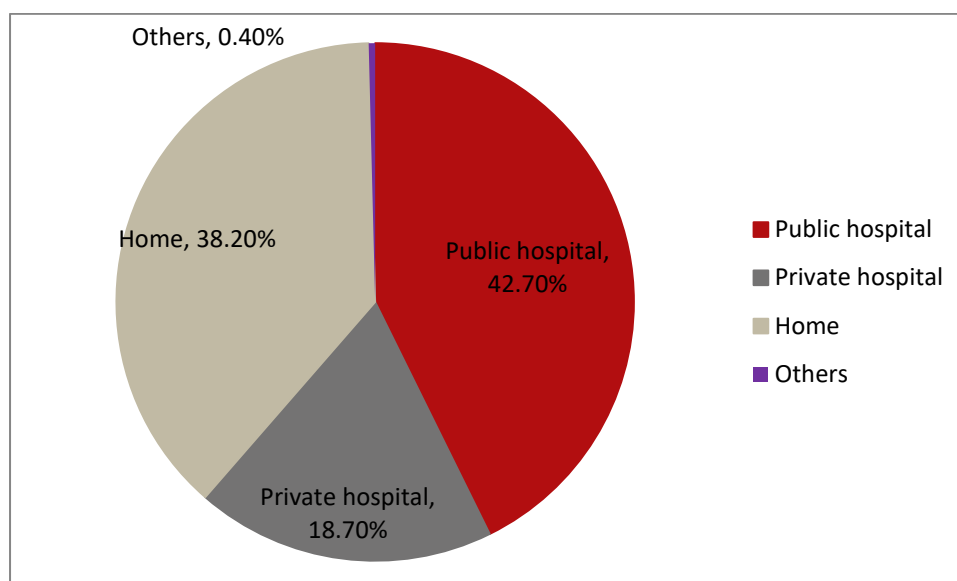
⁵⁴⁶ NDHS 2013, p.106.

⁵⁴⁷ NDHS 2013, p.106.

⁵⁴⁸ State of the World’s Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [27.06.17].

⁵⁴⁹ NDHS 2013, p.106.

Table 4.6. Place of Birth



Source: National Demographic Health Survey 2013

As with institutional delivery coverage, the proportion of women delivering in the presence of a skilled health professional has increased markedly over the last years: from 62 per cent in 2008 to 73 per cent in 2013, according to NDHS data.⁵⁵⁰ However, the current skilled birth attendance coverage rate is still far short of universal coverage and significantly below the regional average for East Asia and Pacific of 93 per cent (as of 2015).⁵⁵¹

NDHS data suggests that there was a substantial decrease in deliveries assisted by Traditional Birth Attendants or ‘*hilots*’, from 36 per cent in 2008 to 26 per cent in 2013.⁵⁵² Whereas 34 per cent of deliveries in rural areas were assisted by a ‘*hilot*’, as of 2013, this figure is almost halved for deliveries in urban areas (16 per cent).⁵⁵³

4.4.4. Disparities in delivery care

An analysis of the 2013 NDHS data reveals significant disparities in institutional delivery and skilled birth attendance coverage along geographical, educational and wealth divides. For example, the percentage of births delivered in a health facility varies significantly between regions, from a very low 12 per cent in ARMM to 82 per cent in NCR.⁵⁵⁴ Similarly, the proportion of births attended by a skilled health professional ranges from a near-universal 90 per cent in NCR to a significantly lower 20 per cent in ARMM.⁵⁵⁵

Disparities in delivery care also exist between urban and rural areas with women in rural areas, on average, being significantly less likely to access professional delivery care. While institutional delivery

⁵⁵⁰ NDHS 2013, p.108.

⁵⁵¹ State of the World’s Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [27.06.17].

⁵⁵² NDHS 2013, p.108.

⁵⁵³ NDHS 2013, p.108.

⁵⁵⁴ NDHS 2013, p.107.

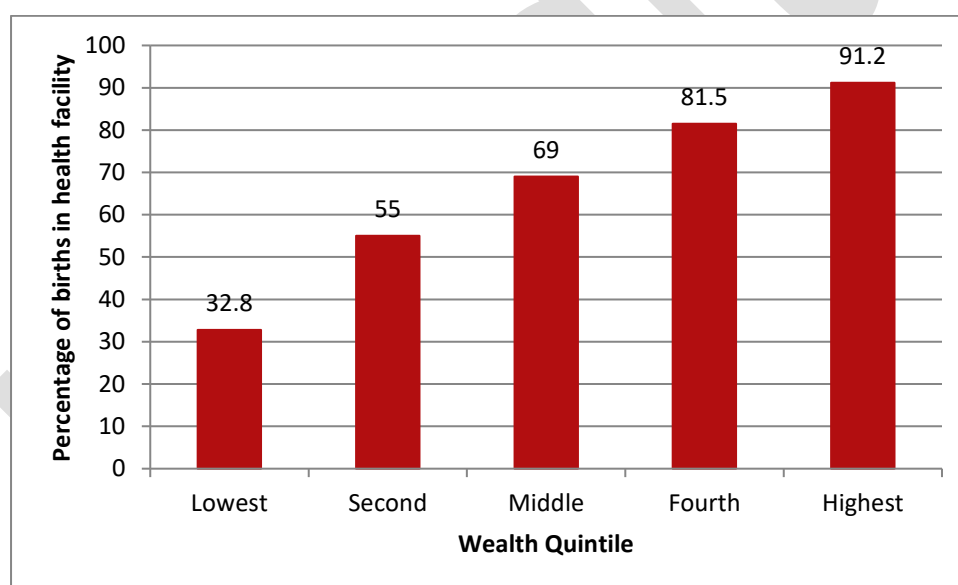
⁵⁵⁵ NDHS 2013, p.109.

coverage stands at an estimated 72 per cent in urban areas, coverage falls to a much lower 51 per cent in rural areas.⁵⁵⁶ Similar disparities are revealed in relation to skilled birth attendance coverage: at 83 per cent in urban areas and 64 per cent in rural areas.⁵⁵⁷

Educational status of the mother appears to affect access to/use of professional delivery care in the Philippines: women with more education being, on average, more likely to access these health services. While 84 per cent of women with at least a college degree delivered their baby in a health facility, this figure drops dramatically when looking at women with no formal education, among whom only 11 per cent delivered their baby in a health facility.⁵⁵⁸ Similar disparities are revealed in relation to skilled birth attendance coverage: at 90 per cent for women with at least a college degree, and at 17 per cent for women with no formal education.⁵⁵⁹ This suggests that in order to increase delivery care coverage in the Philippines, targeting women of lower educational status will need to be key priority.

According to the 2013 NDHS, household wealth of the mother is also a significant predictor of the likelihood of accessing/using professional delivery care. Just over 30 per cent of women from the lowest wealth quintile gave birth in a health facility, whereas over 90 per cent of those in the highest wealth quintile gave birth in a health facility (see Table 4.7 below).⁵⁶⁰

Table 4.7. Percentage of Births in a Health Facility (disaggregated by wealth quintile)



Source: National Demographic and Health Survey 2013

A similar association between household wealth and delivery care is revealed in relation to skilled birth attendance coverage. According to the 2013 NDHS data, only around 40 per cent of women from households in the lowest wealth quintile were assisted in giving birth by skilled health

⁵⁵⁶ NDHS 2013, p.107.

⁵⁵⁷ NDHS 2013, p.109.

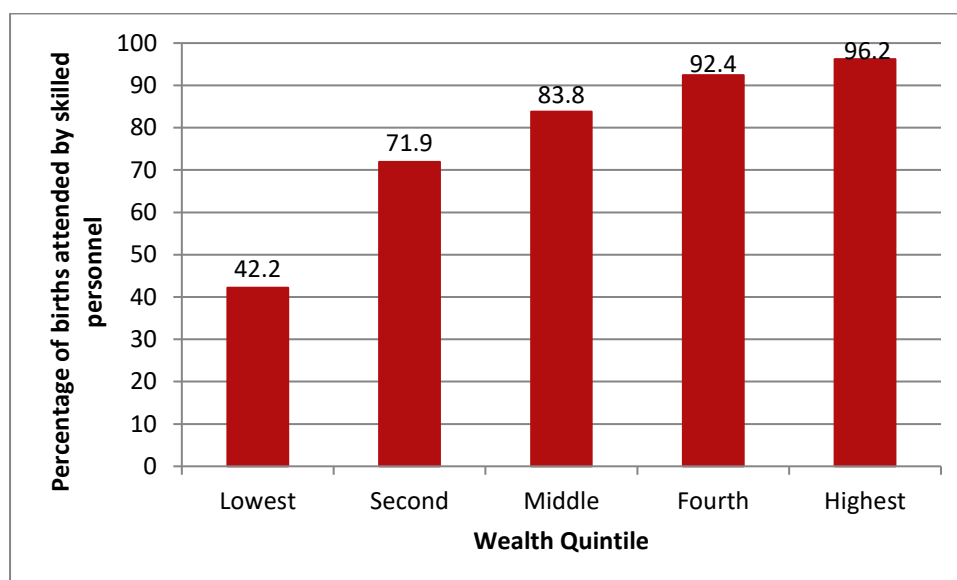
⁵⁵⁸ NDHS 2013, p.107.

⁵⁵⁹ NDHS 2013, p.109.

⁵⁶⁰ NDHS 2013, p.107.

professional, in comparison to over 96 per cent of women from households in the highest wealth quintile (see Table 4.8 below).⁵⁶¹

Table 4.8. Percentage of births attended by skilled personnel (disaggregated by wealth quintile)



Source: National Demographic and Health Survey 2013

2013 NDHS data on the use of Caesarean sections (C-sections) also reveal stark disparities by household wealth and between rural and urban areas, highlighting differences in access to modern maternal health care in the Philippines. In urban areas, 11 per cent of women give birth using C-sections, compared to 7 per cent in rural areas.⁵⁶² While 29 per cent of women from households in the richest wealth quintile give birth using C-sections, this figure drops dramatically for women from households in the poorest wealth quintile (1 per cent).⁵⁶³

4.4.5. Postnatal care

The FHSIS 2014 annual report notes that 65.28 per cent of women had at least two post-partum visits.⁵⁶⁴ According to the 2013 NDHS data, 78 per cent of women aged 20–35 had their first postnatal check-up carried out by a professional health provider (doctor, nurse or midwife). First time mothers were most likely to see a health professional for their first postnatal check-up (86 per cent), while those delivering their sixth or higher child were the least likely to see a health professional (50 per cent).⁵⁶⁵ The place of delivery also appears to determine whether a woman receives her first professional postnatal check-up. Almost all women who delivered in a health facility (97 per cent)

⁵⁶¹ NDHS 2013, p.109.

⁵⁶² Table 9.9 NDHS 2013.

⁵⁶³ Table 9.9 NDHS 2013.

⁵⁶⁴ Table 2G.2 FHSIS.

⁵⁶⁵ Table 9.12 NDHS 2013.

also received their first postnatal care after their last birth from a health professional, compared with only 30 per cent of those who delivered at home.⁵⁶⁶

According to NDHS data from 2013, rural women were, on average, less likely to have a postnatal check-up (71 per cent) compared to those in urban areas (84 per cent).⁵⁶⁷ The data also reveal regional variations within the Philippines, with 93 per cent of mothers in NCR receiving a postnatal check-up, compared with only 22.5 per cent in ARMM – meaning that around 77 per cent of women in this region did not receive any postnatal check-up.⁵⁶⁸

4.5. Violence against Women and Girls

Violence against women and girls (VAWG) is a key public health concern: VAWG can lead to violent deaths either directly (through homicide) or indirectly, through suicide, maternal causes and HIV/AIDS. Furthermore, VAWG is also an important cause of morbidity, from multiple mental, physical, sexual and reproductive health outcomes, and it is also linked with known risk factors, such as alcohol and drug use, smoking and unsafe sex. Violence during pregnancy is associated with an increased risk of miscarriage, premature delivery and low birth weight.⁵⁶⁹

Available data on VAWG suggest that it is a significant problem in the Philippines. For example, according to the 2013 NDHS, around 20 per cent of ever-married women aged 15–49 reported having experienced emotional, physical, and/or sexual violence from their husbands, and seven per cent reported having experienced physical or sexual violence in the past twelve months.⁵⁷⁰ The 2013 NDHS data also suggest that 4 per cent of women aged 15–49 experience violence during pregnancy, which also poses health risks to their unborn child.⁵⁷¹ A more detailed discussion of the extent and underlying causes of VAWG, and violence against child (VAC) is provided in Chapter 7 on ‘Child Protection’.

4.6. Sexual and Reproductive Health

4.6.1. Legal and policy framework⁵⁷²

Article 24(2) of the UNCRC requires state parties to take appropriate measures to develop preventative health care, guidance for parents and family planning education and services. Under SDG 3.7 states are encouraged to ensure universal access to sexual and reproductive health-care services by 2030, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

In the Philippines, RA 10354, the Responsible Parenthood and Reproductive Health Act of 2012 (RHA) guarantees ‘universal access to medically-safe, non-abortifacient, effective, legal, affordable and

⁵⁶⁶ Table 9.12 NDHS 2013.

⁵⁶⁷ Table 9.11 NDHS 2013.

⁵⁶⁸ Table 9.11 NDHS 2013.

⁵⁶⁹ WHO. 2011. Violence against women: an urgent public health priority.

<http://www.who.int/bulletin/volumes/89/1/10-085217/en/> [30.06.17].

⁵⁷⁰ NDHS 2013, p.185.

⁵⁷¹ NDHS 2013, p.193.

⁵⁷² Note that this section is based in part on a recent report written by the authors for the International Planned Parenthood Federation: IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People’s Access to Sexual and Reproductive Health in the Philippines. Available at: <http://www.ippfeseaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

quality reproductive care services, methods, supplies.⁵⁷³ The RHA recognizes the right to reproductive health as well as the rights to access services, make informed decisions, receive reproductive health education and determine family size. The principle of non-discrimination is articulated throughout the law and implementing regulations, as well as that of equitable access for adolescents and other marginalised populations.⁵⁷⁴ The implementing guidelines for the RHA, the Implementing Rules and Regulations of Republic Act No. 10345 (IRR), state that discrimination on the basis of marital status is not permitted in the provision of reproductive health care.⁵⁷⁵ Republic Act 1161, the Social Security Law⁵⁷⁶ and Republic Act 8187 on Paternity Leave provide for 60 days and 7 days of paid leave following a child's birth respectively, subject to restrictions.

Despite the guarantee of a right to reproductive health for all, several provisions of the RHA and the IRR restrict this right indirectly through measures that place a greater burden on adolescents seeking independent access to contraceptive services or information, and limit the availability of contraceptives. In addition, a legal challenge to the RHA's constitutionality led to eight provisions of the law being struck out by the Supreme Court in 2014; many of which may directly impact on access of vulnerable adolescents to services, information and referrals for reproductive health services.

Restrictions on availability of contraceptives: Access to contraceptives is limited to those that are classified as 'non-abortifacient' by the Food and Drug Administration (FDA). Section 7.04 of the IRR gives the FDA the power to determine whether any given drug is, in fact, abortifacient. This has resulted in the prohibition on several types of contraceptives. Emergency contraception has not been legally available in the Philippines since 2001 when the drug, Positer, was delisted by the FDA from the drug registry.⁵⁷⁷ The RHA also explicitly prohibits the purchase or acquisition of emergency contraceptives by national hospitals.⁵⁷⁸

In addition, a Supreme Court decision in 2015 issued a temporary restraining order on the DOH in 'procuring, selling, distributing, dispensing or administering, advertising and promoting' two implant contraceptive products in the Philippines: Implanon and Implanon NXT. A temporary restraining order also put on hold the issuing and renewing of licenses for the distribution and sale of *all* family planning commodities. The restraining order was upheld again in August 2016, despite an appeal

⁵⁷³ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/> Section 2.

⁵⁷⁴ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/> . See inter alia Sections 2, 3(b), 4(g), 4(s), 4(w), 14, 17. Department of Health of the Philippines (2013) *Implementing Rules and Regulations of Republic Act No. 10345*, Available at: http://pcw.gov.ph/sites/default/files/documents/laws/republic_act_10354_irr_0.pdf, Section 4.03.

⁵⁷⁵ Department of Health of the Philippines (2013) *Implementing Rules and Regulations of Republic Act No. 10345*, Available at: http://pcw.gov.ph/sites/default/files/documents/laws/republic_act_10354_irr_0.pdf, Section 2.01 (e): *The provision of reproductive health care shall not discriminate between married or unmarried individuals, for all individuals regardless of their civil status have reproductive health concerns.*

⁵⁷⁶ As amended by Republic Act 7322 – An Act Increasing Maternity Benefits in Favour of Women Workers in the Private Sector, amending for the purpose of Section 14-A of republic Act No 1161, as Amended, and for other Purposes.

⁵⁷⁷ Bureau of Food and Drugs, Delisting of Levonorgestrel 750 mcg (Postinor) from Bureau of Food and Drugs Registry of Drug Products, Bureau Circular No. 18 of 2001 (7 December 2001), available at <http://www.fda.gov.ph/attachments/article/28978/bc%2018%202001.pdf>.

⁵⁷⁸ Section 9, RHA; Rule 7.01 IRR.

from the Health Secretary.⁵⁷⁹ It has been estimated that the resultant contraceptive stock depletion could affect more than 13 million Filipino women.⁵⁸⁰

Furthermore, municipalities and cities have enacted ordinances that limit the distribution of contraceptives within their jurisdiction (however, the legality of these ordinances have been questioned by the Commission on Human Rights).⁵⁸¹ In Sorsogon City (Bicol Region), Mayor Sally Lee issued an executive order in February 2015 declaring the city a 'pro-life city', which has reportedly resulted in poor women having to buy their own family planning commodities as the city has stopped providing them.⁵⁸²

Conscientious objection: The IRR states that private health facilities do not have to provide family planning services if they are affiliated with a religious group. However, to opt out of providing contraceptive services, religiously-affiliated health facilities must apply for an exemption through the Department of Health.⁵⁸³ As a result of the 2014 Supreme Court ruling, private health facilities (or those run by religious groups) no longer have to refer patients for services at other facilities unless it is an emergency or life-threatening situation, and providers may no longer be punished for failing or refusing to provide information or referrals.⁵⁸⁴

Parental consent requirements: While stating that no person shall be denied access to family planning services and information, Section 7 of the RHA requires parental (or guardian) consent for minors (under 18) to access modern methods of family planning in the Philippines.⁵⁸⁵ While the RHA initially exempted minor parents and minors who had experienced a miscarriage from the parental consent requirement, this provision was declared unconstitutional by the Supreme Court in 2014. However, if the situation is one of emergency or is life-threatening, parental or guardian consent is not required.⁵⁸⁶

Spousal consent requirements: The 2014 Supreme Court ruling on the RHA also resulted in Section 23(a)(2)(i) being struck down, which in its original form prohibited the requirement of spousal consent for an individual to undergo a reproductive health care procedure.⁵⁸⁷ It is unclear whether the term 'procedure' in the Act refers solely to permanent contraceptive procedures such as sterilisation, or whether it is broadly applicable to all reproductive health services.

⁵⁷⁹ Philippines News Now (2016) *DOH Appeals SC to lift TRO vs contraceptive Implanon*, Available at:

<http://www.philippinenewsnow.com/2016/10/doh-appeals-sc-to-lift-tro-vs-contraceptives-implanon/>.

⁵⁸⁰ Philippine Legislators' Committee on Population and Development. March 2017. Supreme Court justices urged to lift TRO affecting family planning. <http://www.plcpd.com/supreme-court-justices-urged-to-lift-tro-affecting-family-planning/> [30.06.17].

⁵⁸¹ See Commission on Human Rights and UNFPA, *National Inquiry on Reproductive Health Rights* (2016), available at http://www.asiapacificforum.net/media/resource_file/CHR_National_Inquiry_on_Reproductive_Health.pdf

⁵⁸² See <http://sorsogoncity.gov.ph/?issuance=eo-no-3-an-executive-order-declaring-sorsogon-city-as-a-pro-life-city> and <http://www.rappler.com/nation/137269-doh-case-sorsogon-city-mayor-violation-rh-law>.

⁵⁸³ Department of Health of the Philippines (2013) *Implementing Rules and Regulations of Republic Act No. 10345*, Available at: http://pcw.gov.ph/sites/default/files/documents/laws/republic_act_10354_irr_0.pdf (Last access 7 November 2016), Section 5.22.

⁵⁸⁴ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/>.

⁵⁸⁵ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/> section 7.

⁵⁸⁶ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/>.

⁵⁸⁷ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/>.

4.6.2. Contraceptive prevalence

Contraceptive prevalence⁵⁸⁸ in the Philippines has improved between 2011 and 2013; but this positive trend was reversed again in 2015, according to the PDP 2017-2022.⁵⁸⁹ In 2011, the contraceptive prevalence rate (including modern and traditional methods) for married women stood at 48.9 per cent.⁵⁹⁰ The rate increased to 55.1 per cent in 2013, but decreased again to 42.8 per cent in 2015,⁵⁹¹ which is significantly lower than the regional average of 63 per cent for East Asia and the Pacific (as of 2015).⁵⁹² The PDP states that the reduction in the overall contraceptive prevalence rate between 2013 and 2015 was at least partly due to a weak family planning service delivery network and the lack of a national advocacy campaign.⁵⁹³

The goal in the PDP is for the *modern* contraceptive prevalence rate to be 65 per cent by 2022.⁵⁹⁴ However, according to the PDP, the use of modern methods of contraception stood at only 35.7 per cent in 2015, which suggests that the Philippines is still a long way from achieving this goal.⁵⁹⁵

4.6.3. Disparities in contraceptive prevalence

Analysing disparities in contraceptive use by background characteristics is important for identifying targets for family planning services. The 2013 NDHS data reveal stark disparities in contraceptive use between Filipino women of different educational status and geographical location. While more than half (53 per cent) of all women with at least a college degree used contraceptives, only 29 per cent of women with no formal education did so.⁵⁹⁶ Contraceptive prevalence also differs markedly between regions, with the lowest rate found in ARMM (24 per cent) and the highest rate found in Eastern Visayas (62 per cent).⁵⁹⁷ The 2013 NDHS data also suggest that contraceptive prevalence is slightly higher in urban areas (56 per cent) compared to rural areas (54 per cent). Household wealth does not appear to be significantly associated with contraceptive use.⁵⁹⁸

4.6.4. Adolescent fertility

According to World Bank estimates from 2015, the adolescent fertility rate in the Philippines stands at a high 62 (births per 1,000 women aged 15–19), which is significantly above the regional average of 22 (births per 1,000 women aged 15–19) for East Asia and Pacific.⁵⁹⁹ The World Bank data also reveal that, while adolescent fertility declined rapidly between the 1960s and the mid-1990s, this trend has since been reversed with a steep increase over the last 20 years, from a low 49 births per

⁵⁸⁸ Contraceptive prevalence is typically defined as the percentage of women of reproductive age who use (or whose partners use) a contraceptive method at a given point in time. Women ‘of reproductive age’ is usually defined as women aged 15 to 49. See e.g. <http://indicators.report/indicators/i-29/> [21.03.17].

⁵⁸⁹ PDP, p.138.

⁵⁹⁰ PDP, p.139.

⁵⁹¹ PDP, p.139.

⁵⁹² State of the World’s Children 2016 data; the regional average excludes China. Available at: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [21.03.17].

⁵⁹³ PDP, p.138.

⁵⁹⁴ Table 10.4 PDP, p147.

⁵⁹⁵ PDP, p.138.

⁵⁹⁶ NDHS 2013, p.75.

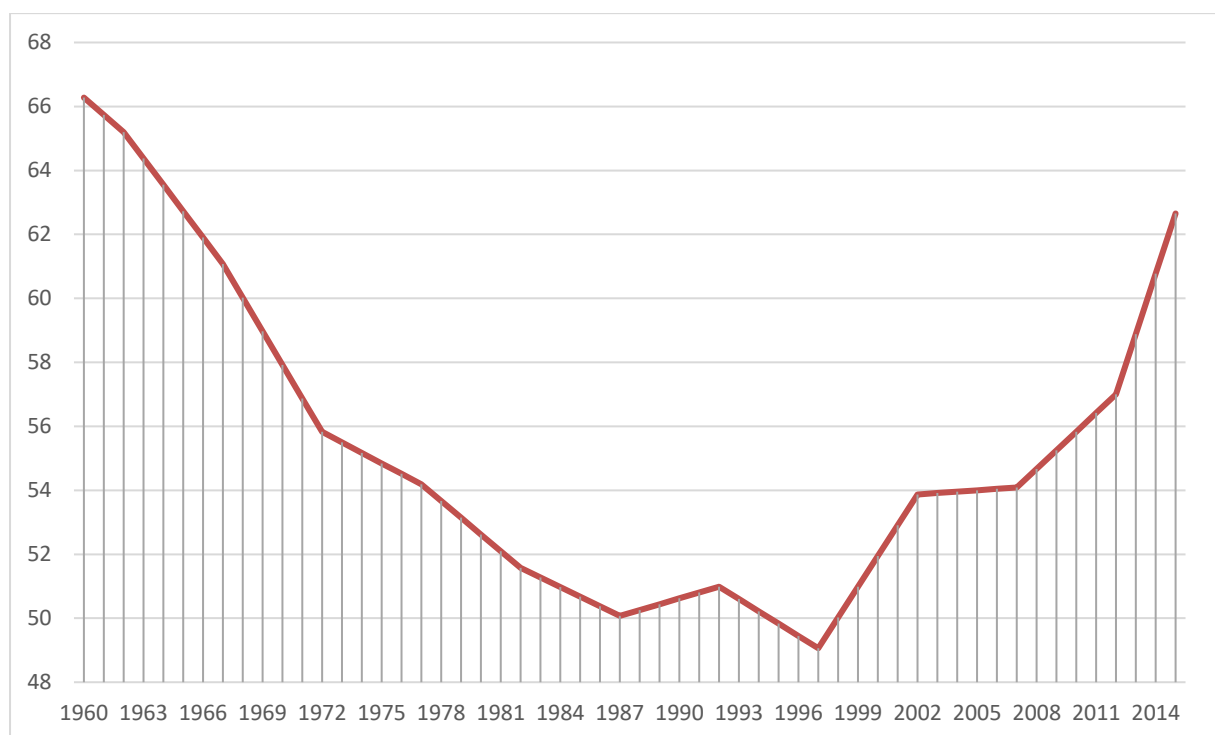
⁵⁹⁷ NDHS 2013, p.75.

⁵⁹⁸ NDHS 2013, p.75.

⁵⁹⁹ World Bank data <http://data.worldbank.org/indicator/SP.ADO.TFRT?locations=PH> [07.03.17].

1,000 women aged 15–19 in 1997 to levels that are comparable to those in the 1960s (see Table 4.9 below).

Table 4.9. Adolescent fertility rate in the Philippines 1960–2014



Source: World Bank

Based on 2013 NDHS it appears that early childbearing rates vary by geographical location as well as women's socio-economic background characteristics. For example, the proportion of young women aged 15–24 who have begun childbearing stand at 25 per cent in urban areas, compared to 29 per cent in rural areas.⁶⁰⁰ Early childbearing appears to be most common in the Caraga Region (38 per cent) and relatively low in NCR, CALABARZON and ARMM (24 per cent).⁶⁰¹

Early child bearing is less common among women (aged 15–24) with a college degree (20 per cent) compared to women who have no formal education (43 per cent). Similarly, early childbearing is significantly less common amongst women in the highest wealth quintile (13 per cent) compared to women in the lowest wealth quintile (37 per cent).⁶⁰²

Citing trend data from the Young Adult Fertility Surveys (YAFS), the PDP suggests that poor access to contraceptives, especially amongst Filipino youth, has led to the recent increase in the prevalence of teenage pregnancies (amongst women aged 15–19), though it fails to establish direct causality.⁶⁰³ Similarly, a recent study by the International Planned Parenthood Federation (IPPF) suggests that high rates of adolescent fertility in the Philippines may in part result from restrictions on access to

⁶⁰⁰ NDHS 2013, p.53.

⁶⁰¹ NDHS 2013, p.53.

⁶⁰² NDHS 2013, p.53.

⁶⁰³ PDP, p.138.

contraception and quality education about sexual and reproductive health (discussed below), in a context where adolescents are increasingly exposed to (often misleading) portrayals of sex and sexuality through the internet, pornography and peers.⁶⁰⁴

4.6.5. Adolescent contraceptive use

Existing data sources suggest that access to contraception is particularly restricted for Filipino adolescents (aged 15–19), despite high levels of demand for family planning in this age group. This becomes particularly evident when disaggregating 2013 NDHS data on ‘unmet need for family planning’ by age groups. Unmet need for family planning refers to fertile women who are not using contraception but who express a wish to postpone the next birth (i.e. have a need for spacing) or stop childbearing altogether (have a need for limiting).⁶⁰⁵

Overall, around 30 per cent of all young women aged 15–19 years were considered to have an unmet need for family planning, according to 2013 NDHS data. However, this figure drops significantly for women in older age groups, down to only 15 per cent for women aged 30–34 years (see Table 4.10 below).⁶⁰⁶ Amongst women aged 15–19 years, unmet need for family planning is primarily made up of an unmet need for spacing (15 per cent), rather than an unmet need for limiting (4 per cent) – a pattern which is reversed for women in older age groups.⁶⁰⁷ Importantly, data on contraceptive use among adolescent boys are lacking.

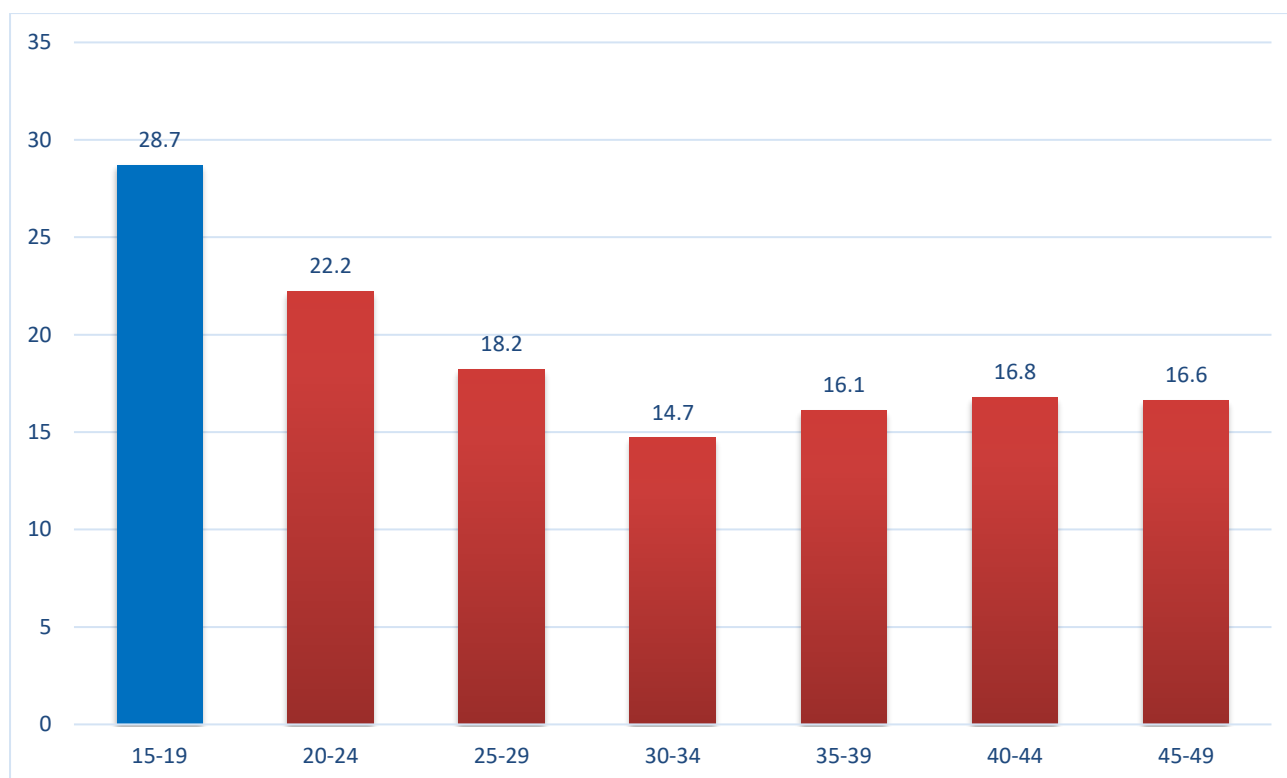
Table 4.10. Unmet need for family planning (disaggregated by age group)

⁶⁰⁴ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People’s Access to Sexual and Reproductive Health in the Philippines, p.31. Available at: <http://www.ippfesaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁶⁰⁵ NDHS 2013, p.83.

⁶⁰⁶ NDHS 2013, p.84.

⁶⁰⁷ NDHS 2013, p.84.



Source: NDHS 2013

Qualitative evidence suggests that dominant socio-religious norms that stigmatise sexual activity among young (unmarried) Filipinos have a significant impact on restricting access to family planning services, for example, by suppressing demand among adolescents and leading service providers to deny access.⁶⁰⁸ In addition, there is some evidence to suggest that parental consent requirements for under-18s have a restrictive impact on adolescents wanting to access family planning services independently.⁶⁰⁹ This barrier was also highlighted by a key informant from UNICEF's Adolescence and Agency Officer interviewed for this study:

*"The Reproductive Health Act became a deterrent for young people, as it really set in stone that young people [under 18] cannot have access to sexual and reproductive health care without parental consent. This became a huge deterrent for young people."*⁶¹⁰

Information on access to family planning services for adolescents with disabilities was not obtainable, which represents a significant data gap. A more detailed discussion of demand- and supply-side constraints in accessing family planning is provided below, in the section on 'Barriers and Bottlenecks'.

⁶⁰⁸ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines. Available at: <http://www.ippfesaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁶⁰⁹ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines. Available at: <http://www.ippfesaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁶¹⁰ Key Informant Interview with the Adolescence and Agency Officer, UNICEF, 22 July 2017, Manila.

4.6.6. Access to comprehensive sexuality education

The 2012 RHA mandates the provision of comprehensive sexuality education (CSE) in schools.⁶¹¹ A recent Executive Order issued by the Office of the President also instructs the Department of Education (DepEd) to implement CSE in the school curriculum.⁶¹² While the DepEd has taken first steps towards implementation (e.g. it has commissioned a study on gaps in health service provision in schools), it is yet to fully implement CSE in the school curriculum, as of mid-2017.⁶¹³

Adolescents' access to CSE is also restricted *indirectly* by provisions in the law and socio-cultural barriers. The law allows private educational institutions (such as religious schools) to develop their own curriculum on CSE, so that adolescents' access to CSE can vary from school to school. Adolescents' access to CSE also appears to be hampered by a lack of skills and training on the part of teachers, and is compounded by social stigma and taboos associated with adolescents' sexuality, which appear to inhibit teachers from speaking openly about CSE topics. In addition, sex is rarely talked about in young people's families, with only 10 per cent of respondents from the 2013 YAFS reporting that sex was ever discussed at home while they were growing up.⁶¹⁴

Myths and misperceptions about sex and sexuality appear to be widespread amongst adolescents, negatively impacting on their service-seeking behaviour.⁶¹⁵ In addition, there is some evidence to suggest that a lack of CSE in schools may lead to earlier sexual initiation and higher rates of risky sexual activity amongst less-informed young adults.⁶¹⁶

2013 NDHS data suggest that teenage girls aged 15–19 are the age group that is least likely to have been exposed to family planning messages (29 per cent were not exposed to any of the four main media sources), compared to women in older age groups (22 per cent amongst 20- to 24-year-olds, and 20 per cent amongst 25- to 29-year-olds).⁶¹⁷ Evidence from the 2013 YAFS suggests that actual knowledge about sex is very poor overall among young Filipinos as measured by the extremely low percentages of respondents aged 15–24 years (12 per cent amongst males and 18 per cent amongst females) who correctly identified the time during the menstrual cycle when a woman is most likely to conceive if she has sexual relations. The YAFS data also reveal that young people themselves feel

⁶¹¹ Congress of the Philippines (2012) *The Responsible Parenthood and Reproductive Health Act of 2012*, Available at: <http://www.officialgazette.gov.ph/2012/12/21/republic-act-no-10354/> Section 2 and Section 4.

⁶¹² Office of the President, Executive Order No 12, "Attaining and sustaining 'Zero unmet need for modern family planning' through the strict implementation of the Responsible Parenthood and Reproductive Health Act, providing funds therefor, and for other purposes", January 2017, available at: <http://www.officialgazette.gov.ph/downloads/2017/01jan/20170109-EO-12-RRD.pdf>.

⁶¹³ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines. Available at: <http://www.ippfesaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁶¹⁴ YAFS 2013, p.142.

⁶¹⁵ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines. Available at: <http://www.ippfesaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁶¹⁶ Philippine Institute for Development Studies. 2017. Unintended Consequences: The Folly of Uncritical Thinking. Page 5. Available at: https://pidswebs.pids.gov.ph/CDN/PUBLICATIONS/pidsbk2017-unintended_fnl.pdf [29.06.17]

⁶¹⁷ NDHS 2013, p.87.

like they do not receive sufficient information about sexual and reproductive health. For example, only 27.4 per cent of survey respondents thought that they ‘have enough knowledge about sex’.⁶¹⁸

4.6.7. Sexually transmitted infections

Available data on the prevalence of sexually transmitted infections (STIs) in the Philippines are limited and out of date, but the little data that are available suggest that STIs are a significant problem and that knowledge of STIs is very limited. As of 2006, the nationwide prevalence of STIs among sex workers was estimated to stand at a very high 40 per cent.⁶¹⁹ In 2002, the prevalence rate for chlamydia infections among women was reported to stand at 5.6 per cent, with a higher rate amongst youth. A study among men who have sex with men (MSM) showed that around 30 per cent MSM has had STIs.⁶²⁰

Worryingly, knowledge about STIs appears to be quite limited among young Filipinos. According to the 2013 YAFS survey, less than half (47 per cent) of all young Filipinos aged 15–24 years are aware of STIs. The proportion of those aware of STIs is somewhat higher among young men (50.5 per cent) compared to young women (44.5 per cent). The 2013 YAFS data also reveal regional differences in relation to young people’s knowledge about STIs, with 70.5 per cent of young people in NCR knowing about STIs, in comparison to only 15.8 per cent in ARMM.⁶²¹ More young people from urban areas had an awareness of STIs (63 per cent) compared to young people in rural areas (41.5 per cent). Similarly, those young people from households in the lowest wealth quintile had lower knowledge of STIs (28.1 per cent) compared to young people in the highest wealth quintile (64.6 per cent).⁶²²

4.7. HIV/AIDS

4.7.1. Legislative and policy framework

Children’s access to HIV testing in Philippines is regulated in part by Republic Act 8504, the Philippine AIDS Prevention and Control Act of 1998. According to this Act, persons may consent to HIV testing if they are ‘of legal age’ or if they have obtained parental consent (in the case of a ‘minor’). The Act does not contain a definition of ‘legal age’ or ‘minor;’ however, the Act is interpreted in line with the age of majority in the Family Code of the Philippines (which is 18 years), which means that children require parental consent for HIV testing. In contrast to HIV testing, there do not appear to be any laws or policies that explicitly regulate children’s access to STI testing in the Philippines. In 2015, PhilHealth updated its Outpatient HIV/AIDS Treatment (OHAT) Package, issuing a circular clarifying the medical interventions and support covered under OHAT.⁶²³

⁶¹⁸ YAFS 2013, p.130.

⁶¹⁹ UNICEF. 2006. East Asia and Pacific Regional Consultation on Children and HIV/AIDS Hanoi, Viet Nam 22-24 March 2006. Available at: https://www.unicef.org/eapro/11_philippines.pdf [19.05.17].

⁶²⁰ As cited in UNICEF. 2006. East Asia and Pacific Regional Consultation on Children and HIV/AIDS Hanoi, Viet Nam 22-24 March 2006. Available at: https://www.unicef.org/eapro/11_philippines.pdf [19.05.17].

⁶²¹ YAFS Table 8.6, p.124.

⁶²² YAFS Table 8.6, p.124.

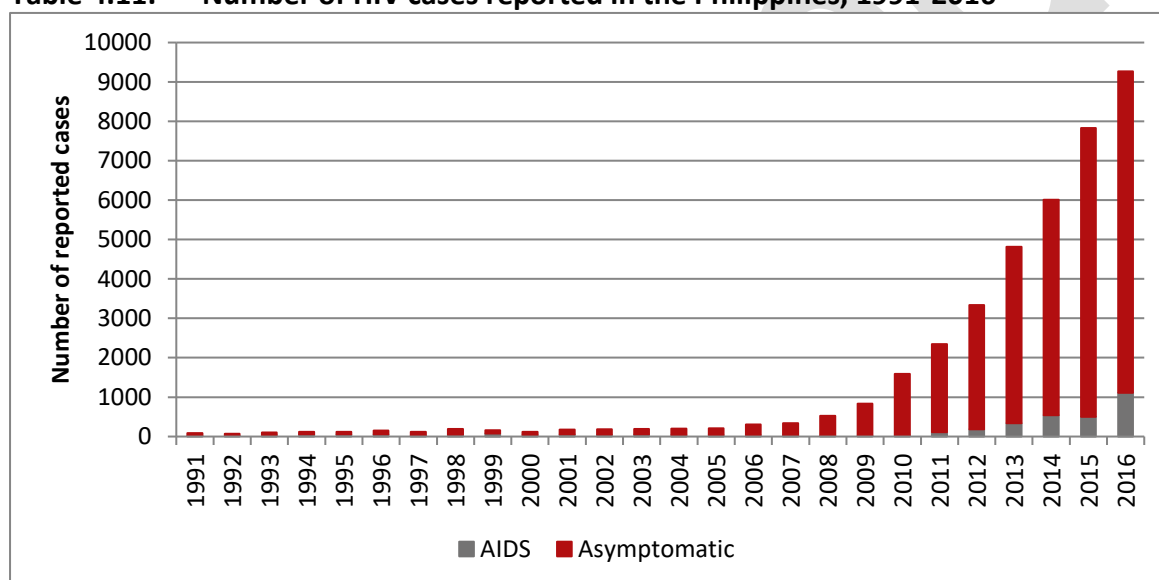
⁶²³ Compare Outpatient HIV /Aids Treatment (OHAT) Package (Phi/Health Circular 19; S 2010) Revision 1 (11-2015), <https://www.philhealth.gov.ph/circulars/2015/circ011-2015.pdf>, to Outpatient HIV /Aids Treatment (OHAT) Package (Phi/Health Circular 19; S 2010), (19-2010) https://www.philhealth.gov.ph/circulars/2010/circ19_2010.pdf Part IV ‘Specific Rules’.

4.7.2. Status of the epidemic

SDG 3.3 calls on States to end the epidemic of HIV/AIDS by 2030. After more than two decades of low HIV prevalence and slow expansion, the Philippines is now has one of the fastest-growing HIV epidemics in the world.⁶²⁴ According to UNAIDS Data 2017, the country experienced the highest increase in HIV infections across Asia and the Pacific between 2010 and 2016.⁶²⁵

The overall prevalence of HIV/AIDS in the Philippines remains below 1 per cent of the population.⁶²⁶ However, there has been a steady increase in the number of newly diagnosed HIV cases (HIV incidence) over recent years, from one case per day in 2008 to 26 cases per day in 2016 (see Table 4.11 below). Around 96 per cent of newly diagnosed cases in 2016 were male, the average age at diagnosis was 28 years, and there were 22 new cases for those under 15.⁶²⁷ With the increase in diagnoses, come concerns over stigmatisation and discrimination, which, though illegal under Section 2(b)(3) of RA 8504, is still reported to be prevalent, and increasing, acting as a harm to those diagnosed with HIV/AIDS but also acting as a barrier to testing and treatment.⁶²⁸

Table 4.11. Number of HIV cases reported in the Philippines, 1991-2016



Source: Department of Health, December 2016

⁶²⁴ See WHO country profile on HIV/AIDS <http://www.wpro.who.int/hiv/data/countries/phl/en/> and UNAIDS Philippines. 2015. Investment Options for Ending AIDS in the Philippines by 2022. Available at: [http://www.aidsdatahub.org/sites/default/files/publication/Investment Options for Ending AIDS in the Philippines by 2022.pdf](http://www.aidsdatahub.org/sites/default/files/publication/Investment%20Options%20for%20Ending%20AIDS%20in%20the%20Philippines%20by%202022.pdf) [27.06.17].

⁶²⁵ UNAIDS Data 201, p. 77. http://www.unaids.org/sites/default/files/media_asset/2017_data-book_en.pdf.

⁶²⁶ <http://www.unaids.org/en/regionscountries/countries/philippines>.

⁶²⁷ HIV/AIDS and ART Registry of the Philippines, December 2016, http://www.aidsdatahub.org/sites/default/files/publication/NEC_HIV_Dec-AIDSreg2016.pdf, p2.

⁶²⁸ ABC News, "HIV rates rise in Philippines amid stigma concerns", 24 July 2014, <http://www.abc.net.au/news/2014-07-24/aids-stigma-in-philippines/5619918>.

4.7.3. Regional disparities in HIV/AIDS

Data from the DOH suggest that ARMM is the region with the lowest HIV incidence in the whole country, accounting for less than 1 per cent of all newly diagnosed cases as of March 2016. However, these estimates may also be biased by lower service-seeking and detection rates in ARMM, as compared to other regions. From January 1984 to December 2016, the regions with the highest number of reported HIV cases were NCR (40 per cent of all cases), CALABARZON (15 per cent), and Central Visayas (10 per cent).⁶²⁹

4.7.4. HIV/AIDS among adolescents and children

Of all reported HIV-positive cases in the whole country, only 4 per cent were in individuals aged 19 years old and below. Among all HIV-positive adolescents (aged 10–19 years) identified between 1984 and 2016, the vast majority (90 per cent) were male.⁶³⁰ Worryingly, data from both the HIV/AIDS & ART Registry of the Philippines (HARP) and the 2015 Integrated HIV Behavioural and Serologic Surveillance (IHBSS) indicate an escalating HIV problem among Filipino adolescents. From 2011 to 2015, newly diagnosed HIV cases among young key affected populations⁶³¹ increased by 230 per cent.⁶³² As of 2016, more than half of all new infections belonged to the 25- to 34-year age group while 29 per cent were youth aged 15–24 years.⁶³³

Findings from the 2015 IHBSS suggest that, while most MSM, female sex workers and people who inject drugs start engaging in high-risk behaviours during their adolescent years, protective behaviours (such as condom use) are only adopted two to three years later, which makes adolescents particularly vulnerable to HIV/AIDS transmission.⁶³⁴ Gateway behaviours such as drinking alcoholic beverages and taking recreational drugs were also found to place young key affected populations at an increased risk of HIV/AIDS.⁶³⁵

4.7.5. Knowledge about HIV/AIDS among adolescents

Comprehensive knowledge about HIV/AIDS⁶³⁶ appears to be very limited among young Filipinos, which is likely to contribute to the escalating HIV problem among Filipino adolescents. For example, the 2013 YAFS survey revealed that only 17 per cent of survey respondents aged 15–24 have

⁶²⁹ HIV/AIDS and ART Registry of the Philippines, December 2016 p.2.

⁶³⁰ HIV/AIDS and ART Registry of the Philippines, December 2016,

http://www.aidsdatahub.org/sites/default/files/publication/NEC_HIV_Dec-AIDSreg2016.pdf, p.4.

⁶³¹ The term refers to young people aged 15 to 24 years who are members of key affected populations, such as young people living with HIV, young gay men and other men who have sex with men, young transgender people, young people who inject drugs and young people (18 years and older) who sell sex. See

http://www.unaids.org/sites/default/files/media_asset/2015_terminology_guidelines_en.pdf p.50.

⁶³² DOH-Epidemiology Bureau. The Growing HIV Epidemic among Adolescents in the Philippines.

http://www.aidsdatahub.org/sites/default/files/publication/2015_Briefer_on_Young_Key_Affected_Populations.pdf.

⁶³³ HIV/AIDS and ART Registry of the Philippines, December 2016,

http://www.aidsdatahub.org/sites/default/files/publication/NEC_HIV_Dec-AIDSreg2016.pdf, p.1.

⁶³⁴ DOH-Epidemiology Bureau. The Growing HIV Epidemic among Adolescents in the Philippines.

http://www.aidsdatahub.org/sites/default/files/publication/2015_Briefer_on_Young_Key_Affected_Populations.pdf

⁶³⁵ DOH-Epidemiology Bureau. The Growing HIV Epidemic among Adolescents in the Philippines.

http://www.aidsdatahub.org/sites/default/files/publication/2015_Briefer_on_Young_Key_Affected_Populations.pdf

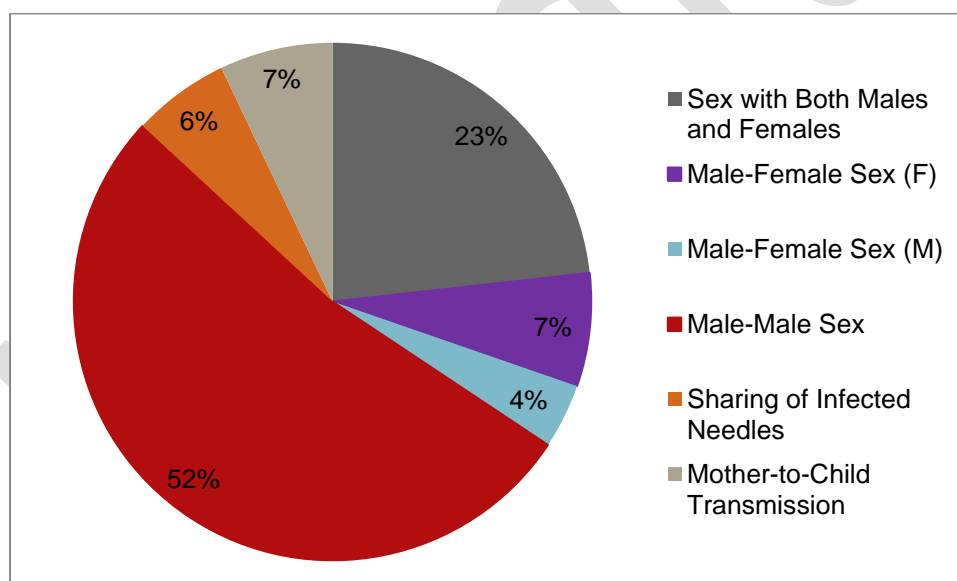
⁶³⁶ Comprehensive knowledge of HIV/AIDS is defined as 'correctly identifying the two major ways of preventing the sexual transmission of HIV (i.e., using condoms and limiting sex to one faithful, uninfected partner), rejecting the two most common local misconceptions about HIV transmission, and knowing that a healthy looking person can be HIV positive. See YAFS 2013, p.126.

comprehensive knowledge of HIV/AIDS, a level which is far below the 95 per cent target set at the 2001 United Nations General Assembly Special Session on HIV and AIDS.⁶³⁷ Worryingly, the YAFS data also suggest that general awareness about HIV/AIDS among Filipino youth is declining, with 95 per cent of youth expressing general awareness of HIV/AIDS during the 1994 YAFS, compared to a significantly lower 83 per cent during the 2013 YAFS.⁶³⁸ The downward trend in general awareness of HIV/AIDS appears to be steeper for young men, compared to young women.⁶³⁹ Lack of knowledge about HIV/AIDS among the adolescent population could be compounded by poor access to information about HIV/AIDS, but even where children and young people do have awareness of HIV/AIDS, the legal requirement for parental consent for testing is likely to inhibit children and young people from receiving a diagnosis, or treatment.⁶⁴⁰

4.7.6. Modes of HIV transmission

Between 1984 and 2016, almost all children aged below 10 years of age (81 of all 84 HIV positive under-10 cases) were infected through mother-to-child transmission, and only one child was infected through blood transfusion (for two children the mode of transmission was not specified).⁶⁴¹ Moreover, 90 per cent of HIV-positive adolescents (aged 10–19) were infected through sexual contact (130 through male-to-female sex, 562 through male-to-male sex, 253 through sex with both males and females), 8 per cent were infected through sharing of infected needles and only 1 per cent through mother-to-child transmission.⁶⁴² Table 4.12 below shows the proportions attributable to different modes of HIV-transmission for children *and* adolescents between 1984 and 2016.

Table 4.12. Modes of Transmission Among Children (<10 years) and Adolescents (10-19 years), Jan 1984-Dec 2016



Source: HIV/AIDS & ART Registry of the Philippines, December 2016

⁶³⁷ YAFS 2013, p.126.

⁶³⁸ YAFS 2013, p. 125.

⁶³⁹ YAFS 2013, p. 125.

⁶⁴⁰ See Section 4.1.7, above.

⁶⁴¹ HIV/AIDS and ART Registry of the Philippines, December 2016. p.4.

⁶⁴² HIV/AIDS and ART Registry of the Philippines, December 2016. p.4.

4.7.7. Future outlook

As of 2013, it is estimated that only 20 per cent of all people living with HIV in the Philippines had been diagnosed and were accessing anti-retroviral treatment (ART).⁶⁴³ According to projections by UNAIDS Philippines, maintaining a 'business as usual' approach (i.e. sustaining current ART treatment levels and prevention coverage) would result in the Philippines witnessing an explosion of the total number of people living with HIV to more than 350,000 by 2030, falling far short of SDG target 3.3, despite an annual resource need of \$19 million.

In contrast, adopting an 'Ending AIDS' approach (i.e. scaling up to universal access to ART treatment while optimizing prevention interventions for high-risk groups) would require an annual investment of \$51 million until 2030, but see the annual number of infections (the incidence rate) beginning to decline in 2029.⁶⁴⁴ UNAIDS Philippines estimates that the 'Ending AIDS' approach will save more lives and yield the greatest cost-benefits in terms of disability-adjusted life-years,⁶⁴⁵ income and treatment costs saved.⁶⁴⁶

4.8. Substance abuse

4.8.1. Status at a glance

According to SDG target 3.5, the Philippines should strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol. Republic Act 9165 or the Comprehensive Dangerous Drugs Act of 2002 imposes the penalties of life imprisonment or death, as well as fines, for any person bringing any amount of drugs into Philippines; as well as life imprisonment or death for possession offences as set out in Section 11 of the Act. Section 21 of the Republic Act 9165 which focuses on processing and seizure of drugs, was 'strengthened' by Republic Act 10640. Reducing the use of illegal drugs has also been identified in the PDP as a priority of the current government.⁶⁴⁷ The approach being advocated in the PDP is an intensification of law enforcement operations, as well as drug rehabilitation, preventative education and awareness programs.⁶⁴⁸

According to data from the Philippines Drug Enforcement Agency (PDEA), as cited in the PDP, nearly half (47 per cent) of barangays throughout the country are drug-affected and it is estimated that there are around 4 million drug users in the Philippines.⁶⁴⁹ The National Capital Region has the most

⁶⁴³ UNAIDS Philippines. 2015. Investment Options for Ending AIDS in the Philippines by 2022. Available at: http://www.aidsdatahub.org/sites/default/files/publication/Investment_Options_for_Ending_AIDS_in_the_Philippines_by_2022.pdf [27.06.17], p.7.

⁶⁴⁴ UNAIDS Philippines. 2015. Investment Options for Ending AIDS in the Philippines by 2022. Available at: http://www.aidsdatahub.org/sites/default/files/publication/Investment_Options_for_Ending_AIDS_in_the_Philippines_by_2022.pdf [27.06.17], p.7.

⁶⁴⁵ One disability-adjusted life year (DALY) can be thought of as one lost year of "healthy" life. The sum of these DALYs across the population, or the burden of disease, can be thought of as a measurement of the gap between current health status and an ideal health situation where the entire population lives to an advanced age, free of disease and disability. See http://www.who.int/healthinfo/global_burden_disease/metrics_daly/en/ [03.07.17].

⁶⁴⁶ UNAIDS Philippines. 2015. Investment Options for Ending AIDS in the Philippines by 2022. Available at: http://www.aidsdatahub.org/sites/default/files/publication/Investment_Options_for_Ending_AIDS_in_the_Philippines_by_2022.pdf [27.06.17], p.15.

⁶⁴⁷ PDP p 52.

⁶⁴⁸ PDP p 275.

⁶⁴⁹ PDP p.272.

number of drug-affected barangays, with 99 per cent of its barangays being classified as drug-affected by the PDEA.⁶⁵⁰ As of 2016, there are 14 DOH treatment and rehabilitation centres in the Philippines with programmes to reintegrate recovering drug addicts.⁶⁵¹

In 2015, the majority of people arrested for using illegal drugs were male (17,018), with only 2,414 females arrested;⁶⁵² 221 minors were arrested in 2015, the highest number since 2003; 50.68 per cent of minors were aged 17, 26.7 per cent were aged 16, 15.8 per cent were aged 15, 5.4 per cent were aged 14, and 1.3 per cent were aged 11.⁶⁵³

4.8.2. Substance abuse among adolescents

According to 2013 YAFS data only 3.9 per cent of young people aged 15–24 years admitted to having ever used any drugs (Marijuana, Shabu/Methamphetamine, ‘Rugby’/inhalants, or cough syrup). However, due to reporting bias, these figures are likely to underestimate the true prevalence of drug use among young people. Significantly more males admitted to having ever used drugs (7.1 per cent) than females (0.9 per cent). Marijuana and Shabu/Methamphetamine were identified as the most commonly used illicit drugs, regardless of gender.⁶⁵⁴

While educational background appears to not be a significant predictor of (reported) drug use, household wealth appears to be associated with (reported) drug use. Young people from households in the richest wealth quintile were more likely to report having used drugs (4.2 per cent) compared to young people from households in the lowest wealth quintile (2.7 per cent).⁶⁵⁵

Alcohol abuse among young people is a serious public health concern in the Philippines. According to 2013 YAFS data, 68 per cent of young people aged 15–24 years have ever drunk alcohol, and 37 per cent currently drink.⁶⁵⁶ Drinking is significantly more prevalent among males: 53 per cent of males currently drink, while only 21 per cent of women currently drink.⁶⁵⁷ Further, drinking is more prevalent among those with a higher socio-economic status. Those in the highest wealth quintile were more likely to have ever drunk (86.4 per cent) or to be currently drinking (60.3 per cent), compared to those in the lowest quintile, where 63.4 per cent had ever drunk and 41 per cent were currently drinking.⁶⁵⁸

Current alcohol consumption is more prevalent among urban youth (46 per cent currently drink) compared to rural youth (33 per cent currently drink).⁶⁵⁹ Drinking is also more prevalent in particular regions of the Philippines. In NCR, 88 per cent of young people had ever drunk, compared to only 8 per cent of young people in ARMM, a majority-Muslim region.⁶⁶⁰

The YAFS 2013 survey also showed that the mean age when young people started to drink was 16. Worryingly, 23 per cent of male and 14 per cent of female respondents reported to having started to

⁶⁵⁰ Philippine Drug Enforcement Agency (PDEA) Annual Report 2015, p.15.

⁶⁵¹ PDP p.294.

⁶⁵² PDEA annual report 2015 p31.

⁶⁵³ PDEA annual report 2015 p33.

⁶⁵⁴ YAFS p 74.

⁶⁵⁵ YAFS p 74.

⁶⁵⁶ YAFS p 70.

⁶⁵⁷ YAFS p 70.

⁶⁵⁸ YAFS p 70.

⁶⁵⁹ YAFS p 71.

⁶⁶⁰ YAFS p 70.

drink before the age of 15.⁶⁶¹ Further, 6.1 per cent of 15- to 19-year-olds and 11.3 per cent of 20- to 24-year-olds reported having ‘gotten in trouble in connection with drinking’, while 8.1 per cent of 15- to 19-year-olds and 16.6 per cent of 20- to 24-year-olds had passed out in a drinking session because they drank too much, suggesting relatively high levels of binge drinking.⁶⁶²

Betel nut chewing is also prevalent in certain parts of the country, especially remote mountainous areas, although robust quantitative data on use among Filipino youth are not available.⁶⁶³

4.9. Mental Health

4.9.1. Legal and policy framework

SDG 3.4 encourages States to promote mental health and wellbeing. Steps have been taken in the Philippines to consolidate mental health provisions in existing laws (the Revised Penal Code, the Magna Carta for Disabled Persons, and the Family Code) into one Mental Health Act to establish a unified legal framework for the provision care and services to those with mental illness.⁶⁶⁴ Senate Bill No. 1345 (Philippine Mental Health Act) was approved on 2 May 2017, but at the time of writing had not been passed in the House of Representatives.⁶⁶⁵

The PDP accepts the emerging incidence of mental health and ⁶⁶⁶ recognises the importance of including mental health services in disaster response efforts. The PDP also commits to increasing public awareness of mental health and psychosocial support services (MHPSS), capacity-building of local implementers, and ensuring that facilities and relocation sites are MHPSS-friendly.⁶⁶⁷ In addition, the NDRRMC recently approved a Memorandum on National Guidelines on Mental Health and Psychosocial Support in Emergencies and Disaster Situations. The development of the Guidelines was led by DOH and supported by UNICEF Philippines,⁶⁶⁸ and focuses on improving the coordination of MHPSS services in the context of emergencies and disasters.⁶⁶⁹

4.9.2. Prevalence of mental health problems

Data on mental health problems in the Philippines are very limited; but existing evidence suggests that mental health problems affect a significant proportion of the population, including young people. Neuropsychiatric disorders are estimated to contribute to around 14 per cent of the overall burden of disease in the Philippines.⁶⁷⁰ According to a WHO report, there were 2558 suicides in the Philippines in 2012, of which the overwhelming majority (78.5 per cent) were committed by men.⁶⁷¹ The nationwide suicide rate in 2012 was 2.5 per 100,000 population for men and 1.7 per 100,000

⁶⁶¹ YAFS p 72.

⁶⁶² YAFS p 73.

⁶⁶³ See e.g. http://www.lasieexotique.com/mag_betel/mag_betel.html [03.07.17].

⁶⁶⁴ Table 10.7, PDP, p159.

⁶⁶⁵ “Senate passes Mental Health Act”, CNN Philippines, May 3, 2017,

<http://cnnphilippines.com/news/2017/05/02/senate-passes-mental-health-act-third-reading.html>.

⁶⁶⁶ PDP, p. 140.

⁶⁶⁷ PDP, p. 176.

⁶⁶⁸ UNICEF Annual Report 2015, Philippines, p. 41-42.

⁶⁶⁹ See National Guidelines on Mental Health and Psychosocial Support in Emergencies and Disaster Situations

<https://mhps.net/?get=219/ndrrmc-memorandum-no.62-s.-2017-national-guidelines-on-mhps.pdf>

⁶⁷⁰ WHO. 2011. Mental Health Atlas 2011 - Department of Mental Health and Substance Abuse. Philippines Profile:

http://www.who.int/mental_health/evidence/atlas/profiles/phl_mh_profile.pdf.

⁶⁷¹ WHO. 2014. Preventing Suicide - A global imperative, p.85

http://apps.who.int/iris/bitstream/10665/131056/1/9789241564779_eng.pdf?ua=1&ua=1 [28.06.17]

population for women.⁶⁷² For those aged 5–14 years the rate was 0.3 per 100,000, for those aged 15–29 years it was 4.3 per 100,000, with 2.2 per 100,000 for women aged 15–29 and 6.4 per 100,000 for men aged 15–19.⁶⁷³

Evidence from the 2013 YAFS study suggests that 8.7 per cent of adolescents aged 15–24 years have thought of committing suicide.⁶⁷⁴ Disparities between genders in relation to suicide are also revealed in the 2013 YAFS data, with 13 per cent of women aged 15–24 reporting that they had thought of committing suicide, compared to only 4.5 per cent of men in the same age group.⁶⁷⁵ Family problems and quarrels with partners were the main reasons cited for attempted suicide.⁶⁷⁶ The gender disparities in relation to suicidal thoughts stand in contrast to gender disparities in relation to completed suicides, which are primarily committed by men.

4.9.3. Mental health support system

At present, there are only an estimated 490 psychiatrists and 1,000 nurses working in psychiatric care in the Philippines, and even less general practitioners trained in early assessment and management of common mental health problem in the community. It was argued in the explanatory note to Senate Bill No. 1345 that the number of addiction specialists, psychologists, occupational therapists, guidance counsellors and social workers are extremely inadequate to meet the mental health needs of 100 million Filipinos.⁶⁷⁷

According to a 2007 WHO report, there were two mental hospitals for the whole of the Philippines, 46 outpatient facilities, four day-treatment facilities, 19 community-based psychiatric in-patient facilities, and 15 community residential facilities.⁶⁷⁸ The explanatory note to Senate Bill No. 1345 notes that almost all mental health facilities are in the country's major cities.⁶⁷⁹ Unfortunately, information on available mental health facilities is not broken down by region.⁶⁸⁰

Data on mental health financing indicate that spending is biased towards the larger mental health facilities located in the country's urban centres (which are likely to be to the detriment of remote, rural areas). For example, a 2007 WHO assessment report noted that, while only 5 per cent of all public health care expenditure was directed towards mental health, 95 per cent of the mental health budget was spent on the operation, maintenance and salary of personnel of the country's two mental hospitals.⁶⁸¹

A psychosocial care system in schools has been established by the DOH in collaboration with the different government agencies and NGOs. Psychosocial support in schools is mainly delivered by

⁶⁷² Table 1.3 Basic Indicators, WHO AIMS Mental Health systems in selected low- and middle-income countries: a WHO-AIMS cross-national analysis, 2009, p. 15.

⁶⁷³ WHO. 2014. Preventing Suicide - A global imperative, p. 85.

http://apps.who.int/iris/bitstream/10665/131056/1/9789241564779_eng.pdf?ua=1&ua=1 [28.06.17]

⁶⁷⁴ DRDF Inc. 2016. The 2013 Young Adult Fertility and Sexuality Study in the Philippines. Demographic Research and Development Foundation Inc. University of the Philippines Population Institute Diliman, Quezon.

⁶⁷⁵ YAFS 2013, p.79.

⁶⁷⁶ YAFS 2013, p.80.

⁶⁷⁷ Explanatory note to Philippine Mental Health Act- <https://www.senate.gov.ph/lisdata/2385220552!.pdf>

⁶⁷⁸ WHO-AIMS report on Mental Health System in The Philippines, 2007, p10.

http://www.who.int/mental_health/evidence/philippines_who_aims_report.pdf

⁶⁷⁹ Explanatory Note to the Philippines Mental Health Act- <https://www.senate.gov.ph/lisdata/2385220552!.pdf>.

⁶⁸⁰ Ibid.

⁶⁸¹ WHO-AIMS report on Mental Health System in The Philippines, 2007, p10.

http://www.who.int/mental_health/evidence/philippines_who_aims_report.pdf.

teachers and only a few schools have part-time or full-time mental health professionals.⁶⁸² Besides strengthening referral systems between schools and professional MHPSS services, there is a need to strengthen community-based mental health services, in line with the WHO guidelines on MHPSS.⁶⁸³

4.10. Key Barriers and Bottlenecks in Health

The key barriers and bottlenecks in the health system were mapped out by a group of key stakeholders at the consultation workshop that informed this Situation Analysis. They were identified using a methodology that involved selecting a key deprivation within the field of health and identifying a causality chain of immediate, underlying and structural causes. The maps are presented below, while the existing literature and key informant interviews are used to elaborate the key barriers and bottlenecks in the health system.

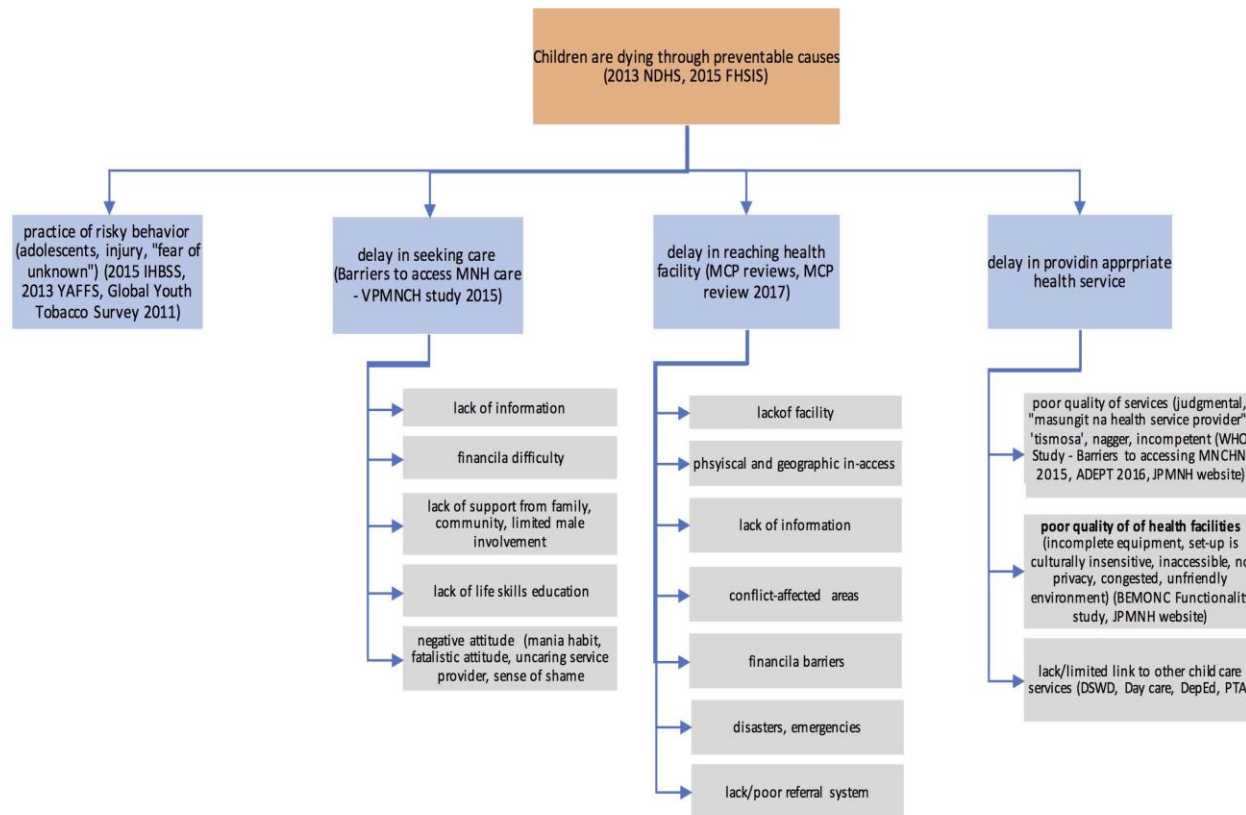
⁶⁸² WHO-AIMS report on Mental Health System in The Philippines, 2007, p24

http://www.who.int/mental_health/evidence/philippines_who_aims_report.pdf.

⁶⁸³ See e.g. Action Sheet 5.2 in IASC Guidelines for mental health and psychosocial support in emergency settings.

https://interagencystandingcommittee.org/system/files/legacy_files/guidelines_iasc_mental_health_psychosocial_june_2007.pdf.

Table 4.13. Health sector causality map



GOVERNANCE <ul style="list-style-type: none"> • Policies (lack or inappropriate, unimplementable) • Abilities of LCEs (weak..) • Political will (poor, 	PLANS, BUDGET, EXPENDITURE <ul style="list-style-type: none"> • Not evidence-based • poor reporting of expenditure • Performance-informed budgeting not institutionalized • Lack of sustainability plans 	SERVICE DELIVERY NETWORK (SDN) <ul style="list-style-type: none"> • Poorly defined coordination and collaboration mechanism and oversight • Poor functionality • None at all in some areas 	FUNDING <ul style="list-style-type: none"> • Absence or lack of budget • Improper utilization • Restrictive policy of utilization (COA policies) • Misappropriation • Non-prioritization of health for funding 	DATA ISSUES <ul style="list-style-type: none"> • Structural • Governance • Limited data utilization • Lack of M&E mechanisms 	LACK OF INTEGRATION OF PROGRAMS ACROSS SECTORS and SETTINGS ((life skills, adolescent health,	VERTICAL/ PROGRAMMATIC CULTURE <ul style="list-style-type: none"> • Inter and intra-agency 	GENDER NORMS <ul style="list-style-type: none"> • Lack of women decision making 	Lack of financial management capacity of institutions <ul style="list-style-type: none"> • Collaboration "low absorptive capacity"
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4.10.1. Enabling environment

Governance

The existing literature on governance in the Philippines identifies corruption, misallocation of resources, political instability, and uncoordinated government agencies as some of the key governance challenges that slow down or obstruct developmental progress in the Philippines, including in the health sector.⁶⁸⁴

Devolution (or decentralisation), in particular, appears to represent a key structural bottleneck in relation to improving the performance of the health system in the Philippines. Health service delivery was devolved to the LGUs in 1991,⁶⁸⁵ and available evidence suggests that the health sector has not completely surmounted the fragmentation problems entailed in this devolution.⁶⁸⁶ According to a recent World Bank report, devolution has led to the fragmentation of health service delivery, as public health functions and primary care (the responsibility of municipalities) were delinked from primary and secondary hospitals (the responsibility of provinces), which were in turn delinked from tertiary and national referral hospitals (the responsibility of the DOH).⁶⁸⁷ It needs to be noted that in this respect, ARMM – with its unique governance structure – has retained a centralized health care system, with the ARMM DOH being directly responsible for the provincial hospitals and the municipal health centres.⁶⁸⁸

Devolution was also highlighted as a key bottleneck in the health sector by several key informants interviewed for this report.

“Policies are generated at the national level, but the effective dissemination of national policy is the first bottleneck. Policies may be well crafted and aligned with global goals, but it is about the policy being cascaded to local levels that is the problem. We are in a devolved system, and, where the local authorities are the ones that have the power to allocate resources to accomplish that policy, the quality suffers due to variations in interpretations of the policies. Even for PhilHealth, the national level policies are subject to local interpretation. This hampers the reach of well-meaning policies.

The lack of integration affects access to health care and its quality. When you go down to the [local level], health care delivery falls on the shoulders of the same midwife, the same nurse, the one municipal health officer. The struggle to get out of vertical programme

⁶⁸⁴ See e.g. Mendoza, et al. 2017. Governance and Institutions in the Philippines. ASOG Working Paper 17-002. Available at SSRN: <https://ssrn.com/abstract=2873942>.

⁶⁸⁵ Specialty hospitals, regional and training hospitals, as well as health facilities for the treatment of leprosy patients were retained under the responsibility of the national DoH. As of 2011, there are around 70 retained hospitals. See WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.54. http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf

⁶⁸⁶ See DoH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, p. 5.

⁶⁸⁷ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.108. Available at: <http://documents.worldbank.org/curated/en/500561468295233918/pdf/635630WPOBox361516BOP11906800PUBLIC0OACS.pdf> [04.07.17].

⁶⁸⁸ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.21 http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf.

implementation is one obstacle to achieving universal health coverage and quality of care; It is the lack of integration and integrated programme development.”⁶⁸⁹

Concerns over decentralisation and subsequent governance issues have also been raised in relation to vaccination. The National Immunization Program cites lack of accountability and ‘no clear leadership and stewardship’⁶⁹⁰ as clear challenges to the implementation of the immunization program which is currently underperforming, leaving only 70 per cent of children fully immunized according to the FHSIS report 2014.⁶⁹¹

Furthermore, decentralisation has raised equity concerns in relation to health care service delivery as well as health financing. For example, the WHO notes that well-resourced areas with strong LGUs can provide comprehensive services comparable to those in upper middle-income countries, but that LGUs with more limited budgets may opt not to prioritize health care.⁶⁹² Wide variation in LGU health spending occurs mainly because LGU budgets rely heavily on internal revenue allotment, which is beyond the control of the DOH and does not take local health needs into account.⁶⁹³

There is also no accountability for health expenditure [at the local level]. It is largely about whether you can burn your budget for the year, and if you don’t, you can’t ask for more in the following years. It’s not tied to [indicators such as] did mortality rate go down? Did more children get vaccinated? It’s not tied to actual results.⁶⁹⁴

Governance, and community engagement, around health care in urban slums is also a concern. As noted in the recent Working Paper on Urban Health and Immunization in East Asia,

Management, information, and financing is fragmented across a range of actors, and there are multiple players in service delivery in public, private, and civil society sectors. Equally, there is no obvious method for community engagement in the urban setting. This is a ‘messy’ management challenge for an expanding urban population, 44% of which (17 million) are hidden away in slums.⁶⁹⁵

Data management and availability

The WHO suggests that devolution has also impacted the quality of the Philippines’ health information system, with national and local health information systems said to be ‘poorly integrated and weakly governed’, leading to data gaps, redundancies and duplications.⁶⁹⁶ This problem was also highlighted in an interview with key informants from UNICEF’s Health and Nutrition Section:

Information systems are uneven in the Philippines. There are certain areas that are using an electronic health information management system. All players at the local level are looking to the DOH for leadership, but they are not providing it. The central government developed

⁶⁸⁹ Interview with two Health Officers, Health and Nutrition Section, UNICEF. Tuesday, 13 June, UNICEF Manila

⁶⁹⁰ UNICEF internal briefer on national immunisation program of the Philippines, p 12.

⁶⁹¹ Figure 2D.1, Field Health Service Information System 2014 Annual Report, Philippines Department of Health (FHSIS)

⁶⁹² WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.9.

⁶⁹³ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.108.

⁶⁹⁴ Interview with two Health Officers, Health and Nutrition Section, UNICEF. Tuesday, 13 June, UNICEF Manila

⁶⁹⁵ UNICEF, Working Paper on Urban Health and Immunization in East Asia (Draft), p. 50.

⁶⁹⁶ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.23

http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf.

their separate information system that confused the LGUs, who were already using their own systems.⁶⁹⁷

Similarly, the PDP suggests that data gaps and inconsistencies constrain decision-making in the areas of health and nutrition. It highlights the *“need to resolve quality issues on coverage, timeliness, reliability, consistency, and coherence of administrative and survey data”* in the areas of health and nutrition.⁶⁹⁸ Data integrity is essential for targeting, planning resource allocation, accountability and transparency.

Weak enforcement of information-sharing regulations in the private sector, which constitutes a large bulk of transactions with general practitioners, has resulted in significant data gaps, such as for example, in the TB Registry or the Malaria Information System.⁶⁹⁹ Further, the WHO also notes that there is very limited information on the financing status of local hospitals, which are the responsibility of the LGUs.⁷⁰⁰ At present, the national DOH cannot require LGUs and the private sector to submit health sector data, which, according to the World Bank, creates huge challenges for the DOH to exercise its ‘stewardship and oversight’ function in the health sector.⁷⁰¹

Financing

A fundamental barrier to more rapid progress in the Philippines’ health system is the inadequate financing of health services, which has failed to keep up with growing demand. The WHO has noted that health financing in the Philippines is *“fragmented, with insufficient government investment, inappropriate incentives for providers, weak social protection and high inequity.”*⁷⁰² The World Bank also notes that a progressively aging population, together with an increasing burden of non-communicable diseases, can be expected to put additional pressure on the Philippines’ health budget.⁷⁰³ Concerns over health financing also have implications in relation to emergency preparedness and the extent to which the health sector is able to respond to and finance vital health services during emergencies.⁷⁰⁴

According to 2014 WHO estimates, total health expenditure (THE) in the Philippines equates to around 4.7 per cent of GDP.⁷⁰⁵ While this represents an increase from around 3.9 per cent in 2007, it is still one of the lowest rates in the Western Pacific Region, which averaged 7.7 per cent of GDP as of 2011.⁷⁰⁶ Nominal THE *per capita* has increased steadily over the last decades and stands at 329 (Intl USD) as of 2014. However, it has been noted that increases in nominal spending have mostly been due to inflation rather than service expansion.⁷⁰⁷

⁶⁹⁷ Interview with two Health Officers, Health and Nutrition Section, UNICEF. Tuesday, 13 June, UNICEF Manila

⁶⁹⁸ PDP, Chapter 10, p.141.

⁶⁹⁹ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p. 24
http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf.

⁷⁰⁰ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p. 56.

⁷⁰¹ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.4.

⁷⁰² WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p. 6.

⁷⁰³ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.101.

⁷⁰⁴ Notes from validation workshop Aug 2017.

⁷⁰⁵ <http://www.who.int/countries/phl/en/>

⁷⁰⁶ WHO. 2013. Philippines Living HiT Update.

http://www.wpro.who.int/asia_pacific_observatory/hits/series/phl_living_hits_3_2_health_expenditure.pdf.

⁷⁰⁷ WHO. 2013. Philippines Living HiT Update.

http://www.wpro.who.int/asia_pacific_observatory/hits/series/phl_living_hits_3_2_health_expenditure.pdf.

Devolution also appears to impact health financing in the Philippines negatively, as it reduces the potential benefits from pooling resources in the public sector. For example, the WHO notes that PhilHealth is unable to exercise its significant purchasing power in order to reduce costs, as balanced billing is allowed and prices charged by health care providers are not negotiated at the national level.⁷⁰⁸ This challenge was also highlighted by a key informant from the DOH interviewed for this study:

Currently, PhilHealth only pays for around 14 per cent of total health expenditure so they cannot be a purchaser [of medical supplies and commodities]. In contrast, LGUs pay around 30 per cent. So, we are looking to shift money to PhilHealth – they should be able to hold 50 per cent of the market, so that they can bring down the costs of purchasing supplies.⁷⁰⁹

The World Bank observes that “LGUs in underserved regions face fiscal constraints in financing health, and that health financing is characterized by the co-existence of highly fragmented and sometimes overlapping streams of funding.”⁷¹⁰ Concerns over funding for health services by LGUs are also referenced within the PDP 2017-2022, which notes that health funding is inadequate, and hugely variable, with allocation dependent upon priorities held by local chief executives.⁷¹¹

4.10.2. Supply

Existing evidence suggests that health interventions in the Philippines are constrained by bottlenecks on the supply side, especially in rural areas. Inadequate supply and logistics management systems lead to lack of necessary medical equipment and drugs and failure to deliver essential health interventions. Limited health facility coverage and remoteness create significant barriers to access, especially in rural areas.

Lack of health facilities

In relation to delivery care for expectant mothers, the 2013 NDHS data reveals that lack of health facilities, linked to remoteness of communities and limited transportation to the nearest health facility, are key barriers to access. Among those women who did *not* deliver in a health facility, 24 per cent indicated that the main reason for this was *too far* or *no transportation*, with rates being significantly higher in rural areas (29 per cent) compared to urban areas (16 per cent).⁷¹² This suggests that supply side barriers to accessing health services are particularly pronounced in rural areas of the Philippines. According to the DOH, the average travel time to the nearest health facility is longest in ARMM (83 minutes) and shortest in NCR and Northern Mindanao (28 minutes).⁷¹³ However, it should be noted that, according to the PDP 2017-2022, “7,713 health facilities were constructed and upgraded from 2010 to 2016, half of which are barangay health stations providing primary health care closer to people within the community.”⁷¹⁴ While acknowledging this progress, the Plan also

⁷⁰⁸ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.37
http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf.

⁷⁰⁹ Key Informant Interview with a representative from the Health Policy and Development Bureau, Department of Health, 16 June 2017, Manila.

⁷¹⁰ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. p.3.

⁷¹¹ Philippine National Development Plan 2017-2022, p.140.

⁷¹² NDHS 2013, p. 108.

⁷¹³ DOH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, page 9.

⁷¹⁴ Philippine Development Plan 2017-2022, p. 138.

noted delays in project implementation that had resulted in fewer health facilities being upgraded than planned.⁷¹⁵

The impact of the Philippines' unique geography on equitable access to health services was also highlighted by a key informant from the Disease Prevention and Control Bureau of the DOH: "The Philippines is an archipelago, so it is very hard in some communities to provide quality health services to all."⁷¹⁶

Capacity of health facilities

The Philippines' hospital network appears to have insufficient capacity to meet demand. As of 2012, there were approximately 1,800 hospitals in the Philippines, of which around 40 per cent were public hospitals.⁷¹⁷ However, according to the DOH, only four regions (NCR, Northern Mindanao, Southern Mindanao and CAR) had more than two hospital beds per 1,000 population, which is the minimum bed-to-population ratio recommended by the WHO.⁷¹⁸ Among all 17 regions, ARMM has the lowest bed-to-population ratio (0.17 beds per 1,000 population), which is significantly lower than the national average of 1.04 beds per 1000 population.⁷¹⁹

Using 2009 DOH administrative data, Table 4.18 shows that Level 1 and 2 hospitals, which have relatively low service capacity, are well-distributed across the Philippines. In contrast, Level 3 and 4 hospitals, with higher service capacity, are concentrated in the Central Luzon Region and NCR.⁷²⁰

Table 4.14. Distribution of hospitals by level and geographical distribution, 2009

⁷¹⁵ Philippine Development Plan 2017-2022, p. 138.

⁷¹⁶ Key Informant Interview with a representative from the Disease Prevention and Control Bureau, DoH, 23 June 2017, Manila.

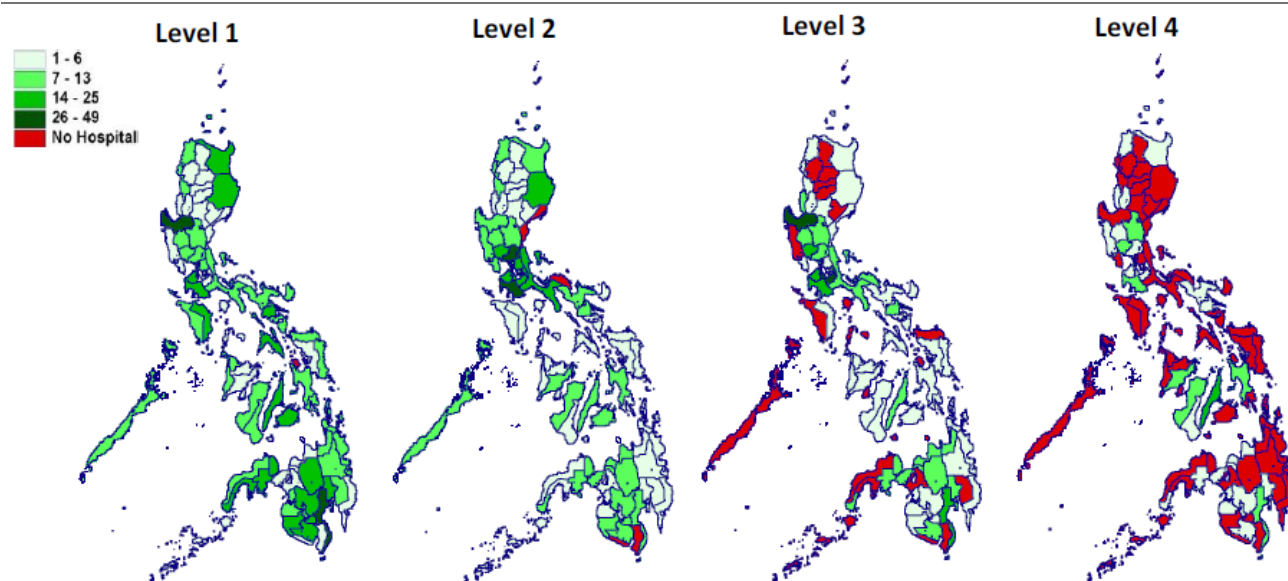
⁷¹⁷ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1.

⁷¹⁸ DOH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, p. 5.

⁷¹⁹ DOH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, p. 7.

⁷²⁰ DOH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, page 6. Note that the Philippines' hospital classification rules were changed in 2012 by Administrative Order No.2012-0012 and reduced to three levels. See <http://hfsrb.doh.gov.ph/images/Hospital/issuances/ao2012-0012.pdf> [04.07.17].



Source: Department of Health 2009

Medical supply and equipment

Supply of essential medicines appears to be an issue in the Philippines, with only 25 per cent of essential medicines available in the public sector.⁷²¹ Limited availability of medicines in public facilities is one reason why patients (even poor members of the PhilHealth Indigent Program) frequently resort to higher-priced private hospitals and self-medication.⁷²²

In a recent assessment report, the World Bank casts doubts on the integrity of the national vaccine cold-chain, owing to its break-up in the wake of devolution.⁷²³ The Philippines' vaccine cold-chain is also vulnerable to extreme weather events such as Typhoon Yolanda, which destroyed cold-chain equipment and vaccines in Leyte and Eastern Samar.⁷²⁴

Furthermore, it appears that cumbersome procurement rules lead to a frequent shortage of essential vaccines and inadequate/untimely response to emergencies, as highlighted by a key informant from the national-level DOH:

“[In the Philippines] we have the issue of not having the vaccines in time for the next year because we do not do multi-year procurement. Procurement is decentralized, so municipalities have to do it on their own. They cannot do emergency procurement as they need to put out a tender for 30 days, and if it fails, they have to wait a few months before re-publishing.”⁷²⁵

According to a recent briefing document on the National Immunization Program in Philippines, “inefficient vaccine procurement processes often leads to massive stock-outs and is one the main

⁷²¹ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1.

⁷²² World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions, p. 119.

⁷²³ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions, p. 116.

⁷²⁴ UNICEF Media Centre. 2014. Vaccines and immunization equipment to benefit children affected by Typhoon Yolanda. https://www.unicef.org/philippines/media_22257.html#.WVuWSYjysdV [04.07.17].

⁷²⁵ Key Informant Interview with a representative from the Health Policy and Development Bureau, Department of Health, 16 June 2017, Manila.

reasons for the increasing number of unimmunized children.”⁷²⁶ The briefer further asserts that *stock-outs* are the main cause of *missed opportunities for vaccination*, alongside *inadequate tracking of defaulters* (children who do not complete a vaccination programme) and limited capacity, and windows of opportunity for vaccination provided to communities.⁷²⁷

A similar concern about procurement rules was raised by a representative from the DOH’s Health Emergency Management Bureau, which coordinates health-related response and mitigation interventions in emergencies and disasters:

“Much of the equipment we need in emergencies is funded from the capital outlay budget line. But in the capital outlay budget line we cannot buy equipment worth more than PhP15,000. Most of the equipment costs much more than that!”⁷²⁸

It has also been suggested, based on observations made by UNICEF staff during visits to LGUs, that lack of supplies is not only limited to vaccines but also include vitamins and minerals, antibiotics and other essential commodities and equipment such as height boards and weighing scales.⁷²⁹

There are also concerns that the entire supply chain faces challenges, for example in relation to forecasting and distribution and that the problem is not limited to stocking and procurement.⁷³⁰ Supply of basic medical equipment also appears to be skewed in favour of highly urbanized areas, often to the detriment of remote rural areas. For example, of the 3,860 general radiography devices in the country, more than 30 per cent were found in NCR, even though NCR is only home to around 13 per cent of the total population of the Philippines.⁷³¹

Human resources

The Philippines’ health workforce coverage is insufficient to meet demand, especially in rural areas. Over the last decade, the Philippines has experienced increasing out-migration of its health professionals, with consequent shortages nationwide.⁷³² According to the WHO, there are insufficient doctors, dentists and therapists for the needs of the population, and many nurses and midwives train specifically to work overseas on a temporary basis.⁷³³

There is no authoritative and up-to-date information on the number of active health workers in the Philippines, as this data is not regularly collected and data from the private sector is not readily available. The most recent World Bank estimates suggest that there are only 1.15 physicians per 1,000 population in the Philippines as of 2004.⁷³⁴ This ratio compares very unfavourably to the wider regional average for East Asia and the Pacific, which stood at 1.62 physicians per 1,000 population as

⁷²⁶ UNICEF internal briefer on national immunisation program of the Philippines p. 1.

⁷²⁷ UNICEF internal briefer on national immunisation program of the Philippines p. 9-11.

⁷²⁸ Key Informant Interview with a representative from the Health Emergency Management Bureau, Department of Health, 23 June 2017, Manila.

⁷²⁹ Notes provided from UNICEF EAPRO consultation, July/Aug 2017.

⁷³⁰ Notes provided from Validation Workshop, Aug 2017.

⁷³¹ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.74

http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf; See also PSA 2015 Census data for NCR: <https://psa.gov.ph/content/population-national-capital-region-based-2015-census-population-0> [04.07.17].

⁷³² WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p. 6.

⁷³³ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at:

http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p. 6.

⁷³⁴ World Bank. 2017. <http://data.worldbank.org/indicator/SH.MED.PHYS.ZS?locations=PH-Z4> [04.07.17].

of 2011.⁷³⁵ Furthermore, according to 2014 World Bank estimates, there were only 9.56 surgical specialists per 100,000 population in the Philippines, compared to the wider regional average for East Asia and the Pacific of 36.6 surgical specialists per 100,000 population.⁷³⁶

In contrast to physicians and surgical specialists, there appears to be a relatively good supply of nurses and midwives in the Philippines. According to the WHO, nurses and midwives constitute the largest category of health workers in the Philippines, as a result of overseas demand for Filipino nurses.⁷³⁷ World Bank estimates from 2004 suggest that there were 6 nurses and midwives per 1,000 population in the Philippines, compared to the much lower regional average for East Asia and the Pacific, which stood at 2.5 nurses and midwives per 1,000 population as of 2011.⁷³⁸ It should be noted, however, that the health workforce ratios for the Philippines are likely to overestimate the actual supply of health workers in the country, as ratios are calculated based on the number of ‘ever-registered’ health workers (which may include deceased, retired and overseas health workers).⁷³⁹

Importantly, the aggregate health workforce figures also hide significant inequities *within* the Philippines. 2006 administrative data on health workers in the public sector show that NCR and Central Luzon have a much higher proportion of health workers, compared to more remote regions such as ARMM, CARAGA or Davao (see Table 4.18 below).⁷⁴⁰ NCR, for example, is home to 22 per cent of all doctors, even though its population only amounts to around 13 per cent of the total population of the Philippines.⁷⁴¹ Regional data on health workers in the private sector is not available, a significant data gap.

Table 4.15. Public health workers per region, 2006

⁷³⁵ World Bank. 2017. <http://data.worldbank.org/indicator/SH.MED.PHYS.ZS?locations=PH-Z4> [04.07.17].

⁷³⁶ World Bank. 2017. <http://data.worldbank.org/indicator/SH.MED.SAOP.P5?locations=PH-Z4> [04.07.17].

⁷³⁷ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.76.

⁷³⁸ World Bank. 2017. <http://data.worldbank.org/indicator/SH.MED.NUMW.P3?locations=PH-Z4> [04.07.17].

⁷³⁹ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.80.

⁷⁴⁰ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.79.

⁷⁴¹ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.79.

Region	Doctors		Nurses		Dentists ^a		Midwives	
	No.	%	No.	%	No.	%	No.	%
NCR	650	22.0	683	15.6	561	28.8	1065	6.3
CAR	83	2.8	151	3.5	32	1.6	599	3.6
Ilocos (I)	154	5.2	232	5.3	110	5.7	1019	6.0
Cagayan Valley (II)	95	3.2	176	4.0	69	3.5	816	4.8
C. Luzon (III)	284	9.6	384	8.8	171	8.8	1630	9.7
CALABARZON (IV-A)	247	8.4	459	10.5	259	13.3	1802	10.7
MIMAROPA (IV-B)	83	2.8	124	2.8			527	3.1
Bicol (V)	179	6.1	271	6.2	89	4.6	1072	6.4
W. Visayas (VI)	263	8.9	485	11.1	111	5.7	1689	10.0
C. Visayas (VII)	215	7.3	305	7.0	139	7.1	1495	8.9
E. Visayas (VIII)	152	5.1	208	4.8	90	4.6	880	5.2
Zamboanga (IX)	94	3.2	167	3.8	42	2.2	541	3.2
N. Mindanao (X)	116	3.9	203	4.6	73	3.8	956	5.7
Davao (XI)	69	2.3	110	2.5	62	3.2	859	5.1
SOCOSKARGEN (XII)	108	3.7	186	4.3	55	2.8	817	4.8
CARAGA (XIII)	85	2.9	116	2.7	57	2.9	631	3.7
ARMM	78	2.6	114	2.6	26	1.3	459	2.7
Philippines	2955	100.0	4374	100.0	1946	100.0	16 857	100.0

^a2005

Source: WHO 2011

There have been some efforts at the central level to counteract the inter-regional and rural-urban disparities in health workforce coverage, but their impact has so far been relatively limited, as highlighted by a key informant from the DOH:

“The DOH has a midwife and nurse deployment programme, which aims to augment health units in remote areas – health personnel are deployed to the LGUs and they are salaried by the DOH. The objective is to get the LGUs to hire them, and give them a permanent position. But there are only very few success stories!”⁷⁴²

4.10.3. Demand

“We need to work more on the demand side barriers. In terms of supply, we are doing what we can, but we are missing a lot on how we can make people demand services – make people see the value of these services.”⁷⁴³

⁷⁴² Key Informant Interview with a representative from the Health Emergency Management Bureau, Department of Health, 23 June 2017, Manila.

⁷⁴³ Key informant interview with representative from World Vision Philippines, 14 June 2017, Quezon City.

Financial access

Healthcare costs appear to play a significant role in suppressing demand for basic health care services in the Philippines, including professional delivery care. NDHS data from 2013 indicate that, among those women who did not deliver in a health facility, 37 per cent indicated that the main reason for this was that *it costs too much* - the most commonly cited reason.⁷⁴⁴ Interestingly, women in urban areas were significantly more likely to report 'costs' as the main reason for not delivering in a health facility (40 per cent) compared to women in rural areas (35 per cent).⁷⁴⁵ According to 2013 NDHS data, the average travel cost for a person visiting a public health facility or private provider is PHP69 . Unfortunately, NDHS data on travel costs is not broken down by geographic location.⁷⁴⁶

Both public and private facilities operate on a fee-for-service basis, although public services receive greater subsidies from PhilHealth.⁷⁴⁷ In public facilities, 'informal payments' or the collection of 'donations' is reported to be common, though robust quantitative evidence is lacking.⁷⁴⁸ As of 2011, government funds accounted for 27 per cent of THE (split equally between national and local government), while private sources accounted for 63 per cent of THE.⁷⁴⁹ Out-of-pocket payments still account for a large proportion of (private) health care spending, at 52.7 per cent of THE, as of 2011.⁷⁵⁰

The high level of out-of-pocket payments may lead to financial catastrophe and impoverishment when family members fall ill, especially among the economically less secure sections of society.⁷⁵¹ According to a recent WHO review report, the high level of out-of-pocket payments makes individuals from poor households more vulnerable than those from wealthier households: they are generally more prone to illness, their out-of-pocket payments are relatively larger, and they are usually less able (e.g. because of lack of awareness) to maximize the use of social protection provided by the government.⁷⁵²

Drugs and medicines account for an estimated 70 per cent of total out-of-pocket payments, while less than 10 per cent is spent on professional fees.⁷⁵³ Importantly, households in the poorest income stratum allot about 73 per cent of their out-of-pocket payments to drugs and medicines, which is about 13 percentage points higher than the share among the richest households.⁷⁵⁴

Financial constraints were also considered a concern in relation to access to health services and health outcomes in urban poor areas in Manila due, for instance, to "high opportunity and financial costs for working mothers to visit health centre."⁷⁵⁵ According to the 2013 NDHS, 58 per cent of PhilHealth members were paying members or their dependents, while 42 per cent were enrolled as

⁷⁴⁴ NDHS 2013, p. 108.

⁷⁴⁵ NDHS 2013, p. 108.

⁷⁴⁶ NDHS 2013, p. 168.

⁷⁴⁷ WHO & DoH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.6.

⁷⁴⁸ Key Informant Interview with a representative from the Health Policy and Development Bureau, Department of Health, 16 June 2017, Manila.

⁷⁴⁹ WHO. 2013. Philippines Living HiT Update, p. 1

⁷⁵⁰ WHO. 2013. Philippines Living HiT Update, p. 1.

⁷⁵¹ DoH. Undated. The Philippine Health System at a Glance. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>, p. 5.

⁷⁵² WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p. 36.

⁷⁵³ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p. 58.

⁷⁵⁴ WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p. 58.

⁷⁵⁵ UNICEF, Working Paper on Urban Health and Immunization in East Asia (Draft), p. 50.

indigent members, or were their dependents.⁷⁵⁶ Enrolment as an indigent member or dependent was highest in ARMM (at 82 per cent), and 61 per cent of indigent members were based in rural areas.⁷⁵⁷ Traditional medicine practitioners continue to play an important role in the Philippines' health care system, with a 2010 study estimating that around 70 per cent of Filipinos make use of traditional and complementary medicines.⁷⁵⁸ Most traditional medicine practitioners do not have set fees, and rely instead on voluntary donations, which makes them attractive alternatives for individuals from poorer sectors of society.⁷⁵⁹

Practices and beliefs

Existing evidence suggests that social and religious norms play an important role in determining health outcomes in the Philippines. For example, conservative socio-religious norms that stigmatise sexual activity among young (unmarried) people were found to have a significant restrictive impact on access to family planning services, both in terms of suppressing demand among adolescents and the cause of service providers denying access.⁷⁶⁰ A recent non-representative study conducted for IPPF in Manila and Pampanga found that, among all surveyed health service providers, the majority (56 per cent) reported that they had previously denied a young person access to condoms because of their own religious beliefs.⁷⁶¹ Similar concerns about the restrictive impact of socio-religious norms on young people's access to sexual and reproductive health services were also raised by a key informant from the United Nations Population Fund (UNFPA):

“Our culture is conservative - either Catholic or Muslim - and this translates into conservative professionals working within the health sector. The way these professionals deal with young people trying to access sexual and reproductive health services is restrictive. Conservative culture also affects the way young people perceive sexual and reproductive health – it is something sinful and not to be talked about.”⁷⁶²

Conservative religious norms also appear to inform and reinforce legal restrictions on access to sexual and reproductive health services in the Philippines, such as, for example, the blanket prohibition of abortion services, or the legal exemption for private/religious schools to develop their own sexuality education curriculum.⁷⁶³

Additionally, when developing the health sector causality analysis, the expert focus group noted that a combination of ‘risky behaviours’ among adolescents, which might include, for example, drug taking, smoking, alcohol consumption, anti-social behaviours and similar practices, combine with

⁷⁵⁶ NDHS 2013, p. 160.

⁷⁵⁷ NDHS 2013, p. 160.

⁷⁵⁸ As cited in WHO & DoH. 2012. Philippines Health Service Delivery Profile, p.10.

⁷⁵⁹ WHO & DoH. 2012. Philippines Health Service Delivery Profile, p.10

⁷⁶⁰ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines. Available at:

<http://www.ippfeseaor.org/resource/overprotected-and-underserved-influence-law-young-peoples-access-sexual-and-reproductive> [14.09.17].

⁷⁶¹ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines.

⁷⁶² Key Informant Interview with a representative from the Reproductive Health section of UNFPA, 23 June 2017, Manila.

⁷⁶³ IPPF ESAOR & Coram International. 2017. Overprotected and Underserved: The Influence of the Law on Young People's Access to Sexual and Reproductive Health in the Philippines.

poor caring practices and unclean and unhealthy living conditions to exacerbate health concerns while occasionally also exacerbating barriers to accessing health services.⁷⁶⁴

4.10.4. Quality

The DOH and PhilHealth are mandated to accredit and regulate quality of care, service delivery and health establishments in the Philippines.⁷⁶⁵ Health professionals are in turn regulated by the Professional Regulations Commission, while the Food and Drug Administration regulates drugs, health devices and equipment.⁷⁶⁶ Even though a detailed assessment of quality of care is difficult due to limited and unreliable data, it is clear that quality of care remains a significant bottleneck in the Philippines' health sector.

Anecdotal evidence suggests that quality of care is generally (perceived to be) lower in rural areas of the Philippines. For example, the 2012 WHO service delivery profile notes that *“highly urbanized metropolitan areas with higher income levels tend to and are perceived to have better quality health service than the mainly rural impoverished and often isolated communities, where licensing standards are absent, and accreditation rates are very low.”*⁷⁶⁷

Primary care facilities and lower-level hospitals are frequently bypassed because of perceptions of low quality, causing heavy traffic at the higher-level facilities and corresponding over-utilization of resources.⁷⁶⁸ Similarly, nurses appear to be frequently bypassed in favour of doctors, even in cases of minor illness, as the latter are perceived to be able to provide better quality of care:

“Filipinos want to be seen by a doctor. There is a cultural component: doctors are put on a pedestal.”⁷⁶⁹

Furthermore, the World Bank observes that first-contact primary care in the Philippines is largely perceived to be providing preventive (rather than curative) services and that therefore patients prefer to seek care at the next level.⁷⁷⁰ Private providers are generally perceived to provide better quality of care, compared to public providers.⁷⁷¹ However, data on quality of care in the private sector is not readily available, so it is difficult to establish to what extent these perceptions correspond with reality.⁷⁷²

In relation to the quality of maternal health care in the Philippines, it should be noted that the recent increase in the proportion of births delivered in a health facility (from 44 per cent in 2008 to 61 per

⁷⁶⁴ Causality analysis map discussion; UNICEF notes, September 2017.

⁷⁶⁵ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.8.

⁷⁶⁶ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.8.

⁷⁶⁷ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.8.

⁷⁶⁸ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.8; and WHO. 2011. The Philippines Health System Review. Health Systems in Transition Vol. 1 No.2, p.92.

⁷⁶⁹ Key Informant Interview with a representative from the Health Policy and Development Bureau, Department of Health, 16 June 2017, Manila.

⁷⁷⁰ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.118.

⁷⁷¹ WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.6.

⁷⁷² WHO & DOH. 2012. Philippines Health Service Delivery Profile. Available at: http://www.wpro.who.int/health_services/service_delivery_profile_philippines.pdf?ua=1, p.6.

cent in 2013) as well as the proportion of births attended by a skilled health professional (from 62 per cent in 2008 to 73 per cent in 2013) did *not* result in the expected decrease in the maternal mortality ratio, which still stands at a very high 114 deaths per 100,000 live births (discussed in detail above). While this pattern does not establish causality, it suggests that low quality of maternal care in health facilities in the Philippines represents a bottleneck, which prevents the increased delivery care coverage from translating into a reduction of maternal mortality. This is to some extent confirmed by a recent World Bank study, which suggests that high levels of maternal mortality are at least partially due to inadequate facilities for emergency obstetric care.⁷⁷³

Interestingly, (perceived) poor quality of care does *not* appear to be an important factor suppressing demand for professional delivery care services in the Philippines. According to 2013 NDHS data, among those women who did not deliver in a health facility, only a very small proportion (3.6 per cent) indicated that the main reason for this was 'Don't trust facility/ Poor quality service', with far larger proportions citing costs and transportation difficulties as the main reason for not delivering in a health facility.⁷⁷⁴

⁷⁷³ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.116.

⁷⁷⁴ NDHS 2013, p.108.

5. Nutrition

As set out above in relation to child health rights, under the CRC and ICESCR, every child has the right to *the highest attainable standard of physical and mental health*.⁷⁷⁵ This is an inclusive right and encompasses several components, including an adequate supply of safe food, nutrition and housing.⁷⁷⁶ The situation of child and maternal nutrition in the Philippines is analysed regarding the six thematic areas described in the WHO’s Global Nutrition Targets: child stunting; micronutrient deficiencies/anaemia; low birth weight; obesity/over-weight; breastfeeding; and wasting/acute malnutrition.

Key nutrition-related SDGs

SDG	Targets	Indicators
2.1	By 2025, achieve a 40 per cent reduction in the number of children under-5 who are stunted	Prevalence of stunting (low height-for-age) in children under 5 years of age
2.2	By 2025, achieve a 50 per cent reduction of anaemia in women of reproductive age	Percentage of women of reproductive age (15-49 years of age) with anaemia
2.3	By 2025, achieve a 30 per cent reduction in low birth weight	Percentage of infants born with low birth weight (< 2,500 grams)
2.4	By 2025, ensure that there is no increase in childhood overweight	Prevalence of overweight (high weight-for-height) in children under 5 years of age
2.5	By 2025, increase the rate of exclusive breastfeeding in the first 6 months up to at least 50%	Percentage of infants less than 6 months of age who are exclusively breast fed
2.6	By 2025, reduce and maintain childhood wasting to less than 5 per cent	Prevalence of wasting (low weight-for-height) in children under 5 years of age
Key CRC Articles		
<p>Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child’s or his or her parent’s or guardian’s race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status</p> <p>Article 6 (1) Every child has the inherent right to life; (2) States parties shall ensure to the maximum extent possible the survival and development of the child</p>		

⁷⁷⁵ CRC, article 24, ICESCR, article 12.

⁷⁷⁶ CESCR General Comment No 14: The Right to the Highest Attainable Standard of Health (Art 12), 11 August 2000, E/C.12/2000/4, para 11.

Article 17: States shall ensure that the child has access to information aimed at the promotion of his or her social, spiritual and moral well-being and physical and mental health

Article 24 (1) Every child has the right to the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health; (2) In particular, States must: (a) diminish infant and child mortality; (c) Combat disease and malnutrition, including through the provision of adequate nutritious foods and clean drinking-water, taking into consideration the dangers of environmental pollution; (e) Ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents.

Article 27: States recognize the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development

SDG 2.2 encourages States to end all forms of malnutrition by 2030, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under five years of age (the 'WHO Global Nutrition Targets'), and addressing the nutritional needs of adolescent girls, pregnant and lactating women, and older persons.⁷⁷⁷

According to the WHO's Global Nutrition Targets, the Philippines should, by 2025, aim to: achieve a 40 per cent reduction in the number of children under-5 who are stunted; achieve a 50 per cent reduction of anaemia in women of reproductive age; achieve a 30 per cent reduction in low birth weight prevalence; ensure that there is no increase in childhood overweight; increase the rate of exclusive breastfeeding in the first six months up to at least 50 per cent; and reduce and maintain childhood wasting to less than 5 per cent.⁷⁷⁸

5.1.1. Legislative and policy framework

A number of laws and policy documents underpin programmes and services relating to nutrition in Philippines. These are set out, in detail, in the DOH Strategic Framework for Comprehensive Nutrition Implementation Plan 2014-2015, which lists a detailed history of nutrition law and policy making in Philippines, including, for example, Republic Act No. 8172, An Act Promoting Salt Iodization Nationwide and for Related Purposes 1995, Republic Act 10611, the Food Safety Act of 2013, as well as Republic Act 7600, the Rooming-In and Breastfeeding Act of 1992. The Plan also lists influential nutrition-linked policies, including the Healthy Lifestyle Policy Administrative Order 2011-0003 on Strengthening the Prevention & Control of Chronic Lifestyle Related Non Communicable Diseases.⁷⁷⁹ The legislative and policy framework concerning nutrition in Philippines also includes Republic Act 8976, the Philippine Food Fortification Act of 2000, which sets out provisions to address nutritional deficiency in Philippines, including, energy, iron, vitamin A, iodine, thiamine and riboflavin.⁷⁸⁰ In addition, the DOH has propounded a number of Administrative Orders in connection with nutrition,

⁷⁷⁷ See <https://sustainabledevelopment.un.org/sdg2> [10.04.17].

⁷⁷⁸ <http://www.who.int/nutrition/global-target-2025/en/> [02.03.17].

⁷⁷⁹ DOH Strategic Framework for Comprehensive Nutrition Implementation Plan 2014-2015, p. 12-14 and 22-24.

⁷⁸⁰ RA 8976 Philippine Food Fortification Act of 2000.

and child nutrition, including, for instance, Administrative Order 2015-0055 on National Guidelines on the Management of Acute Malnutrition for Children under 5 years of 2015. Republic Act 1161 or the Social Security Law of 1954 (as amended by Republic Act 7322 on Increasing Maternity Benefits in Favour of Women Workers in the Private Sectors), which provides for 60 days of paid leave following a child's birth is also an important part of the nutritional legislative landscape, enabling mothers to breastfeed their babies at least for the initial 60 days of their lives, though, as set out in section 5.1.8, the low prevalence rate of breastfeeding remains a challenge.

5.1.2. Malnutrition: Status at a glance

Malnutrition refers to deficiencies, excesses or imbalances in individual's intake of energy and/or nutrients. The term malnutrition covers two broad groups of conditions. On the one hand is 'undernutrition', which includes stunting (low height for age), wasting (low weight for height), underweight (low weight for age) and micronutrient deficiencies (a lack of important vitamins and minerals). 'Over-nutrition,' is at the opposite end of the spectrum and includes being overweight, obesity and diet-related non-communicable diseases such as heart disease, stroke, diabetes and cancer.⁷⁸¹

Globally, malnutrition is estimated to contribute to more than one third of all child deaths, although it is rarely listed as the direct cause of child mortality.⁷⁸² As a key determinant of child health, this chapter analyses child and maternal malnutrition in the Philippines with reference to the six thematic areas described in the WHO's Global Nutrition Targets: child stunting; child wasting, anaemia (and other micronutrient deficiencies); low birth weight; obesity and over-weight and breastfeeding. In addition, and where relevant, reference is made to the Philippine Plan of Action for Nutrition 2017-2022 (PPAN).

The PPAN focuses on the first 1,000 days of life of the child, referring to the period of pregnancy up to the first two years of the child. This is the period during which poor nutrition can have irreversible effects on the physical and mental development of the child, the consequences of which are felt way into adulthood.⁷⁸³

According to the 2014 Annual Poverty Indicators Survey, on average, around 5 per cent of families in the Philippines had experienced hunger in the three months preceding the survey; however, this figure increases to 10 per cent for families in the bottom 30 per cent of the income stratum. Of those who had experienced hunger, 24 per cent experienced it at least once per week.⁷⁸⁴

Using trend data from the 2015 National Nutrition Survey (NNS), Table 5.1 below shows that, while childhood stunting and underweight prevalence in under-5 year olds have been declining slowly overall between 1989 and 2015 (albeit at very high levels), childhood wasting and overweight have been increasing over the same time period (but at much lower levels).⁷⁸⁵

Table 5.1. Trends in the prevalence of malnutrition among children 0–59 months: 1989-2015

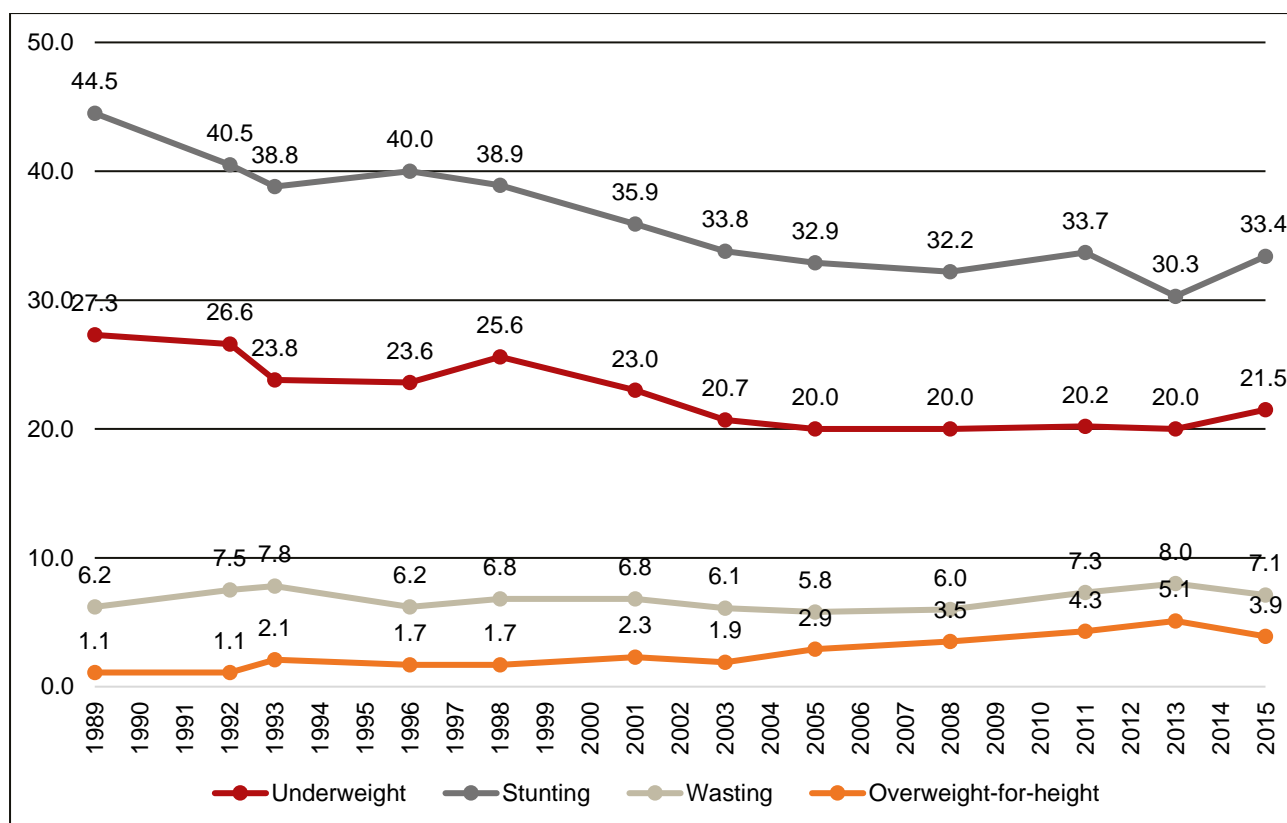
⁷⁸¹ WHO. 2016. What is malnutrition? <http://www.who.int/features/qa/malnutrition/en/> [29.06.17].

⁷⁸² WHO http://www.who.int/maternal_child_adolescent/topics/child/malnutrition/en/ [29.06.17].

⁷⁸³ Philippine Plan of Action for Nutrition 2017-2022, p.36.

⁷⁸⁴ Highlights from 2014 Annual Poverty Indicators Survey (APIS) results, p33.

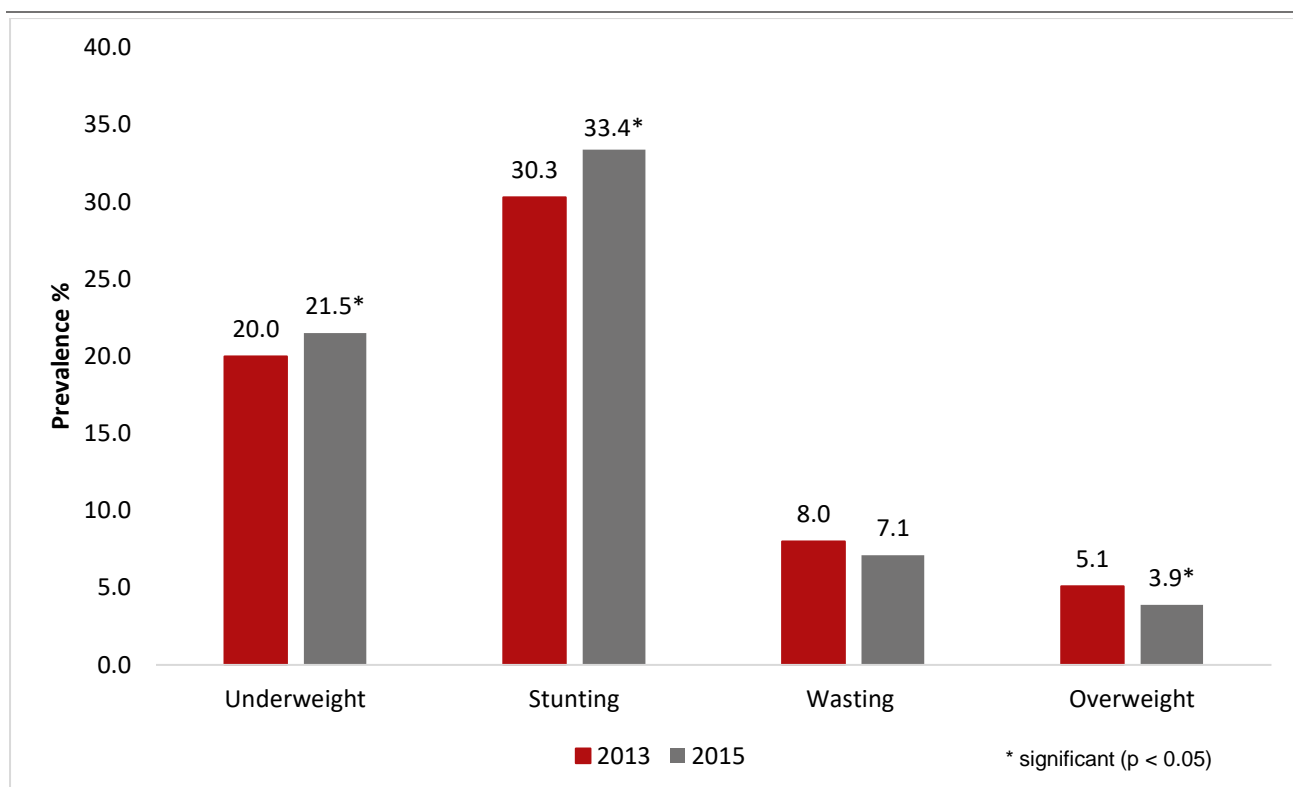
⁷⁸⁵ Note that the 2015 National Nutrition Survey data have not yet been validated and included in the UNICEF-WHO-World Bank Joint Malnutrition Estimates (JME). The latest Philippines data included are from the 8th National nutrition Survey Philippines 2013. See <http://www.who.int/nutgrowthdb/estimates/en/> [29.06.17].



Source: National Nutrition Survey 2015

Worryingly, the last years have seen a reversal of downward trends in childhood stunting and underweight, with statistically significant increases in both malnourishment indicators between 2013 and 2015. While the prevalence of childhood stunting increased from 30 per cent to 33 per cent between 2013 and 2015, the prevalence of underweight increased from 20 per cent to 21.5 per cent in the same time period (see Table 5.2 below). Possible causes of these trends are discussed separately by issue below.

Table 5.2. Prevalence of malnourished children 0–59 months: 2013 and 2015



Source: National Nutrition Survey 2015

5.1.3. Childhood stunting

High levels of childhood stunting are associated with a high risk of frequent and early exposure to illness and/or inappropriate feeding practices. In the long run, stunted children are likely to have reduced work capacity as adults which negatively impacts economic productivity.⁷⁸⁶

The stunting reduction target set out in the PDP as well as the PPAN 2017-2022 is to reach a stunting prevalence rate of less than 21.4 per cent in under-5 children by 2022.⁷⁸⁷ As set out above, the current prevalence of childhood stunting is estimated to stand at a very high 33 per cent, which is still far from the PDP reduction target, and compares very unfavourably with the regional average for East Asia and Pacific which stands at 11 per cent as of 2015.⁷⁸⁸

Data from the 2015 NNS reveal significant disparities in relation to childhood stunting rates along gender lines, geographical location, as well as household wealth. As of 2015, boys under the age of 5 were slightly more likely to be stunted (at 34.3 per cent) compared to girls (32.5 per cent).⁷⁸⁹ It appears that children living in rural areas are also more likely to be stunted (at 38.1 per cent) than those living in urban areas (28.3 per cent).⁷⁹⁰ The region with the highest level of childhood stunting was ARMM (45.2 per cent), while Central Luzon was found to be the region with the lowest level of stunting (23.1 per cent).⁷⁹¹

⁷⁸⁶ See e.g. <http://www.who.int/nutgrowthdb/about/introduction/en/index2.html> [03.07.17]

⁷⁸⁷ Table 10.4 PDP & PPAN Executive Summary. P.8.

⁷⁸⁸ State of the World's Children 2016 data <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [29.06.17].

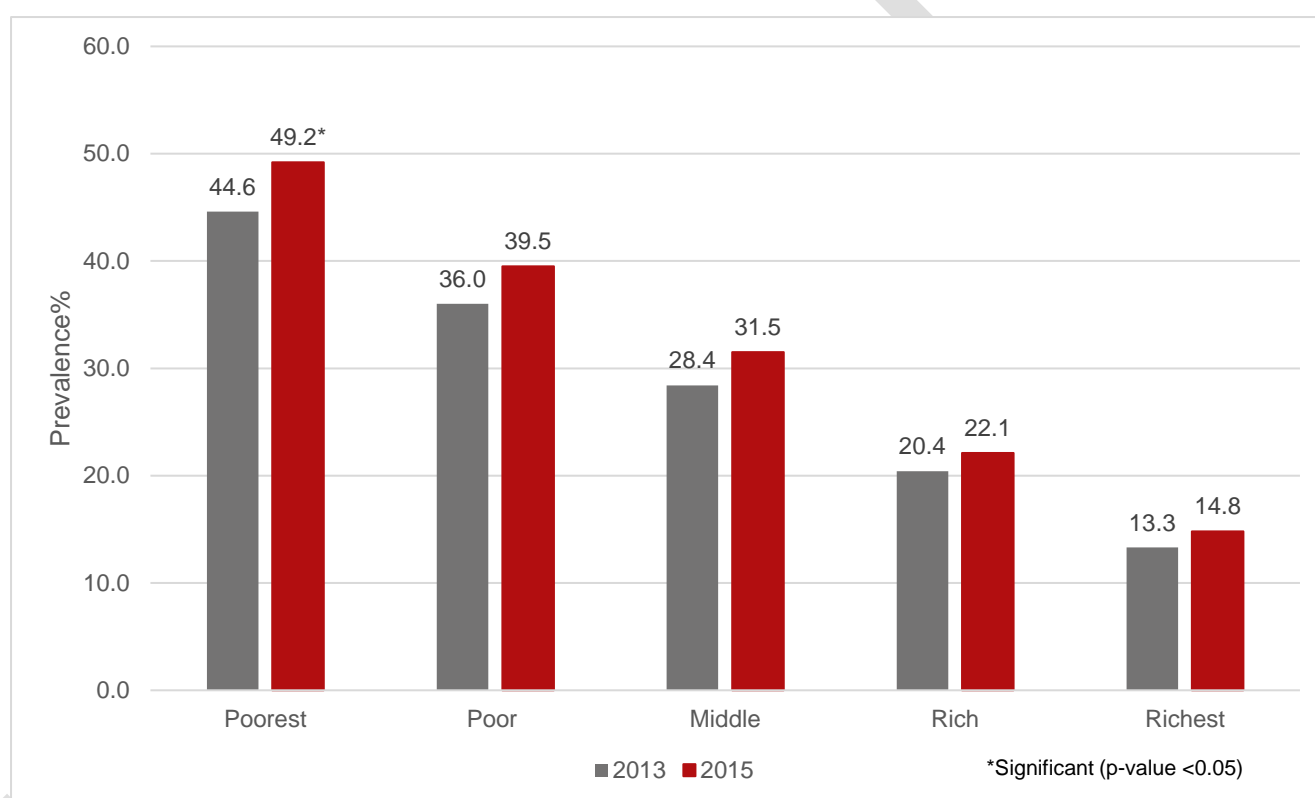
⁷⁸⁹ NNS 2015.

⁷⁹⁰ NNS 2015.

⁷⁹¹ NNS 2015.

Perhaps unsurprisingly, household wealth was found to be one of the most significant predictors of childhood stunting prevalence in the Philippines: Nearly 1 in 2 children from households in the poorest wealth quintile (49.2 per cent) were found to be stunted, whereas only 15 per cent of children from households in the richest quintile were found to be stunted. Table 5.3 below shows that recent increases in childhood stunting prevalence have affected households across the wealth divide with households from the poorest wealth quintile, however, being affected most severely.⁷⁹²

Table 5.3. Prevalence of stunting among children under-five years old (0-59 months) by wealth quintile: 2013 vs 2015



Source: National Nutrition Survey 2015

5.1.4. Childhood wasting

Childhood wasting (low weight for height or ‘acute malnutrition’) is estimated to affect around 7 per cent of under-5 children in the Philippines, as of 2015,⁷⁹³ which is still above the WHO’s target of 5 per cent for the year 2025 and also above the PPAN target of 5 per cent or less by 2022.⁷⁹⁴ Childhood wasting prevalence rates in the Philippines also compare unfavourably with the regional average for East Asia and Pacific which stood at 4 per cent as of 2015.⁷⁹⁵ It is important to recognise, when considering childhood wasting in the Philippines, that “*the risk of developing wasting increases during*

⁷⁹² NNS 2015.

⁷⁹³ NNS 2015.

⁷⁹⁴ PPAN Executive Summary, p.8.

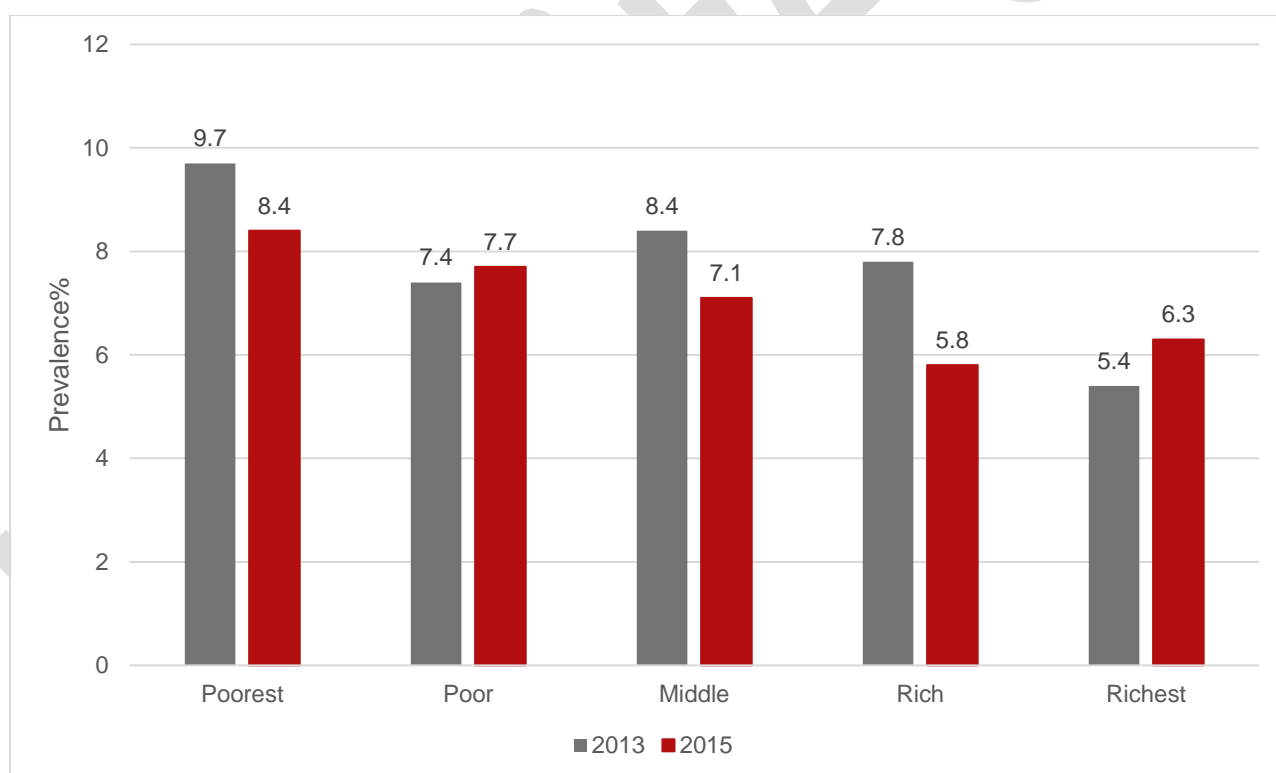
⁷⁹⁵ State of the World’s Children 2016 data <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [29.06.17].

humanitarian emergencies”,⁷⁹⁶ making wasting a particular concern and risk in the Philippines, which is prone to natural disasters.

Disparities between genders, wealth and geographical divides appear to be relatively minor in relation to childhood wasting prevalence in the Philippines. The percentage of children under the age of five years who were wasted in 2015 was higher among male children (8.3 per cent) compared to female children (7.6 per cent).⁷⁹⁷ It also appears that children living in rural areas are only slightly more likely to be wasted (7.2 per cent) than those living in urban areas (7.0 per cent). 2015 NNS data reveal that wasting prevalence rates are highest in MIMAROPA (9.7 per cent), Eastern Visayas (8.4 per cent), and ARMM (8.2 per cent); and lowest in Northern Mindanao (4 per cent) and CAR (4.5 per cent).⁷⁹⁸

Table 5.4 below shows that children from households in the poorest wealth quintile are more likely to be wasted (at 8.4 per cent) than those from households in the richest wealth quintile (6.3 per cent). Interestingly, it appears that reductions in wasting prevalence among the poorest households between 2013 and 2015 has been largely offset by an increase in wasting prevalence among the richest households (see Table 5.4 below).⁷⁹⁹

Table 5.4. Prevalence of wasting among children under-five years old (0-59 months) by wealth quintile: 2013 vs 2015



Source: National Nutrition Survey 2015

⁷⁹⁶ Aashima Garg, Anthony Calibo, Rene Galera, Andrew Bucu, Rosalia Paje and Willibald Zeck, Management of SAM in the Philippines: from emergency-focused modelling to national policy and government scale-up (Undated), p. 2.

⁷⁹⁷ NNS 2015.

⁷⁹⁸ NNS 2015.

⁷⁹⁹ NNS 2015.

5.1.5. Micronutrient deficiencies

Anaemia

Globally, maternal anaemia accounts for around 20 per cent of maternal deaths.⁸⁰⁰ Maternal anaemia may increase the risk of blood loss at delivery and postpartum haemorrhage.⁸⁰¹ The nutritional status of the mother during pregnancy and lactation can also impact on the health and nutritional status of the child. For example, anaemic mothers are at greater risk of delivering premature and low-birth-weight babies, who also have an increased risk of dying.⁸⁰² Anaemia can be caused by infectious diseases such as malaria, helminth infections, and other infections. Iron supplementation, food fortification and de-worming can be effective in reducing anaemia in pregnant women as well as children.⁸⁰³

The PPAN 2017-2022 sets out the target for reducing the prevalence of anaemia among women of reproductive age to 6 per cent by 2022.⁸⁰⁴ The prevalence of anaemia among women of reproductive age (15–49 years) has decreased steadily in the Philippines over the past decades, but remains significantly above the PPAN target for 2022. While in 2000, the percentage of women of reproductive age with anaemia in the Philippines stood at a very high 40 percent, by 2011 it had decreased to an estimated 25 per cent (with severe anaemia at 1.6 per cent).⁸⁰⁵ Based on the estimates from 2011, the WHO classifies the Philippines' level of public health significance in relation to anaemia among women of reproductive age as 'moderate'. The 25 per cent prevalence rate in the Philippines is below the regional average of 32 per cent for Asia (as of 2011).⁸⁰⁶

Anaemia prevalence among pregnant women was estimated to stand at a relatively high 25 per cent, according to NNS data from 2013. This means that the anaemia prevalence rate among pregnant women has halved since 1998, when it stood at more than 50 per cent.⁸⁰⁷ The national Food Fortification Programme, which was strengthened with the passage of the Food Fortification Law in 2000, is likely to have contributed to this decline in anaemia among pregnant women, though causality is difficult to establish.⁸⁰⁸ Results from the 2013 NNS also suggest that teenaged girls (less than 20 years of age) who are pregnant, are significantly more at risk of anaemia than pregnant

⁸⁰⁰ Black et al. 2008. Maternal and child undernutrition: global and regional exposures and health consequences.

⁸⁰¹ See e.g. K4Health. Anaemia Prevalence, Causes, and Consequences. <https://www.k4health.org/toolkits/anemia-prevention/anemia-causes-prevalence-impact>.

⁸⁰² See e.g. K4Health. Anaemia Prevalence, Causes, and Consequences. <https://www.k4health.org/toolkits/anemia-prevention/anemia-causes-prevalence-impact>.

⁸⁰³ WHO. 2014. WHA Global Nutrition Targets 2025: Anaemia Policy Brief. Available at: http://www.who.int/nutrition/topics/globaltargets_anaemia_policybrief.pdf [25.04.17].

⁸⁰⁴ PPAN, Executive Summary, p.8.

⁸⁰⁵ Table A3.4, The Global Prevalence of Anaemia in 2011, World Health Organisation: http://apps.who.int/iris/bitstream/10665/177094/1/9789241564960_eng.pdf [29.06.17].

⁸⁰⁶ Table A2.2. The Global Prevalence of Anaemia in 2011, World Health Organisation: http://apps.who.int/iris/bitstream/10665/177094/1/9789241564960_eng.pdf [29.06.17].

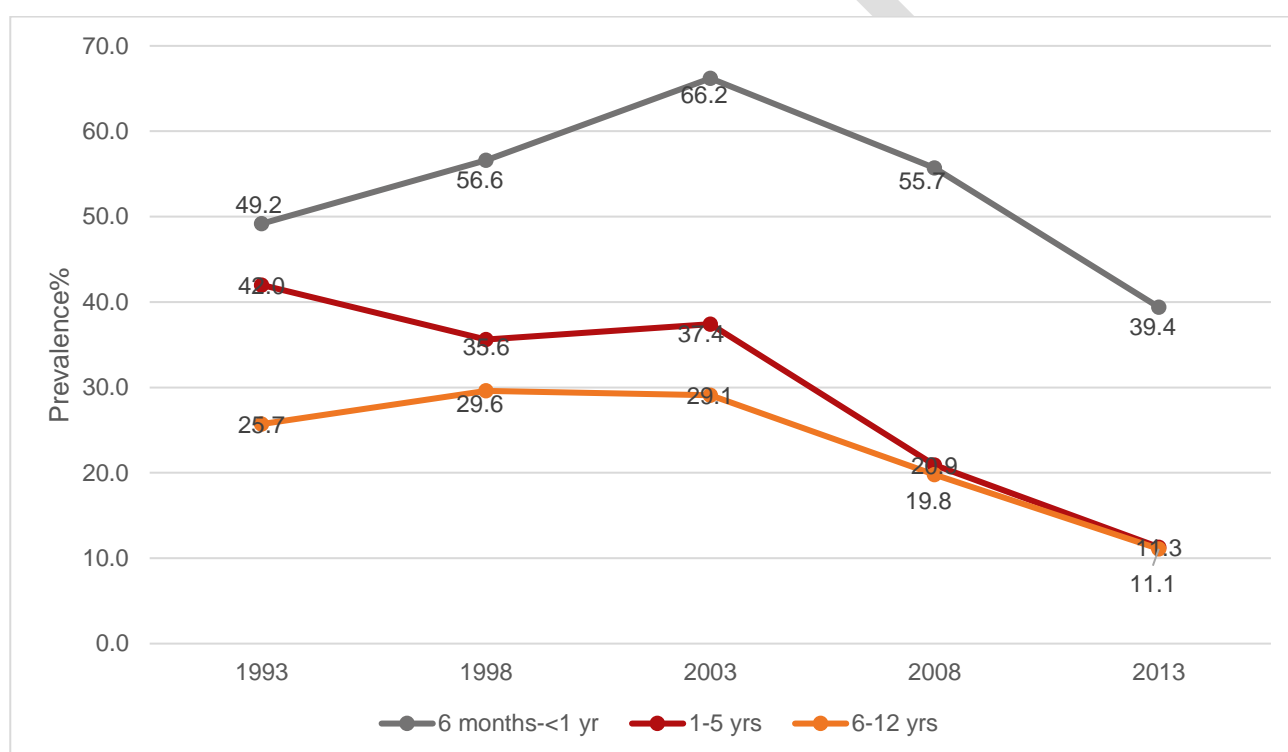
⁸⁰⁷ Results of the Philippines 8th National Nutrition Survey: http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17].

⁸⁰⁸ WHO. Undated. Philippines Nutrition Overview. <http://www.wpro.who.int/nutrition/documents/docs/phl.pdf> [25.04.17].

women who are 20 years and above.⁸⁰⁹ Anaemia prevalence among lactating mothers was estimated to stand at a lower 17 per cent as of 2013 – a significant decrease from 46 per cent in 1998.⁸¹⁰

Childhood anaemia prevalence remains very high in the Philippines. Table 5.5 below shows that, while anaemia prevalence among children aged 6 months to 1 year decreased from a very high 66 per cent in 2003, it still stood at a high 39.4 per cent, as of 2013.⁸¹¹ The data suggest that childhood anaemia primarily affects children in the age group of 6 months to 1 year: Anaemia prevalence among children on other age groups (1–5 and 6–12 years) is estimated to stand at a lower 11 per cent, after having steadily decreased since 2003 (see Table 5.5 below).⁸¹²

Table 5.5 Trends in anaemia prevalence among children, by age group: 1993-2013



Source: National Nutrition Survey 2013

NNS data from 2013 suggests that anaemia prevalence rates in children aged 6 months to 1 year are significantly higher in rural areas of the Philippines (at 49 per cent), compared to urban areas (32 per cent).⁸¹³ Regions with the highest prevalence rate of anaemia in children aged 6 months to 5 years

⁸⁰⁹ As cited in PPAN 2017-2022, p.21.

⁸¹⁰ Results of the Philippines 8th National Nutrition Survey: http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17].

⁸¹¹ Results of the Philippines 8th National Nutrition Survey: http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17].

⁸¹² Results of the Philippines 8th National Nutrition Survey: http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17].

⁸¹³ Results of the Philippines 8th National Nutrition Survey: http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17].

were Cagayan, ARMM, and MIMAPROPA.⁸¹⁴ In this respect it is relevant to note that, according to 2013 NDHS data, ARMM and MIMAPROPA also have some of the highest under-5 child mortality rates in the country (at 43/1000 and 55/1000 respectively),⁸¹⁵ which suggests a strong association between childhood anaemia and child mortality.⁸¹⁶

Children from poorer households are, on average, more at risk of anaemia: While 43 per cent of children (aged 6 months to 1 year) from households in the poorest wealth quintile are affected by anaemia, this figure drops to 31 per cent for children in the same age group from households in the richest wealth quintile.⁸¹⁷

Vitamin A and Iodine deficiency

Globally, Vitamin A deficiency (VAD) is the leading cause of preventable blindness in children and increases the risk of disease and death from severe infections. In pregnant women, VAD causes night blindness and may increase the risk of maternal mortality.⁸¹⁸ Iodine deficiency disorders (IDD), which can start before birth, jeopardizes children's mental health, with potentially fatal consequences. Serious iodine deficiency during pregnancy can result in stillbirth, spontaneous abortion, and congenital abnormalities.⁸¹⁹

The PPAN sets a target of reducing the prevalence of VAD in children aged 6 months to 5 years old to less than 15 per cent by 2022, and the percentage of children 6-12 years old with urinary iodine concentration (<50 mcg/L) to less than 20 per cent by 2022.

According to 2013 NNS data, the Philippines as a whole has already reached the PPAN target for 2022 in relation to IDD, with an estimated 16 per cent of children (aged 6–12) having a urinary iodine concentration of <50 mcg/L.⁸²⁰ However, the aggregate figures hide significant regional differences, with the Mindanao Island group recording a prevalence rate of 25 per cent (5 percentage points above the PPAN target), and the Luzon Island group recording a significantly lower prevalence rate of 12 per cent.⁸²¹ Regions with the highest prevalence rate were found to be Zamboanga Peninsula (41 per cent), CAR (26 per cent), and Davao (24 per cent).⁸²²

In contrast to IDD, the Philippines has not yet met the PPAN target for 2022 in relation to VAD. According to 2013 NNS data, 20.4 per cent of children aged 6 months to 5 years have Vitamin A deficiency.⁸²³ Vitamin A deficiency prevalence in pregnant women is estimated to stand at around 9 per cent, and at 5 per cent among lactating mothers.⁸²⁴ Mandatory fortification of wheat flour and

⁸¹⁴ Results of the Philippines 8th National Nutrition Survey:

http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17]

⁸¹⁵ NDHS 2013, p. 93.

⁸¹⁶ PPAN, p.20.

⁸¹⁷ Results of the Philippines 8th National Nutrition Survey:

http://www.fnri.dost.gov.ph/images/sources/anemia_revised.pdf [25.04.17]

⁸¹⁸ WHO <http://www.who.int/nutrition/topics/vad/en/> [29.06.17].

⁸¹⁹ WHO <http://www.who.int/nutrition/topics/idd/en/> [29.06.17].

⁸²⁰ Results of the Philippines 8th National Nutrition Survey: <http://www.fnri.dost.gov.ph/images/sources/Iodine.pdf> [25.04.17].

⁸²¹ Results of the Philippines 8th National Nutrition Survey: <http://www.fnri.dost.gov.ph/images/sources/Iodine.pdf> [25.04.17].

⁸²² Results of the Philippines 8th National Nutrition Survey: <http://www.fnri.dost.gov.ph/images/sources/Iodine.pdf> [25.04.17].

⁸²³ 2013 NNS data, as cited in the PPAN, p.18.

⁸²⁴ 2013 NNS data, as cited in the PPAN, p.18.

vegetable oil, as well as some voluntary fortification, is believed to have contributed to recent falls in vitamin A deficiency in the Philippines, but additional efforts will be necessary to meet VAD targets.⁸²⁵

5.1.6. Low Birth Weight

Low birth weight is closely associated with foetal and neonatal mortality and morbidity.⁸²⁶ The WHO defines low birth weight as weight at birth of less than 2.5 kilograms.⁸²⁷ According to the 2013 NDHS, 21.4 per cent of children in the Philippines had low birth weight.⁸²⁸ The low birth weight prevalence in the Philippines compares unfavourably to the global average of 16 per cent as of 2015.⁸²⁹

According to NDHS data, a child is more likely to be born underweight if the mother is under 20 years old (25.1 per cent) or aged 35–49 (24.2 per cent), rather than aged 20–34 (20.2 per cent).⁸³⁰ There appears to be no significant difference between rural and urban areas in relation to low birth weight prevalence in the Philippines.⁸³¹ The regions with the highest percentage of children with a low birth weight are Central Visayas (25.5 per cent), MIMAROPA (25.3 per cent) and Caraga (25.1 per cent).⁸³² The lowest low birth weight prevalence was found in Davao (16 per cent).⁸³³

Note, however, that only 80.7 per cent of all births recorded in the 2013 NDHS had a reported birth weight and that reporting rates differed significantly between regions, with 96.1 per cent of all births weighed in NCR, in comparison to only 28 per cent weighed in ARMM. Babies are also more likely to be weighed if they are born to women living in an urban area (90.1 per cent) as opposed to rural areas (72.5 per cent); if the mother is better educated (94 per cent for women who had been to college, compared to 27.6 per cent for those with no education), and if the mother is from a wealthier household (95.6 per cent for those in the highest wealth quintile, compared to only 59.5 per cent for those in the lowest).⁸³⁴

5.1.7. Childhood overweight and obesity

As noted earlier, overweight prevalence in children under 5 years has been increasing in the Philippines since at least the early 1990s, albeit at a relatively low level. While in 1989, overweight prevalence in under-5 children stood at only 1.1 per cent, this rose to 5.1 per cent by the year 2013.⁸³⁵

According to a 2015 report by the Special Rapporteur on the Right to Food, the gradual increase in overweight and obesity levels (also among the adult population) corresponds to a change in nutritional habits, with a move away from high-fibre healthier foods to meat, dairy and canned and

⁸²⁵ https://www.unicef.org/eapro/Vol_2_EAPR_strategic_approach_to_nutrition_programming.pdf p.36

⁸²⁶ NDHS 2013, p.121.

⁸²⁷ WHO <http://apps.who.int/iris/bitstream/10665/43184/1/9280638327.pdf>

⁸²⁸ Table 10.1 p 122 NDHS, 2013.

⁸²⁹ A regional average for East Asia and Pacific is not provided. The global average excludes China. State of the World's Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [29.06.17]

⁸³⁰ NDHS 2013 Table 10.1 p.122.

⁸³¹ NDHS 2013 Table 10.1 p.122.

⁸³² NDHS 2013 Table 10.1 p.122.

⁸³³ NDHS 2013 Table 10.1 p.122.

⁸³⁴ NDHS 2013 Table 10.1 p.122.

⁸³⁵ NNS 2015. Note, however, that since 2013, overweight prevalence decreased again, to 3.9 per cent in 2015.

packaged foods. In addition, urban dwellers are increasingly vulnerable to food price hikes and in such cases, opt for less nutritious foods which are usually cheaper.⁸³⁶

Data from the 2015 NNS suggest that overweight prevalence is only slightly higher among male children under 5 years (4 per cent) than among female children in the same age group (3.8 per cent).⁸³⁷ The NNS data also suggest that children are more likely to be overweight if they live in an urban area (4.9 per cent) rather than in a rural area (3.0 per cent), and if they live in households in the richest wealth quintile (8.9 per cent) rather than the poorest wealth quintile (1.7 per cent).⁸³⁸

Data from the 2011 Philippines Global school-based health survey (GSHS), which was implemented among a nationally representative sample of 5290 school children in Grades 1–4, suggest that only 2.8 per cent of students aged 13–15 years were obese,⁸³⁹ with no statistically significant difference between girls and boys.⁸⁴⁰

5.1.8. Breastfeeding practices

The WHO recommends that infants are exclusively breastfed for the first six months of life to achieve optimal growth, development and health.⁸⁴¹ In addition, the WHO recommends that breastfeeding is initiated within one hour after birth, continued for at least 24 months (with the introduction of complementary foods after 6 months), and that bottle feeding is avoided during early infancy.⁸⁴² The PDP recognises that breastfeeding should be fully promoted and supported.⁸⁴³ Republic Act 10028 or the Expanded Breastfeeding Promotion Act of 2009 which amended Republic Act 7600, the Rooming in and Breast Feeding Act of 1992, provides a legal basis for support to breastfeeding mothers, and practices to facilitate breastfeeding, including ‘rooming-in’, which sees new-born children placed with mothers as soon as possible after delivery in order to facilitate breastfeeding. The DOH has adopted the WHO recommendations on breastfeeding practices in its National Policies on Infant and Young Child Feeding.⁸⁴⁴

According to the most recent UN-validated estimates, only 34 per cent of children in the Philippines are exclusively breastfed for the first six months after birth.⁸⁴⁵ However, the UN-validated estimates for the Philippines are based on outdated NDHS data from 2008 (not the 2013 NDHS or the 2015 NNS), which constitutes a significant shortcoming in relation to data quality. The exclusive breastfeeding rate in the Philippines is still likely, however, to be significantly below the 50 per cent rate envisaged in the WHO nutrition targets for 2025, but already slightly above the regional average of 31 per cent for East Asia and Pacific (as of 2015).⁸⁴⁶ Despite the relatively low exclusive breastfeeding rate, almost all children in the Philippines are breastfed at some stage. According to

⁸³⁶ Report of the Special Rapporteur on the right to food on her mission to Philippines, 29 December 2015, para 41 <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G15/293/32/PDF/G1529332.pdf?OpenElement> .

⁸³⁷ NNS 2015; It is not clear whether this difference is statistically significant.

⁸³⁸ NNS 2015.

⁸³⁹ Obese: >+2SD from median by BMI for age and sex.

⁸⁴⁰ GSHS 2011 Factsheet: http://www.who.int/chp/gshs/2011_GSHS_FS_Philippines.pdf?ua=1 [29.06.17].

⁸⁴¹ WHO http://www.who.int/elena/titles/exclusive_breastfeeding/en/ [13.04.17].

⁸⁴² WHO <http://www.who.int/topics/breastfeeding/en/> [29.06.17].

⁸⁴³ PDP p 152.

⁸⁴⁴ Administrative Order 2005-0014.

⁸⁴⁵ State of the World’s Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [29.06.17].

⁸⁴⁶ State of the World’s Children 2016 data: <http://data.unicef.org/resources/state-worlds-children-2016-statistical-Tables/> [29.06.17].

2013 NDHS data, 94 per cent of children are breastfed at some stage. Only 6 per cent of children are not breastfed at all.⁸⁴⁷

Early initiation of breastfeeding (i.e. the provision of mother’s breast milk to infants within one hour of birth) ensures that infants receive colostrum (‘first milk’), which is rich in protective factors, and recommended by the WHO.⁸⁴⁸ According to 2013 NDHS data only 50 per cent of Filipino infants started breastfeeding within one hour of birth.⁸⁴⁹ However, the vast majority of infants (82 per cent) start breastfeeding within one day of birth.⁸⁵⁰

Infants with mothers residing in an urban area were less likely to be initiated to breastfeeding within one hour of birth (47.2 per cent) compared to those residing in a rural area (52.1 per cent), and were also less likely to have started breastfeeding within one day of birth (79.8 per cent) compared to those residing in a rural area (83.9 per cent).⁸⁵¹ Significant disparities in relation to early breastfeeding initiation are also notable across regions. The percentage of infants put to the breast within one hour after birth ranges from a very low 26 per cent in Central Luzon to 72 per cent in Western Visayas and Central Visayas.⁸⁵² Differences by the child’s sex, type of residence, assistance at delivery and place of delivery appear to be insignificant.⁸⁵³

According to NDHS 2013 data, bottle-feeding is fairly common in the Philippines, with 34.4 per cent of children aged 0–5 months, 50.1 per cent of those aged 6–9 months and 52.5 per cent of those aged 12–23 months being fed using a bottle.⁸⁵⁴

5.1.9. Immediate and underlying causes of malnutrition

The causes of childhood under- and over-nutrition in the Philippines are multifaceted and interlinked. The PPAN notes that malnutrition in the Philippines is caused, on the one hand, by the immediate causes of inadequate dietary intake, physical inactivity and disease; whereas, and on the other hand, underlying causes of malnutrition are identified as sedentary lifestyle, food insecurity, poor caring and breastfeeding practices (described above), inadequate access to water and sanitation (described in Chapter 6 below), and poor access to health services (see Table 5.6 below for a conceptual framework of malnutrition), which is also linked to governance and programming concerns (discussed under 5.2. Key Barriers and Bottlenecks, below).⁸⁵⁵

The immediate, underlying and structural causes of malnutrition, as it links to water, sanitation and hygiene, was mapped out by a group of key stakeholders at the consultation workshop that informed this Situation Analysis. This map is presented in section 5.2, below.

Table 5.6. Conceptual Framework of Malnutrition

⁸⁴⁷ NDHS 2013, p.138.

⁸⁴⁸ WHO. Early initiation of breastfeeding to promote exclusive breastfeeding. http://www.who.int/elena/titles/early_breastfeeding/en/ [31.05.17].

⁸⁴⁹ NDHS 2013, p.138.

⁸⁵⁰ NDHS 2013, p.138.

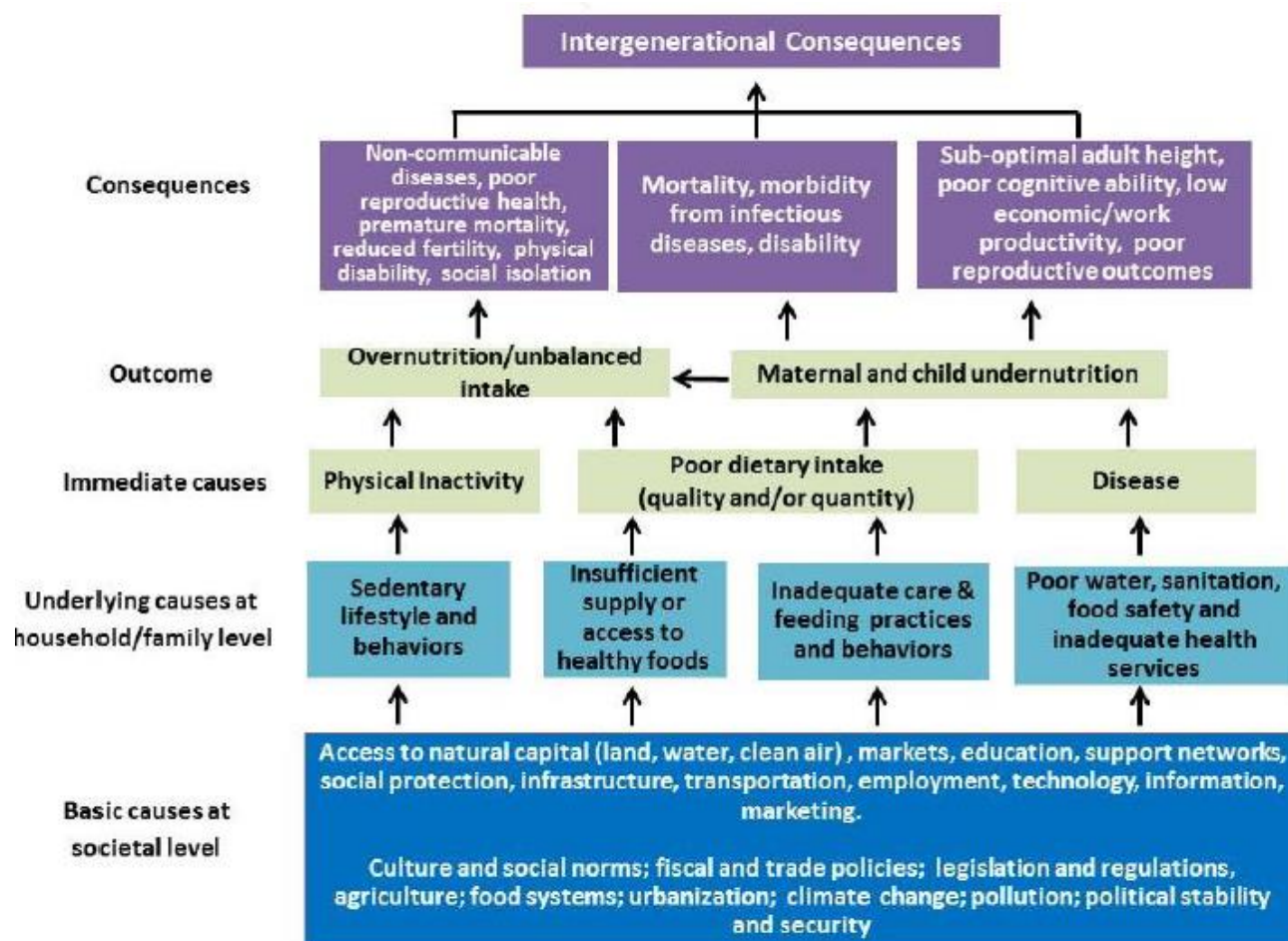
⁸⁵¹ NDHS, 2013, Table 11.1, p.139.

⁸⁵² NDHS, 2013, Table 11.1, p.139.

⁸⁵³ NDHS 2013, p.138.

⁸⁵⁴ NDHS, 2013, Table 11.2, p.140.

⁸⁵⁵ Philippine Plan of Action for Nutrition 2017-2022, p.30.



Source: ASEAN/UNICEF/WHO 2016 Regional Report on Nutrition Security in ASEAN Volume 2

The PPAN 2017-2022 suggests that poor infant and young child feeding in the first two years of life, coupled with bouts of infection can explain the high levels of childhood stunting in the Philippines.⁸⁵⁶ Furthermore, and as mentioned above, it appears that teenage pregnancies are an underlying determinant of malnutrition in the Philippines. In response, the PPAN 2017-2022 highlights the need for nutrition education and infant and young child feeding counselling programmes to reach more teenage pregnant women.⁸⁵⁷

Economic insecurity at the household level also appears to play an important role as an underlying determinant of child malnutrition. As described above, existing data reveals that household wealth is one of the most significant predictors of childhood stunting prevalence in the Philippines, with children from poor households being, on average, more at risk of malnutrition. A key informant from the National Nutrition Council (NNC) also highlighted how economic pressures on households can interact with a lack of knowledge about optimal breastfeeding practices to exacerbate malnutrition among Filipino infants:

What are the causes of stunting?

⁸⁵⁶ Philippine Plan of Action for Nutrition 2017-2022, p.27.

⁸⁵⁷ Philippine Plan of Action for Nutrition 2017-2022, p.22.

Infants are not being breastfed optimally, and are being given food in addition to breastmilk too early or too late. The kind of food given to them is not nutritious. They are given porridge that is not thick enough and does not have vitamins.

Why are infants not fed well?

In higher income groups, it is a lack of knowledge and time. In lower income groups, it is a lack of knowledge and not having the means.”⁸⁵⁸

Households with working mothers, in particular, will need to be supported in order to improve breastfeeding practices in the Philippines:

“Working mothers say they stop breastfeeding as they have to go back to work. That is why it is important to work with companies and workplaces to promote breastfeeding.”⁸⁵⁹

In addition, nutrition-related programming in the Philippines will need to alleviate women’s double-burden, which results from traditional expectations to provide and nurture children, while also being increasingly expected to earn income to support the household:

“There is the idea that taking care of children and nutrition is a mother’s responsibility. Traditionally, women nurture and men have an economic role. Now, more women are working, but they also have to take care of the home and the children, even though they are working. What we want is that more fathers become involved in the care of the child.”⁸⁶⁰

Besides individual- and household-level factors, macro-level factors also play an important role in explaining the problem of malnutrition in the Philippines. For example, a recent report by the Philippines Institute for Development Studies suggests that the Philippines’ pursuit of rice self-sufficiency programmes has led to the unintended consequences of increasing overall food prices, which in turn has contributed to high levels of malnutrition among Filipino children.⁸⁶¹

Given the importance of underlying, structural drivers in relation to malnutrition, a key informant from the NNC interviewed for this study argued that malnutrition in the Philippines should not be viewed just as a health issues, but also as a more fundamental, social issue:⁸⁶²

“When you talk about food intake, you have to talk about physical and economic access to food and this opens up a lot of discussions. Physical access is about farm to market roads, inter-island transport systems, the need for good storage facilities for agricultural products, irrigation, seeds, inputs for the farmers, access to credit and technology, access to information on markets. And you have to talk about whether people are earning enough to be able to buy the food. Do they have enough resources to grown their own food? Then you need to talk about poverty alleviation and economic development.”⁸⁶³

Lastly, it needs to be stressed that climate-related disasters may exacerbate the risk of malnutrition in the Philippines. For example, it was noted in a recent report by the UN Special Rapporteur on the Right to Food, that after Typhoon Haiyan (Yolanda) in 2013, an estimated 2.94 million individuals

⁸⁵⁸ Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila.

⁸⁵⁹ Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila.

⁸⁶⁰ Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila.

⁸⁶¹ Philippine Institute for Development Studies. 2017. Unintended Consequences: The Folly of Uncritical Thinking. Available at: https://pidswebs.pids.gov.ph/CDN/PUBLICATIONS/pidsbk2017-unintended_fnl.pdf [29.06.17].

⁸⁶² Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila.

⁸⁶³ Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila.

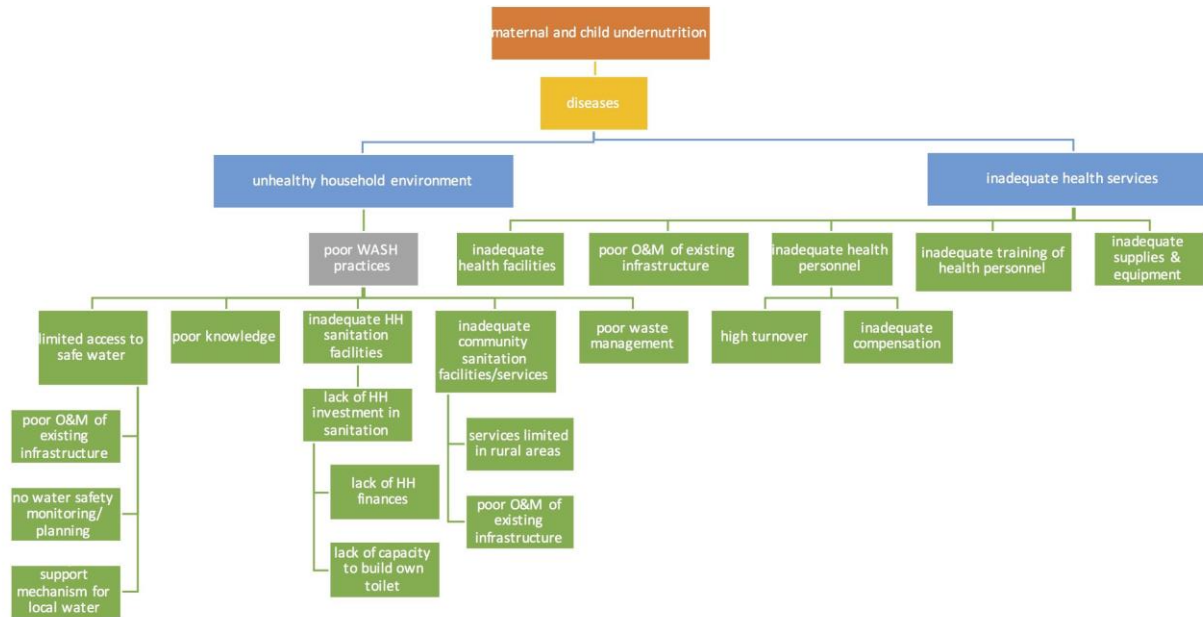
were at risk of undernutrition, including about 320,000 children under the age of 5 and up to 210,000 pregnant and lactating women.⁸⁶⁴

5.2. Key Barriers and Bottlenecks in Nutrition

The key barriers and bottlenecks in the relation to nutrition outcomes were mapped out by a group of key stakeholders at the consultation workshop that informed this Situation Analysis. The group focused on nutrition and WASH as a combined analysis. Causality was identified using a methodology that involved selecting a key deprivation within the field of nutrition/WASH, and identifying a causality chain of immediate, underlying and structural causes. The map is presented below (see Table 5.7). The existing literature and key informant interviews is also used to elaborate these key barriers and bottlenecks in relation to nutrition in Philippines.

⁸⁶⁴ Report of the Special Rapporteur on the right to food on her mission to Philippines, 29 December 2015, para 49

Table 5.7. Nutrition / WASH causality map



STRUCTURAL CAUSES	
Unhealthy HH environment Governance <ul style="list-style-type: none"> • Lack of political will by LCEs/officials • Poor enforcement and monitoring of policies • Lack of planning for response • Fragmented accountability for H/W/N due to gaps and contradicting policies • Corruption at various levels of government Disaster <ul style="list-style-type: none"> • Infrastructure does not consider DRR adequately • Impact of disasters on water supplies • Drought-prone barangays/flood prone areas/coastal areas Data gaps/research/communication <ul style="list-style-type: none"> • Lack of research studies focusing on essential indicators/programs • Limited technological capacity to develop plans and sustain projects (including feasibility studies, tech designs) to access WASH and nutrition funding streams • Lack of C4D/BCC monitoring and evaluation Data Gaps <ul style="list-style-type: none"> • Water quality • Sanitation (safe emptying, treatment, disposal) • No data on WASH in healthcare facilities • ZOD communities, sewerage and septage coverage • Accessibility/use of W/N services by PLWD • WASH practices and services in informal settlements 	Inadequate health services Governance <ul style="list-style-type: none"> • Planning and targeting issues (service delivery network) • Program gap in responsive care and early stimulation • Vertical programs and guidance → missing opportunities for integration - Missing chances for convergence and more strategic planning • Devolved health services delivery - Budget cap/guidelines on how to use for programs in W/N - Insufficient policies/programs supportive of WASH/nutrition goals - Limited financing or investments on H/W/N • Non-compliance to standards on health service delivery - Standards not known Inclusive process <ul style="list-style-type: none"> • No specific program approach to make services accessible to PWDs • Program gap in developing life skills and child/youth participation • No child/youth participation in planning implementation of M&E, health, nutrition/WASH

5.2.1. Enabling environment

Governance

The existing literature on governance in the Philippines identifies a number of concerns in relation to administration, organization and provision within all outcome areas, including the nutrition sector. These concerns include corruption, misallocation of resources, political instability, and uncoordinated government agencies, as well as challenges faced as a result of decentralisation, all of which are considered to have a negative impact upon progress, and, ultimately, outcomes in sectors including health and nutrition.⁸⁶⁵ As suggested in the causality map above, nutrition outcomes are inextricably linked to health sector governance concerns.

As set out above in relation to health sector barriers and bottlenecks, devolution (or decentralisation), acts as a key structural bottleneck within the health system, and it is likely that this challenge is also experienced within the nutrition sector. In relation to governance challenges in the nutrition sector, the PDP 2016-2020 notes that limited progress in improving nutritional outcomes in the Philippines has partly been due to the weak multisectoral and multilevel approach to address malnutrition.⁸⁶⁶ Similarly, the PPAN 2017-2022 suggests that weak response of local governments to national nutrition programming and lack of robust LGU mobilisation strategies remain key unresolved governance bottlenecks in the sector.⁸⁶⁷

Data management and availability

The causality map analysis identifies data gaps in relation to ‘essential indicators and programmes’ for nutrition and WASH, a concern that it is also noted within the PDP, which notes that *data gaps constrain decision-making for nutrition and health*.⁸⁶⁸ The causality analysis also mentions, in particular, a data gap in relation to indigent persons and the urban poor.

Financing

Inadequate financing is a concern in relation to several sectors or outcome areas in Philippines, and in relation to nutrition. Inadequate funding in health, which has been noted to be a problem by the WHO, and which is discussed in the Health chapter of this report, is a barrier to successful prevention and treatment of nutritional concerns. As noted earlier, the World Bank has suggested that an increasing burden of non-communicable diseases, many of which will be linked to nutrition can be expected to put additional pressure on the Philippines’ health budget.⁸⁶⁹ The PDP also makes note of concerns over funding for nutrition services, explaining that that health and nutrition funding is inadequate, that, as allocation is dependent upon priorities held by local chief executives, it is variable across LGUs.⁸⁷⁰

⁸⁶⁵ See e.g. Mendoza, et al. 2017. Governance and Institutions in the Philippines. ASOG Working Paper 17-002. Available at SSRN: <https://ssrn.com/abstract=2873942>.

⁸⁶⁶ PDP, p.138.

⁸⁶⁷ PPAN, p.32.

⁸⁶⁸ PDP, Chapter 10, p.141.

⁸⁶⁹ World Bank. 2011. Transforming the Philippine Health Sector: Challenges and Future Directions. P.101.

⁸⁷⁰ Philippine National Development Plan 2016-2020, p.140.

5.2.2. Supply

It is important to recognise that most nutrition-related interventions in Philippines are delivered through the health sector, and the supply-side analysis set out in the Health section of this Situation Analysis is therefore crucial to understanding nutrition challenges.⁸⁷¹

There are a number of important gaps in relation to the supply side of the nutrition sector. The PPAN notes that it has been a challenge to find adequate staff to fill positions in the Basic Needs Services, and as District /City Nutrition Program Coordinators, local Nutrition Action Officers, members of local Nutrition Committees, and Regional Nutrition Program Coordinators.⁸⁷² There is also a lack of equipment in relation to supply of nutritional resources.

A further factor that may affect supply-side implementation of nutrition services is the perceived focus upon health-side interventions, particularly in relation to the 'direct' causes of maternal and neonatal deaths, rather than on nutritional causes of poor health outcomes, morbidity and death.⁸⁷³

5.2.3. Demand

Financial costs, access and food security

The financial cost of accessing food is as a major nutrition-related demand-side barrier in the Philippines. According to the PPAN 2017-2022, "while recent poverty and hunger reports in 2016 show a decline in the incidence of poverty and hunger, food security is precarious, particularly among the poor who constitute a significant proportion of Filipino households."⁸⁷⁴ The PPAN assessed different modes of analysis of poverty and food security in Philippines and came to the conclusion that:

whichever set of food deprivation estimates produced using different methodologies, inadequate access to food is a serious problem for a substantial number of Filipino families. The estimated number of families that remained income poor is 4.7 million, of which 43.6 per cent or a little over 2.0 million are food-poor in 2015.⁸⁷⁵

This suggests the food insecurity faced by a large number of families in the Philippines is a significant barrier to adequate nutrition, with such food insecurity exacerbated by financial burdens and access constraints. It is also important to note that access to food is affected during emergencies, reducing food security, particularly among the most vulnerable members of the community.⁸⁷⁶

Further, as set out by the Special Rapporteur on the right to food in the report on her mission to the Philippines:

Food security becomes more critical an issue as the rate of urban poverty rises. In fact, evidence indicates that food security and nutrition are worse among the urban poor than the rural poor.... The urban poor certainly face a daily struggle to feed their families. Without a

⁸⁷¹ DOH Strategic Framework 2014-2015, p. 11.

⁸⁷² PPAN, p. 32.

⁸⁷³ DOH Strategic Framework 2014-2015, p. 2.

⁸⁷⁴ PPAN, p. 14

⁸⁷⁵ PPAN, p. 14

⁸⁷⁶ DOH Strategic Framework 2014-2015, p. 22.

stable and sufficient income, these households struggle to provide their children with nutritious and adequate food, often resorting to processed and junk food as an alternative.⁸⁷⁷

Social and religious behaviours

Social behaviours, including behaviours influenced by religious beliefs, can act as demand-side barriers or bottlenecks to adequate nutrition. During the data collection phase for this SitAn, for example, a key informant from the NNC highlighted that, while there have been efforts to mobilise wet nurses in conflict-affected ARMM, this was not accepted by the local Muslim communities, as there appears to be a belief that a wet nurse becomes related to the baby.⁸⁷⁸ Where breastfeeding is limited this can lead to stunting and, as set out above, can have implications in relation to child development.

5.2.4. Quality

Unfortunately, there is a data gap in relation to quality of nutrition-focused services in Philippines and it is therefore not possible comment in relation to quality of nutrition services.

⁸⁷⁷ Report of the Special Rapporteur on the right to food on her mission to Philippines, 2015, para. 59.

⁸⁷⁸ Key informant interview with representative from the National Nutrition Council, 14 June 2017, Manila

6. Water, Sanitation and Hygiene (WASH)

Ensuring that all children have access to safe and affordable drinking water, as well as adequate sanitation and hygiene (WASH), is crucial for achieving a whole range of development goals including those related to health and nutrition, education and child and social protection. For instance, evidence suggests that poor water, sanitation and hygiene access is linked to growth stunting,⁸⁷⁹ while there is growing evidence that clean water and sanitation facilities (at home and in schools) can improve school attendance and even learning outcomes for boys and girls.⁸⁸⁰ The achievement of sustainable access to WASH for all also makes a critical contribution to poverty reduction, gender equality, sustainable and resilient cities and communities, and environmental protection. This chapter assesses the situation in the Philippines regarding children’s access to improved water sources and sanitation facilities, as well as children’s hygiene practices, using SDG 6 (ensure availability and sustainable management of water and sanitation for all) and the rights to water and sanitation as benchmarks.

Key WASH-related SDGs

SDGs	Targets	Indicators
1.4	By 2030 ensure all men and women, in particular the poor and vulnerable, have equal rights to economic resources as well as access to basic services	Proportion of population living in households with access to basic services (including basic drinking water, sanitation and hygiene)
6.1	By 2030, achieve universal and equitable access to safe and affordable drinking water for all	Proportion of population using safely managed drinking water services
6.2	By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	Proportion of population using safely managed sanitation services Proportion of population with a basic hand-washing facility with soap and water available on premises Proportion of population practising open defecation

Key CRC Articles

Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child’s or his or her parent’s or guardian’s race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status

Article 6 (2) States parties shall ensure to the maximum extent possible the survival and development of the child

⁸⁷⁹ UNICEF, Looking back, moving forward. A snapshot of UNICEF’s work for Pacific Island children 2015-16, 2006.

⁸⁸⁰ UNICEF, Looking back, moving forward. A snapshot of UNICEF’s work for Pacific Island children 2015-16, 2006.

Article 17: States shall ensure that the child has access to information aimed at the promotion of his or her social, spiritual and moral well-being and physical and mental health

Article 24 (1) Every child has the right to the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health; (2) In particular, States must: (a) diminish infant and child mortality; (c) Combat disease and malnutrition, including through the provision of adequate nutritious foods and clean drinking-water, taking into consideration the dangers of environmental pollution; (e) Ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents.

Article 27: States recognize the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development

6.1. WASH in the Philippines: an overview

6.1.1 Infrastructure and institutions

In 2010, the public water supply in the Philippines was provided by around 5,400 water service providers.⁸⁸¹ While in urban communities, water districts, LGUs and private operators run urban water systems, in rural communities, these are run by community based organizations including Barangay Water and Sanitation Associations, Regional Water and Sanitation Associations and co-operatives.⁸⁸²

There are three levels of water supply service in the Philippines. Barangay Water and Sanitation Associations run mostly Level I facilities, which are mainly protected wells with hand pumps that serve around 15 households.⁸⁸³ Level II facilities, which are run by Regional Water and Sanitation Association, are mostly piped systems with communal or public faucets that serve around 4–6 households.⁸⁸⁴ Level III facilities are waterworks systems with connections for individual households, and are often run by private organizations such as the Metropolitan Waterworks and Sewerage System.⁸⁸⁵ Those without access to any of these three levels of facility are forced to use alternative sources of water including private wells or fetching water from a river or spring system. There are also some informal providers of water supply services such as small-scale independent providers, entrepreneurs with water tankers or neighbourhood water vendors.⁸⁸⁶

In the Philippines, there are very few sewerage systems, with most of the country's sewage being discharged into open water bodies, which contributes heavily to the pollution of water sources.⁸⁸⁷ In

⁸⁸¹ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xv.

⁸⁸² National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xv.

⁸⁸³ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xv.

⁸⁸⁴ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xvi.

⁸⁸⁵ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xvi.

⁸⁸⁶ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p xv.

⁸⁸⁷ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 27.

2015, only 2.4 per cent of the population had a sewer connection.⁸⁸⁸ Many of the drainage systems in town centres are open earth canals with few concrete lined canals, all of which discharge into rivers and creeks that traverse the towns.⁸⁸⁹

6.1.2 Legal and policy framework

The Philippines has recognised, implicitly, the human right to safe drinking water and sanitation on several occasions at the international level. A representative from the Philippines was present at the adoption of Human Rights Council resolutions 21/2 of September 2012, 24/18 of September 2013 and 27/7 of September 2014, as well as General Assembly resolution 68/157 of December 2013, all of which were adopted without a vote. These resolutions affirm the human right to safe drinking water and sanitation under the right to an adequate standard of living, which is enshrined in the CRC, ICESCR and CRPD.⁸⁹⁰

On a national level, the Philippines Constitution states that water belongs to the State, and that the disposition, exploitation, development or utilisation shall be limited to citizens of the Philippines.⁸⁹¹ There is a large amount of legislation relating to WASH in the Philippines, the key pieces of which are set out in Figure 6.1 below.

Table 6.1: Key WASH-related Legislation and Policy in the Philippines

Magna Carta of Women (RA 9710) (2009)	Defines ‘marginalised’ people as those who have little or no access to land and other resources such as health care, education and water and sanitation. Provides equal rights to women to access natural resources, including water and gives responsibility to the State to develop housing programs for women with potable water.
Clean Water Act (RA 9275) (2004)	Provides for management of water quality and pollution.
Social Reform and Policy Alleviation Act (RA 8425) (1997)	States that the Government should adopt an area-based, sectoral and focused intervention to poverty alleviation to meet the minimum basic needs of health, water and environmental sanitation.
Indigenous Peoples Rights Act (RA 8371) (1997)	Includes the rights to basic services, including sanitation for indigenous peoples.
Local Government Code (RA 7160) (1991)	Requires that LGUs shall be responsible for providing basic services and facilities, including water and sanitation, including providing basic hygiene services.
Rainwater Catchment Law, (RA 6716) (1989)	Requires DPWH to construct water wells, springs and rainwater collectors in all barangays to ensure that each

⁸⁸⁸ Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, WHO/UNICEF, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁸⁸⁹ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 27.

⁸⁹⁰ Amnesty International and Wash United, recognition of the human rights to water and sanitation by UN Member States at the international level, 2015.

⁸⁹¹ Philippines Constitution Article XII Section 2.

	barangay has at least one potable water source. It also defines the community's role in operation and maintenance of such facilities and sets out that the DPWH should provide training for communities on water system operation and maintenance.
National Policy on Water Safety Plan (2014), DOH Administrative Order No. 2014-0027	Sets out a national policy to require all drinking water service providers to develop and implement water safety plans.
Philippine National Standards for Drinking Water (2007), DOH Administrative Order No. 2007-0021	Sets quality standards for drinking water supply.
Building Code, PD 1096 of 1977	Requires the inclusion of adequate and potable water supply, plumbing, waste water treatment and storm water drainage in buildings for human habitation.
Code on Sanitation of the Philippines, PD 856 of 1975	Prescribes standards and procedures on water, hygiene and sanitation including setting standards for drinking water, and hygiene and sanitation requirements for locations such as restaurants, schools etc.
National Sustainable Sanitation Policy, DoH AO 2010-0021	States that sustainable sanitation is a national policy and program priority, anchored on the principle that sustainable sanitation is a public good and a fundamental human right. Outlines strategies, roles and responsibilities for achieving sustainable sanitation goals.
WASH in Schools Policy and Guidelines, DepED AO 10 s.2016	Prescribes standards, roles and responsibilities for ensuring the promotion of correct sanitation and hygiene practices among school children and a clean environment in and around schools to keep learners safe and healthy.
Accreditation of Day Care Centres and Day Care Workers, DSWD Administrative Order No. 15 s. 2011	Provides standards on the availability of safe water supply, functional toilets and hand washing sinks and prescribes hand-washing practice in day care centres that cater to children aged 3–4 years old.

Lead responsibility for WASH in the Philippines is held by the Department of Health, but seven other departments are involved in the WASH sector, including Department of the Interior and Local Government , Department of Environment and Natural Resources (DENR) and the Department of Education. Co-ordination between stakeholders, including NGOs, is done through the Inter-agency

Committee on Environmental Health (IACEH) and the Philippines Development Forum Working Group on WASH.⁸⁹² Both water and sanitation are devolved to LGUs.⁸⁹³

The IACEH was established under Executive Order No. 489, 1991. It is chaired by the Secretary of Health, with the vice chair held by the Secretary of Environment and Natural Resources. The members of the Committee are the Secretaries of: Public Works and Highways; Interior and Local Government; Agriculture; Trade and Industry; Transportation and Communications; Science and Technology; and Labor and Employment, as well as the Director Generals of the National Economic and Development Authority and the Philippine Information Agency.⁸⁹⁴ The Committee is responsible for formulating policies, promulgating guidelines and developing programmes for environmental health protection; coordinating environmental health programmes initiated by the Government and private agencies to achieve environment protection for health promotion; raise awareness of environment health control measures through information and education campaigns; coordinating, assisting and supporting the conduct of research and activities on environmental maintenance and protection; and any other necessary and incidental tasks.⁸⁹⁵ The Committee has five sectoral task forces, one each for solid waste; water air, toxic and hazardous wastes; occupational health; food safety; and sanitation.⁸⁹⁶ However, according to government and sector experts who participated in the validation workshop for this report, there are a number of key concerns over the efficacy of the IACEH, which, discussions suggested, focuses on environmental health and does not engage in WASH coordination.⁸⁹⁷ It is also reported that key agencies in the delivery of WASH sector services are not members of IACEH, including, for example, DepEd, DSWD, The Local Water Utilities Administration (LWUA) and the National Water Resources Board (NWRB) and that it does not include external partners, which is seen as a shortcoming.⁸⁹⁸ According to the same group, the Philippines Development Forum Working Group has minimal functionality, as it only meets once per year.⁸⁹⁹

The NWRB and the LWUA are the primary regulatory institutions in the water supply services sector, although LGUs also regulate water service provision in their respective areas.⁹⁰⁰ However there is also a range of other regulatory units which regulate water utilities by contract. It is clearly recognised in the Philippines Water Supply Sector Roadmap that such a multiplicity of regulation can lead to fragmentation.⁹⁰¹

LGUs also have a sanitation related mandate. At provincial, city and municipal level, LGUs are responsible for preparation of water supply, sewerage and sanitation sector plans, monitoring local water and sanitation coverage and providing support to water service providers including Rural Waterworks and Sanitation Associations and Barangay Water and Sanitation Associations, co-operatives and water user's groups.⁹⁰² Barangay-level LGUs can initiate local ordinances and coordinate closely with the municipal government in addressing the needs of their constituents,

⁸⁹² GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

⁸⁹³ Section 17, Local Government Code of 1991, Republic Act no. 7160.

⁸⁹⁴ Executive Order No. 489, s. 1991, section 1.

⁸⁹⁵ Executive Order No. 489, s. 1991, section 2.

⁸⁹⁶ Department of Health, Philippines National Environmental Health Plan 2010-2013, July 7, 2010, p 6.

⁸⁹⁷ Validation workshop with Government and Key Experts, Manila, August 2017.

⁸⁹⁸ Validation workshop with Government and Key Experts, Manila, August 2017.

⁸⁹⁹ Validation workshop with Government and Key Experts, Manila, August 2017.

⁹⁰⁰ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p 9.

⁹⁰¹ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p 9.

⁹⁰² Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 28.

meaning that they can, to some extent, influence policy.⁹⁰³ However, the National Government continues to play a major role in the sector in terms of policy formulation, facilitating investments in the sector and building capacities of LGUs.⁹⁰⁴

Seventy-nine provinces had developed provincial water supply, sewerage and sanitation sector plans in 2005.⁹⁰⁵ These plans were developed with the intention that they would guide LGUs in prioritising areas for development and accessing funds. However, the plans have reportedly not been mainstreamed into the LGU development plans, and, as they have not been updated since 2005, are now very out of date.⁹⁰⁶

NEDA has the responsibility for coordinating the preparation and monitoring of LGU's investment plans, including in relation to sanitation, but it lacks the manpower, budget and resources to address growing sanitation concerns.⁹⁰⁷ The agency has created a sub-committee on Water Resources to ensure the sector plans, as set out in the various roadmaps, are followed through. However, there are concerns that the sub-committee will focus more on the water supply agenda as opposed to sanitation targets.⁹⁰⁸

WASH Committees have been created at provincial, municipal and barangay levels to provide oversight for WASH services in pilot areas supported by development partners.⁹⁰⁹ At all levels, WASH Committees comprise staff drawn from across different government departments, while, at barangay level, Committees also include community members.⁹¹⁰ WASH Committees develop annual WASH plans based on needs in their area and are responsible for providing training and mobilising communities to support progress to WASH targets, including, for example, becoming open defecation-free.⁹¹¹

6.2. Access to safely managed water services

According to SDG 6.1, the Philippines should aim to achieve universal and equitable access to safe and affordable drinking water by 2030. Progress towards, or achievement of this target is measured by the proportion of the population that has access to 'safely managed' drinking water. According to the WHO and UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP), in order to meet the criteria for a safely managed drinking water service an improved water source⁹¹² should fulfil three criteria:

- 1) It should be accessible on premises (in the home);
- 2) It should be available when needed;

⁹⁰³ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 28.

⁹⁰⁴ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 28.

⁹⁰⁵ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 29.

⁹⁰⁶ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 29.

⁹⁰⁷ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 30.

⁹⁰⁸ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 30.

⁹⁰⁹ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 31.

⁹¹⁰ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 31.

⁹¹¹ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 31.

⁹¹² Improved water sources include: piped water, boreholes or tubewells, protected dug wells, protected springs, and packaged or delivered water. Progress on drinking water, sanitation and hygiene. World Health Organization (WHO) and the United Nations Children's Fund (UNICEF), 2017 update and SDG baselines. 2017, p 8.

3) It should be free from contamination.⁹¹³

If the improved water source fails to meet *one* of these criteria, but the time it takes to conduct a round trip to collect water is 30 minutes or less, the water source will be classified as a ‘*basic drinking water service*’, which would meet the requirements of SDG 1.4.⁹¹⁴ If, however, the time taken to collect water from an improved source is greater than 30 minutes, the source is categorized as a *limited service*.⁹¹⁵ According to the JMP Report, the immediate priority in many countries will be to ensure universal access to at least basic level services.⁹¹⁶

Table 6.2. JMP service ladder for improved water sources⁹¹⁷

SERVICE LEVEL	DEFINITION
SAFELY MANAGED	Drinking water from an improved water source that is located on premises, available when needed and free from faecal and priority chemical contamination
BASIC	Drinking water from an improved source, provided collection time is not more than 30 minutes for a round trip, including queuing
LIMITED	Drinking water from an improved source for which collection time exceeds 30 minutes for a round trip, including queuing
UNIMPROVED	Drinking water from an unprotected dug well or unprotected spring
SURFACE WATER	Drinking water directly from a river, dam, lake, pond, stream, canal or irrigation canal

Note: Improved sources include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water.

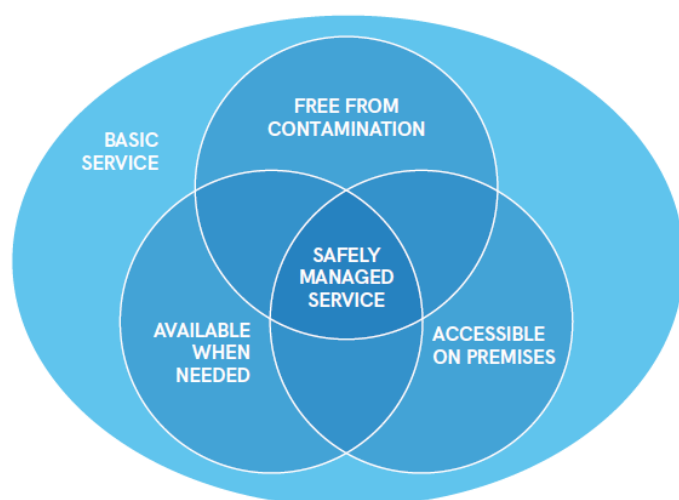
⁹¹³ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 8.

⁹¹⁴ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 8. Under target 1.4 of the SDGs, all men and women should have equal rights of access to basic services, including basic drinking water.

⁹¹⁵ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 8.

⁹¹⁶ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 10.

⁹¹⁷ Although JMP definition includes packaged or delivered water under ‘improved water source’, it is important to note that the Philippines Government classifies this as an ‘unimproved water source’.



Source: JMP Report 2017

The PDP 2017-2022 sets a goal of increasing the percentage of households with access to ‘safe water’⁹¹⁸ from 85.5 per cent in 2014 to 95.16 per cent in 2022.⁹¹⁹ The Philippines Water Supply Sector Roadmap 2010 sets out the goal of having access to safe, adequate and sustainable water supply for all by 2025.⁹²⁰ However, at the time of writing, a new Water Supply Sector Roadmap was being developed.

6.2.1. Safely managed water in Philippines

According to JMP estimates published in 2017, 90.5 per cent of the population of Philippines had access to a basic drinking water service, while a further 2.83 per cent had access to a limited drinking water service. This left only 6.66 per cent using unimproved or surface water supplies.⁹²¹

As set out above, there are three necessary elements to a safely managed water system (accessibility on premises, availability when needed and freedom from contamination). Despite the high levels of access to a basic water service, it is not possible to identify the proportion of the population in the Philippines with access to safely managed drinking water from the 2017 JMP data because there is a data gap in relation to the third of these criteria. Therefore, while data from 2015 show that 60.8 per cent of the population were using an improved water source in the home (on premises), and that 82.9 per cent had access to improved water when needed, the lack of information on whether improved water sources are free from contamination means an assessment of progress towards a

⁹¹⁸ ‘Safe water’ supply refers to water accessed through a pipe system into dwellings, yards or plots; through public tap; and through protected wells, as per Philippine Statistics Authority, Annual Poverty Indicator Survey, 2014.

⁹¹⁹ National Economic and Development Agency, Philippines Development Plan 2017-2022, p 297.

⁹²⁰ National Economic and Development Agency, Philippine Water Supply Sector Roadmap, 2010, p 36, http://www.lwua.gov.ph/downloads_14/Philippine%20Water%20Supply%20Sector%20Roadmap%202nd%20Edition.pdf.

⁹²¹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

safely managed water source is not possible.⁹²² These figures in relation to use of improved water in the home and with availability when needed suggest that, despite the high proportion of the population with access to improved water in some form, it may be difficult for the Philippines to achieve the SDG of universal access to safely managed water sources by 2030.⁹²³

According to the 2017 JMP Report, figures for the Philippines stand only just below the regional⁹²⁴ average for use of improved water sources (93.3 per cent compared to 95 per cent regionally).⁹²⁵ However, the Philippines is slightly further behind in relation to use of basic drinking water (90.5 per cent in the Philippines compared to 95 per cent regionally).⁹²⁶

Figure 6.3, which uses data from the 2017 JMP Report shows that there has been a steady improvement in the use of improved water sources since 2000 in the Philippines. There has also been a reduction in the proportion of the population using surface water. Interestingly, there has been a small decrease in the proportion of the population using a piped water source, but an increase in the proportion of the population using an improved water source which is accessible on the premises. This may reflect the challenges in building piped infrastructure to accommodate the growing population, but an increase in provision of improved water through other means, such as water delivery service, for example.

Table 6.3. Drinking Water Estimates in the Philippines, 2000-2015

Drinking Water										
Estimated coverage 2015, published 2017										
Year	Improved water source	Improved within 30 minutes (Basic)	Improved more than 30 minutes (Limited)	Unimproved water	Surface water	Population using an improved source which is:				
						Piped	Non Piped	Accessible on premises	Available when needed	Free from contamination
2000	88.7	86.1	2.6	6.0	5.3	46.8	41.9	39.3	78.8	n/a
2005	90.2	87.5	2.7	5.9	3.8	45.6	44.6	45.3	80.2	n/a
2010	91.8	89.0	2.8	6	2.3	44.5	47.3	52.8	81.5	n/a
2015	93.3	90.5	2.8	5.9	0.7	43.5	49.9	60.8	82.9	n/a

Source: JMP Estimates 2017

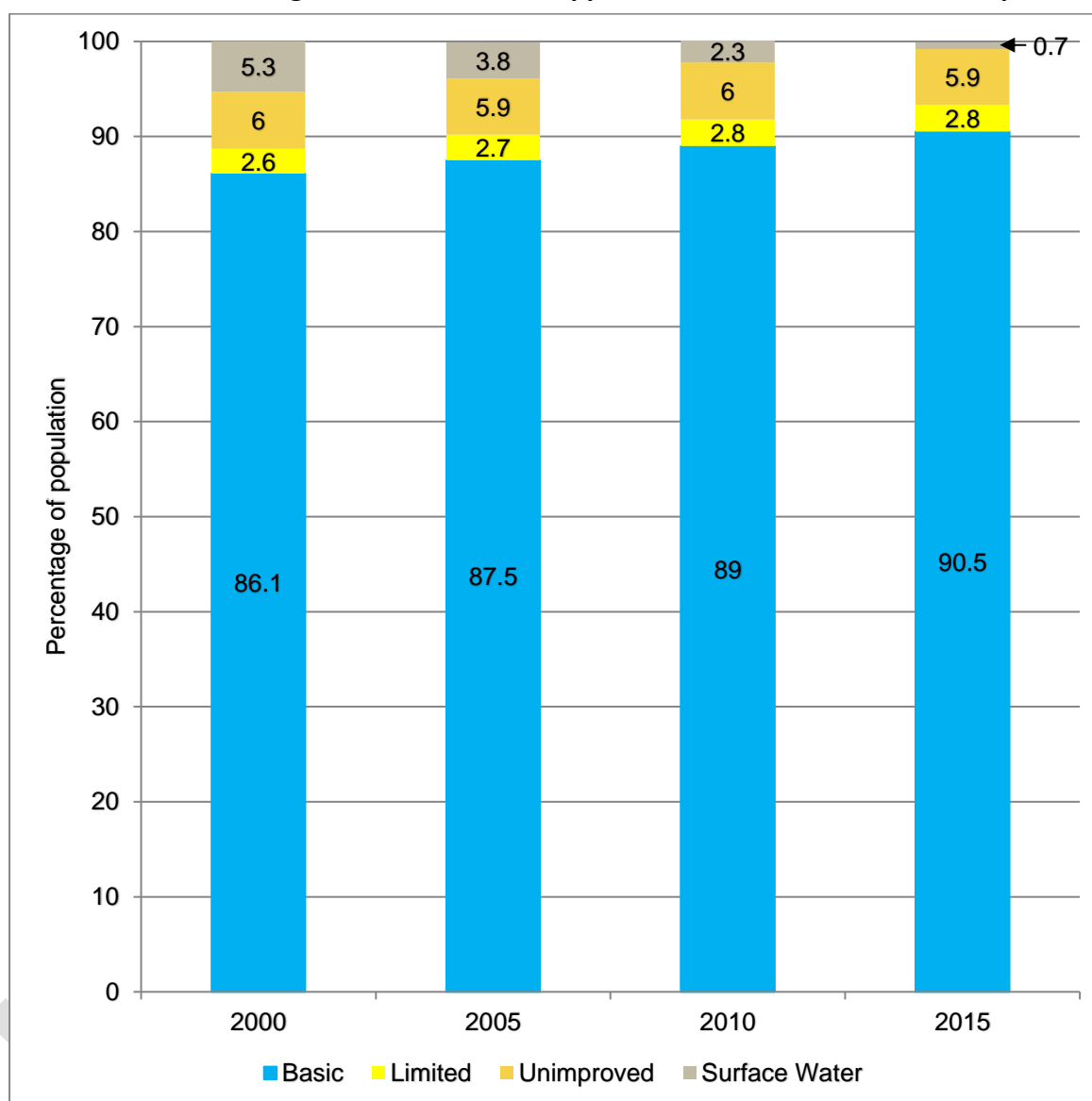
⁹²² WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹²³ For reference, in 2015, the Philippines was considered to have met the MDG target for access to safe water sources because 41 per cent of the population in 2015 had gained access to safe water sources since 1990. UNICEF and WHO, 25 years Progress on Sanitation and Drinking Water, 2015 Update and MDG Assessment, 2015, p 69.

⁹²⁴ Eastern Asia and the South-East Asia Region.

⁹²⁵ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 104.

⁹²⁶ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 104.

Table 6.4. Drinking water service in Philippines, 2000 to 2015 estimates as published in 2017

Source: JMP Estimates 2017

6.2.2. Geographical disparities

There is a disparity between availability of improved water sources in urban and rural areas, with 98.4 per cent of the urban population using improved water sources in 2015, compared to 89.3 per cent of the rural population.⁹²⁷ Some of this may be due to the increase in the proportion of the urban population using packaged (i.e. bottled or otherwise contained) water in the Philippines, which rose from around 20 per cent in 2005 to over 40 per cent in 2010.⁹²⁸

⁹²⁷ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹²⁸ UNICEF and WHO, Safely managed drinking water – thematic report on drinking water 2017, p 37

There is also a large difference between the use of water piped onto the premises in rural and urban areas. According to the 2017 JMP Report, it was estimated that 58.8 per cent of the urban population had access to water piped into their premises in 2015, compared to only 31.2 per cent of the rural population.⁹²⁹ Interestingly, as seen in Figure 6.4, below, the proportion of the urban population with access to piped water decreased between 2000 and 2015.⁹³⁰ As mentioned above, this may be due to the challenges in developing piped infrastructure sufficiently quickly to serve the needs of a rapidly urbanising population.

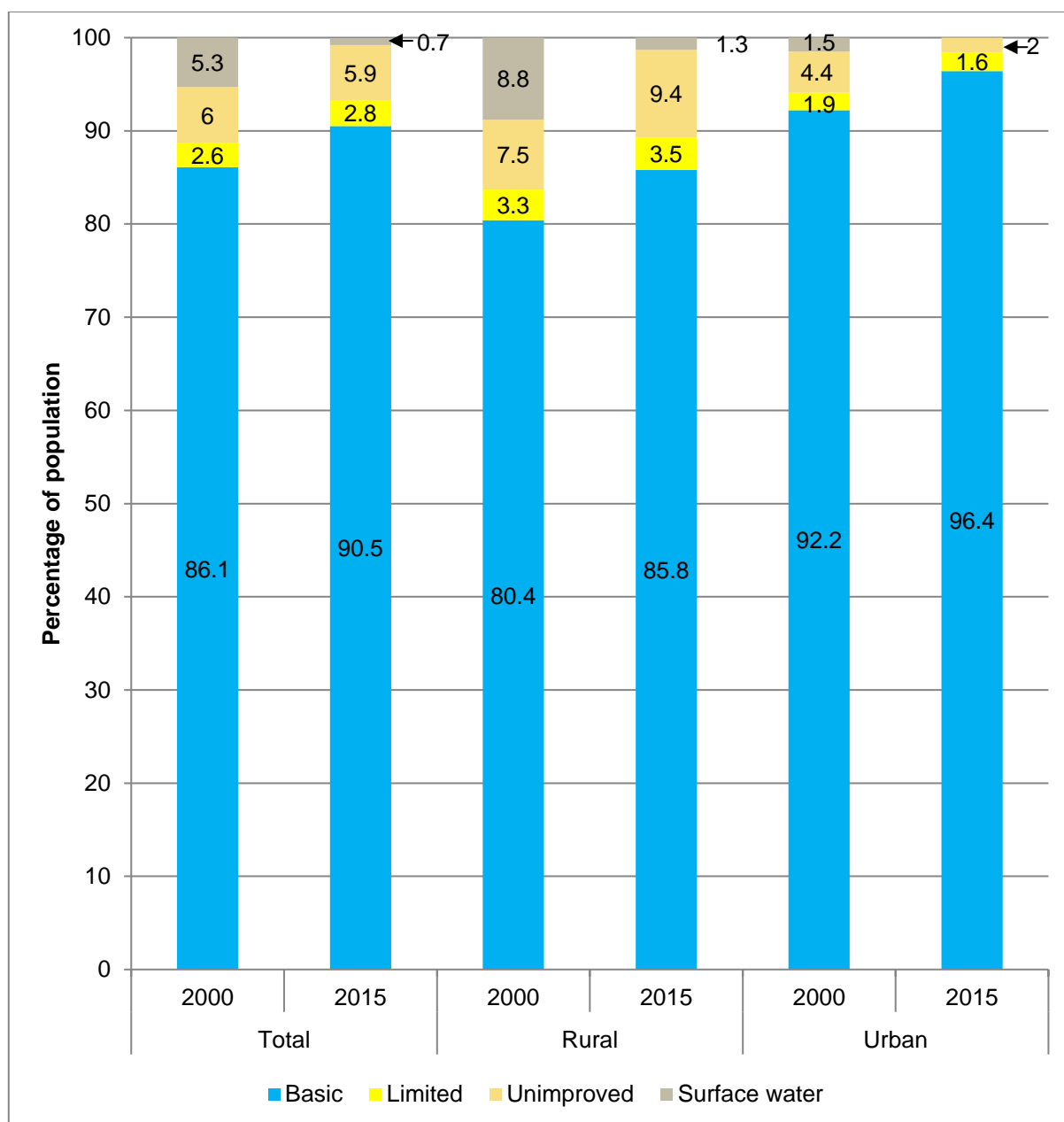
The table also shows that the use of surface water has reduced in both rural and urban areas but that disparities between urban and rural areas remain, with use at zero per cent in urban areas and 1.3 per cent in rural.⁹³¹

Table 6.4. Drinking water service in Philippines, Rural and Urban areas, 2000 to 2015 estimates as published in 2017

⁹²⁹ Joint Monitoring Programme for Water Supply and Sanitation, Estimates on the use of water sources and sanitation facilities, updated June 2015, Philippines data: <https://www.wssinfo.org/>.

⁹³⁰ Joint Monitoring Programme for Water Supply and Sanitation, Estimates on the use of water sources and sanitation facilities, updated June 2015, Philippines data: <https://www.wssinfo.org/>.

⁹³¹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.



Source: JMP Estimates 2017

Table 6.5. Drinking Water Estimates in Rural areas of the Philippines, 2000–2015

Rural Drinking Water										
Estimated coverage 2015, published 2017										
Year	Improved water source	Improved within 30 minutes (Basic)	Improved more than 30 minutes (Limited)	Unimproved water	Surface water	Population using an improved source which is:				
						Piped	Non Piped	Accessible on premises	Available when needed	Free from contamination
2000	83.7	80.4	3.3	7.5	8.8	31.6	52.1	25.6	73.9	n/a

2005	85.6	82.2	3.4	8.1	6.3	31.5	54.1	31.6	75.6	n/a
2010	87.5	84.0	3.4	8.7	3.8	31.4	56.1	39.1	77.2	n/a
2015	89.3	85.8	3.5	9.4	1.3	31.2	58.1	46.9	78.9	n/a

Source: JMP Estimates 2017

Table 6.6. Drinking Water Estimates in Urban areas in the Philippines, 2000-2015

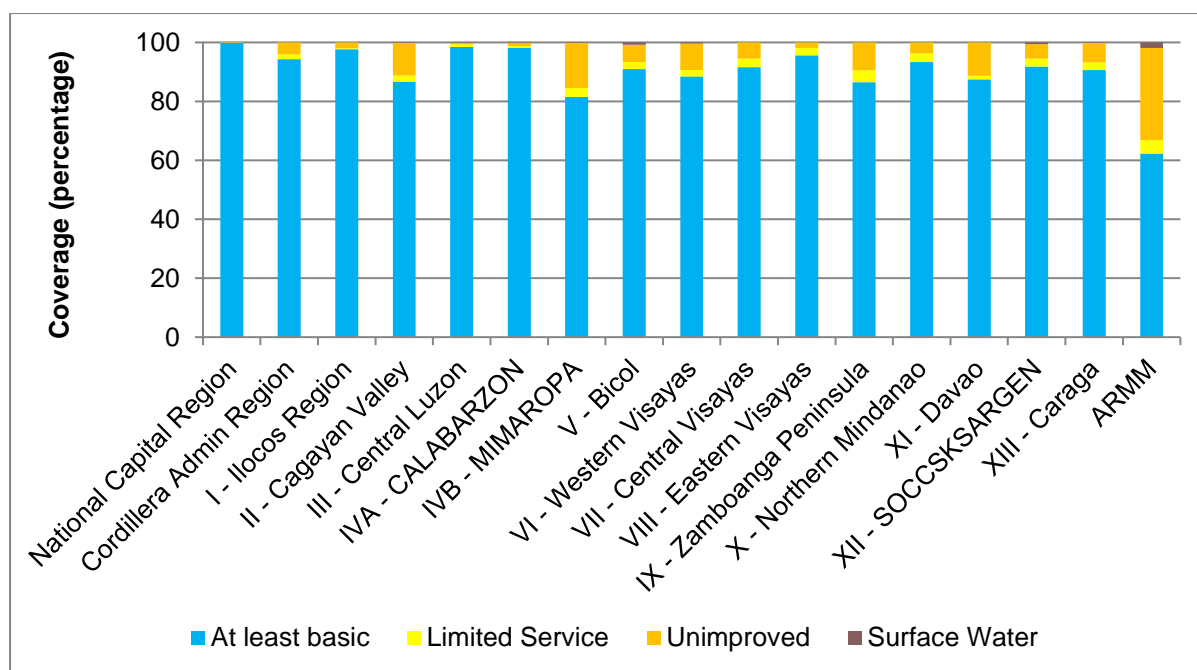
Urban Drinking Water Estimated coverage 2015, published 2017										
Year	Improved water source	Improved within 30 minutes (Basic)	Improved more than 30 minutes (Limited)	Unimproved water	Surface water	Population using an improved source which is:				
						Piped	Non Piped	on Accessible premises	Available when needed	Free from contamination
2000	94.1	92.2	1.9	4.4	1.5	63.2	30.9	54.2	84.2	n/a
2005	95.5	93.6	1.9	3.5	1.0	61.8	33.8	61.0	85.4	n/a
2010	97.0	95.0	2.0	2.6	0.5	60.3	36.7	69.5	86.7	n/a
2015	98.4	96.4	2.0	1.6	0	58.8	39.6	78.2	87.9	n/a

Source: JMP Estimates 2017

According to the 2017 JMP Report, there was also a disparity in the use of water sources between regions in the Philippines. In 2013, ARMM was the lowest-performing region with only 62.27 per cent of the population using at least a basic water supply, compared to 99.81 per cent of the population of the NCR, the highest-performing region.⁹³²

Table 6.7. Drinking water service in Philippines by region, 2013 estimates as published in 2017

⁹³² WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.



Source: JMP Estimates 2017

In addition to the JMP Report, the 2013 Functional Literacy, Education and Mass Media Survey (FLEMMS), which was carried out in 26,000 households across the Philippines, recorded disparities between regions in relation to water supply. It reported that NCR (47.8 per cent) and CALABARZON (47.1 per cent) had the largest proportion of households with piped water into the dwelling.⁹³³ The use of bottled water was most common in NCR (46.3 per cent) and Central Visayas (40.5 per cent).⁹³⁴ Further, the 2016 Multiple Indicator Survey (MIS), which was carried out in a non-representative sample of 36 municipalities in the Philippines, showed that remote, island municipalities were least likely to have access to improved water sources.⁹³⁵ In Sulu, Siasi and Parang, tankers or trucked water were the most common source of drinking water (up to 89 per cent in Parang), while unprotected wells were the most common source of water in Languyan (51 per cent).⁹³⁶ In these areas, around 8 in 10 households boiled their drinking water. In contrast, all urban cities surveyed in the 2016 MIS had near-universal use of improved sources for drinking water.⁹³⁷

The disparities in water service access set out above suggest a need to focus on increasing access to improved water sources in rural and remote areas, and also in peri-urban areas, in order to reduce the proportion of the population relying on surface water or unimproved sources, and the quality of

⁹³³ Philippines Statistics Authority, Functional Literacy, Education and Mass Media Survey 2013, Chapter 4 <https://psa.gov.ph/sites/default/files/2013%20FLEMMS%20Final%20Report.pdf>.

⁹³⁴ Philippines Statistics Authority, Functional Literacy, Education and Mass Media Survey 2013, Chapter 4 <https://psa.gov.ph/sites/default/files/2013%20FLEMMS%20Final%20Report.pdf>.

⁹³⁵ Demographic Research and Development Foundation, 2016 Multiple Indicator Survey Final Report, 21 November 2016, p 83.

⁹³⁶ Demographic Research and Development Foundation, 2016 Multiple Indicator Survey Final Report, 21 November 2016, p 83.

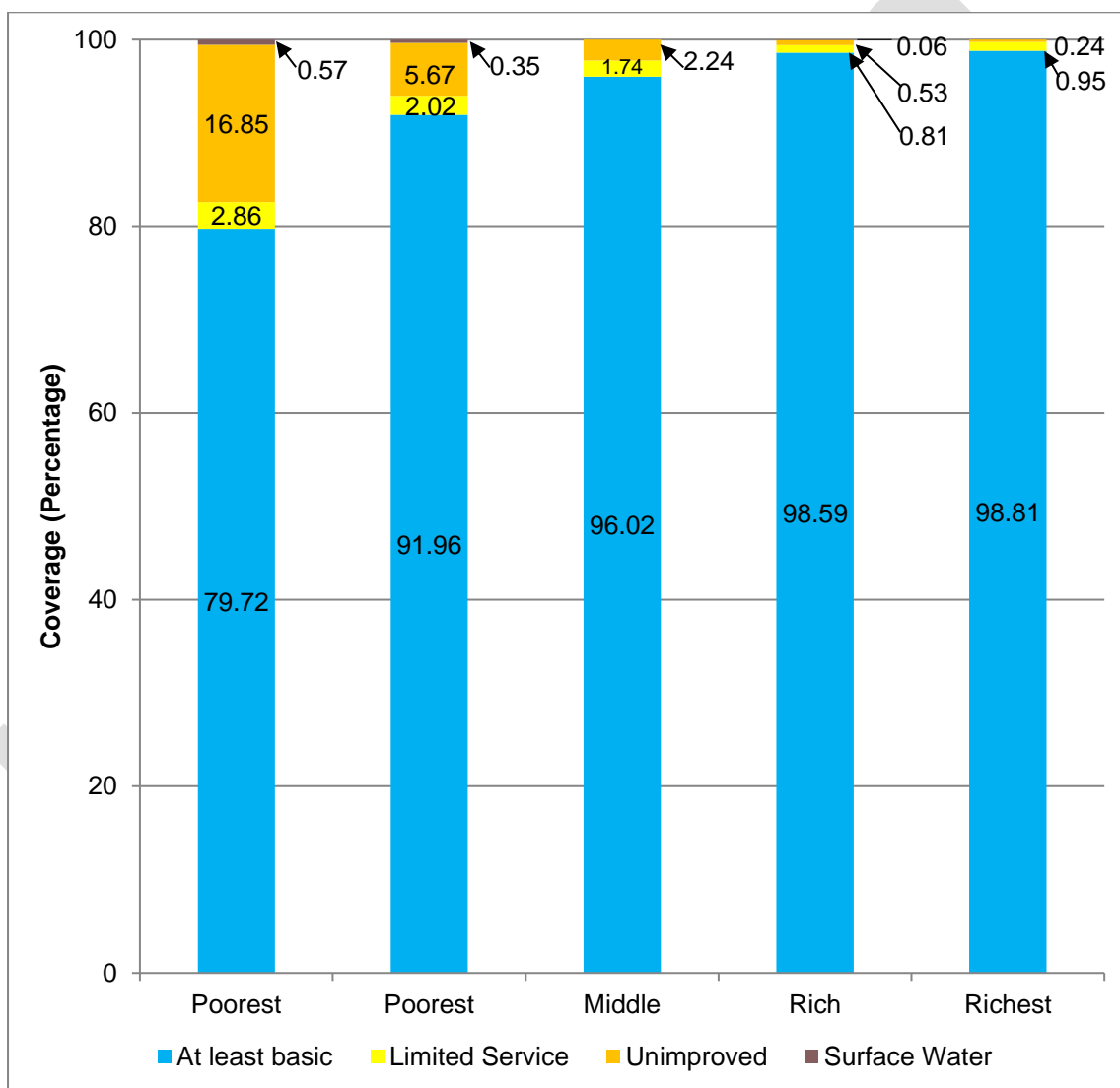
⁹³⁷ Demographic Research and Development Foundation, 2016 Multiple Indicator Survey Final Report, 21 November 2016, p 83.

access to improved sources, as measured in the context of ‘safe water’. Without such targeted efforts, it will be difficult for the Philippines to meet SDG targets by 2030.

6.2.3. Economic disparities

According to the 2017 JMP data, 99 per cent of the richest wealth quintile in the Philippines were using at least basic drinking water in 2013, in comparison to only 80 per cent of the poorest wealth quintile.⁹³⁸ Additionally, zero per cent of the richest wealth quintile used unimproved drinking water sources or surface water, compared to 17 per cent of the poorest wealth quintile who used unimproved drinking water sources, and 1 per cent who used surface water.⁹³⁹

Table 6.8: Drinking water service in Philippines by wealth quintile, 2013 estimates as published in 2017



Source: JMP estimates 2017

⁹³⁸ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 101.

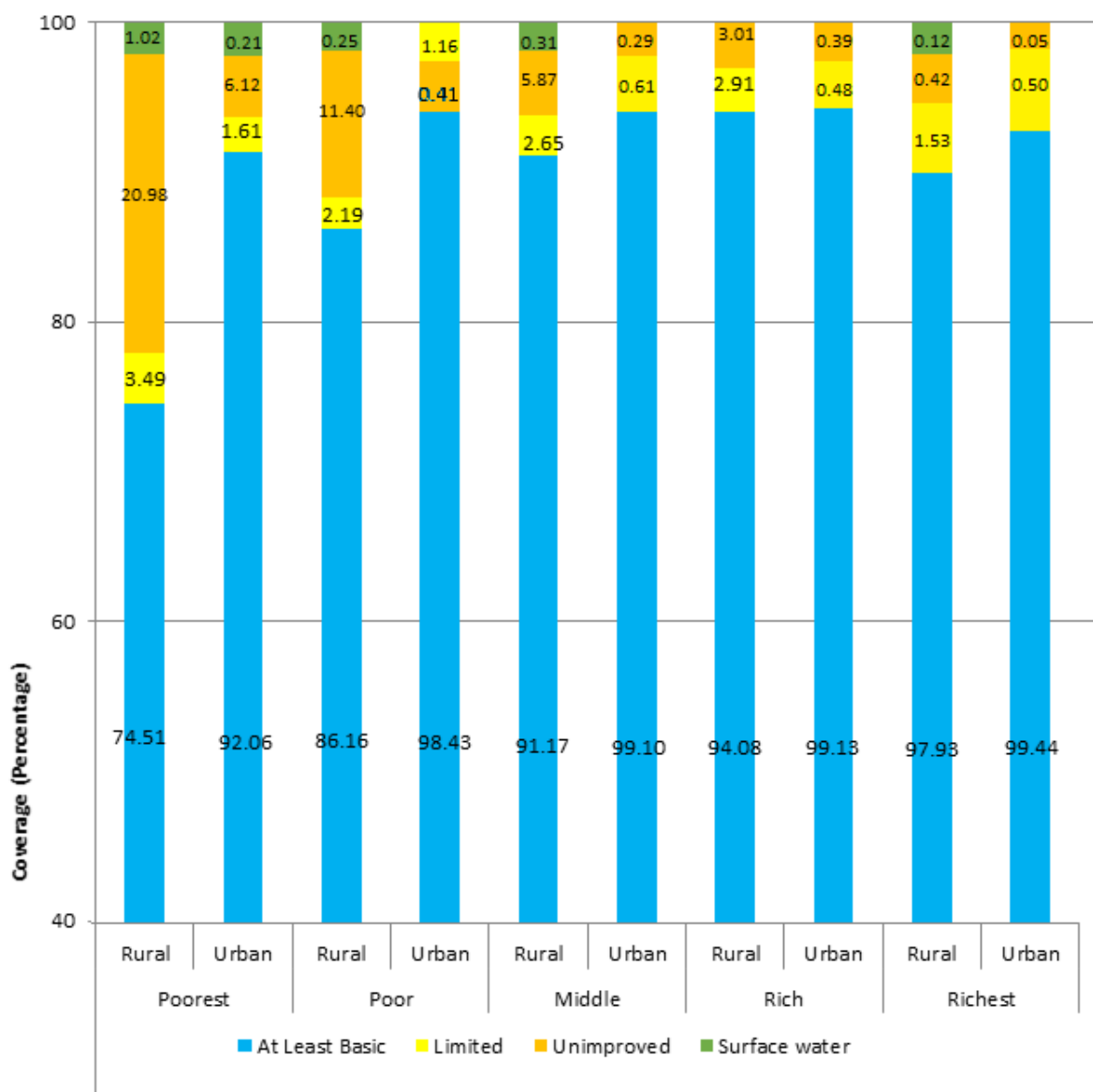
⁹³⁹ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 101.

The interaction between economic and rural/urban disparities suggests that the wealthiest quintile of the population feels the impact of the rural/urban divide least acutely, while on the other hand, those living in rural areas are worse off across all wealth quintiles. Of the rural population who are in the poorest wealth quintile 74.51 per cent are using basic water sources, 20.98 per cent use unimproved water sources and 1.02 per cent use surface water, compared to 92.06 per cent of the urban population in the poorest wealth quintile who were using basic water sources, 6.12 per cent who used unimproved water sources and 0.21 per cent who used surface water.⁹⁴⁰ Among the highest wealth quintiles, of those living in rural areas and in the richest quintile, 97.93 per cent were using basic water sources, 1.53 per cent used limited water sources, 0.42 per cent used unimproved water sources and 0.12 per cent used surface water. In comparison, of those in the richest quintile living in urban areas, 99.44 per cent use basic water sources, 0.5 per cent use limited water sources and .05 per cent use unimproved sources.⁹⁴¹ These discrepancies suggest a need to focus on improving access to improved sources of drinking water for those in the lower wealth quintiles in order to meet international development targets.

Table 6.9. Drinking water service in Philippines by wealth quintile and rural or urban, 2013 estimates as published in 2017

⁹⁴⁰ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁴¹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.



Source: JMP Estimates 2017

6.3. Access to improved sanitation facilities

Poor sanitation can have substantial health impacts for children, including a higher prevalence of diarrheal disease, intestinal worms, enteropathy, malnutrition, and death.⁹⁴² According to the WHO, most diarrheal deaths in the world (88 per cent) are caused by unsafe water, sanitation, or hygiene.⁹⁴³ More than 99 per cent of these deaths are in developing countries, and about 8 in every 10 deaths

⁹⁴² UNICEF, WSP, World Bank Group, Child Faeces Disposal in Philippines, February 2015, p 3.

⁹⁴³ WHO, Global Health Risks: Mortality and Burden of Disease Attributable to Selected Major Risks. Geneva: World Health Organization, 2009, p. 23
http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf [07.07.17].

are children.⁹⁴⁴ Diarrhoea also has an economic impact because it obliges households to incur costs on medicine, transportation, health facility fees, and more, and can mean lost work, wages, and productivity among working household members.⁹⁴⁵ Stunting and worm infestation has also been linked to reduced intellectual capacity among children, which affects their development and productivity later in life.⁹⁴⁶ The WHO estimates that the average IQ loss per worm infection is around 3.75 points.⁹⁴⁷

According to SDG target 6.2 the Philippines should aim to achieve access to adequate and equitable sanitation for all by 2030. The measure of whether they have met this target is the proportion of population using safely managed sanitation services. As with drinking water, JMP has set out three qualifying elements of a safely managed sanitation service, which are fulfilled when access to 'improved facilities' (which include flush/pour flush to piped sewer systems, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs)⁹⁴⁸ that are not shared with other households, and where:

- 1) Excreta are 'treated and disposed of in situ'
- 2) Excreta are stored on site and then emptied for transportation and treatment off site
- 3) Excreta are transported through a sewerage system alongside wastewater and then treated offsite.⁹⁴⁹

Households with access to improved sanitation services in which excreta are not managed in line with one of these three methods are considered to have access to a basic service. Households with access to improved sanitation that is shared is considered 'limited'.⁹⁵⁰ An unimproved sanitation service is one that involves the use of pit latrines without a slab or platform, hanging latrines or bucket latrines.⁹⁵¹

Table 6.10: JMP service ladder for improved sanitation facilities

⁹⁴⁴ WHO, *Global Health Risks: Mortality and Burden of Disease Attributable to Selected Major Risks*. Geneva: World Health Organization, 2009, p. 23

http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf [07.07.17].

⁹⁴⁵ Favin, M., G. Naimoli, and L. Sherburne, *Improving Health through Behaviour Change: A Process Guide on Hygiene Promotion*. Joint Publication, Washington, DC: Environmental Health Project (EHP), 2004, p. 7.

⁹⁴⁶ WHO, *Report of the Third Global Meeting of the Partners for Parasite Control: Deworming for Health and Development*. Geneva: World Health Organization, 2005, p 15.

⁹⁴⁷ WHO, *Report of the Third Global Meeting of the Partners for Parasite Control: Deworming for Health and Development*. Geneva: World Health Organization, 2005, p 15.

⁹⁴⁸ WHO and UNICEF, *Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017*, p 8.

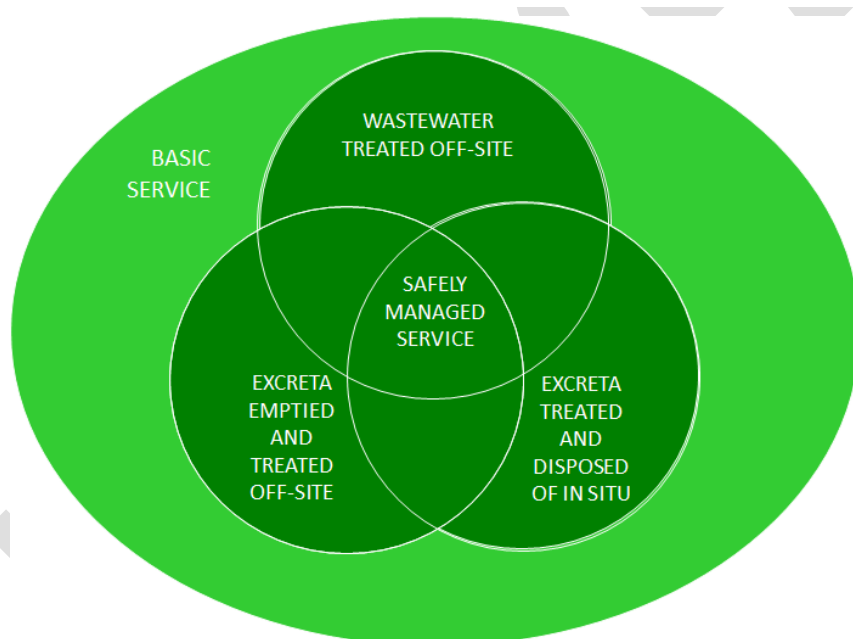
⁹⁴⁹ WHO and UNICEF, *Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017*, p 8.

⁹⁵⁰ WHO and UNICEF, *Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017*, p 8.

⁹⁵¹ WHO and UNICEF, *Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017*, p 8.

SERVICE LEVEL	DEFINITION
SAFELY MANAGED	Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or transported and treated offsite
BASIC	Use of improved facilities that are not shared with other households
LIMITED	Use of improved facilities shared between two or more households
UNIMPROVED	Use of pit latrines without a slab or platform, hanging latrines or bucket latrines
OPEN DEFECATION	Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches or other open spaces, or with solid waste

Note: improved facilities include flush/pour flush to piped sewer systems, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs.



Source: JMP 2017

6.3.1. Access to sanitation in the Philippines

The PDP includes a sanitation-specific goal to increase the percentage of households with access to ‘basic sanitation’⁹⁵² to 97.46 per cent by 2022.⁹⁵³ It should be noted that the reference to basic sanitation in the PDP includes shared toilets, while basic sanitation as measured by the JMP does not

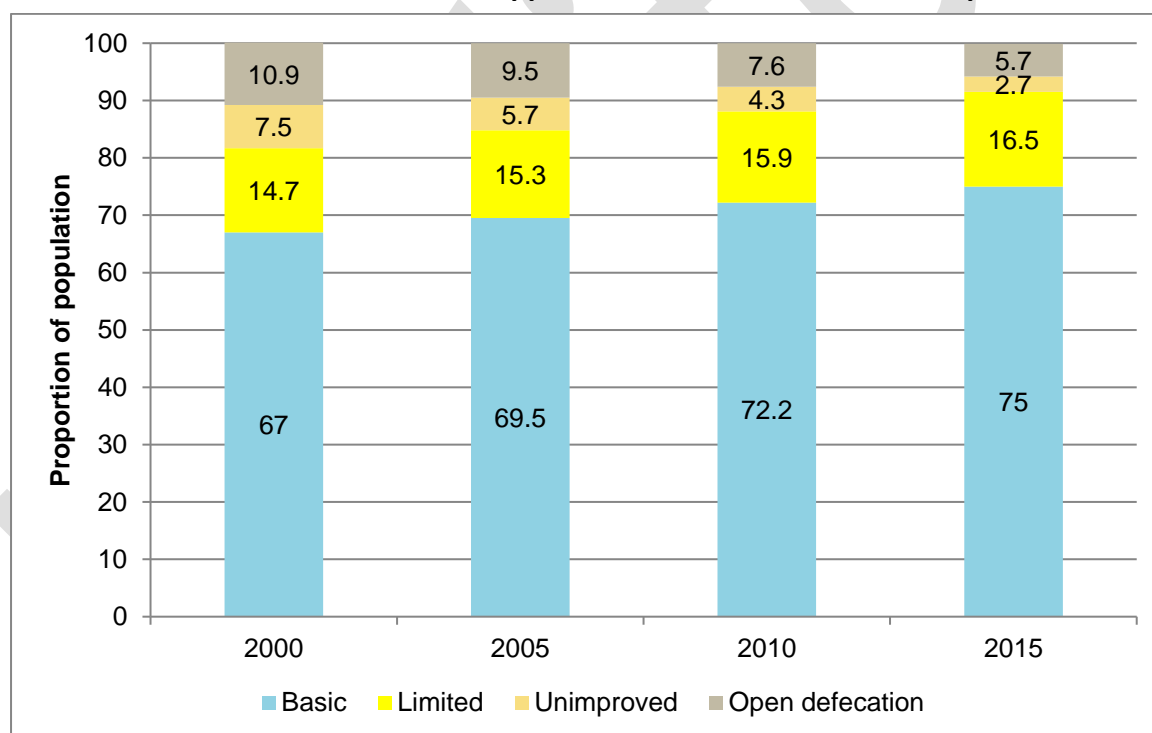
⁹⁵² ‘Basic sanitation’ refers to flush toilet (either owned or shared) and closed pit facilities – National Economic and Development Authority, Philippines Development Plan 2017-2022, p 351.

⁹⁵³ National Economic and Development Authority, Philippines Development Plan 2017-2022, Table 19.4.

include shared toilets. The 2010 Philippines Sustainable Sanitation Roadmap and the National Sustainable Sanitation Plan (NSSP) set out key sanitation development goals, in addition to detailing the roles and responsibilities of the main sanitation stakeholders.⁹⁵⁴ These goals include having universal (100 per cent) access to safe and adequate sanitary facilities within communities by 2028.⁹⁵⁵

Evidence suggests that, while good progress has been achieved over the past decades, the Philippines still has a long way to go to meet SDG 6.2.⁹⁵⁶ As of 2015, only 75 per cent of the Philippines' population was using basic sanitation services, 16.5 per cent was using limited sanitation services and 2.7 per cent was using unimproved sanitation. It was not possible to estimate the proportion of the population using safely managed sanitation because data on the method of disposal of waste were not available.⁹⁵⁷ Figure 6.11 below shows that there had been a steady increase in the use of improved sanitation facilities between 2000 and 2015 (open defecation is discussed in more detail in the next section).

Table 6.11: Sanitation services in Philippines, 2000 to 2015 estimates as published in 2017



Source: JMP Estimates 2017

Table 6.12: Sanitation coverage in the Philippines, 2000-2015

⁹⁵⁴ Robinson, A, Enabling Environment for scaling up sustainable sanitation and hygiene in the Philippines, 2012, p 10.

⁹⁵⁵ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 14, http://www.wpro.who.int/philippines/publications/philippine_sanitation_roadmap.pdf?ua=1.

⁹⁵⁶ Based on an MDG assessment carried out by JMP in 2015 the Philippines did not meet the MDG sanitation target for 2015, with only an additional 39 per cent of the population having gained access to improved sanitation facilities since 1990, but the country was still considered to have made 'good progress' towards the sanitation-related MDG. WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 68.

⁹⁵⁷ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

Sanitation								
Estimated coverage 2015, published 2017								
Year	Total improved sanitation	Improved and not shared (Basic)	Improved and shared (limited)	Unimproved sanitation	Open defecation	Population using an improved and not shared sanitation facility:		
						Latrines and other	Septic tank	Sewer connection
2000	81.6	67.0	14.7	7.5	10.9	9.8	53.5	3.7
2005	84.8	69.5	15.3	5.7	9.5	13.1	53.3	3.1
2010	88.1	72.2	15.9	4.3	7.6	10.5	59.0	2.8
2015	91.5	75.0	16.5	2.7	5.7	6.0	66.6	2.4

Source: JMP Estimates 2017

Figures for the Philippines stand slightly below the regional average for usage of basic sanitation (75 per cent compared to 77 per cent), and considerably higher than the regional average for usage of improved sanitation (91.5 per cent compared to the regional average of 83.08 per cent).⁹⁵⁸

6.3.2. Open defecation

According to SDG target 6.2, the Philippines should end all open defecation by 2030. This target is reflected in the DOH's document "12 Legacies for 2022", which includes the goal of achieving 'Zero Open Defecation by 2022.'⁹⁵⁹ Open defecation poses a serious threat to public health and the environment, potentially leading to groundwater pollution as well as spread of water- and faecal-borne illnesses such as diarrhoea, intestinal worms, and cholera. It can also affect economic and social development, because, for example, when children suffer ill-health, they may not be able to attend school, or to engage as actively in their schooling, which eventually limits their productivity as adults.⁹⁶⁰

As of 2015, it was estimated that around 5.74 per cent of the Philippines' population still practiced open defecation.⁹⁶¹ According to the 2017 JMP Report, open defecation rates have declined in both urban and rural areas between 2000 and 2015 (by 7.7 percentage points in rural areas and 2.7 percentage points in urban areas).⁹⁶² However, as of 2015, there was still a difference in the prevalence of open defecation in urban and rural areas, with a rate of 2.7 per cent in urban areas, compared to 8.2 per cent in rural areas.⁹⁶³ The national prevalence of open defecation in Philippines (5.74 per cent) is greater than the regional average for open defecation in 2015, which is estimated

⁹⁵⁸ WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 106.

⁹⁵⁹ See e.g. The Mindanao Daily Mirror, "12 legacies for health pushed", April 2017, <http://mindanaodailymirror.com/12-legacies-health-pushed-35713/>.

⁹⁶⁰ REECS, WSP, UNICEF, Department of Health, Scaling up demand and supply for rural sanitation, Final Report, April 2013, p 4.

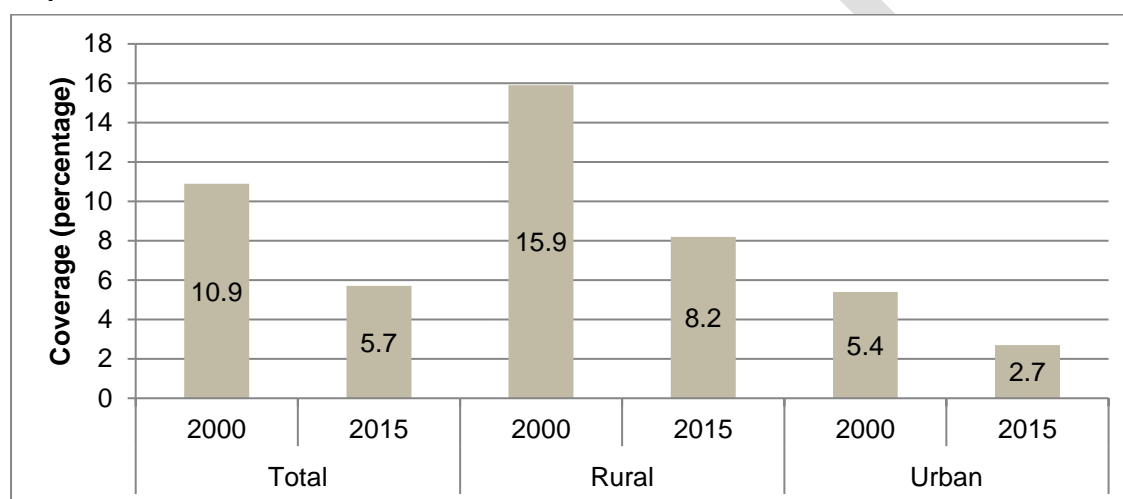
⁹⁶¹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁶² WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁶³ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

at 3.28 per cent.⁹⁶⁴ In terms of disparities across income quintiles, according to the 2017 JMP data, in 2013, zero per cent of the richest wealth quintile was practising open defecation, compared to 22.38 per cent of the poorest wealth quintile.⁹⁶⁵

Table 6.13. Proportion of population practicing open defecation in Philippines, 2013 estimates as published in 2017



Source: JMP Estimates 2017

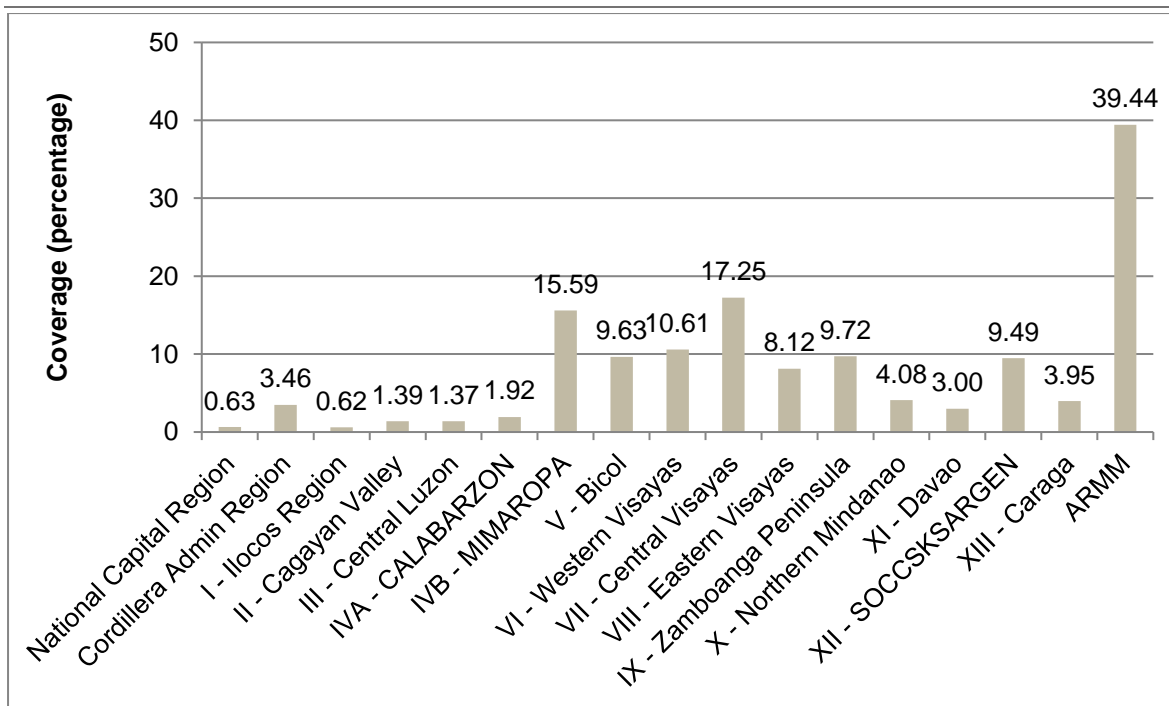
The 2017 JMP Report also recorded a regional disparity in the practice of open defecation in the Philippines. In 2013 in ARMM, the lowest-performing region, 39.4 per cent of the population practised open defecation, compared to only 0.62 per cent of the population of Ilocos, the highest-performing region.⁹⁶⁶ This is likely to be linked to the lack of sanitation facilities available in ARMM, as shown by Figure 6.17, for example. Regional data in relation to open defecation are set out in Figure 6.14 below.

Table 6.14: Proportion of population practicing open defecation in Philippines by region, 2013 estimates as published in 2017

⁹⁶⁴ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁶⁵ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁶⁶ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.



Source: JMP Estimates 2017

A 2017 UNICEF study found that the main reasons for continuing open defecation in the Philippines were a ‘lack of available toilets or a lack of household toilet ownership’, compounded by the view that shared toilet facilities were undesirable.⁹⁶⁷ The study also cited additional reasons for continuing open defecation, including ‘lack of water availability, perceptions that open defecation by small children is acceptable and a lack of sanitation facilities when people are not at home.’⁹⁶⁸

These figures and analysis indicate that the Philippines still has work to do to meet the SDG and DOH targets in relation to open defecation, and that increasing access to improved sanitation facilities in poor, rural communities will need to be prioritised alongside social behaviour change programmes that encourage the use of sanitation facilities. Additionally, those regions and areas with the highest rates of open defecation should be prioritised.

6.3.3. Geographical disparities

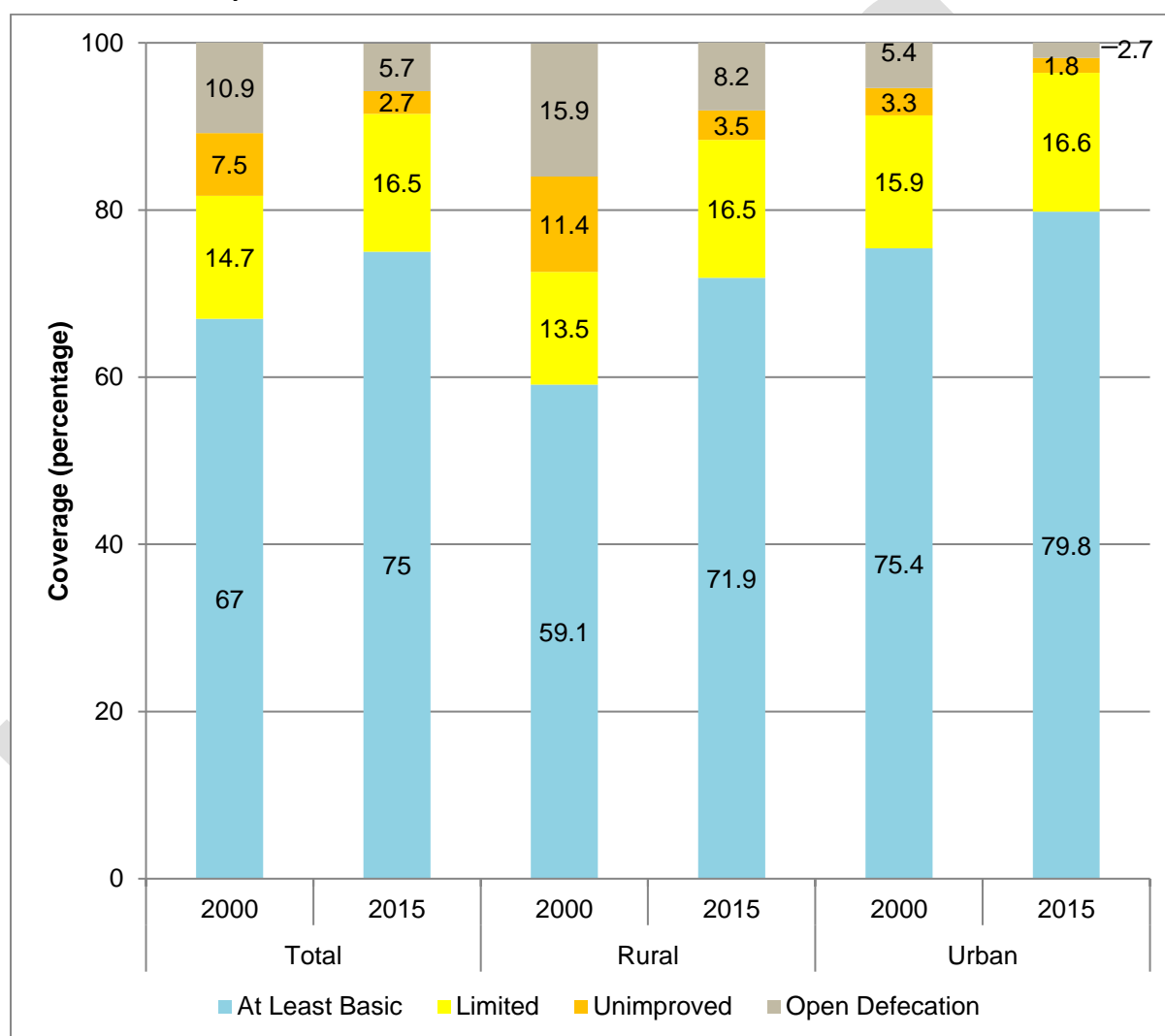
There is a relatively small difference between rural and urban areas in the Philippines in relation to usage of basic sanitation, as compared to the larger discrepancy noted earlier in relation to usage of basic water sources. According to the 2017 JMP estimates, as of 2015, 79.8 per cent of the population in urban areas used improved sanitation facilities, compared to 71.9 per cent of the population in rural areas. A higher proportion of the rural population of the Philippines used unimproved sanitation

⁹⁶⁷ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 33.

⁹⁶⁸ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 33.

(3.5 per cent) than the urban population at only 1.8 per cent.⁹⁶⁹ Data recorded between 2000 and 2015 shows an improvement in usage of basic sanitation services across the Philippines, with a greater increase in rural areas, where usage rose from 59.15 per cent in 2000 to 71.87 per cent in 2015, compared to urban areas in which the increase was from 75.44 per cent in 2000 to 78.88 per cent in 2015.⁹⁷⁰ This may reflect the challenges in dealing with rapid urbanisation which may slow the rate of improvement in urban areas.

Table 6.15. Sanitation services in Philippines in urban and rural areas, 2000 to 2015 estimates as published in 2017



Source: JMP Estimates 2017

⁹⁶⁹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁷⁰ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

There appears to be an historical difference between the type of sanitation facilities used in rural and urban areas which, though lessened over time, continues to exist. For example, in 2000, 39 per cent of the population in rural areas used a septic tank, while in urban areas, this stood at 69.5 per cent. This difference had decreased in 2015, by which point 62.5 per cent of the rural population was using a septic tank, compared to 71.7 per cent of the urban population.⁹⁷¹

Table 6.16. Estimated coverage of sanitation services in Philippines in urban and rural areas, 2000 to 2015 estimates as published in 2017

Rural Sanitation								
Estimated coverage 2015, published 2017								
Year	Improved sanitation	Improved and not shared (Basic)	Improved and shared (limited)	Unimproved sanitation	Open defecation	Population using an improved and not shared sanitation facility:		
						Latrines and other	Septic tank	Sewer connection
2000	72.7	59.1	13.5	11.4	15.9	18.6	39.0	1.6
2005	77.9	63.4	14.5	8.4	13.7	22.6	39.0	1.8
2010	83.1	67.6	15.5	5.9	11.0	16.1	49.4	2.1
2015	88.3	71.9	16.5	3.5	8.2	7.0	62.5	2.4

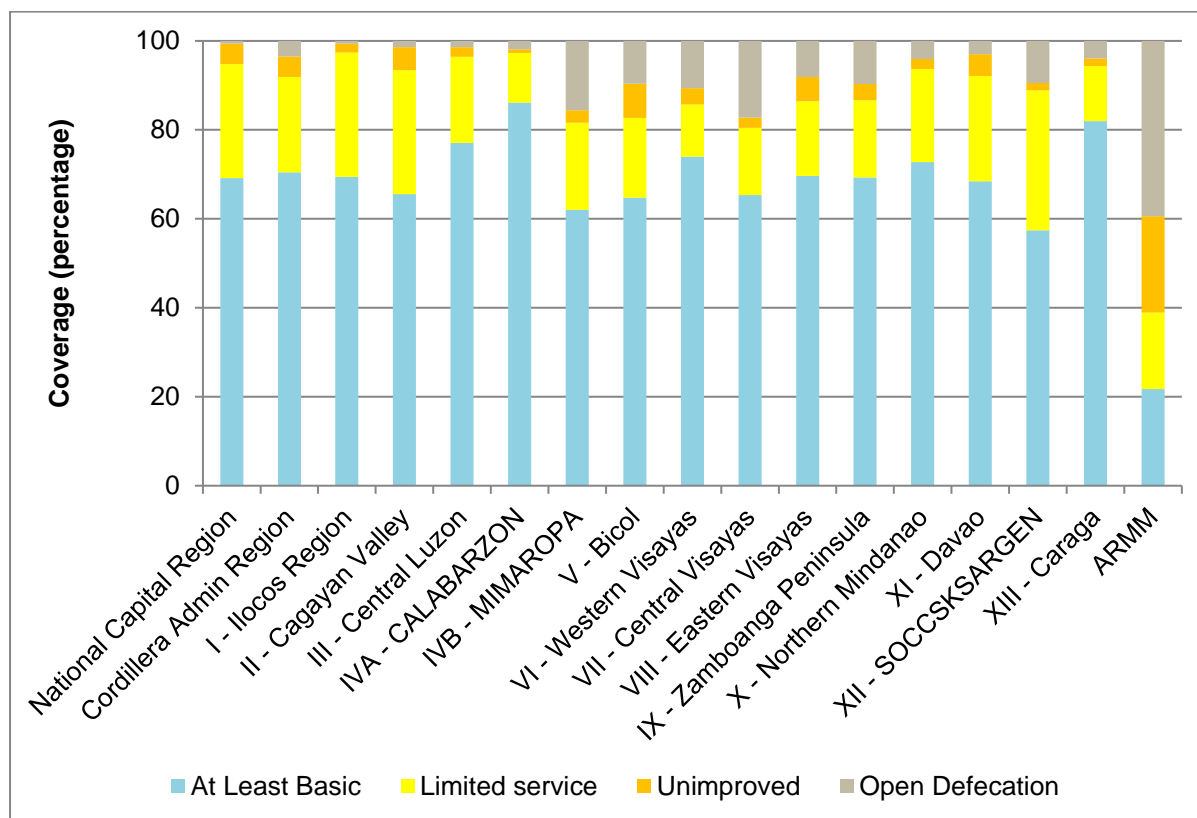
Urban Sanitation								
Estimated coverage 2015, published 2017								
Year	Improved sanitation	Improved and not shared (Basic)	Improved and shared (limited)	Unimproved sanitation	Open defecation	Population using an improved and not shared sanitation facility:		
						Latrines and other	Septic tank	Sewer connection
2000	91.4	75.4	15.9	3.3	5.4	0	69.5	6
2005	92.8	76.6	16.2	2.7	4.6	2.0	69.8	4.8
2010	94.1	77.7	16.4	2.2	3.6	3.5	70.6	3.6
2015	95.5	79.8	16.6	1.8	2.7	4.8	71.7	2.4

Source: JMP Estimates 2017

According to the 2017 JMP data, there was also a disparity in use of sanitation services between regions in the Philippines. In 2013, ARMM was the lowest performing region with only 21.72 per cent of the population using at least basic sanitation, compared to 86.14 per cent of the population of CALABARZON, the highest performing region.⁹⁷²

⁹⁷¹ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!/phl>, accessed 22 August 2017.

⁹⁷² WHO and UNICEF, Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines, 2017, p 100.

Table 6.17. Sanitation services in Philippines by region, 2013 estimates as published in 2017

Source: JMP Estimates 2017

6.3.4. Economic disparities

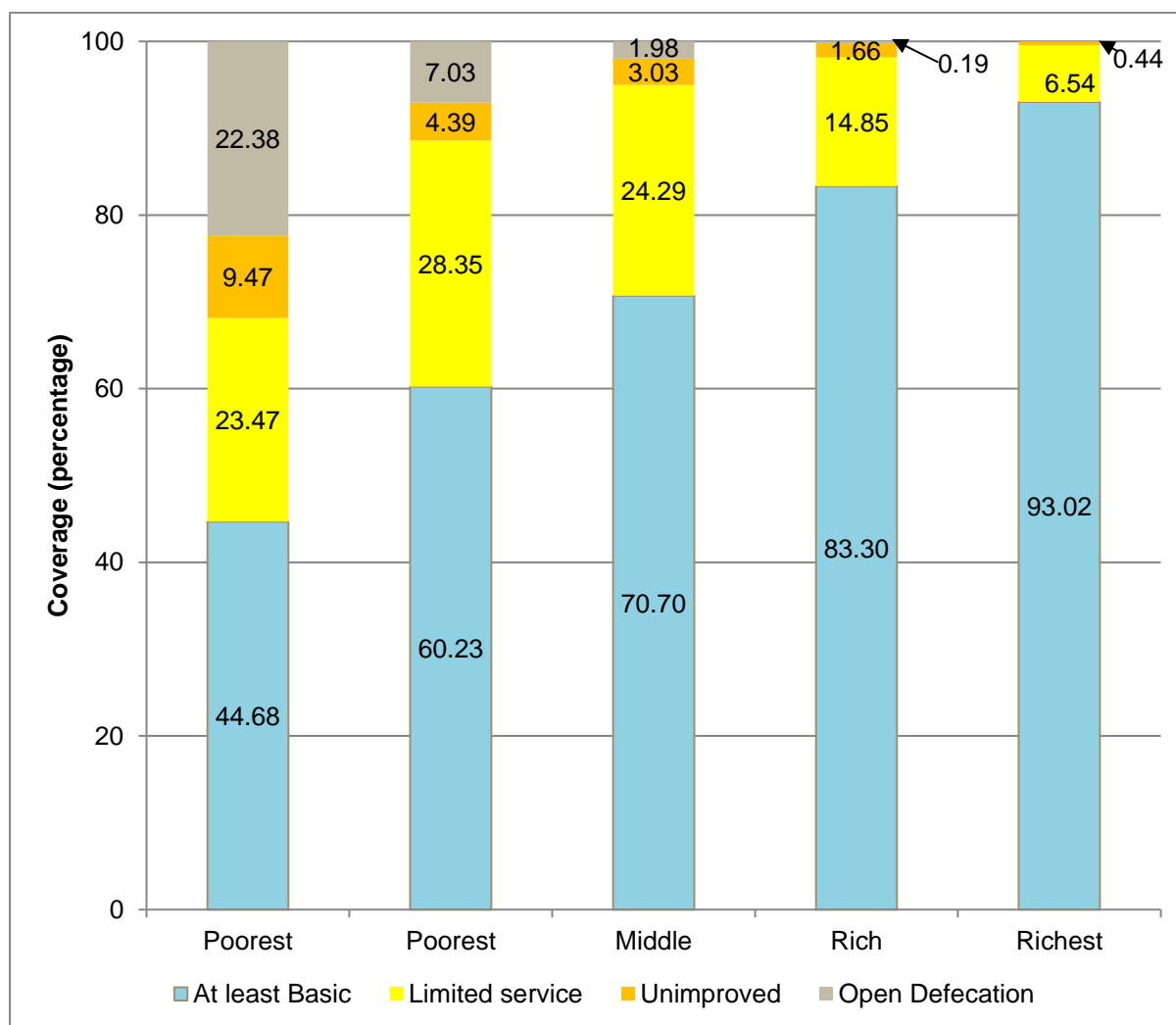
According to the 2017 JMP Report, in 2013, 93 per cent of the richest wealth quintile in the Philippines were using at least basic sanitation, in comparison to only 45 per cent of the poorest wealth quintile.⁹⁷³ Further, 23 per cent of the poorest wealth quintile used limited sanitation services, in comparison to 7 per cent of the richest wealth quintile.⁹⁷⁴ None of the richest wealth quintile used unimproved sanitation, compared to 9 per cent of the poorest wealth quintile.⁹⁷⁵

⁹⁷³ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!phl>, accessed 22 August 2017.

⁹⁷⁴ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!phl>, accessed 22 August 2017.

⁹⁷⁵ WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, Estimates on the Use of water, sanitation and hygiene in Philippines, Updated July 2017, accessed at <https://washdata.org/data#!phl>, accessed 22 August 2017.

Table 6.18. Sanitation services in Philippines by wealth quintile, 2013 estimates as published in 2017



Source: JMP Estimates 2017

In addition to the discrepancies identified through the JMP Report, the 2014 Annual Poverty Indicators Survey (APIS) which included 10,469 households from across the Philippines, also found differences in use of sanitation services based on wealth. The APIS Report found that families in the bottom 30 per cent of the income stratum were more likely to use ‘unsanitary’ types of toilet facilities compared to families in the top 70 per cent of the income stratum.⁹⁷⁶ Among households in the bottom 30 per cent of the income stratum, 7.5 per cent had no toilet or used a field or bush for a toilet, compared to only 1.1 per cent of households in the top 70 per cent of the income stratum.⁹⁷⁷ The 2013 FLEMMS data recorded a similar finding, noting that 83.7 per cent of households in the top

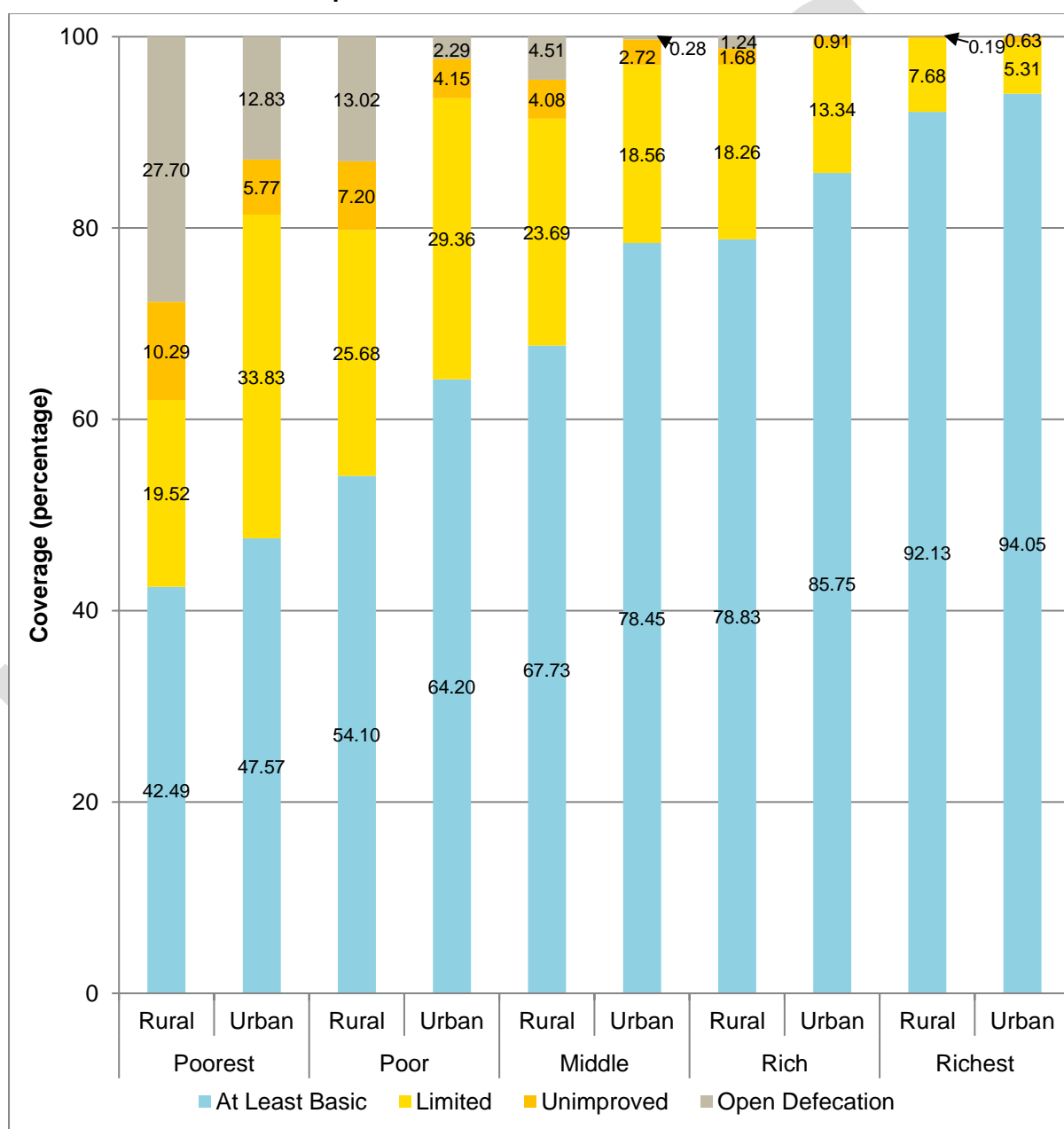
⁹⁷⁶ Annual Poverty Indicators Survey, Open pit, drop or overhang and pail systems are considered as ‘unsanitary’, 2014, p 17, <https://psa.gov.ph/sites/default/files/2014%20APIS%20Final%20Report.pdf>.

⁹⁷⁷ Annual Poverty Indicators Survey, Open pit, drop or overhang and pail systems are considered as ‘unsanitary’, 2014, p 17.

70 per cent of the income stratum owned a flush toilet, compared to 16.3 per cent of households in the bottom 30 per cent owned a flush toilet.⁹⁷⁸

When taking into account both wealth and geography, the data suggest that those living in urban areas show greater usage of basic sanitation across all wealth quintiles. It is possible that the difference in use of improved sanitation in poor and rural areas may be caused by the high cost of materials for improved sanitation facilities, as well as challenges in transporting materials to rural and remote areas. The discrepancy in outcomes at present suggests a need to focus on improving usage of basic sanitation for those in the poorest quintiles and in particular, for the poorest quintiles living in rural areas.

Table 6.19. Sanitation services in Philippines by wealth quintile and urban or rural areas, 2013 estimates as published in 2017



⁹⁷⁸ Philippines Statistics Authority, Functional Literacy, Education and Mass Media Survey 2013, p 20, <https://psa.gov.ph/sites/default/files/2013%20FLEMMS%20Final%20Report.pdf>.

Source: JMP Estimates 2017

6.4. Hygiene practices

According to SDG target 6.2, by 2030 the Philippines should aim to provide access to adequate and equitable hygiene for all, paying special attention to the needs of women and girls and those in vulnerable situations. Hygiene promotion that focuses on key practices in households and schools (washing hands with soap after using the toilet and before handling food, and the safe disposal of children's faeces) is an effective way to prevent diarrhoea (and other diseases), which in turn affect important development outcomes such as those related to child mortality or school attendance.⁹⁷⁹ The UN estimates that in the Philippines in 2012, a total of 2,239 children below the age of 5 (19.8 per 100,000 children under 5) died from diarrhoea due to inadequate access to WASH.⁹⁸⁰

6.4.1. Handwashing and dental hygiene

There are no UN verified data available on handwashing in the Philippines, including in the 2017 JMP Report, which makes it impossible to measure progress in the Philippines towards the SDG targets. However, there are non-national data relating to handwashing and dental hygiene that provide some insight into the situation in the country. In the non-random sample of 36 municipalities surveyed by the 2016 MIS, almost all households used a cleansing agent, usually bar soap or detergent.⁹⁸¹ Most adult household members surveyed in the MIS claimed that they wash their hands before preparing food, feeding children or eating and after going to the toilet.⁹⁸²

According to the 2011 Philippines Global School-based Health Survey (GSHS), which was implemented among 5,290 students in Grades 1–4, only 2.9 per cent of students aged 13–15 reported that they usually clean their teeth *less than once per day*, with a significantly higher percentage of boys reporting such sub-optimal dental hygiene behaviour (4.1 per cent) compared to girls (1.8 per cent).⁹⁸³ The GSHS data also revealed that 2.6 per cent of students never or rarely washed their hands after using the toilet, with 3.1 per cent of boys and 1.8 per cent of girls reporting this sub-optimal hand-washing behaviour.⁹⁸⁴

Importantly, this data is self-reported, so it does not necessarily accurately capture hygiene *practices*, and it is likely to overestimate the proportion of pupils washing their hands or cleaning their teeth after toilet use, due to social desirability bias. Unfortunately, the GSHS data also only capture reported hygiene behaviour of school children in Grades 1–4, so very little is known about hygiene practices of children in other age groups and children that do not attend school (i.e. out-of-school youth).

⁹⁷⁹ See e.g. UN-Water Decade Programme on Advocacy and Communication Information Brief. Available at: http://www.un.org/waterforlifedecade/waterandsustainabledevelopment2015/images/wash_eng.pdf

⁹⁸⁰ UN Water Global Analysis and Assessment of Sanitation and Drinking-Water GLAAS 2017 report, p 61.

⁹⁸¹ Demographic Research and Development Foundation, Inc., 2016 Multiple indicator survey in 36 municipalities in the Philippines Final Report, 21 November 2016, p 85.

⁹⁸² Demographic Research and Development Foundation, Inc., 2016 Multiple indicator survey in 36 municipalities in the Philippines Final Report, 21 November 2016, p 85.

⁹⁸³ Note that, whilst the Fact Sheet reports confidence intervals, the level of confidence is not reported. Global School Based Health Survey, Philippines 2011 Fact Sheet, http://www.who.int/chp/gshs/2011_GSHS_FS_Philippines.pdf?ua=1.

⁹⁸⁴ Note, however, that this difference is not statistically significant, as confidence intervals overlap. Global School Based Health Survey, Philippines 2011 Fact Sheet, http://www.who.int/chp/gshs/2011_GSHS_FS_Philippines.pdf?ua=1.

6.4.2. Safe disposal of children's stools

As noted earlier, most cases of diarrhoea worldwide are caused by unsafe water, inadequate sanitation or poor hygiene. Safe disposal of children's stools is crucial in preventing the spread of diarrheal disease.⁹⁸⁵ If stools are left uncontained, disease may spread by direct contact or through animal contact. A child using a toilet directly, or rinsing a child's stools into a toilet or latrine is considered safe disposal.⁹⁸⁶

According to NDHS data, safe disposal of the stools of children aged 3 and under has been declining in the Philippines in recent years, reducing from 42.5 per cent in 2003 to 37.0 per cent in 2008 and 31.3 per cent in 2013.⁹⁸⁷ Out of nine countries in East Asia and the Pacific with available comparable Multiple Indicator Cluster Survey (MICS) or DHS data, the Philippines ranked third-worst in relation to the proportion of children whose faeces are safely disposed of.⁹⁸⁸

According to the 2013 NDHS report, there are notable differences in the proportion of children under the age of 5 whose stools were disposed of safely based on the age of the child. Only 9.1 per cent of children in the youngest age group (<6 months) had their stools disposed of safely, compared to 88.4 per cent of children in the oldest age group (48–59 months).⁹⁸⁹ This is almost certainly because children aged under 6 months do not use toilets so their stools are caught by nappies or cloths and then thrown in the garbage or rinsed, which is not considered to be safe disposal; whereas children aged 48–59 months are more likely to use a toilet or latrine, which is considered safe disposal.⁹⁹⁰

The 2013 NDHS data also reveal regional differences in relation to safe stool disposal practices in the Philippines. In MIMAROPA, 62.2 per cent of children under the age of 3 have their stools disposed of correctly, compared to only 17.2 per cent of children under the age of 3 in ARMM.⁹⁹¹

Where households have access to an improved toilet facility, they are more likely to safely dispose of stools of children under the age of 3. 33.2 per cent of those with an improved (not shared) toilet and 30.2 per cent of those with an improved (shared) toilet disposed of children's faeces safely. This compared to only 24.1 per cent of those with access only to a non-improved public toilet.⁹⁹²

Disposal of faeces in the garbage – an unsafe disposal practice – is more prevalent among households in urban areas, wealthy households and those who use improved sanitation.⁹⁹³ Its classification as unsafe reduces the differences seen between urban and rural households and along other socio-economic lines. According to the 2013 NDHS data, the wealthiest households had the lowest level of safe disposal of stools for children under the age of 3 at 26.2 per cent compared to 36.6 per cent for households in the lowest wealth quintile.⁹⁹⁴ This is likely to be because of the high proportion of wealthy households throwing stools into the garbage (69.6 per cent) compared to only 28.4 per cent of households in the lowest wealth quintile. In comparison, 15.8 per cent of households in the lowest wealth quintile bury stools and 16.8 per cent rinse them away, both of which are considered safe

⁹⁸⁵ NDHS report 2013, p 134.

⁹⁸⁶ NDHS report 2013, p 134.

⁹⁸⁷ NDHS data from 2003, 2008 and 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

⁹⁸⁸ Child Faeces Disposal in Philippines, UNICEF, WSP, World Bank Group, February 2015, p 2.

⁹⁸⁹ NDHS report 2013, p 135.

⁹⁹⁰ NDHS report 2014, p 135.

⁹⁹¹ NDHS data from 2003, 2008 and 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

⁹⁹² NDHS data from 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

⁹⁹³ NDHS data from 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

⁹⁹⁴ NDHS data from 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

disposal, compared to 0.9 per cent of households in the highest wealth quintile who bury stools and 2.6 per cent who rinse them away.⁹⁹⁵

6.4.3. Menstrual hygiene management

Limited access to sanitary protection materials and a lack of appropriate WASH facilities in schools have been shown to affect girls negatively, leading in some cases to bullying or harassment, reducing girls' self-confidence, concentration and school attendance during menstruation, or even leading to school dropout.⁹⁹⁶ In a survey of girls, boys, teachers and mothers at 10 schools in Masbate Province and the NCR in 2012, it was found that the negative impacts of poor menstrual hygiene management included girls' self-exclusion from school and reduced participation in school including distraction, missing class and absenteeism.⁹⁹⁷

According to a recent regional report on menstrual hygiene management in East Asia and Pacific, the Philippines has made 'significant progress' on stakeholder engagement and formative research on menstrual hygiene management.⁹⁹⁸ The report also suggests that the Philippines has achieved 'good progress' in government leadership on menstrual hygiene management, coordination and menstrual hygiene management in policies, and having teaching and learning materials on menstrual hygiene management.⁹⁹⁹ Lastly, 'reasonable progress' has been achieved in placing menstrual hygiene management into the curriculum for teacher training and for school WASH facilities.¹⁰⁰⁰

However, despite these positive reports, it is clear that challenges still remain in implementation. In the survey of girls, boys, teachers and mothers at 10 schools in Masbate Province and the NCR in 2012, it was found that the major challenges to menstrual hygiene management were the inability of girls to manage their menses in school discretely, leading to feelings of stress, shame and embarrassment.¹⁰⁰¹ Lack of access to adequate WASH facilities in school was considered to be a determinant of menstruation-related challenges for girls.¹⁰⁰² In addition, girls were reported to have difficulty obtaining sanitary pads, which are often not available at school or are too expensive for

⁹⁹⁵ NDHS data from 2013 accessed at <http://www.statcompiler.com/en/> on 18 August 2017.

⁹⁹⁶ See e.g. UNICEF, Supporting the Rights of Girls and Women through Menstrual Hygiene Management (MHM) in the East Asia and Pacific Region: Realities, progress and opportunities, UNICEF East Asia and Pacific Regional Office (EAPRO), Bangkok, Thailand, 2016, https://www.unicef.org/eapro/MHM_Realities_Progress_and_OpportunitiesSupporting_opti.pdf [05.05.17].

⁹⁹⁷ WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, UNICEF, 2013, p 9.

⁹⁹⁸ UNICEF, Supporting the Rights of Girls and Women through Menstrual Hygiene Management (MHM) in the East Asia and Pacific Region: Realities, progress and opportunities, UNICEF East Asia and Pacific Regional Office (EAPRO), Bangkok, Thailand, 2016, p 14.

⁹⁹⁹ UNICEF, Supporting the Rights of Girls and Women through Menstrual Hygiene Management (MHM) in the East Asia and Pacific Region: Realities, progress and opportunities, UNICEF East Asia and Pacific Regional Office (EAPRO), Bangkok, Thailand, 2016, p 14.

¹⁰⁰⁰ UNICEF, Supporting the Rights of Girls and Women through Menstrual Hygiene Management (MHM) in the East Asia and Pacific Region: Realities, progress and opportunities, UNICEF East Asia and Pacific Regional Office (EAPRO), Bangkok, Thailand, 2016, p 14.

¹⁰⁰¹ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 1.

¹⁰⁰² UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 1.

girls to afford, so many used cloths, which need more regular changing.¹⁰⁰³ In the face of these challenges, it was reported that girls would go home instead of using school toilets, meaning they would miss out on class time.¹⁰⁰⁴

In the 10 schools surveyed, the student-to-toilet ratio was found to be much higher than the WHO-UNICEF standards of 25 girls per school toilet: the mean ratio being 325 girls per toilet in primary school and 207 per toilet in secondary school.¹⁰⁰⁵ It was also found that there were a number of toilets which were not functioning or not clean, which, in practice, reduced the student-to-toilet ratio even further.¹⁰⁰⁶ Additionally, some toilets had a lack of privacy due to gaps in the structures, or doors that did not lock.¹⁰⁰⁷

Another cause of inadequate menstrual hygiene management identified in the UNICEF report was the lack of knowledge about menstruation among girls. This was combined with misinformation from friends, family and even teachers, often based on traditional practices such as not bathing for the first three days of menstruation, not doing heavy lifting or physical work, not interacting with boys and not consuming sour foods.¹⁰⁰⁸ Although menstrual hygiene management is part of the curriculum in the Philippines, it is reported that there is a lack of learning materials for pupils to access and a lack of accountability mechanisms to ensure that the correct information is being provided by teachers, some of whom revert to the traditional beliefs set out above due to a lack of confidence in or about the MHM curriculum.¹⁰⁰⁹

6.5. WASH in Schools

UNICEF Philippines is currently working with DepEd to improve school-based management of WASH, with national policy and guidelines that will see a staged approach to gradually improving WASH in schools.¹⁰¹⁰ The DepEd goal is to have 100 per cent of schools with access to water, sanitation and hygiene facilities, with a standard of 1:50 toilet-to-pupil ratio.¹⁰¹¹ Importantly, national standards on the toilet-to-pupil ratio are lower than international standards, which require one toilet per 25 girls and one toilet and one urinal per 50 boys.¹⁰¹²

At present, a large number of schools fail to meet national DepEd standards regarding sanitation facilities: according to the PDP for 2017-2022, 3,819 schools in the Philippines still lack water supply

¹⁰⁰³ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 24.

¹⁰⁰⁴ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 11.

¹⁰⁰⁵ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 12.

¹⁰⁰⁶ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 12.

¹⁰⁰⁷ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 13.

¹⁰⁰⁸ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 20.

¹⁰⁰⁹ UNICEF, WASH in schools, Empower Girls Education in Masbate Province and Metro Manila, Philippines, an assessment of menstrual hygiene management in schools, 2013, p 21.

¹⁰¹⁰ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰¹¹ Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene in Schools (WINS) Program, p 5.

¹⁰¹² UNICEF and WHO, Water, Sanitation and Hygiene Standards for Schools in Low-Cost Settings, 2009, Guideline 5, p. 22.

and sanitation facilities.¹⁰¹³ In 2014, 38.5 per cent of high schools had more than 50 girls per toilet and 37 per cent of high schools had more than 50 boys per toilet, failing to meet the DepEd standard.¹⁰¹⁴ At elementary school level, 22 per cent of schools had more than 50 girls per toilet, and 19 per cent had more than 50 boys per toilet.¹⁰¹⁵ 70 per cent of high schools in highly urbanized cities had more than 50 female students per toilet, compared to a lower 32 per cent in the more rural municipalities.¹⁰¹⁶

Although high schools tend to be better equipped than elementary schools, one third of high schools have no safe source of drinking water.¹⁰¹⁷ High schools are more likely to be located in urban areas, where they rely on piped water and do not have access to alternative sources such as drinking wells. Where schools do not have access to safe drinking water, this can be detrimental to pupils' attendance and learning, particularly if students and teachers have to leave the school premises to collect water.¹⁰¹⁸ There may also be health impacts due to lack of safe drinking water including dehydration or illness.

Infrastructure in schools is identified as an issue in the education chapter of this report (see section 7). In 2015, the DepEd target was to build 30,506 water and sanitation facilities in schools, but only 3,330 were built; 545 facilities were repaired, which met the DepEd target for 2015.¹⁰¹⁹ It appears that infrastructure for children with disabilities is limited due to a lack of classrooms and facilities, appropriate toilets, that are accessible to children with disabilities.¹⁰²⁰

6.6. WASH in Day Care Centres and Early Child Care and Development

DSWD Administrative Order No. 15 series of 2011 (Guidelines for the Accreditation of Day Care Centres and Day Care Workers) provides standards on the availability of safe water supply, functional toilets and hand washing sinks and prescribes hand-washing practice in day care centres (DCCs)¹⁰²¹ that cater to children aged 3–4 years old.¹⁰²² However, it is not clear how and to what extent these Guidelines have been implemented in practice, and quantitative data on WASH in DCCs are not available.

Under the DILG-DepEd Joint Memorandum Circular for Water, Sanitation and Hygiene in Early Child Care and Development (ECCD), there is a commitment to have access to safe, clean water for

¹⁰¹³ National Economic and Development Authority, Philippines Development Plan 2017-2022, p 294.

¹⁰¹⁴ World Bank, Assessing Basic Education Service Delivery in the Philippines, June 2016, p 58.

¹⁰¹⁵ World Bank, Assessing Basic Education Service Delivery in the Philippines, June 2016, p 58.

¹⁰¹⁶ World Bank, Assessing Basic Education Service Delivery in the Philippines, June 2016, p 58.

¹⁰¹⁷ World Bank, Assessing Basic Education Service Delivery in the Philippines, June 2016, p 56.

¹⁰¹⁸ World Bank, Assessing Basic Education Service Delivery in the Philippines, June 2016, p 56.

¹⁰¹⁹ Department of Education, FY 2015 Physical Report of Operation as of December 31 2015.

¹⁰²⁰ Five Year Development Plan for the Education of Children with Disabilities (CWD) SYs 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁰²¹ UNICEF, et al, WASH (water, sanitation and hygiene) in Day Care Centres power point presentation (undated) <http://www.itnphil.org.ph/docs/WinD%20Intro%20long%20version.pdf>.

¹⁰²² DILG-DepEd Joint Memorandum-Circular for Water, Sanitation, and Hygiene in early child care and development (ECCD), Paragraph D.5, p.4, available at: <http://www.dilg.gov.ph/issuances/jc/DILG-DepEd-Joint-Memorandum-Circular-for-Water-Sanitation-and-Hygiene-wash-in-early-child-care-and-development-ECCD/68>.

drinking, handwashing and tooth brushing materials in all early learning centres, specifically day care centres and child development centres, as well as at least one functional sanitary toilet per centre.¹⁰²³

The Early Years Act of 2013 recognises 0 to 8 years as the first crucial stage of educational development, of which the 0- to 4-year-old age range falls under the responsibility of the ECCD Council, and the 5–8 years age range falls under the responsibility of DepEd.¹⁰²⁴ In practice, it appears that in most LGUs, WASH-related programming and activities in ECCD include the provision of toilet and handwashing facilities, hygiene education and provision of hygiene kits.¹⁰²⁵

In a recent, non-representative ECCD Longitudinal Study, which followed a cohort of approximately 4500 students from Kindergarten to Grade 2 elementary school, 77 per cent of the 65 facilities surveyed had piped water, a water tank or a spring to access water, and 65 per cent had access to safe drinking water.¹⁰²⁶ The ECCD Longitudinal Study also found that 80 per cent of surveyed facilities had a handwashing station, and nearly all, 92 per cent, had toilets. However, only 8 per cent had made adequate arrangements for students with disabilities.¹⁰²⁷ The ECCD Longitudinal Study also found a relationship between the school's basic facilities and pupils' performance in literacy and mathematics such that when children, particularly those of low socio-economic status, attended schools with basic facilities, they demonstrated higher levels of growth than those attending schools without such facilities.¹⁰²⁸

In a recent UNICEF study on ECCD budgeting at LGU level in 36 cities and municipalities across the Philippines, it was found that the WASH budget component showed the lowest share of the total budget, especially during the first two budget years (2013–2014) analysed, when very few WASH facilities were built (0.2 per cent of the budget). The overall LGU ECCD budget spent on WASH increased to 1.8 per cent in 2015, but decreased again to 1.1 per cent in 2016.¹⁰²⁹ The study also found differences between LGUs in terms of WASH expenditure with, for example, Siayan spending 87 per cent of its ECCD budget on WASH but several surveyed LGUs spending none at all on WASH.¹⁰³⁰ While some LGU WASH budgets will be lower than others because they will already have the infrastructure in place, in other cases, this disparity highlights the extent to which spending autonomy among LGUs could contribute to inequities in access to WASH in ECCD across the Philippines.

¹⁰²³ DILG-DepEd Joint Memorandum-Circular for Water, Sanitation, and Hygiene in early child care and development (ECCD).

¹⁰²⁴ Republic Act No.10410 (Early Years Act) of 2013. Available at: <http://www.eccdcouncil.gov.ph/cmsms/uploads/downloads/RA-10410.pdf> [07.07.17].

¹⁰²⁵ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 14.

¹⁰²⁶ Philippines Early Childhood Care and Development (ECCD) Longitudinal Study, Round 1 and 2 Longitudinal Report, Final 29 May 2017, p 89.

¹⁰²⁷ Philippines Early Childhood Care and Development (ECCD) Longitudinal Study, Round 1 and 2 Longitudinal Report, Final 29 May 2017, p 89.

¹⁰²⁸ Philippines Early Childhood Care and Development (ECCD) Longitudinal Study, Round 1 and 2 Longitudinal Report, Final 29 May 2017, p 89.

¹⁰²⁹ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 20.

¹⁰³⁰ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 24.

6.7. WASH in Health Care Facilities

The provision of adequate WASH in health care facilities serves to prevent infections and spread of disease, protect staff and patients, and uphold the dignity of vulnerable populations, including pregnant women and the disabled.¹⁰³¹ The Philippines Water Supply Sector Roadmap 2010 lists the goal of reducing maternal mortality ‘by ensuring that water is available in health centres for pregnant mothers.’¹⁰³² Furthermore, DOH Administrative Order 2010-0021 declared sustainable sanitation a National Policy and a National Priority Program of the DOH, with the goal of achieving universal access to safe and adequate sanitary facilities by 2028.¹⁰³³ It is not possible to assess the situation and progress in the Philippines in relation to WASH in health care facilities, as quantitative data are not available.

6.8. Barriers and Bottlenecks in WASH

The key barriers and bottlenecks in WASH (and the intersections between nutrition and WASH outcomes) were mapped out by groups of key stakeholders at the consultation workshop that informed this SitAn using a methodology that involved selecting a key deprivation within the field of nutrition/WASH, and identifying a causality chain of immediate, underlying and structural causes. The map for WASH/nutrition is presented above in the previous chapter (Table 5.7). The causality chain that the stakeholders developed for WASH shows that the poor WASH practices highlighted in this Chapter contribute to an unhealthy household and community environment.

In addition to the barriers and bottlenecks mapped by the key stakeholders, existing research and key informant interviews carried out for this study indicate that are other barriers and bottlenecks contributing to poor WASH outcomes.

6.8.1. Enabling Environment

Governance

The multitude of departments with accountabilities for water and sanitation contributes to fragmentation and lack of coordination in the sector. While the Government has stated that the DOH has responsibility for WASH as it relates to environmental health,¹⁰³⁴ it would appear that the DOH has not yet fully absorbed this responsibility in practice. For example, the only unit of DOH dealing with sanitation is the Environment and Occupational Health Office of the National Disease Control and Prevention Center, whose mandate in sanitation is limited to policy formulation.¹⁰³⁵ Further, according to key informant interviews, DOH accountability and enforcement for WASH only extends as far as the regional level. At the provincial and municipal levels, Health Offices report to the Governor and Mayor respectively, meaning that implementation of national WASH policies at sub-regional levels may be inconsistent and fragmented.¹⁰³⁶

¹⁰³¹ WHO/UNICEF, Water, sanitation and hygiene in health care facilities Status in low- and middle-income countries and way forward, 2005, P.1 http://apps.who.int/iris/bitstream/10665/154588/1/9789241508476_eng.pdf.

¹⁰³² National Economic and Development Agency, Philippines Water Supply Sector Road Map, 2010, p 36.

¹⁰³³ Department of Health Administrative Order 2010-0021, Sustainable Sanitation as a National Policy and a National Priority Program of the Department of Health (DOH), June 25 2010..

¹⁰³⁴ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

¹⁰³⁵ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 30.

¹⁰³⁶ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

There are a number of government departments and other agencies involved in the implementation of WASH policy and strategy nationwide, with the Inter-Agency Committee on Environmental Health acting as the coordinating body. However it appears that this Committee is not used for coordination in practice, that key departments such as DepEd, are not members¹⁰³⁷ and that the Philippines Development Forum Working Group on WASH (discussed in section 6.2) rarely meets.¹⁰³⁸

At present, the Philippines does not have a comprehensive and transparent policy setting out institutional responsibilities for sanitation. This contributes to fragmented accountability and implementation. Although there is a 1975 Sanitation Code, it was recognised in the Philippines Sustainable Sanitation Roadmap 2010 that this Code should be *revisited in light of the growing concerns of the country, including population stresses, water pollution and climate change*.¹⁰³⁹ In relation to climate change in particular, the Roadmap notes that more sustainable sanitation services that are resistant and resilient in the face of natural disasters will be increasingly important in the future.¹⁰⁴⁰ Despite these growing needs, Republic Act 9275 or the Clean Water Act 2004, focuses mainly on conventional sanitation services that are prohibitively expensive for most LGUs.¹⁰⁴¹ This makes it difficult for LGUs to implement the Clean Water Act 2004, and for them to turn their attention to alternative sanitation systems which may be more appropriate to local circumstances.¹⁰⁴²

Although both sanitation and water are supposed to be devolved to LGUs under the 1991 Act, the major agencies have not changed their processes and continue to directly plan and implement projects rather than providing support to and developing the capacity of LGUs to plan and implement projects themselves.¹⁰⁴³ This may be one reason why implementation of WASH policy at LGU level is reported to be limited.¹⁰⁴⁴ Fragmented accountabilities across government agencies, and a lack of coordination, leads to different agencies giving different directions to LGUs, resulting in overlaps and gaps in policy and approach.¹⁰⁴⁵ LGUs are reported to lack the skills and knowledge needed to plan appropriate approaches for both rural and urban areas.¹⁰⁴⁶

One main governance challenge in relation to sanitation in particular, is that most sanitation planning is incorporated within water planning, and this can result in sanitation getting 'left behind'.¹⁰⁴⁷ Although various government departments, including DOH and the DILG have developed sanitation strategies, these are not mainstreamed into other areas of their work, meaning sanitation is not afforded sufficient attention.¹⁰⁴⁸ In relation to open defecation, although DOH has strong policy backing to eliminate open defecation, it has faced challenges in doing so. It is only responsible for

¹⁰³⁷ Comment, key informant August, 2017.

¹⁰³⁸ Comment, key informant August, 2017.

¹⁰³⁹ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 31.

¹⁰⁴⁰ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 31.

¹⁰⁴¹ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 31.

¹⁰⁴² Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 31.

¹⁰⁴³ National Economic and Development Agency, Philippines Water Supply Sector Road Map, Second Edition, 2010, p 26.

¹⁰⁴⁴ Robinson, A. Enabling Environment for scaling up sustainable sanitation and hygiene in the Philippines, 2012, p iv.

¹⁰⁴⁵ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰⁴⁶ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 30-31.

¹⁰⁴⁷ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 35.

¹⁰⁴⁸ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 49 and National Economic and Development Agency, Philippines Water Supply Sector Road map, Second Edition, 2010, p 29.

establishing policies and guidelines, while accountability for delivering sanitation is decentralised, meaning the systems and processes required do not always reach all communities.¹⁰⁴⁹

Political commitment

The WASH sector faces further barriers due to a reported lack of political commitment to WASH.¹⁰⁵⁰ Because WASH is an area that has been devolved to LGUs, it is primarily the responsibility of mayors who serve a three-year term. Plans and priorities are therefore likely to change every three years, making long-term planning difficult.¹⁰⁵¹ In addition, it is reported that, from a political standpoint, projects that provide more tangible infrastructure improvement receive more attention and financing, compared to projects and programmes that involve investment in behaviour change.¹⁰⁵² There has been a reported lack of interest in sanitation among decision makers and ordinary citizens, and it is often not recognised by the community as a problem.¹⁰⁵³ The low priority for WASH also means there is negligible, or no, budget allocation for sanitation programmes and infrastructure.¹⁰⁵⁴ This has resulted in a lack of development of local sanitation policies, plans and programmes, and a lack of focus on improving sanitation standards.¹⁰⁵⁵

Such a lack of interest can be addressed. When political advocacy has been undertaken with LGUs under the UNICEF Community Approaches to Total Sanitation programme, which raises awareness of WASH, this has had a positive impact on mayors, who have created local WASH committees, passed local ordinances in support of WASH and developed WASH plans with allocated budgets.¹⁰⁵⁶

Financing

A further barrier to improving WASH in the Philippines is both insufficient funding and a lack of the absorption of funding. According to the 2017 Global Annual Assessment of Sanitation and Drinking-Water (GLAAS) report, the budget in the Philippines for WASH was \$210 million in 2016.¹⁰⁵⁷ However, there is a significant difference between expenditure on water and expenditure on sanitation. As of 2015, PhP12 million was spent on water, whereas only PhP526 million were spent on sanitation.¹⁰⁵⁸

The WASH sector faces difficulties in absorbing and using domestic funding due to delays and short timeframes for procurement. Less than 50 per cent of domestic funding commitments were used in

¹⁰⁴⁹ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 31.

¹⁰⁵⁰ Robinson, A. Enabling Environment for scaling up sustainable sanitation and hygiene in the Philippines, 2012, p iv.

¹⁰⁵¹ Key Informant Interview with representative from UNICEF, 13 June 2017, Manila.

¹⁰⁵² Theory of Change Pathway and Narrative for Integrating WASH and Nutrition Programming In the Philippines [DRAFT] March 2016, p 4.

¹⁰⁵³ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 35.

¹⁰⁵⁴ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 35.

¹⁰⁵⁵ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 38.

¹⁰⁵⁶ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 34.

¹⁰⁵⁷ UN Water Global Analysis and Assessment of Sanitation and Drinking-Water GLAAS 2017 report, p 11

<http://apps.who.int/iris/bitstream/10665/254999/1/9789241512190-eng.pdf?ua=1>.

¹⁰⁵⁸ Philippines GLAAS Country Survey – Long form, 2016, p 60.

2014.¹⁰⁵⁹ External funds are also not absorbed or used well, with only an estimated 50-75 per cent of external funds utilised in 2014.¹⁰⁶⁰

Water supply investments are reported to have been low relative to overall public infrastructure spending, and there is a reported bias towards spending in Metro Manila and other urban areas, with rural areas left behind.¹⁰⁶¹ LGUs in rural areas need financial and technological assistance in the planning and development of water supply systems, as do the organizations who are operating and managing these systems.¹⁰⁶² Many small water districts (those with less than 3,000 connections) and utilities operated by LGUs are reported to have difficulty sustaining operations and generating capital for expansion due to low tariffs and consumers' low willingness to pay.¹⁰⁶³

In addition, community water management groups are reported to have struggled to operate and maintain their systems, with a consequent failure in functioning and the provision of poor quality water.¹⁰⁶⁴ There are no formal support mechanisms in place for these groups, and, in some poorer, remote areas, it is not feasible for them to raise money for maintenance of water and sanitation systems.¹⁰⁶⁵ There is also a reported lack of interest from the private sector in investing in sanitation due to insufficient incentives and efficiency issues.¹⁰⁶⁶ However, there have been examples of successful public-private partnerships for financing WASH in the Philippines. The 'pro-poor water supply' project in Cebu uses a microfinance system where users make small daily payments for water consumption to help fund the connection fee and ensure the provision of safe and affordable water to the city's poorest.¹⁰⁶⁷ It is estimated that the project will eventually connect around 80,000 people to the drinking water network.¹⁰⁶⁸

There are no financing schemes that families can access for sanitation services support, and a lack of pro-poor sanitation financing, including, for example, promotion of sanitation entrepreneurship.¹⁰⁶⁹ There have, however, been schemes to provide subsidies and resources to build toilets, but handouts of physical equipment for toilets can damage local businesses who are then unable to sell their similar equipment.¹⁰⁷⁰ Government department policies are inconsistent on subsidies. While the DOH's open defecation programme advocates for no subsidies to achieve zero open defecation, the DILG has a fund that LGUs can access to construct toilets.¹⁰⁷¹ Further, there is no proper guidance for LGUs on

¹⁰⁵⁹ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1

¹⁰⁶⁰ Investing in Water and Sanitation: Increasing Access, Reducing Inequalities, UN-Water Global Analysis and Assessment of Sanitation and Drinking Water GLAAS 2014 report, p 83.

¹⁰⁶¹ National Economic and Development Agency, Philippines Water Supply Sector Road map, Second Edition, 2010, p xvi.

¹⁰⁶² National Economic and Development Agency, Philippines Water Supply Sector Road map, Second Edition, 2010, p 27.

¹⁰⁶³ National Economic and Development Agency, Philippines Development Plan 2017-2022, p 304.

¹⁰⁶⁴ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰⁶⁵ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰⁶⁶ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 39.

¹⁰⁶⁷ Financing Universal Water, Sanitation and Hygiene Under the Sustainable Development Goals, UN Water Global Analysis and Assessment of Sanitation and Drinking-Water GLAAS 2017 report, p 29.

¹⁰⁶⁸ Financing Universal Water, Sanitation and Hygiene Under the Sustainable Development Goals, UN Water Global Analysis and Assessment of Sanitation and Drinking-Water GLAAS 2017 report, p 29.

¹⁰⁶⁹ Philippines Sustainable Sanitation Roadmap, April 2010, Department of Health, p 39.

¹⁰⁷⁰ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰⁷¹ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

bulk procurements in order to help them combine, increase their bargaining power and benefit from economies of scale.¹⁰⁷²

Data

Data is available from both the Philippines Sustainable Sanitation Roadmap 2010 and the Philippines Water Supply Sector Roadmap 2010. As these documents were both published in 2010 the data may now be regarded as being of limited use. Further it has been suggested that some of the information included in these Roadmaps may not reflect fully the challenges faced in this area.¹⁰⁷³

While the 2017 JMP Report contains some national level data on WASH, including data disaggregated by wealth quintile, rural/urban and region, the data is still not up to date. National level data is available up to 2015, but the disaggregated data is only available up to 2013. Further, the data are not aligned with the new SDG indicators. For example, there is no data on whether water is free from contamination, making it impossible to assess progress towards the WASH SDG targets.

In some areas of WASH, there appears to have been very little data collection or analysis: for instance, it has not been possible to find quantitative data on WASH in health care facilities, and the DOH does not have any mechanism in place to track progress against the National Sustainable Sanitation Policy targets (such as number of communities that have been declared zero open defecation). Additionally, information about disadvantaged groups is not easily accessible, for example access to WASH for children with disabilities, or data disaggregated by disability. This gap results in these issues being 'hidden'.

Human resources

Personnel working on sanitation and water are based in a range of agencies and therefore come from a variety of different backgrounds. Although this can be an advantage because it creates a multidisciplinary environment, the lack of uniform knowledge and training may also result in gaps in the skills and expertise available within the sector.¹⁰⁷⁴

There is reported to be a particular lack of capacity within the sanitation field. Very few universities offer Sanitary Engineering courses, and those courses that are on offer have recorded declining attendance levels.¹⁰⁷⁵ The decline may be due to the fact that LGUs do not require candidates for the post of Sanitary Inspector at local level to have a sanitary engineering degree. In 2010, less than 40 per cent of Sanitary Inspectors had a Sanitary Engineering degree.¹⁰⁷⁶ An additional barrier, is that the few skilled graduates in the WASH field prefer to work in urban areas or abroad, where salaries are higher, rather than in rural areas where demand is highest.¹⁰⁷⁷

According to one key informant from the UNICEF WASH section, the prevailing view within the field is that the number of staff at national, sub national and provincial level working on WASH is inadequate, and the available staff are often the lowest paid and lowest grade.¹⁰⁷⁸ Their work is

¹⁰⁷² Key Informant Interview with representative from UNICEF, Tuesday, 13 June 2017, Manila.

¹⁰⁷³ Key informant interview, August, 2017.

¹⁰⁷⁴ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 34.

¹⁰⁷⁵ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 34.

¹⁰⁷⁶ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 34.

¹⁰⁷⁷ Investing in Water and Sanitation: Increasing Access, Reducing Inequalities, UN-Water Global Analysis and Assessment of Sanitation and Drinking Water GLAAS 2014 report, p 75.

¹⁰⁷⁸ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

reportedly given a low priority, and they are frequently allocated to other work. There is also little support for staff, with limited continuing education or performance monitoring.¹⁰⁷⁹

The lack of human resources does not only affect those working in the public sector. Many water utilities lack staff with the capability to undertake the various regulatory requirements they are required to comply with.¹⁰⁸⁰

6.8.2. Supply and Demand

WASH, and the achievement of WASH-related development goals, relies on both supply side infrastructure (i.e. physical presence of and access to water, toilets, etc.) and on demand-side use of these services and systems, as well as personal practices.

Infrastructure

There are barriers and bottlenecks in the provision of water and sanitation infrastructure in the Philippines. Piped water systems in the Philippines are limited, are not always linked to key facilities such as health centres and schools, and where there are piped systems, poor maintenance impacts on usability.¹⁰⁸¹ As a result, there is limited access to piped water systems outside of city areas.

In the sanitation sector, there has been a focus on large scale infrastructure such as centralised treatment and sewerage facilities, which tend to be very costly and which do not generally recover full costs through user fees.¹⁰⁸² This results in limited sanitation infrastructure being funded or constructed and a lack of sustainability in sanitation projects.¹⁰⁸³ The geography of the Philippines also creates challenges for WASH infrastructure development and for the provision of basic water and sanitation services, particularly in rural areas and remote islands.¹⁰⁸⁴

Behaviour change

According to a key informant from UNICEF's WASH section, improving sanitation and hygiene is not just about having the right infrastructure, but also about behaviour change in communities.¹⁰⁸⁵ The provision of materials alone is insufficient as sanitation or hygiene materials are not always used even where supplied. Although the National Sustainable Sanitation Policy highlights the importance of behaviour change programming, there has been under investment in this area, and many LGUs continue to spend their limited sanitation funds on distribution of hardware materials (such as toilet bowls). Piloting of the Phased Approach to Total Sanitation (PhATS) by DOH, UNICEF and the World Bank has demonstrated that demand creation via Community-Led Total Sanitation (CLTS), combined with support to strengthen WASH governance at the local level, is a viable approach to sustainable sanitation behaviour change in the Philippines.¹⁰⁸⁶

¹⁰⁷⁹ Key informant at validation workshop, August 2017.

¹⁰⁸⁰ National Economic and Development Agency, 2010, p 10.

¹⁰⁸¹ Theory of Change Pathway and Narrative for Integrating WASH and Nutrition Programming In the Philippines [DRAFT] March 2016, p 3.

¹⁰⁸² Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 39.

¹⁰⁸³ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 39.

¹⁰⁸⁴ Theory of Change Pathway and Narrative for Integrating WASH and Nutrition Programming In the Philippines [DRAFT] March 2016, p 4.

¹⁰⁸⁵ Key Informant Interview with representative from UNICEF, 13 June 2017, Manila.

¹⁰⁸⁶ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p26.

Equity

There are a number of equity issues that require consideration in relation to WASH in the Philippines. These include, for example stark disparities in access to safe water and adequate sanitation between rural and urban areas. These disparities become more pronounced when looking at specific sub-indicators, such as access to water piped onto the premises or the practice of open defecation.

Concerns have been raised, in particular, about access to safe drinking water and sanitation in urban slums.¹⁰⁸⁷ In urban centres, especially in informal settlements, there is often no space for sanitation facilities and so open defecation is practiced.¹⁰⁸⁸ There are particular challenges in urban informal settlements where people do not own the land and there is a reluctance on behalf of the government to provide any services, out of concern that doing so may encourage people to stay in these informal settlements.¹⁰⁸⁹ It is likely that with continued rapid urbanization, ensuring the provision of even basic services to these populations will be a growing challenge and, given the rights implications and health concerns, an increasing need.

The costs of poor sanitation are not evenly shared, with a much greater burden falling on poor people in terms of their health, lost time for productive work and lost income. Poor sanitation impacts on health due to increased incidence of illness, on fisheries due to pollution, on tourism due to pollution (affecting occupancy), and other damage due to environmental degradation, which impacts on income and livelihood.¹⁰⁹⁰ Improving sanitation is not seen as a top priority among households in the lower income brackets, whose finances are directed towards other priorities, such as food.¹⁰⁹¹ Open defecation is cheap, and spending money on sanitation is not a priority, especially as sanitation products are not affordable to poor households and financing is not available to help build improved toilets.¹⁰⁹²

There are also gender issues to be overcome in the WASH sector, as women in the Philippines traditionally bear responsibility collecting water for households, often from locations far from home.¹⁰⁹³ In addition, women and female children can be exposed to harassment and danger when practising open defecation or when using poorly constructed or shared toilet facilities which offer limited privacy.¹⁰⁹⁴ As set out above, girl children in schools may also continue to face stigma and practical concerns around their periods due to inadequate MHM programming.

Although there are procedures in place for the participation of disadvantaged groups in sanitation governance, the extent to which these procedures are implemented in practice is questionable, according to the 2014 GLAAS assessment.¹⁰⁹⁵ Existing complaints mechanisms are reported to be

¹⁰⁸⁷ CRC concluding observations Philippines, 2009, para 59-60.

¹⁰⁸⁸ Key Informant Interview with representative from UNICEF, 13 June 2017, Manila.

¹⁰⁸⁹ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹⁰⁹⁰ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 36-37.

¹⁰⁹¹ Key Informant Interview with representative from UNICEF, 13 June 2017, Manila.

¹⁰⁹² REECS, WSP, UNICEF, Department of Health, Scaling up demand and supply for rural sanitation, Final Report, April 2013, p 6.

¹⁰⁹³ Fritzie Rodriguez, A thirsty world and the PH water problem, June 25, 2014, <http://www.rappler.com/move-ph/issues/hunger/61480-access-water-sanitation-philippines>.

¹⁰⁹⁴ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 37.

¹⁰⁹⁵ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

ineffective, especially in rural areas.¹⁰⁹⁶ In contrast, there is relatively high participation in drinking-water governance and access to effective complaints mechanisms in urban areas.¹⁰⁹⁷

6.8.3. Quality

Lack of adequate monitoring and evaluation systems makes it hard to obtain reliable data on WASH.¹⁰⁹⁸ According to the 2014 GLASS Report, rural drinking water quality is not usually tested due to a lack of staff and the prohibitive costs of testing all water quality parameters.¹⁰⁹⁹ The Report found that in rural areas of the Philippines, drinking water providers are not audited against recommended management procedure.¹¹⁰⁰ There is also no monitoring of sanitation or drinking water for populations living in slums or informal settlements, or populations in remote or hard-to-reach areas.¹¹⁰¹ Effective national monitoring of sanitation programmes is lacking and initiatives delivered by the LGUs rarely collect data about impact.¹¹⁰² This means that, for some of the relevant development indicators, the Philippines does not have baseline data collected at national level in a systematic manner.¹¹⁰³ Additionally, the lack of national plans, programmes and budgets means there is no monitoring and evaluation of national targets and plans.¹¹⁰⁴ This leads to a lack of transparency on the performance of the sector, making it difficult to hold service providers accountable, and impedes effective regulation.¹¹⁰⁵

6.8.4. Climate change and disasters

Climate change has an impact on WASH, as rising temperatures and droughts can lead to the depletion of the country's water resources. El Niño is likely to increase the demand for water, which is a considerable concern as meeting the growing demand from the population is already a challenge.¹¹⁰⁶ Natural hazards and disasters are also likely to affect the delivery of safe water and can damage water and sanitation infrastructure. This can result in increased incidence of disease in the immediate aftermath of a disaster, as unsafe water sources are used and affected areas see an increase in unsanitary practices, such as open defecation. Additionally, as discussed in the climate change section above, the impacts of climate change are often felt hardest by the poorest households. With increased impacts from climate change on WASH services, there is a risk that improving services to the poorest households will face additional challenges.¹¹⁰⁷

¹⁰⁹⁶ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

¹⁰⁹⁷ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

¹⁰⁹⁸ Robinson, A, Enabling Environment for scaling up sustainable sanitation and hygiene in the Philippines, 2012 p v.

¹⁰⁹⁹ GLAAS Country Highlights, Philippines, 2013/4

http://www.who.int/water_sanitation_health/monitoring/investments/philippines-01-jul-16.pdf?ua=1.

¹¹⁰⁰ Investing in Water and Sanitation: Increasing Access, Reducing Inequalities, UN-Water Global Analysis and Assessment of Sanitation and Drinking Water GLAAS 2014 report, p 74.

¹¹⁰¹ Investing in Water and Sanitation: Increasing Access, Reducing Inequalities, UN-Water Global Analysis and Assessment of Sanitation and Drinking Water GLAAS 2014 report, p 75.

¹¹⁰² Philippines Sustainable Sanitation Roadmap, April 2010, Department of Health, p 33.

¹¹⁰³ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹¹⁰⁴ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 36.

¹¹⁰⁵ Philippines Water Supply Sector Road map, Second Edition, National Economic and Development Agency, 2010, p 29.

¹¹⁰⁶ Philippines GLAAS Country Survey – Long form, 2016, p 56.

¹¹⁰⁷ Key informant interview, August, 2017.

Lack of adequate water and sanitation facilities after a disaster can lead to protection concerns for children and young people. Where water sources or toilets are located far from emergency accommodation, or where sanitary facilities are not private, there is an increased risk of violence en route to, or while using facilities.

There is recognition in the Philippines that WASH systems need to be emergency-proofed and made resilient, and that each water district/barangay should have a DRRM plan. However, there is limited technical support available to help them to develop these.¹¹⁰⁸

Sanitation and hygiene promotion has been identified as critical both during relief and rehabilitation phases due to increasing cases of water-borne diseases, health risks due to open defecation, ground water contamination and generally unsanitary conditions in evacuation centres and resettlement areas. In some evacuation centres, the toilet to population ratio is as high as 1:116, compared to a target of ratio of 1:20.¹¹⁰⁹ There is a lack of policy, practice and coordination for sanitation and hygiene promotion in different types of emergency situations.¹¹¹⁰ This is a barrier to ensuring high standards of sanitation and hygiene during an emergency.

One goal set out in the Philippines Sustainable Sanitation Roadmap 2010, is to have institutionalised national and local broad-based sanitation alliances to respond to emergency situations, and to have a 1:20 toilet-to-people ratio in emergencies, by 2028.¹¹¹¹ The Roadmap recognises that providing adequate WASH in emergencies is a challenging task. For example, it highlights recurring challenges in providing sanitation in emergency situations and in providing toilets segregated by sex. To overcome this challenge, the Roadmap suggests that it will be necessary to invest in more mobile sanitation facilities for immediate deployment and regular capacity development for WASH in emergency situations.¹¹¹²

The fragmentation of responsibilities for WASH compounds the impacts of disasters. For example, although the DOH has a national DRRM plan, it does not have a mandate for all components of WASH.¹¹¹³ Additionally, LGUs vary significantly in their knowledge and capacity, and often LGU DRRM plans do not consider the WASH sector as a whole.¹¹¹⁴

There are also opportunities in the disaster response setting. It has been noted that following Typhoon Haiyan, UNICEF and the DOH, in the recovery phase, provided materials to construct communal latrines which allowed not only the households with storm damaged latrines to rebuild, but also those who had no access to latrines before the Typhoon.¹¹¹⁵

¹¹⁰⁸ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹¹⁰⁹ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 27.

¹¹¹⁰ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 39.

¹¹¹¹ Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 65.

¹¹¹² Department of Health, Philippines Sustainable Sanitation Roadmap, April 2010, p 65.

¹¹¹³ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹¹¹⁴ Key Informant Interview with representative from UNICEF, Friday, 16 June 2017, Manila.

¹¹¹⁵ UNICEF field notes on Complete Approaches to Total Sanitation, Learning from five country programmes, June 2017, p 29.

7. Education

The right to education is a fundamental human right, enshrined in Articles 28 and 29 of the CRC and article 13 of ICESCR. According to the UN Committee on Economic, Social and Cultural Rights, the right to education encompasses the following ‘interrelated and essential features’: availability; accessibility; acceptability; and adaptability.¹¹¹⁶ The right to education is also contained in the SDGs, where it is recognised that “*quality education is the foundation to improving people’s lives and sustainable development.*” Goal 4 requires States to ensure inclusive and quality education for all and promote lifelong learning.

Key Education-related SDGs

SDGs	Targets	Indicators
4.1	By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes	Proportion of children and young people: in grades 2/3; at the end of primary; and at the end of lower secondary achieving at least a minimum proficiency level in reading and mathematics, by sex
4.2	By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education	Proportion of children under 5 years of age who are developmentally on track in health, learning and psychosocial well-being, by sex
		Participation rate in organized learning (one year before the official primary entry age), by sex
4.3	By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university	Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex
4.4	By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship	Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill
4.5	By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations	Parity indices (female/male, rural/urban)

¹¹¹⁶ UN Committee on Economic, Social and Cultural Rights, General Comment No. 13 (1999), The Right to Education, 8 December 1999, E/C.12/1999/10 (CESCR GC No. 13 (1999)), para 6.

4.6	By 2030, ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy	Percentage of population in a given age group achieving at least a fixed level of proficiency in functional literacy and numeracy skills, by sex
4.A	Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	Proportion of schools with access to: electricity; the Internet for pedagogical purposes; computers for pedagogical purposes; adapted infrastructure and materials for students with disabilities; basic drinking water; single-sex basic sanitation facilities; and basic handwashing facilities (as per the WASH indicator definitions)
4.B	By 2020, substantially expand globally the number of scholarships available to developing countries, for enrolment in higher education, including vocational training and information and communications technology, technical, engineering and scientific programmes	Volume of official development assistance flows for scholarships by sector and type of study
4.C	By 2030, substantially increase the supply of qualified teachers	Proportion of teachers in pre-primary; primary; lower secondary; and upper secondary education who have received at least the minimum organized teacher training for teaching at the relevant level

Key CRC Articles

Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child’s or his or her parent’s or guardian’s race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status

Article 6(2): States parties shall ensure to the maximum extent possible the survival and development of the child

Article 18(3): States shall take all appropriate measures to ensure that children of working parents have the right to benefit from child-care services and facilities for which they are eligible

Article 23(3): States shall ensure that every child with a disability has effective access to and received education, training, health care services, rehabilitation services, preparation for employment and recreational opportunities in a manner conducive to the child’s achieving the fullest possible social integration and individual development, including his or her cultural and spiritual development

Article 28(1): Every child has the right to education on the basis of equal opportunity. States shall: (a) Make primary education compulsory and available free to all; (b) Encourage the development of different forms of secondary education, making them accessible to every child; (c) Make higher

education accessible on the basis of capacity; (d) Make educational and vocational information and guidance available and accessible to all children; (e) Take measures to encourage regular attendance at schools and the reduction of drop-out rates

Article 29: Education shall be directed to: (a) the development of the child's personality, talents and mental and physical abilities to their fullest potential; (b) The development of respect for human rights; (c) The development of respect for the child's parents, his or her own cultural identity, language and values; (d) The preparation of the child for responsible life in society, in the spirit of peace, tolerance, equality of the sexes and friendship among all peoples, ethnic, national and religious groups and persons of indigenous origin; (e) The development of respect for the natural environment

Article 30: Every child belonging to an ethnic, religious or linguistic minority or persons of indigenous origin shall have the right, in community with other members of his or her own culture, to profess and practice his or her own religion, or use his or her own language

8.1.1 7.1. Early education

According to the SDGs, by 2030, States are required to ensure that *“all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.”*

7.1.1. Early years education: legislation and policy

Early years education applies to zero to eight-year-olds, with this period being recognised as a crucial time for education. The government's policy on early years' education is set out in Republic Act 10410, the Early Years Act, 2013:

The State shall institutionalize a National System for Early Childhood Care and Development (ECCD) that is comprehensive, integrative and sustainable, that involves multisectoral and interagency collaboration at the national and local levels among government; among service providers, families and communities, and among the public and private sectors, nongovernment organizations; professional associations and academic institutions.

The System shall promote the inclusion of children with special needs, provide for reasonable accommodation and accessible environments for children with disabilities...¹¹¹⁷

The Philippines divides early years into two. Responsibility for zero- to four-year-olds sits with the Early Childhood Care and Development Council (ECCD Council) and through them with ECCD Committees at local level, while responsibility for four- to eight-year-olds is placed on the DepEd. The early childhood care and development system (under the ECCD Council) is defined in the Act as referring to *“the full range of health, nutrition, early education and social services development*

¹¹¹⁷ Republic Act 10410, The Early Years Act 2013, section 2.

programs that provide for the basic holistic needs of young children from age zero (0) to four (4) years; and to promote their optimum growth and development.”¹¹¹⁸

The role of the ECCD Council is to set standards for early years providers, develop policies and programmes and provide technical assistance and support to the ECCD service providers in consultation with coordinating committees at the provincial, city, municipal and barangay levels.¹¹¹⁹ It is also responsible for developing: “a national system for the recruitment, registration, accreditation, continuing education and equivalency, and credential system of ECCD service providers, supervisors and administrators to improve and professionalize the ECCD sector and upgrade quality standards of public and private ECCD programs.”¹¹²⁰

Under Section 7(b) of the Act, LGUs are required to utilize funding from their Special Education Fund and the Gender and Development Fund to support the implementation of the ECCD programme and for the provision of facilities. The extent to which they are required to do this is not, however, specified.

7.1.2. Participation in day care centres

There is a lack of national data on participation in ECCD. In particular, there is a lack of national level disaggregated data on enrolment rates, student to teacher ratios and the situation of disadvantaged groups. The data that is available from the DSWD for 2011 shows that there were 1,699,888 three- to four-year-olds enrolled in day care centres, a figure that increased to 1,778,274 by 2013.¹¹²¹ This would appear to represent around 42 per cent of three- to four- year- old children.¹¹²²

Little is known about the reasons for the geographical variance in the rates of enrolment, although it is likely to be related to availability and accessibility of day care centres. However, there is some limited information available on ECCD participation from the Multiple Indicator Survey (MIS) carried out in 2016. As this survey only covered 36 municipalities, it is important to recognise that it has limited value and cannot be considered representative. The MIS shows that in the 36 municipalities surveyed, there is significant variation in the numbers of children attending, with an overall low prevalence of attendance in pre-school for children aged 3–4. The two municipalities with the highest rates of attendance were Bobon and Milagros where attendance was 82.4 and 82.5 per cent respectively.¹¹²³ In four municipalities, the prevalence was below 30 per cent: Cotabato City with 21.1

¹¹¹⁸ Republic Act 10410, The Early Years Act 2013, section 4(a).

¹¹¹⁹ Republic Act 10410, The Early Years Act 2013, section 7(a).

¹¹²⁰ Republic Act 10410, The Early Years Act 2013, section 10. [Education of 4-8 year olds is the responsibility of the DepED.](#)

¹¹²¹ Department of Social Welfare and Development (DSWD) figures as set out in Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf> p 14.

¹¹²² The figures available showed that around 58 per cent of children do not attend day care: A Study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development at City and Municipal levels, Philippines, Final Report, May 2016, p 2.

¹¹²³ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016 table 8.13 p 194.

per cent, Paracale at 26.2 per cent, Siasi 26.8 per cent and Mamasapano 28.6 per cent.¹¹²⁴ The remaining areas had an average of 58 per cent attendance.¹¹²⁵

7.1.3. Barriers and bottlenecks

Enabling Environment

Governance

Although the Early Years Act 2013 includes provisions relating to health, nutrition, early education and social services,¹¹²⁶ the focus of ECCD has been on the implementation of early education: health, nutrition and social services have not been given the same emphasis and priority.¹¹²⁷ There is no agreed or standardised approach to ECCD, nor is there a national plan for ECCD or a National ECCD Monitoring and Evaluation framework or system. This represents a considerable governance gap, as a national plan or similar strategic policy document would enable the different departments involved to work together towards a common national goal.¹¹²⁸

The ECCD Council formed under the Early Years Act also has weaknesses. In particular, the DILG, which has responsibility for oversight and supervision of LGUs, is not part of the governing board of the ECCD council. It was suggested in the 2016 study on Factors Affecting Local Government Budgets and Expenditures for ECCD at City and Municipal Levels, that DILG has a vast organizational structure at the regional, provincial, city and municipal levels, and could assist with the effectiveness of the programmes, for instance by ensuring that national policies such as ECCD are communicated to all LGUs.¹¹²⁹

A further issue, is that the Early Years Act does not require the creation of local ECCD coordinating committees. These were formed under the Early Childhood Care and Development Act 2000 Act and provided important governance mechanisms in harmonising local ECCD inter-sector interventions planning, programming and budget.¹¹³⁰ However, these Committees ceased to exist when the Early Childhood Care and Development Act 2000 was repealed by the Early Years Act of 2013.

Funding for ECCD

The funding available to LGUs to spend on ECCD comes from the national government, with ECCD funding coming out of the 20 per cent of the Internal Revenue Allotment allocated to be spent on development projects.¹¹³¹ However there is no requirement to spend a particular proportion of that

¹¹²⁴ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016 table 8.13 p 194.

¹¹²⁵ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016 p 156.

¹¹²⁶ Early Years Act, section 4.

¹¹²⁷ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 55.

¹¹²⁸ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹²⁹ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 61.

¹¹³⁰ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 62.

¹¹³¹ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 50.

money on ECCD.¹¹³² The share that each LGU receives depends upon population size and land area, with the result that highly urbanized cities receive a larger share.¹¹³³

In some cases, it is reported that the Special Education Fund, which is a 1 per cent tax on real property in each LGU, is not being used for ECCD, but for public elementary and secondary school education.¹¹³⁴ There is a lack of clarity in the Early Years Act whether the Special Education Fund can be used for centre-based or home-based play as well as school-based ECCD.¹¹³⁵

It appears that there was an increase in funding to LGUs for ECCD over the 2013–2016 period. In a study of 36 LGUs carried out between 2013 and 2016, it was found that the budget allocations for ECCD has doubled during this time, with the budget share increasing from 1.88 per cent in 2013 to 2.7 per cent in 2016.¹¹³⁶ However, the proportion of the ECCD budget allocated to early years education has decreased from 61.74 per cent in 2013 to 29.8 per cent in 2016.¹¹³⁷ Although early education was the second biggest recipient of the ECCD budget in 2016 (receiving 29.8 per cent of ECCD funding), this was less than half of the budget allocated to health and nutrition.¹¹³⁸

Underspensing is also a problem within ECCD. According to the study mentioned above, only 64 per cent of the budget for ECCD was spent in 2015, which was a drop from 84 per cent spent in 2014.¹¹³⁹ This may be due to poor planning or low absorptive capacity.¹¹⁴⁰

Administrative processes

There can be difficulties for students in transferring from a preschool (*Tahderriyah*) into the public education system, especially for those who spend the kindergarten year at a preschool. In the 36 Municipalities in which UNICEF has been working, securing accreditation from the local government was identified as a problem. The lack of accreditation, which is often due to a lack of knowledge about accreditation requirements and procedures, means that students are not given a learner's reference number, and so cannot be registered in Year 1 of the public education system.¹¹⁴¹ DepEd allows students who have completed kindergarten at a non-recognised provider such as a preschool

¹¹³² A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 56.

¹¹³³ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 51.

¹¹³⁴ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 50.

¹¹³⁵ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 56.

¹¹³⁶ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 17.

¹¹³⁷ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 19.

¹¹³⁸ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 20.

¹¹³⁹ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p 33.

¹¹⁴⁰ A study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development (ECCD) at City and Municipal Levels, Philippines, Final Report May 2016, p vi.

¹¹⁴¹ Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p iv.

to take a validation assessment in order to be issued with a Learner's reference number. However, there have been problems with DepEd's ability to deploy staff to administer the assessment.¹¹⁴²

Supply and Demand

Although all barangays are required to have a day care centre,¹¹⁴³ by 2011, 4,570 out of 42,026 barangays (10.87 per cent) had yet to establish one.¹¹⁴⁴ The total number of day care centres rose from 51,797 in 2011 to 53,436 in 2013.¹¹⁴⁵ Even where a day care centre has been established in a barangay, the growth in the population in the Philippines means that in some areas one day care centre per barangay is not enough to guarantee the delivery of quality ECCD to all children aged 0–4.¹¹⁴⁶

The accessibility of day care centres, and particularly the distance between the child's home and the day care centre, raises issues of cost and time. Some parents consider that their children are too young to travel the long distances to get to a day care centre, while others cannot afford the travel costs.¹¹⁴⁷ In a 2016 study of LGU budgets and expenditures on Early Childhood Care and Development covering 36 municipalities and cities in the Philippines, it was found that parents were paying between PhP2,334 and PhP8,233 for food and transportation for each child attending public day care. Transportation for those in rural areas and conflict-affected barangays was even more difficult, with limited transport available and at higher cost. It is likely that families are unwilling or unable to bear these costs, especially as children only spend two to three hours per day at a day care centre.¹¹⁴⁸

There are also reported to be social barriers to children accessing ECCD. Some parents view children at the age of 3 or 4 as being too young to go to day care.¹¹⁴⁹

Disasters and conflict frequently disrupt early education. Staff in the ECCD sector may be redeployed to assist in distribution and relief efforts or may themselves be displaced.¹¹⁵⁰ It is common for ECCD classes to be put on hold following a disaster or an emergency and it can take some time for them to resume after a disaster.¹¹⁵¹ Premises in which ECCD takes place, may also be used for evacuees.

Quality

The PDP recognises that quality ECCD programmes help to prepare young children for formal education. Studies in the Philippines have shown that where children have attended preschool they perform better at kindergarten and at grade 1.¹¹⁵² In the ECCD Longitudinal Study it was found that

¹¹⁴² Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management report, p 36.

¹¹⁴³ Republic Act 6972, the Barangay Level Total Development and Protection of Children Act 1900 required every barangay to establish and run at least one day care centre.

¹¹⁴⁴ DSWD figures as referenced in Philippines Education for All 2015 Review Report, p 14.

¹¹⁴⁵ DSWD figures as referenced in Philippines Education for All 2015 Review Report, p 14.

¹¹⁴⁶ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p15.

¹¹⁴⁷ Key Informant Interview with representatives from UNICEF, Tuesday, 13 June, Manila.

¹¹⁴⁸ A Study on Factors Affecting Local Government Budgets and Expenditures for Early Childhood Care and Development at City and Municipal levels, Philippines, Final Report, May 2016, p 43.

¹¹⁴⁹ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹⁵⁰ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹⁵¹ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹⁵² Philippines Development Plan 2017-2022, p 142.

growth in literacy and social and emotional skills in children in Kindergarten to Grade 2 increased as the percentage of students who attended preschool increased.¹¹⁵³

However, the quality of day care staff can be a barrier to children's development. There is no requirement for day care centre staff to have a college degree or even a professional qualification before they are hired.¹¹⁵⁴ It appears that in 2011, the DSWD issued setting out standards for day care centres and staff on how to deliver services efficiently and effectively, and a quality assurance process for ECCD services.¹¹⁵⁵ It has not been possible to access these guidelines or details of the assurance process. This raises questions as to whether the Guidelines are sufficiently accessible, understood and applied in day care centres. There also appears to be no data on the take up or effectiveness of the accreditation scheme.

The limited resources of LGUs mean that day care staff are poorly paid, with a salary of around \$10 per month. Many of these positions are part time positions, or the staff are just paid an honorarium.¹¹⁵⁶ This is likely to impact on the quality of early education as it is difficult to recruit and retain quality staff and reduces the morale of staff.¹¹⁵⁷

There is some limited provision for continuing professional development for day care staff. DSWD, with support from UNICEF, developed and adopted a standard training programme for day care staff. However, it is envisaged that there may be challenges in rolling out this training programme given the limited capacity of DSWD to identify trainers and the lack of resources within LGUs nationwide.¹¹⁵⁸ Further, it appears that even where there is training of day care centre staff there has been little evaluation of its impact, with systematic and effective monitoring, supervision and mentoring of staff after the initial training process.¹¹⁵⁹

UNICEF has been supporting training teachers in 36 municipalities to use an ECCD checklist in order to monitor child performance in class. It is used by kindergarten teachers, day care workers and preschool teachers and most found it to be useful in assessing children's performance. However there have been challenges for some teachers in understanding the checklist, as it is printed in English, and is lengthy. Additionally, teachers or parents have to pay for the checklist to be photocopied or printed as there is no funding available to provide a copy for each child.¹¹⁶⁰

There is currently no measure of the quality of ECCD at national level. This makes it difficult to show how the Philippines has met the requirements of SDG 4.2 which is measured by the proportion of

¹¹⁵³ Philippines Longitudinal Study of the Effects of Early Childhood Care and Development (ECCD) on the Learning Experiences and Performance of Kindergarten Pupils through Grade 2 in the Philippines, Round 1 & 2 Longitudinal Report, Final 29 May 2017, p 77.

¹¹⁵⁴ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹⁵⁵ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p15.

¹¹⁵⁶ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹¹⁵⁷ Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 40.

¹¹⁵⁸ Key Informant Interview, 13 June, Manila.

¹¹⁵⁹ DFAT Independent Review Report 2015, as cited in Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 35.

¹¹⁶⁰ Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 47.

children under 5 years of age who are developmentally on track in health, learning and psychosocial well-being, by sex. It is not yet clear how the Philippines government plans to measure progress against this indicator.

7.1 Basic education

7.2.1. Legislation and policy

The right to education is protected in the Philippines Constitution under Article XIV Section 1, which provides that the State shall protect and promote the right of all citizens to quality education at all levels, and shall take appropriate steps to make such education accessible to all. Additionally, the Constitution requires the establishment, maintenance and support of a complete, adequate and integrated system of education relevant to the needs of the people and society under Article XIV Section 2.

Republic Act 9155, the Governance of Basic Education Act 2001, confirmed the constitutional right to free basic education.¹¹⁶¹ Republic Act 10157, the Kindergarten Education Act 2012, made kindergarten for five-year-olds free, mandatory and compulsory.¹¹⁶²

The basic education system was further developed through Republic Act 10533 or the Enhanced Basic Education Act 2013 which requires the government to establish a functional basic education system that will develop productive and responsible citizens equipped with the essential competencies, skills and values for both lifelong learning and employment. In particular, it established the K-12 program.¹¹⁶³

The new K-12 system introduced in 2011 extends the length of compulsory basic education in the Philippines to 13 years. Kindergarten is compulsory for children aged 5, with elementary school for those aged 6–11 and secondary school for those from age 12–18. Children aged 12–16 are educated in Junior High Schools and those aged 16–18 in Senior High Schools.¹¹⁶⁴ The curriculum for basic education and the K-12 programme is set by the Department for Education.¹¹⁶⁵

7.2.2. K-12 program

The K-12 system was introduced in order to improve the quality of the basic education system and, in doing so, improve the employment opportunities for Filipinos. Introducing a 13-year programme of compulsory education makes the length of free and compulsory basic education in the Philippines significantly longer than that in neighbouring countries. In a 2014 report, the average duration of free and compulsory education in ASEAN+6 countries (ASEAN member states plus Australia, China, India, Japan, New Zealand and the Republic of Korea) is only 7.7 years.¹¹⁶⁶

The new K-12 system involves the introduction of compulsory senior high school from 2016 for those aged 16–18. The education offered consists of both core modules and the choice to follow one of four tracks: academic; technical-vocational and livelihood; sports; and art and design.¹¹⁶⁷ As of

¹¹⁶¹ Governance of Basic Education Act of 2001, section 2.

¹¹⁶² Kindergarten Education Act, section 4.

¹¹⁶³ Enhanced Basic Education Act, section 4.

¹¹⁶⁴ Enhanced Basic Education Act, section 4.

¹¹⁶⁵ Enhanced Basic Education Act, section 5.

¹¹⁶⁶ Education Systems in ASEAN+6 countries: A Comparative Analysis of Selected Educational Issues, Education Policy Research Series Discussion Document No. 5, Education Policy and Reform Unit, UNESCO Bangkok, p 8.

¹¹⁶⁷ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 29.

January 2015 it was estimated that 50.6 per cent of students would follow the academic programme, 46.5 per cent would follow the technical, vocational and livelihood program and 1.4 per cent each would follow the art and design and sports programs.¹¹⁶⁸

It is intended that by increasing the length of compulsory basic education, the quality of education will improve and the Philippines will have a better educated population, ready to work with 21st Century technological advances. According to an Asian Development Bank Report on K-12 education systems, the addition of senior high school for two years beyond Grade 10 is likely to increase wage income adjusted by probability of employment by 56 per cent.¹¹⁶⁹ It should also make Philippines graduates more competitive domestically and globally.¹¹⁷⁰

Implementing the K-12 education programme however, is likely to pose a number of challenges. The sheer size of the basic education system in the Philippines has made implementing change simultaneously across the country difficult, as has the inequality in enrolment and completion rates between regions and socio economic classes.¹¹⁷¹

Additional teachers are needed to teach the senior high school curriculum in a system where there are already teacher shortages. Retaining students in school for two additional years also requires the provision of additional infrastructure in schools to support the additional number of students, in a system in which there is already a lack of infrastructure, including classrooms and WASH facilities.¹¹⁷²

A further issue relates to economic reality. Before K-12 was introduced, many young people would have been entering the job market at 16 and potentially earning money to help support their families. Adding an additional two years of education will require families or young people to support their children for two more years, and will result in a loss of potential income from the child.¹¹⁷³

There was initial resistance to the K-12 programme from parents, teachers, private school providers, higher education institutions, legislators and the general public. However public opinion has shifted over time and to acceptance and approval of the changes. Private higher education institutions however, continue to be resistant, largely due to the potential financial loss. By extending compulsory education for a further two years, students will no longer move into higher education establishments at age 16 but rather at age 18 resulting in a significant reduction in the number of new starters in higher education between 2016 and 2020.¹¹⁷⁴ Although higher education institutions could offer senior high school programmes, this may pose difficulties for private higher education institutions due to contractual arrangements.¹¹⁷⁵

¹¹⁶⁸ K-12 Midterm report to Congress (10 March 2015)

<http://www.deped.gov.ph/sites/default/files/K%20to%2012%20Midterm%20Report%20to%20Congress%20%2810%20March%202015%29.pdf>), p24.

¹¹⁶⁹ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 25.

¹¹⁷⁰ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 28.

¹¹⁷¹ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 26.

¹¹⁷² Arthur S. Abulencia, the Unravelling of K-12 Program as an education reform in the Philippines, South-East Asian Journal for Youth, Sports and Health Education, 1(2) October 2015.

¹¹⁷³ <http://www.philstar.com/cebu-news/2014/06/27/1339633/k-12-effect-teachers>.

¹¹⁷⁴ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 32.

¹¹⁷⁵ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 32.

7.2.3. Mother Tongue-Based Multi-lingual Education

Mother tongue-based multilingual education was officially recognised and supported in the formal education system from 2009.¹¹⁷⁶ Under Republic Act 10157 or the Kindergarten Education Act 2012, the mother tongue of the learner is to be the primary medium of instruction for teaching and learning at the kindergarten level.¹¹⁷⁷ Under Republic Act 9155, the Enhanced Basic Education Act 2001, instruction, teaching materials and assessment are to be in the regional or native language of the learners until Grade 3. From Grades 4 to 6, a mother language transition programme introduces Filipino and English as languages of instruction, so that by secondary level, Filipino and English are the primary languages of instruction.¹¹⁷⁸

The intention in introducing multilingual education is to help students to learn basic skills more quickly: use of their mother tongue which they use and understand at home is believed to promote this.¹¹⁷⁹ Studies have shown that multi-lingual programmes encourage those from minority language backgrounds to participate and engage more in class.¹¹⁸⁰ Additionally, children learning in multilingual programmes have a higher proficiency in speaking, reading and writing the official school/national language and learn more quickly and with better comprehension than those from a minority language background learning solely in the official school/national language.¹¹⁸¹ Further, multilingual teaching also aids the Indigenous Peoples Education initiatives as instructional materials and teaching can be delivered in indigenous languages in indigenous communities encouraging take up of public education.¹¹⁸²

Although there are benefits to children from the multilingual programme, there have been challenges in implementing it. Where other countries have introduced similar schemes, it has been introduced gradually and in stages throughout the country.¹¹⁸³ The Philippines have taken a different approach, requiring mother tongue education across the whole country at the same time. Some of the challenges that have been faced include the limited resources in certain languages: the few audio recordings and textbooks in some minority languages, and a limited number of teachers in school who speak the relevant language.¹¹⁸⁴ Providing mother-tongue education poses a particular challenge in the Philippines with its wide range of spoken languages, including a number of dialects of the same language. In some cases, the regional mother tongue may be used, when in fact at local level this is not the language spoken by the children at home.¹¹⁸⁵ Additionally, some teachers find themselves having to teach their subject in a language which is foreign to them, and in which they are not fluent,

¹¹⁷⁶ Issues and Challenges in Teaching Mother Tongue-Based Multilingual Education in Grades II and III: The Philippine Experience, Rosario P Alberto, Sunny G Gabinete, Vanessa S Ranola, April 2016.

¹¹⁷⁷ Republic Act 10157, Kindergarten Education Act 2012, section 5.

¹¹⁷⁸ Republic Act 9155 Enhanced Basic Education Act 2001, section 4.

¹¹⁷⁹ The Mother Tongue Based Multilingual Education (MTB-MLE) In the K to 12 Program, Felicitas E Pado, PHD, University of the Philippines, http://www.ceap.org.ph/upload/download/20136/417420447_1.pdf.

¹¹⁸⁰ MTB-MLE Resource Kit; Including the Excluded: Promoting Multilingual Education, UNESCO 2016 p 23.

¹¹⁸¹ MTB-MLE Resource Kit; Including the Excluded: Promoting Multilingual Education, UNESCO 2016, p 29.

¹¹⁸² DepEd Order No. 32 s. 2015, p 16.

¹¹⁸³ Issues and Challenges in Teaching Mother Tongue-Based Multilingual Education in Grades II and III: The Philippine Experience, Rosario P Alberto, Sunny G Gabinete, Vanessa S Ranola, April 2016.

¹¹⁸⁴ Issues and Challenges in Teaching Mother Tongue-Based Multilingual Education in Grades II and III: The Philippine Experience, Rosario P Alberto, Sunny G Gabinete, Vanessa S Ranola, April 2016.

¹¹⁸⁵ Investigating best practice in MTB-MLE In the Philippines, Phase 2 progress report: Patterns of challenges and strategies in the implementation of mother tongue as the medium of instruction in the early years: A nationwide study, p3-4.

reducing the effectiveness of their teaching.¹¹⁸⁶ Further, some schools have faced challenges in standardising the medium of instruction between Grades 4 and 6 with the move to teaching in Filipino and English rather than the mother tongue. An additional problem arises when children are displaced, a particular problem in Mindanao, when children are unable to attend grades 1-3 as the language of instruction at the available schools is one with which they are not familiar.

There has been limited support for teachers in implementing multilingual education in the classroom from DepEd. It has, however, introduced a programme of in-school training and mentoring to teachers in implementing multilingual education through “school learning action cells”. The idea is that these cells will provide localised training and mentoring tailored to the local context. There are concerns about the effectiveness of this approach. Training modules to be used are developed at national level for the whole country and are not always suitable for the local context.¹¹⁸⁷

7.2.4. Disaster Response and Risk Reduction

Disasters and climate change are significant challenges to education development and represent a general barrier to attaining the education SDGs.

The Philippines government developed the National Climate Change Action Plan 2011–2018 to mitigate the impact of climate change in the country, and has adopted a management framework and national plan on disaster risk reduction through the Philippines Disaster and Risk Reduction Management Act of 2010. This builds on previous legislation such as DepEd Order No. 55 s.2007 which prioritised the mainstreaming of disaster risk reduction management in the school system.¹¹⁸⁸ The Act goes further, and requires DRRM to be mainstreamed into the curricula of secondary and tertiary learning and training institutions.¹¹⁸⁹ In 2015, DepEd adopted the Comprehensive DRRM in Basic Education Framework to guide the implementation of DRRM. This is based on the global Comprehensive Safe Schools Framework and the four thematic areas of prevention and mitigation, preparedness, response, and recovery and rehabilitation.¹¹⁹⁰

DRRM is included in the new K-12 programme and is embedded in certain subjects. For example the K-12 science curriculum requires students to discuss scientific principles such as force motion and energy in the context of disaster risk reduction and mitigation.¹¹⁹¹ In the K-12 health curriculum students are required to learn about staying safe in disasters.¹¹⁹² However, concerns have been raised about the capacity of teachers to teach these subjects due to their lack of training on DRRM.¹¹⁹³ At tertiary level, DRRM is a component of the National Service Training Programme and there is a course on Disaster Risk Management.¹¹⁹⁴

¹¹⁸⁶ Issues and Challenges in Teaching Mother Tongue-Based Multilingual Education in Grades II and III: The Philippine Experience, Rosario P Alberto, Sunny G Gabinete, Vanessa S Ranola, April 2016.

¹¹⁸⁷ Key Informant Interview, 13 June, Manila.

¹¹⁸⁸ DepEd Order No. 55 s. 2007.

¹¹⁸⁹ Philippines Disaster and Risk Reduction Management Act of 2010, RA 10121, section 14.

¹¹⁹⁰ DepEd Order No 37 s.2015 The Comprehensive Disaster Risk Reduction and management (DRRM) in Education Framework, 12 August 2015, http://www.deped.gov.ph/sites/default/files/order/2015/DO_s2015_37.pdf.

¹¹⁹¹ K to 12 Curriculum Guide Science, (Grade 3 to Grade 10), August 2016.

¹¹⁹² K to 12 Curriculum Guide Health, (Grade 1 to Grade 10), August 2016.

¹¹⁹³ Philippines National Progress Report on the implementation of the Hyogo Framework for action, p 23.

¹¹⁹⁴ Philippines National Progress Report on the implementation of the Hyogo Framework for action, p 23.

In addition to incorporation of DRMM in the curriculum, schools are also required to undertake preparedness activities.¹¹⁹⁵ Under DepEd Order 48 s.2012, schools are required to participate in quarterly national school-based earthquake and fire drills. This not only ensures awareness of evacuation policies but also allows for assessment of the capacity of the school and community to respond to disasters and emergencies.¹¹⁹⁶ Additionally, DepEd is required to ensure that teachers receive in-service disaster preparedness training.¹¹⁹⁷

In 2011 DepEd established the DRRM Office (DRMMO) under DepEd Order 50 s.2011. The DRRMO's role is to institutionalise the culture of safety at all levels, systematise the protection of education property and ensure continued delivery of quality education services. It co-ordinates DepEd's DRRM activities and cooperates with other government agencies, NGOs and civil society, inter-agency and cluster groupings.¹¹⁹⁸ It also issues early warning messages about incoming storms, which allows the community and members of the education cluster to act in order to mitigate potential impacts, leading to earlier recovery.¹¹⁹⁹

School attendance is disrupted when schools are used as emergency evacuation shelters. As of 2 December 2013, three weeks after Typhoon Yolanda (Haiyan), 59 per cent of evacuation centres were schools, sheltering 21,230 individuals or 61 per cent of displaced persons living in displacement sites.¹²⁰⁰ IDPs were encouraged to leave evacuation centres located in schools and DepEd resumed classes in early 2014.¹²⁰¹ The percentage of IDPs living in schools decreased from 40 per cent on 20 December 2013 to 14 per cent as of 28 April 2014. This equated to only two evacuation centres in schools being open, and only one of those was using classrooms to house displaced persons.¹²⁰²

The recently passed Republic Act 10821, the Children's Emergency Relief and Protection Act (2016) addresses the use of schools as evacuation centres. The Act only permits the use of a school or child development centre as an evacuation centre in cases where there is no other available place or structure. Auditoria and open spaces must be utilised first, with classrooms only used as a last resort. If the use of school premises is going to last for more than 15 days, the LGU must provide information to the DepEd and the DILG, including information on how they are preventing interference or disruption to the school and educational activities of children.¹²⁰³ One of the upcoming items on the Legislative Agenda, as set out in the PDP, is the Evacuation Centre Act which would establish permanent, typhoon-resilient evacuation centres to avoid the need to use classrooms as evacuation centres during calamities.¹²⁰⁴

¹¹⁹⁵ National Disaster Preparedness Plan 2015-2028, p 39.

¹¹⁹⁶ Dep Ed DO. 48, s2012 – Quarterly Conduct of the National School-Based Earthquake and Fire Drills, June 15, 2012.

¹¹⁹⁷ National Disaster Preparedness Plan 2015-2028, p 44.

¹¹⁹⁸ DO 50 s. 2011 – Creation of Disaster Risk Reduction and Management Office (DRRMO), July 1 2011, <http://www.deped.gov.ph/orders/do-50-s-2011>.

¹¹⁹⁹ Education Disrupted: Disaster impacts on education in the Asia Pacific region in 2015, Save the Children, p 23.

¹²⁰⁰ Resolving Post Disaster Displacement, Insights from the Philippines after Typhoon Haiyan (Yolanda), Brookings Institution, IOM, 2014, p 22.

¹²⁰¹ The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, May 2014, p 29.

¹²⁰² The evolving picture of displacement in the Wake of Typhoon Haiyan, an Evidence Based overview, May 2014, p 29.

¹²⁰³ Children's Emergency Relief and Protection Act 2016 (RA 10821), section 5.

¹²⁰⁴ Philippines Development Plan 2017-2022, p178.

After a disaster, it is not unusual for teachers and students to spend longer hours in school during weekends or have class hours extended to complete missed lessons and make up the required number of school days.¹²⁰⁵

Climate and disaster risks may also cause disruption to online remote learning programmes which is currently being developed for those living in remote areas or areas without good accessibility to a school, as depend on good connectivity.

The general view on DRRM measures, is that more can be done in the education sector, and particularly in relation to the impact of small scale disasters, which are often poorly documented. The cumulative impact of such occurrences, however, can be significant and can result in many days of student absences as well as damages to school facilities, equipment and learning materials.¹²⁰⁶

7.2.5. Participation in basic education

Participation in Kindergarten

The DepEd requires that all children enrolled in Grade 1 should have completed Kindergarten. Enrolment in Kindergarten in the Philippines has almost doubled from 2005 to 2013, with the largest increases within the poorest and most vulnerable sections of society. In 2008, the gross enrolment rate in Kindergarten for the poorest 20 per cent of the population was 33 per cent, but this had risen to 63 per cent by 2013.¹²⁰⁷ The rate of enrolment in Kindergarten for all children was 57.2 per cent in 2010 which increased to 79.3 per cent in 2014, but dropped back to 74.65 in 2015.¹²⁰⁸ The increase in Kindergarten enrolment since 2010 is likely to be due to the introduction of compulsory and free Kindergarten education in 2012, as well as the increase in public sector spending on education between those dates, and the fact that attendance is tied to the payment of a conditional cash transfer.¹²⁰⁹ It is not clear why enrolment rates were lower in 2015, but must be regarded as a cause of concern. The goal in the PDP is to reach 95 per cent enrolment by 2022.¹²¹⁰

The MIS 2016 Survey carried out in 36 municipalities, shows that, although Kindergarten has become compulsory, there are large disparities in the level of attendance at kindergarten between regions. The number of six-year-olds who had completed preschool or Kindergarten was found to be below 100 per cent in all 36 municipalities. In two municipalities, Capalonga and Mapanas the recorded attendance rate was 93 per cent and in 29 others municipalities, the proportion was over 70 per cent.¹²¹¹ However in two municipalities, Mamasapano and Languyan, the proportion was 36 per cent and 35 per cent respectively.¹²¹² Worryingly, attendance at preschool or Kindergarten had decreased in seven municipalities between the baseline survey (carried out in 2012 for 18 municipalities, in 2013

¹²⁰⁵ Education Disrupted: Disaster impacts on education in the Asia Pacific region in 2015, Save the Children, p 20.

¹²⁰⁶ Gaillard, JC et al 2014, Impact of 2013/2014 Floods on Education Sector in Metro Manila and Impact on Education in Emergency Policies, Practices and Capacity on Disaster Response to Manila Floods, page 3 as referenced in Education Disrupted: Disaster impacts on education in the Asia Pacific region in 2015, Save the Childre, p 24.

¹²⁰⁷ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 18.

¹²⁰⁸ Table 10.2 Philippines Development Plan 2017-2022.

¹²⁰⁹ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 18.

¹²¹⁰ Table 10.5 Philippines Development Plan 2017-2022.

¹²¹¹ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p 150-151.

¹²¹² 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p 150-151.

for the six cities and in 2014 for the remaining 12 municipalities), while the end-line survey in 2016, showed an even bigger drop: most dramatically in Mamasapano where the rate of attendance had dropped from 63 per cent to 36.2 per cent and in Upi where it had dropped from 81.7 per cent to 55.2 per cent.¹²¹³

It is not clear why enrolment has dropped, especially as the MIS Survey in 2016 showed that in 36 municipalities a very high proportion of parents of children aged 3–5 were aware that five-year-olds were required to attend Kindergarten.¹²¹⁴ Rates ranged from 100 per cent in Basud, Capalonga, Labo and Mercedes to 76.2 per cent and 73.5 per cent in Parang, Sulu and Siasi respectively.¹²¹⁵

The MIS Survey of 2016 showed that social reasons were the main reason for five-year-old children not attending Kindergarten, followed by financial reasons and the child's lack of interest in school.¹²¹⁶ This remains a prevailing view and one that did not change over the course of the survey period between 2012 and 2016.

DepEd runs a Kindergarten Catch-Up Programme as an alternative model for children aged 5 and over who were unable to attend or finish kindergarten during the school year.¹²¹⁷ There is a lower rate of awareness of the Catch-up programme than the requirement for a child to attend kindergarten, pointing to a need to disseminate this information more widely. Rates of awareness among parents of children aged 3-5 ranged from 26.2 per cent in Siayan to 78.9 per cent in Mapanas.¹²¹⁸

There was been a reduction in delivery of the Catch-Up Programme in many of the 36 municipalities, largely because Kindergarten has now been made compulsory. A lack of teaching space and teachers also meant that the programme was only implemented as a two-month course over the summer.¹²¹⁹

An evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 found that in the 36 municipalities covered by the MIS survey there was a significant proportion (43 per cent; 15.1 per cent boys, 13.5 per cent girls) of six-year-olds enrolled in early education rather than Grade 1.¹²²⁰ This is a matter of concern because it means that children are not entering primary education at the

¹²¹³ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016 p 150-151.

¹²¹⁴ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p 161.

¹²¹⁵ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, table 8.18.

¹²¹⁶ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p 152

¹²¹⁷ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016 p 161.

¹²¹⁸ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, table 8.18.

¹²¹⁹ Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management p 48.

¹²²⁰ Evaluation of the UNICEF Philippines Country Office 'Early Childhood Care and Development' and 'Basic Education' components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 51.

correct age.¹²²¹ Where children enter school late they are more likely to drop out of school or to repeat grades.¹²²²

Participation in elementary education

Elementary or primary education is compulsory for all children of school age under the Philippines Constitution and is provided for free according to Article XIV section 2(1). Elementary school is for children aged 6–11.

The net enrolment rate in elementary education in 2010 was 95.9 per cent. This decreased to 92.57 per cent in 2014 and 91.05 per cent in 2015.¹²²³ The goal in the PDP is to the net enrolment rate to 95 per cent by 2022.¹²²⁴ It has been suggested that enrolment may not have decreased in practice, but rather that the improvements to the Learner Information System which tracks students through the school system, may have removed duplicate and non-existent students.¹²²⁵ As EBEIS is not published or open to public, disaggregated data is not readily available to show how net enrolment rates vary between regions.

In 2013, there were similar enrolment rates for girls and boys attending elementary school, with a net enrolment rate of 91.8 per cent for boys and 93.5 per cent for girls.¹²²⁶ However, the MIS data from 36 municipalities shows that in many municipalities there are significant gender differences in attendance at Grade 1. These vary from Upi in Maguindanao, where there are almost twice as many boys studying as girls (80 per cent of boys and 45.5 per cent of girls), to Parang in Sulu with many more girls than boys (51.9 per cent of boys and 76.5 per cent of girls).¹²²⁷ Boys are considered to be less ready for school at a young age. They are more likely to get sick and be malnourished, and there are low parental expectations of boys in terms of schooling,¹²²⁸ all of which lead to lower enrolment rates of boys in formal education.

Although the net enrolment rate is high, this is not reflected in the elementary school completion rate. The Functional Literacy, Education, and Mass Media Survey (FLEMMS) survey showed that in 2013 the percentage of the population who had attended elementary school but did not graduate was 22 per cent. A further 11.6 per cent of the population had graduation from elementary school as their highest educational attainment.¹²²⁹

¹²²¹ Evaluation of the UNICEF Philippines Country Office ‘Early Childhood Care and Development’ and ‘Basic Education’ components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 51.

¹²²² UNESCO report 2006, as cited in Evaluation of the UNICEF Philippines Country Office ‘Early Childhood Care and Development’ and ‘Basic Education’ components of the 7th GPH-UNICEF Country Programme 2012-2016 Final Report, March 2017, Oxford Policy Management, p 51.

¹²²³ Table 10.2, Philippines Development Plan 2017-2022.

¹²²⁴ Table 10.5, Philippines Development Plan 2017-2022.

¹²²⁵ Philippines Development Plan 2017-2022, p 141.

¹²²⁶ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 25.

¹²²⁷ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p 174.

¹²²⁸ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 45.

¹²²⁹ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 12. The figures from the FLEMMS survey should be treated with caution as it refers to the population without counting children aged 1-5.

The numbers completing elementary education have, however, been rising. The completion rate for elementary education in 2010 was 72.1 per cent. This rose to 83.04 per cent in 2014 and 83.43 per cent in 2015.¹²³⁰ The goal in the PDP is to increase this to 90 per cent by 2022.¹²³¹ The cohort survival rate in elementary education was 74.2 per cent in 2010. This rose to 85.08 per cent in 2014 and 87.07 per cent in 2015.¹²³²

Dropout rates have also been decreasing. In school year 2010–2011 the dropout rate in elementary school was 6.29 per cent. This decreased to 2.7 per cent by school year 2015–2016.¹²³³ It is likely the rates are improving due to increased investment in education in recent years, which has resulted in fewer congested classrooms and an improved learning environment. The introduction of compulsory Kindergarten and investment in early years education may also have reduced dropouts as Grade 1 students are better prepared for school. The Government's flagship social protection programme, the 4Ps conditional cash transfer programme, may also have helped encourage children to stay in school; this programme provides cash transfers to poor households provided certain conditions are met, including requirements for school enrolment and attendance of children in the family up to 18 years.¹²³⁴

According to the FLEMMS survey carried out in 2013, the main reasons for children aged 6–11 not attending school are: lack of personal interest (24.9 per cent) and illness or disability (20.4 per cent).¹²³⁵ Though it has been suggested that the social norm (that the child is too young for school) also applies to this age group. More boys than girls are likely to drop out, with 0.65 per cent of boys and 0.36 per cent of girls dropping out at elementary level.¹²³⁶ Boys are also more likely to be taken out of school to work: education is seen as less important for boys who are more likely to be employed in jobs that do not require high academic skills, and boys can help in supporting the family, particularly in rural areas. It has also been suggested that boys are more likely to lose interest in traditional routine and passive classroom tasks.¹²³⁷ This is a particular issue for boys because teaching is a sector dominated by women, and it has been alleged that there is a gender bias towards girls in schools.¹²³⁸

Participation in secondary education

Secondary education is compulsory for all children of school age under the Philippines Constitution and is provided for free (Article XIV Section 2[1]). Until mid-2016, secondary education was compulsory for children aged 11–16. Under the new K-12 programme, secondary school is now compulsory for children aged 11–18.

The net enrolment rate in secondary education has fluctuated, decreasing from 64.7 per cent in 2010 to 63.26 per cent in 2014, but increasing again to 68.15 per cent in 2015. The goal in the PDP is to reach 75.44 per cent by 2022.¹²³⁹ It is not clear why the net enrolment rate has fluctuated, but as discussed above, the 2015 figures may be more reliable due to the introduction of the new learner

¹²³⁰ Table 10.2, Philippines Development Plan 2017-2022.

¹²³¹ Table 10.5, Philippines Development Plan 2017-2022.

¹²³² Table 10.2, Philippines Development Plan 2017-2022.

¹²³³ Philippines Development Plan 2017-2022, p 141-142.

¹²³⁴ See Chapter 8 for more detail on this programme.

¹²³⁵ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 30.

¹²³⁶ Philippines Development Plan 2017-2022, p 141-142.

¹²³⁷ Education for All 2015 National Review Report: Philippines,

<http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 45.

¹²³⁸ Last-mile learners situational analysis report, DepEd Project Development Division, June 2016, p 8.

¹²³⁹ Table 10.2, Philippines Development Plan 2017-2022.

information system. It should also be noted that this data will not reflect attendance at Senior High School under the K-12 Program as this was only introduced in mid-2016.

There is an interesting and significant difference between the attendance rates of girls and boys at secondary school level. In 2013 a far higher percentage of girls attended secondary school (71.2 per cent) than boys (58.9 per cent).¹²⁴⁰

Both the completion rate and cohort survival rate have fluctuated since 2010. The completion rate in 2010 was 75.1 per cent. This rose to 78.7 per cent in 2014 but dropped to 73.97 per cent in 2015.¹²⁴¹ The goal in the PDP is to increase this to 78.48 per cent by 2022.¹²⁴² Similarly the cohort survival rate in 2010 was 79.4. This increased to 81.24 in 2014 and then decreased to 80.75 in 2015.¹²⁴³

In the FLEMMS survey, the percentage of the population who graduated from elementary school but did not proceed to secondary school was 11.6 per cent in 2013; 15 per cent reached but did not finish high school, while 20.3 per cent completed high school.¹²⁴⁴ Dropout rates have decreased at the secondary level, but by less than at primary level. In school year 2010–2011 the dropout rate was 7.79 per cent. This dropped to 6.65 per cent in school year 2015–2016.¹²⁴⁵ In school year 2015–2016 the dropout rate for males was 3.32 per cent and 1.64 per cent for females.¹²⁴⁶ The FLEMMS survey showed a variation between regions in high school graduation. Ilocos and CALABARZON had the highest proportions with 39.3 per cent and 39 per cent respectively. ARMM had the lowest proportion with just 26.4 per cent.¹²⁴⁷ There is a lack of information on the underlying reasons for the regional variation which suggests that further research is needed in this area.

According to the FLEMMS survey, for children aged 12–15 the main reasons for not attending school were a lack of personal interest (46.1 per cent) followed by family income not being sufficient to send the child to school (19.8 per cent) and illness or disability (10.3 per cent).¹²⁴⁸ A survey published in 2013 by the Philippines Statistics Authority showed a slightly different breakdown of reasons for children dropping out of school. For children aged 12–15, the main reasons for leaving education were a lack of money to pay for it (19.8 per cent) and the need to find work (7.7 per cent).¹²⁴⁹ This appears to be reflected in the available data on working children. Boys are considered to be more likely to get a job which does not require academic skills and, as a result, remaining in school when they could be earning is less attractive.¹²⁵⁰ At the same time, there is a social expectation that girls will persevere with their education and seek a job that requires qualifications.¹²⁵¹ The pattern of attendance and dropout, with more girls in school than boy and less dropout among girls is unusual in developing States. International research evidence indicates that children's level of education is

¹²⁴⁰ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 26.

¹²⁴¹ Table 10.2, Philippines Development Plan 2017-2022.

¹²⁴² Table 10.5, Philippines Development Plan 2017-2022.

¹²⁴³ Table 10.2, Philippines Development Plan 2017-2022.

¹²⁴⁴ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 12.

¹²⁴⁵ Philippines Development Plan 2017-2022, p 141-142.

¹²⁴⁶ Philippines Development Plan 2017-2022, p 141-142.

¹²⁴⁷ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 22.

¹²⁴⁸ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 30.

¹²⁴⁹ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 30.

¹²⁵⁰ Education for All 2015 National Review Report: Philippines

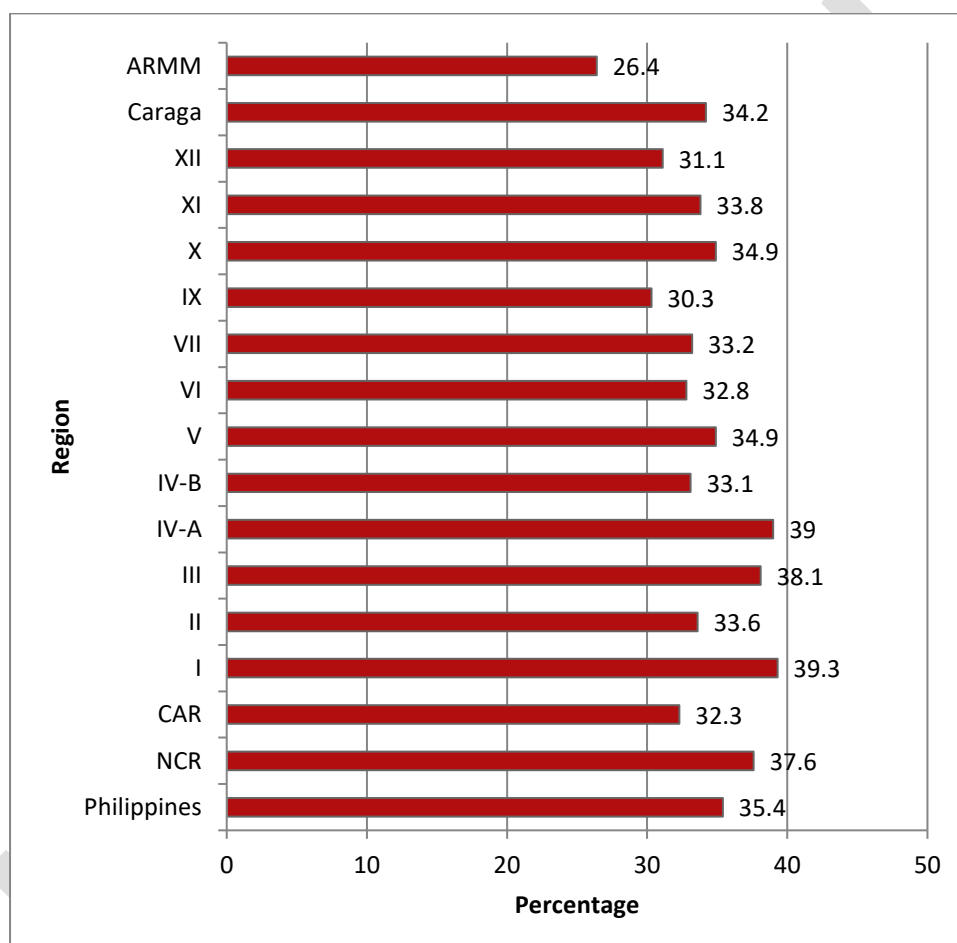
<http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 45.

¹²⁵¹ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

most closely linked to the educational level of their mother, and thus, the better education of girls provides an interesting possibility for improving the education level of the next generation.

It is likely that some of the children who drop out have undiagnosed special educational needs and are not able to keep up with the class, but it may also be indicative of poor teaching and a syllabus that is seen as irrelevant by children.

Table 7.1. Percentage of Population who have reached high school or graduated from high school by region, Philippines, 2013



Source: *Functional Literacy, Education, and Mass Media Survey, 2013*

Out-of-school children

There were an estimated 2.85 million children aged 5–15 who were ‘out of school’ (i.e. not attending school) in the school year 2015–2016. The prevalence was generally higher among the older age groups. However, Grade 1 (for seven-year-olds) generally has the highest dropout rate both nationally and in all regions.¹²⁵² This may be due to the often held view that children are too young to start education, and children in Grade 1 who have not participated in kindergarten or early education are not able to keep up with others in the class. What is not known, is whether any of these children re-enrol the following year.

¹²⁵² Last-mile learners situational analysis report, DepEd Project Development Division, June 2016, p 7-8.

Many out-of-school youth are from pockets of the population living below the poverty line who face challenges in accessing education. These include children living in geographically isolated areas, children with no families (for example, street children) and children in conflict areas.¹²⁵³ This is supported by the fact that ARMM has the highest rates for dropouts at both primary and secondary school.¹²⁵⁴

Alternative learning system

Many out-of-school children are located in geographically remote areas where, due to the requirement that there must be a minimum of 100 pupils in the area before a school is constructed,¹²⁵⁵ there are fewer schools, and longer distances for children to travel to reach available schools. Where schools have a low number of pupils, a small number of multigrade teachers may be allocated instead of one teacher per grade.¹²⁵⁶ In 2008–2009, multigrade schools comprised 33 per cent of the total number of public elementary schools and served 8 per cent of the total number of elementary students.¹²⁵⁷ The children in these schools are often disadvantaged children, including indigenous peoples and those living in conflict areas.

The Alternative Learning System (ALS), run by the DepEd in parallel to formal basic education, offers both non-formal and informal education to children who are out of school and adults.¹²⁵⁸ ALS is delivered by a mixture of DepEd provision, for example by using regular teachers as mobile teachers, and external procurement of NGOs and others to deliver education through alternative delivery methods. The ALS is open to anyone who is above the school age of formal elementary or secondary education respectively, but has not achieved the final years of that school level.¹²⁵⁹ The Enhanced Basic Education Act affirmed that ALS is considered to be part of the basic education sector.¹²⁶⁰ In 2015 the budget allocated to ALS was around 0.14 per cent of DepEd's total budget.¹²⁶¹

There are two strands to the ALS system. One is the Basic Literacy Program which is designed to eradicate illiteracy among both children and adults and is community-based. The second is structured informal education leading to the completing of the Accreditation and Equivalence Test and the awarding of an elementary or secondary level diploma to those who pass it.¹²⁶² The programme is free and learners are instructed in groups by facilitators using self-learning modules. Classes are held in a wide variety of locations from church halls to prisons.¹²⁶³ Different delivery modes are used to reach different target beneficiaries including face to face, radio based instruction, computer based instruction, independent learning and TV episodes.¹²⁶⁴

¹²⁵³ Key Informant Interview with Representative from DepEd, Wednesday, 14 June 2017, Manila.

¹²⁵⁴ Last-mile learners situational analysis report, DepEd Project Development Division, June 2016, p 7-8.

¹²⁵⁵ Key Informant Interview with representatives from UNICEF, Tuesday 13 June 2017, Manila.

¹²⁵⁶ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹²⁵⁷ Based on school year 2008–2009 data, Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf> p 20.

¹²⁵⁸ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>.

¹²⁵⁹ Philippines, Alternative Learning System Study, World Bank, May 2016, p 5.

¹²⁶⁰ Enhanced Basic Education Act, section 3.

¹²⁶¹ Philippines, Alternative Learning System Study, World Bank, May 2016, p 63.

¹²⁶² Philippines, Alternative Learning System Study, World Bank, May 2016, p 65.

¹²⁶³ Philippines, Alternative Learning System Study, World Bank, May 2016, p 65.

¹²⁶⁴ Philippines, Alternative Learning System Study, World Bank, May 2016, p 67.

While the alternative learning system has been effective it has faced challenges. There is limited data available about participation in ALS. In 2016, there were 691,461 learners enrolled in ALS, 43 per cent of whom were female.¹²⁶⁵ In 2014, only 10 per cent of potential learners were enrolled in the programme. Many of the target group are employed, meaning that they are less likely to wish to return to studying and to lose their source of income. However, those who left education for financial reasons are more likely to participate successfully in the ALS program as the failure to complete school is not related to their ability. It was suggested that those who stopped school for marriage/pregnancy or behavioural reasons were the least likely to enrol and succeed in ALS.¹²⁶⁶

While passing the secondary school equivalency test within the ALS programme can increase a child's employability and lead to increased wages, pass rate is low, at around 20 per cent.¹²⁶⁷ One of the main reasons for this is likely to be the high number of learners per facilitator, and the lack of financial support for those who chose to study in an ALS programme, meaning that they are working as well as studying.¹²⁶⁸ It was observed in a study carried out by the World Bank that an increase in pass rate was observed in classes where the number of learners was below 50.¹²⁶⁹

Other alternative delivery modes have been implemented by DepEd, and supported by NGOs and international organizations such as UNICEF, to make education more flexible. Some details are set out below, however there is limited information about the breadth and effectiveness of these programmes and how they link up with the ALS and the formal basic education system.

The e-IMPACT programme is a technology-enhanced alternative delivery mode developed by the SEAMEO Regional Centre for Educational Innovation and Technology to address issues of accessibility and low quality in multi-grade schools. It is a very flexible programme allowing for self and group learning, both at school and at home. It also allows students to drop in and out as it suits them. However this approach is contrary to the general DepEd approach of having fixed enrolment periods and attendance at a fixed percentage of classes.¹²⁷⁰ It was first introduced in 1974 in five rural schools and has been expanded in recent years.¹²⁷¹ In the 2012–2013 school year, it was implemented in 31 elementary schools with 4,932 people enrolled.¹²⁷² A UNICEF evaluation found that this programme, although effective, had a high cost due to the technology requirements which limited the viability of replicating the programme on a wider level.¹²⁷³

The Modified In-School Off-School Approach (MISOSA) was introduced by the DepEd Bureau of Elementary Education and piloted in 14 schools in 2005. It is implemented in large classes with more than 50 students in Grades 4–6.¹²⁷⁴ The programme consists of splitting the class into two groups of students who alternate attending classes taught by a teacher, and out of school learning taught by a volunteer teacher. Its purpose is to help address overcrowding, the lack of classrooms, learning

¹²⁶⁵ Presentation by Assistant Secretary, Ms G.H. Ambat to DepEd donor coordination workshop, July 20, 2017

¹²⁶⁶ Philippines, Alternative Learning System Study, World Bank, May 2016, p 60.

¹²⁶⁷ Philippines, Alternative Learning System Study, World Bank, May 2016, p 60.

¹²⁶⁸ Philippines, Alternative Learning System Study, World Bank, May 2016, p 60.

¹²⁶⁹ Philippines, Alternative Learning System Study, World Bank, May 2016, p 60.

¹²⁷⁰ UNICEF evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, p 4.

¹²⁷¹ UNICEF evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, p 4.

¹²⁷² Education for All 2015 National Review Report: Philippines,

<http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 20.

¹²⁷³ UNICEF evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, p 4-5.

¹²⁷⁴ UNICEF evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, p 4.

materials and teachers.¹²⁷⁵ In the 2012–2013 school year there were 84,754 pupils in 117 schools benefiting from MISOSA.¹²⁷⁶ A UNICEF evaluation found that although the programme was effective, there were challenges in recruiting and retaining volunteer teachers, and securing appropriate locations for the out-of-school segments.¹²⁷⁷

A UNICEF study on MISOSA and e-IMPACT found that these alternative delivery modes made notable contributions to improving educational outcomes, especially in raising the level and achievement test scores of learners, as well as reducing dropout and repetition rates, although to a lesser extent. This may have been the result of a more varied and stimulating teaching and learning environment which encourages learners to participate in an active fashion and the engagement of parents and communities in education.¹²⁷⁸ A particular benefit of these programmes is that they do not generally need additional resources such as classrooms and teachers, and so could also benefit overcrowded schools as well as those who are at risk of dropping out.¹²⁷⁹ However, the cost of additional inputs, such as technology are likely to be a barrier to wider implementation.

A further alternative delivery mode in the Philippines is the Open High School Programme which does not require regular class attendance, but uses flexible and distance learning strategies to accommodate learners whose physical impairments, jobs, finances, remoteness or other factors prevent them from attending regular school. There is limited data on the Open High School Programme, but in the 2011–2012 school year there were 39,822 OHSP enrollees in 942 OHSP implementing schools.¹²⁸⁰ A SAMEO INNOTECH study carried out on a small sample of schools implementing the open high school program in 2015 concluded that it does provide an effective solution for some students who cannot attend regular school and helps in reducing dropouts. However, there were areas that needed improvement, including the need for better support for teachers to help students develop at their own pace, a lack of orientation for parents and learners about how the programme worked and a lack of consistent monitoring and evaluation of the programme. In particular, it was difficult to assess the academic performance of students in open high school due to the lack of a standardised testing regime.¹²⁸¹

Madrasah Education

Steps have been taken by DepEd to increase the number of Muslim and Indigenous students receiving formal education. Madrasah education has been introduced to both promote education for all and contribute to the peace process. The Refined Elementary Madrasah Curriculum was implemented through DO No. 40 s. 2011¹²⁸² in elementary public schools which have at least 15 Muslim students enrolled (also known as the ALIVE program) and private madaris. Some public school divisions have used ALIVE in their ALS program to deliver Arabic Language and Islamic Values to Muslim out of

¹²⁷⁵ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 20.

¹²⁷⁶ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 20.

¹²⁷⁷ UNICEF evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, p 4-5.

¹²⁷⁸ UNICEF Evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, Final Report, December 2012, p 147.

¹²⁷⁹ UNICEF Evaluation on Alternative Delivery Modes: MISOSA and e-IMPACT, Final Report, December 2012, p 148.

¹²⁸⁰ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 21.

¹²⁸¹ Evaluation of the Open High School Program in the Philippines, SAMEO INNOTECH, 2015, p xv.

¹²⁸² Amendment to DepEd Order No. 51, s. 2004 (Standard Curriculum for Elementary Public Schools and Private Madaris).

school youth.¹²⁸³ In 2013–2014, there were 1,235,854 Muslim students enrolled in elementary and secondary education.¹²⁸⁴

DepEd will provide support to madrasahs if they adopt the Refined Elementary Madrasah Curriculum, which includes both secular education and Arabic Language and Islamic studies.¹²⁸⁵ The DepEd support is in the form of tuition fees, which goes to the school administration, for example to hire teachers and build structures.¹²⁸⁶ The reasons for introducing the refined elementary madrasah curriculum include ensuring that children are more able to move between Madrasahs and regular public schools, and to promote Filipino culture alongside preserving Filipino Muslim's cultural heritage.¹²⁸⁷

Additionally, under the Philippine Response to Indigenous and Muslim Education programme, a number of steps were taken to address the access to schools for Muslim boys and girls including building dormitories, prayer rooms and learning centres to improve access and to indigenise learning materials.¹²⁸⁸

At tertiary level, ALIVE TVET was a partnership between DepEd and TESDA to implement Technical and Vocational Education and Training with Arabic Language and Islamic Values Education for Muslim Out of School Youth. However, there is very little information about this programme and it appears to have been discontinued due to budget constraints.¹²⁸⁹

Education programme for Indigenous Peoples

DepEd has a number of frameworks for education of indigenous persons. The National Indigenous People Educational Policy Framework (DO No. 62 s. 2011) aims to make education culturally responsive. It integrates Indigenous peoples' learning systems into the standard basic education curriculum and commits to providing culturally appropriate learning resources and environments to indigenous learners.¹²⁹⁰ In conjunction with this, the Indigenous Peoples Education Curriculum Framework (DepEd Order No. 32 s.2015) provides guidance to schools and learning programmes engaging with indigenous communities to localise, indigenize and enhance the K–12 Curriculum for their local context.¹²⁹¹ There is very limited information on the quality of the education provided under these frameworks. In the 2013–2014 school year, there were 997,138 elementary and 246,820 secondary Indigenous learners, with 21 per cent of all Indigenous students located in CAR.¹²⁹²

¹²⁸³ Baseline Study of DepEd's Readiness to Provide and Sustain Basic Education Services to Disadvantaged Muslim Communities as cited in Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 40.

¹²⁸⁴ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 28.

¹²⁸⁵ Refined Elementary Madrasah Curriculum, DepEd Order No. 40, s.2011.

¹²⁸⁶ Interview with Director Rodger Masapol, Planning Service, Department of Education, Wednesday, 14 June 2017, DoE Complex, Manila.

¹²⁸⁷ DepEd Order No. 40, s.2011.

¹²⁸⁸ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 28.

¹²⁸⁹ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 31.

¹²⁹⁰ DepEd Order No. 62, s. 2011.

¹²⁹¹ DepEd Order No. 32, s.2015.

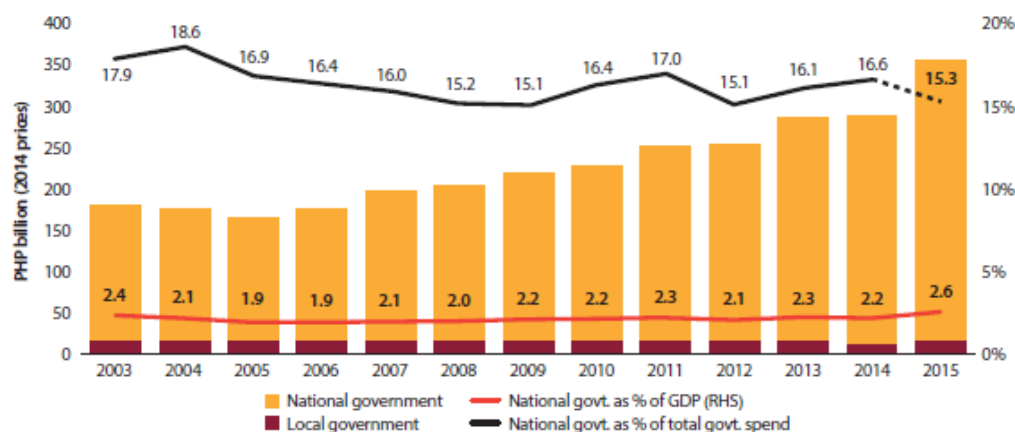
¹²⁹² Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 29.

There appears to have been limited monitoring of these forms of education and their impact on children’s educational achievement.

7.2.6. Funding for basic education

The percentage of the national budget allocated to public education and overall funding for education has been increasing. In 2014, the education budget was PhP309.43 billion,¹²⁹³ which increased to PhP435.9 billion in 2016.¹²⁹⁴ The percentage of the national budget spent on public education was 2.2 per cent of GDP in 2014. However, the Philippines is still falling short of the amount of money spent on education by other similar countries. The average amount spent on education in lower-middle income countries is almost 5 per cent.¹²⁹⁵

Table 7.2. Public Spending on Education, Philippines, 2003–2015



Sources: National government spending—DBM National Expenditure Program. Local government education spending—Bureau of Local Government Finance. GDP and GDP deflator—Philippines Statistics Authority.

Notes: Basic education spending data are obligations except for 2015 where adjusted amounts are reported. Basic education refers to the DepEd budget and obligations for the Philippines Science High School. Local government spending figures are obligations but from 2014 only include spending from the Special Education Fund. The total government expenditure figures used to calculate the share of education spending exclude interest payments.

The spending per student in the Philippines is also low compared to other middle-income countries.¹²⁹⁶

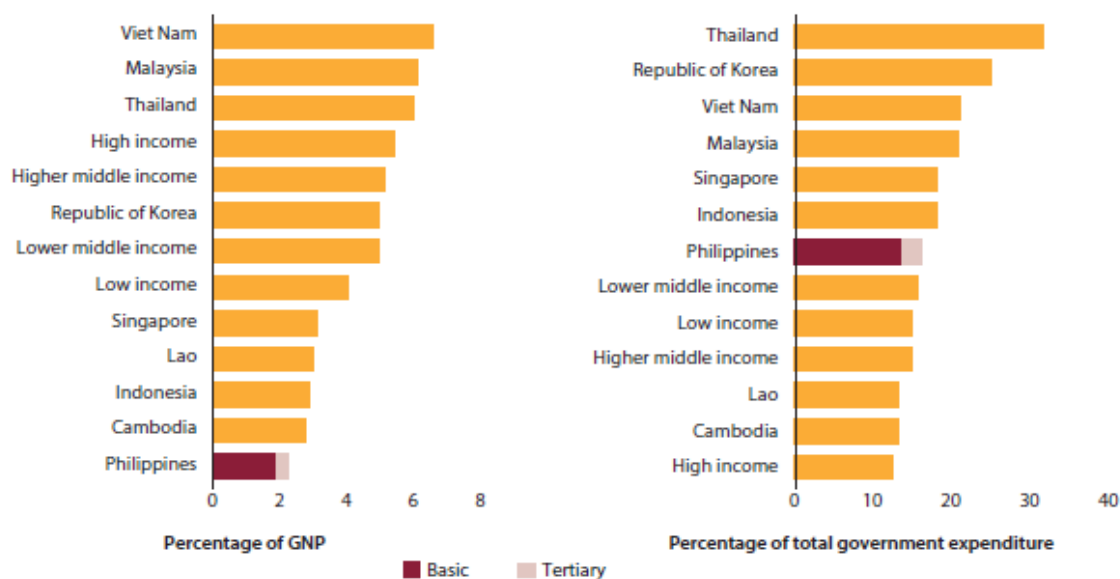
Table 7.3. Spending on Education as a share of GDP and total government spending, selected countries, 2012

¹²⁹³ “Education gets lion’s share of 2014 budget”, January 27, 2014, <http://www.gov.ph/2014/01/27/education-gets-lions-share-of-2014-budget/>.

¹²⁹⁴ “Education tops 2016 budget”, September 8, 2015, <http://www.gov.ph/2015/09/08/education-tops-2016-budget/>.

¹²⁹⁵ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 13.

¹²⁹⁶ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 11.



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

There is a significant disparity in the amount spent for each school-aged child in the regions, varying from around PhP4,500 in the NCR to just over PhP7,600 in the CAR. This does not appear to correlate with regional and provincial levels of poverty.¹²⁹⁷

Although many public services have been decentralised in the Philippines, basic education remains largely under the control of the national government through DepEd. LGUs have a small amount of responsibility as they maintain basic education infrastructure and fund sports activities.¹²⁹⁸ A Special Education Fund was created by Republic Act 7160, an Act Providing for a Local Government Code of 1991, which is funded by a 1 per cent charge on real property.¹²⁹⁹ The fund can be spent on operation and maintenance of public schools, construction and repair of school buildings, facilities and equipment, educational research, purchase of books and periodicals and sports development.¹³⁰⁰ Funds from the special education funds are released to local school boards who determine how the funds are spent.¹³⁰¹

As the Special Education Fund (SEF) is based on a 1 per cent surcharge on property taxes, and property prices have risen in recent years, the funds available in the SEF have risen, but the spending has declined. In 2014 this resulted in a surplus of over PhP63 billion. The reasons for this are likely to be related to poor cash management and poor budgeting by local school boards and LGUs.¹³⁰² One of the challenges in spending the funds effectively has been the lack of communication between schools and the local school boards, with funds are not always being allocated to areas of most need.¹³⁰³

Table 7.4. Total public spending on education by LGUs between 2003 and 2013

¹²⁹⁷ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, xxix.

¹²⁹⁸ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 103.

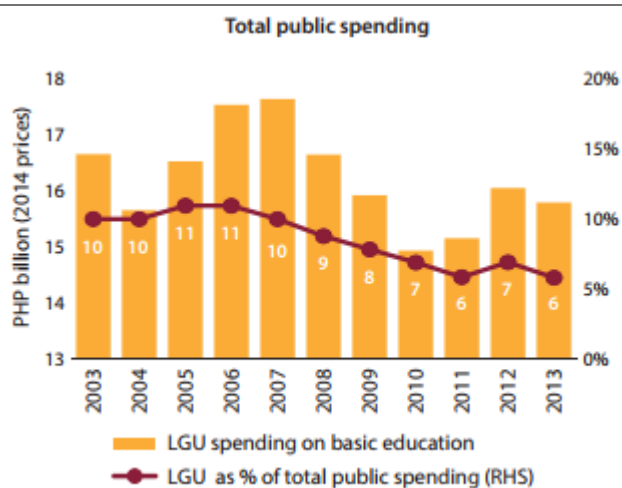
¹²⁹⁹ An Act Providing for a Local Government Code 1991, section 309.

¹³⁰⁰ An Act Providing for a Local Government Code 1991, section 272.

¹³⁰¹ An Act Providing for a Local Government Code 1991, section 272.

¹³⁰² *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 104.

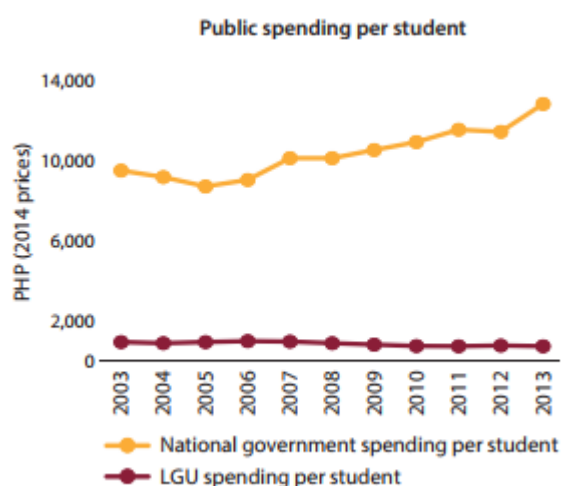
¹³⁰³ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 103.



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

The decrease in spending on education at local level is in stark contrast to the increase in national government funding for education.¹³⁰⁴

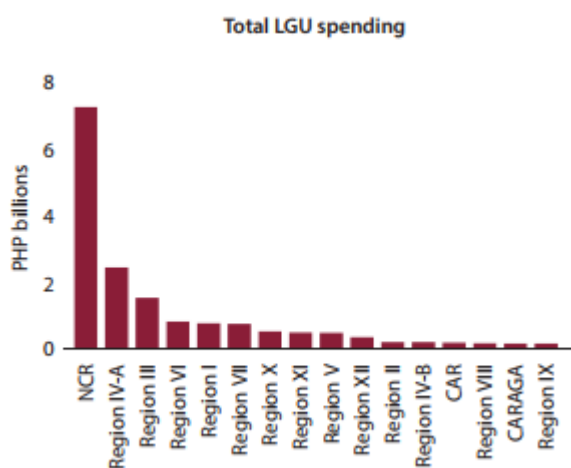
Table 7.5. Public spending per student by LGUs 2003–2013



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

Table 7.6. Total local government spending on education per region, 2013

¹³⁰⁴ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 104.



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

Although education is free, households spend a considerable amount of money on education. In 2015, 3.8 per cent of total family expenditure was spent on education,¹³⁰⁵ but it is not clear to what extent this was spent on public or private.¹³⁰⁶ The private sector and NGOs also contribute funding to schools, but there is a lack of consistent information on the amount they contribute and on what it is spent.¹³⁰⁷

In order to ensure that education is free for all children, DepEd prohibits the collection of fees for schooling and regulates the collection of voluntary fees. The Revised Guidelines on the Opening of Classes (DO No. 41 s. 2012) are intended to reinforce the policy that no fees are to be collected from school children from kindergarten to Grade 4. From Grade 5 and up, voluntary contributions may be sought, but collection of voluntary contributions from parents cannot begin until two months after the start of class. The removal of fees for learners has helped to increase enrolment and has reduced dropout rates by easing the financial burden on families.¹³⁰⁸

The government is taking steps to mitigate some of the reasons for lack of attendance. The Conditional Cash Transfer (CCT) programme provides the poorest households in the Philippines with a Php500 subsidy per month for healthcare and nutrition expenses and a Php300 education subsidy per month per child for a maximum of three children. These benefits are only released if three- to five-year-old children in the family attend day care or preschool at least 85 per cent of the time and 6–14 year old children enrol in elementary or secondary school and attend at least 85 percent of class meetings.¹³⁰⁹

¹³⁰⁵ 2015 Family Income and Expenditure Survey Table 9, accessed at <https://psa.gov.ph/content/statistical-tables-2015-family-income-and-expenditure-survey>.

¹³⁰⁶ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 13.

¹³⁰⁷ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 13.

¹³⁰⁸ *Education for All 2015 National Review Report: Philippines*, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 21.

¹³⁰⁹ *Education for All 2015 National Review Report: Philippines*, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 22.

In order for the CCT requirements to have effect there needs to be sufficient available space in all levels of education for children to attend. It is not clear what happens when there is no space in the local day care centre, or if there is no day care centre in the area.¹³¹⁰

Another programme providing financial support for education is the Government Assistance to Students and Teachers in Private Education programme. This programme pays the fees for ‘deserving’ elementary graduates from low income families to continue their studies at private high schools, especially where the child does not have access to a public high school. DepEd will cover the tuition and other fees to enable a child to enrol in a private high school to enable the child to continue into secondary education.¹³¹¹ Under the K-12 program the Government Assistance to Students and Teachers in Private Education programme has been extended to support those who have attended public junior high school and wish to attend senior high school, but there is no availability in their area.¹³¹² The number of student beneficiaries of this programme has increased from 666,000 in school year 2009–2010 to 809,000 in school year 2013–2014,¹³¹³ and to 910,312 in school year 2015–2016.¹³¹⁴ The expectation is that DepEd will subsidise around 800,000 public school students to attend a private school for senior high school each year.¹³¹⁵

7.2.7. Infrastructure for basic education

Concerns have been raised by the UN Committee on the Rights of the Child regarding poor school facilities in the Philippines, including the insufficient number of classroom seats, text books and school supplies, especially in remote areas.¹³¹⁶

Some schools in the Philippines have been so congested in the last 10 years that they have had to run up to four shifts of classes each day. Running classes in shifts may increase the number of children receiving some schooling, but can reduce the quality of education received, particularly if the same teacher is teaching multiple shifts each day.¹³¹⁷ According to DepEd, there was a reduction in the number of congested schools between 2011 and 2014.¹³¹⁸

Table 7.7. Number of congested elementary schools 2011–2014

¹³¹⁰ Key Informant Interview with representatives from UNICEF, 13 June 2017, Manila.

¹³¹¹ An Act Providing Government Assistance to Students and Teachers in Private Education, and Appropriating Funds Therefore, RA No. 6728, as amended by RA 8545, section 7.

¹³¹² Enhanced Basic Education Act, section 10.

¹³¹³ DepEd figures cited in Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 22.

¹³¹⁴ DepEd FY 2015 Physical Report of Operation as of December 31 2015.

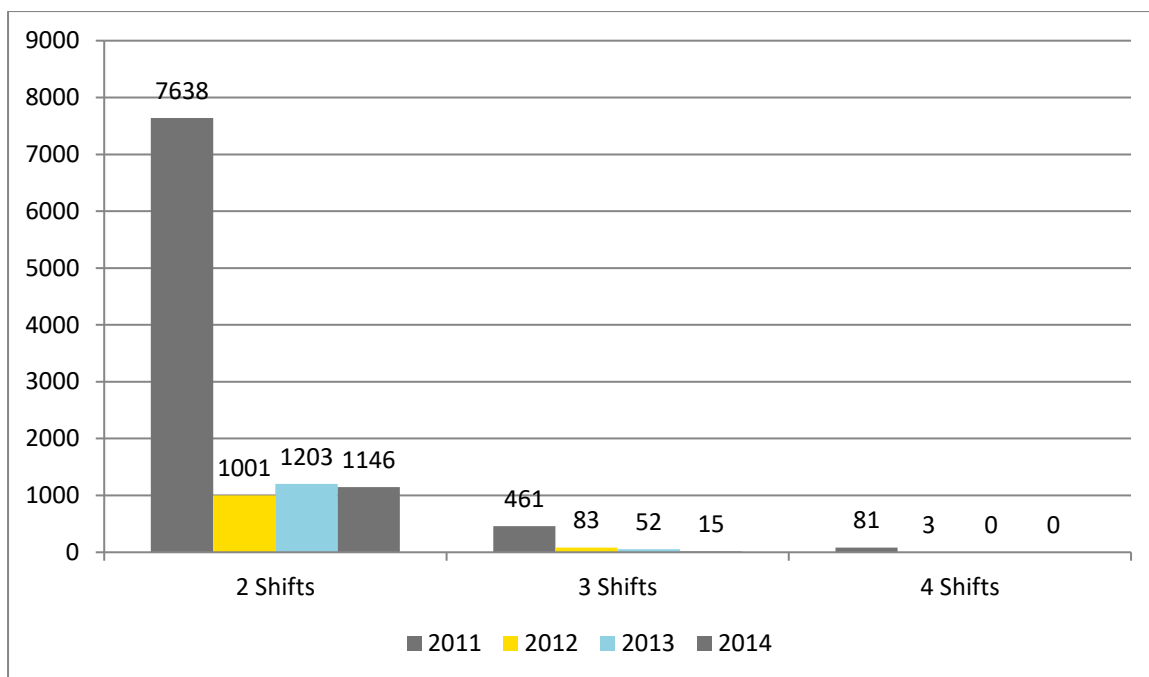
¹³¹⁵ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 29.

¹³¹⁶ UN Committee on the Rights of the Child, concluding observations on the Philippines, 2009, para 65.

¹³¹⁷ Double Shift Schooling: design and operation for cost effectiveness, Mark Bray, UNESCO, p 20.

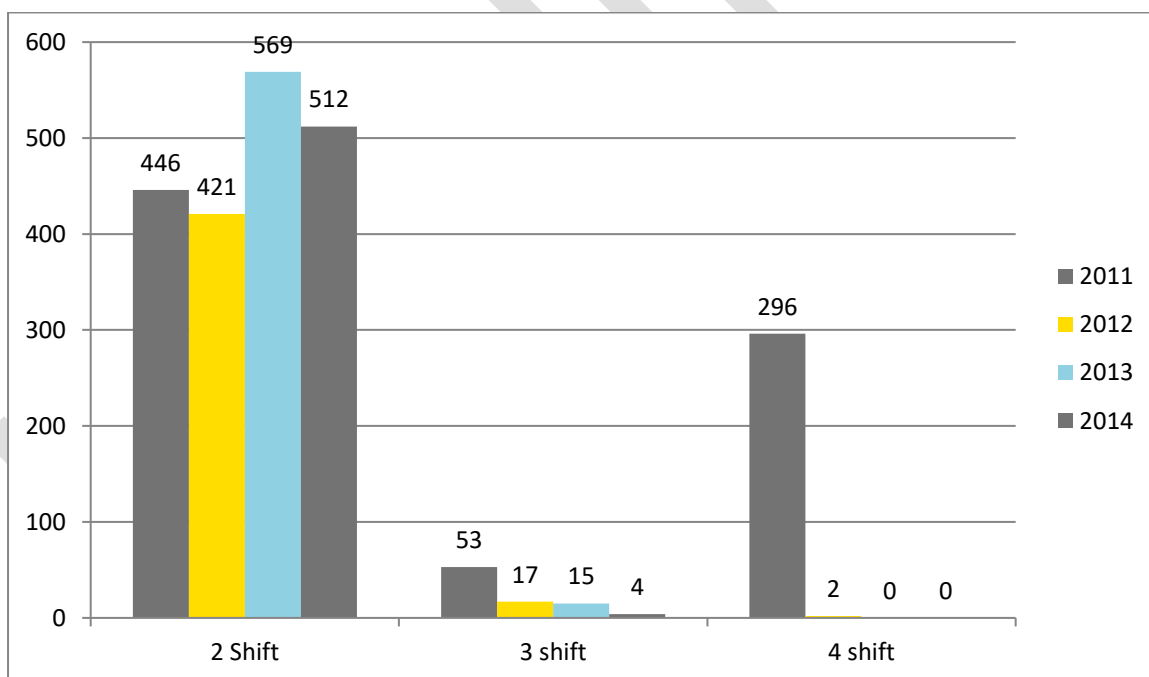
¹³¹⁸ K-12 Midterm report to Congress, slideshow

(<http://www.deped.gov.ph/sites/default/files/K%20to%2012%20Midterm%20Report%20to%20Congress%20%2810%20March%202015%29.pdf>)



Source: Department of Education

Table 7.8. Number of congested secondary schools 2011-2014



Source: Department of Education

According to the PDP, although the provision of educational facilities has improved through school building programs and projects, the ratio of classroom to pupils remains low. The classroom to pupil ratio decreased from 1:39 in 2010 to 1:34 in 2014 at primary level, and from 1:54 to 1:48 at secondary

level between 2010 and 2014.¹³¹⁹ The goal in the PDP is to have a classroom to pupil ratio of 1:25 in kindergarten, 1:30 for Grades 1–3 and 1:40 for Grades 4–6 in junior and senior high school by 2022.¹³²⁰

There have been difficulties in building enough classrooms to meet the needs of the growing school age population. Between 2010 and 2016, 118,686 classrooms were constructed.¹³²¹ This construction covered the classroom deficit of 66,800 in 2010, but another 34,057 classrooms are needed to allow for the full implementation of the K-12 program.¹³²² Of the 15,025 classrooms planned to be built in 2015, only 900 were built. The goal was to build 3,003 classrooms to facilitate K to 10 classes, while the majority (12,022) were for senior high school.¹³²³ Slightly better progress was made in 2016, as DepEd had planned to build 91,368 new classrooms, but by the end of the third quarter had only built 33,230.¹³²⁴ The lack of progress in hitting targets for building classrooms in 2015 and 2016 does not appear to be due to lack of funds, as sufficient funds appear to have been allocated by DepEd to build these classrooms. However, DepEd failed to utilize more than half its budget for capital outlay between 2012 and 2015,¹³²⁵ indicating a lack of capacity to administer and utilize the funds to execute the project. There appear to be a number of reasons for the failure to meet the targets. First, there are often delays in receiving funds for planned projects which, combined with strict procurement rules imposed, means schools cannot spend and account for the use of funds before the end of the fiscal year.¹³²⁶ Second, some schools, especially those in rural areas, lack administrative staff to prepare the necessary accounts for their expenditure.¹³²⁷ Failure to prepare accounts for previous expenditure results in future funds being withheld, which in turn leads to an inability to spend funds.¹³²⁸ Additionally, school construction is implemented through the Department of Public Works and Highways which does not always co-ordinate effectively with DepEd, leading to delays in executing of projects.¹³²⁹

School infrastructure (classrooms, desks and chairs) meet DepEd’s standards in 94 per cent of elementary schools and 83 per cent of high schools.¹³³⁰ However in urban areas, standards of school infrastructure are lower: 24 per cent of elementary and 30 per cent of high schools in highly urbanized cities have student-classroom ratios well above the maximum.¹³³¹ Additionally, many fail to meet sanitation facility standards, with 3,819 schools still lacking a water supply and sanitation facilities.¹³³² Seventy per cent of high schools in highly urbanized cities fail to meet the sanitation facility standards because they have more than 50 female students per toilet.¹³³³ This is likely to be due to the high population density in such cities and a lack of schools. High schools in highly urbanized cities tend to

¹³¹⁹ Philippines Development Plan 2017-2022, p 310.

¹³²⁰ Table 19.4, Philippines Development Plan 2017-2022.

¹³²¹ Philippines Development Plan 2017-2022, p 310.

¹³²² Philippines Development Plan 2017-2022, p 294.

¹³²³ DepEd FY 2015 Physical report of operation as of December 31 2015.

¹³²⁴ <http://www.deped.gov.ph/sites/default/files/page/2017/FY%202015%20Full%20Year.PDF>

¹³²⁵ DepEd Physical Report of Operation as of September 30 2016.

¹³²⁶ Philippines Development Plan 2017-2022, p 294.

¹³²⁷ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 21.

¹³²⁸ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 21.

¹³²⁹ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 21.

¹³³⁰ Philippines Development Plan 2017-2022, p 310.

¹³³¹ Philippines Development Plan 2017-2022, p 310.

¹³³² Philippines Development Plan 2017-2022, p 310.

¹³³³ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 58.

be more overcrowded, with higher student-teacher and student classroom ratios,¹³³⁴ so it is unsurprising they also fail to meet sanitation facility standards.

There are also problems with delivering electricity to schools. In the school year of 2013–2014, 1,308 public elementary schools (3.38 per cent of the total number of public elementary schools nationwide, with a total enrolment of 220,883 students) were without access to electricity in the Philippines.¹³³⁵ The majority of these, 355 (16.06 per cent of elementary schools in the region), were in the ARMM, followed by Region IV-B (164 or 8.9 per cent of schools in the region), Bicol Region (146 or 4.64 per cent of schools in the region), and CAR (132 or 8.66 per cent of schools in the region).¹³³⁶ The lack of electricity reduces the opportunity for students to develop skills in technology, and can limit teaching hours due to a lack of available light. However, the electrification of these schools could, provide great opportunities for the promotion of renewable, cleaner and more resilient energy sources like solar energy.

7.2.8. Quality of basic education

Educational achievement

One of the key concerns in the education sector is whether children are learning and achieving well. The achievement rate in elementary education (the degree of performance in different subject areas in various levels of education, as measured by DepEd) rose from 68.2 per cent in 2010 to 69.1 per cent in 2014,¹³³⁷ not a significant increase. The achievement rate is lower at secondary school, but has increased from 47.9 per cent in 2010 to 49.48 per cent in 2014.¹³³⁸

The Philippines has not participated in international assessments of academic performance since 2003, but when it did, its scores were among the lowest of all countries.¹³³⁹ The Philippines is now participating in the Southeast Asia Primary Learning Metrics at Grade 5.¹³⁴⁰ In the 2008 national achievement test there were low scores across mathematics (42.9 per cent mastery) and science (46.7 per cent mastery), which is reflected in employers surveys of the low performance of students in these areas.¹³⁴¹ In the national achievement test, girls generally perform better than boys.¹³⁴² It should be noted that the data from National Achievement Test is not publicly available and is not linked with the EBEIS system which makes it difficult to analyse the data.

Reasons given for the low achievement rates and low academic performance are a lack of teacher competencies;¹³⁴³ high student-teacher ratios; absence of basic educational facilities and the quality of classrooms.¹³⁴⁴ In a nationwide survey in 2015 of 2,762 respondents aged 15–30, that only 64 per cent of respondents said they were satisfied with the quality of education in the Philippines.¹³⁴⁵

¹³³⁴ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p xxxvi.

¹³³⁵ Last Mile Learners Situational Analysis report, DepEd June 2016, p 47.

¹³³⁶ Last Mile Learners Situational Analysis report, DepEd June 2016, p 47.

¹³³⁷ Table 10.2, Philippines Development Plan 2017-2022.

¹³³⁸ Table 10.2, Philippines Development Plan 2017-2022.

¹³³⁹ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 26.

¹³⁴⁰ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹³⁴¹ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 26.

¹³⁴² Key Informant Interview with representative from DepEd, Wednesday, 14 June 2017, Manila.

¹³⁴³ Philippines Education Note, Developing a Proficient and Motivated Teacher Workforce in Assessing Basic Education Service Delivery in the Philippines Policy No. 2, World Bank, June, 2016.

¹³⁴⁴ Philippines Development Plan 2017-2022, p 141.

¹³⁴⁵ National Youth Assessment Study 2015, Philippines, National Youth Commission, p 21.

Teacher training and recruitment

The quality of teacher training provided in the Philippines remains a matter of concern. The pass rate for teacher exams in March 2017 was 10.49 per cent for examinees applying to be elementary teachers and 25.46 per cent for examinees applying to be secondary teachers.¹³⁴⁶ In 2014, Philippine Business for Education, a national NGO found that 59 per cent of teacher education institutions for elementary teachers did not reach the national pass rate of 52 per cent of candidates passing first time. Similarly, 63 per cent of teacher education institutions for secondary students did not meet the national pass rate of 56 per cent for first time candidates; 68 per cent of the teacher training institutions that did not meet the national pass rate were private schools. One of the reasons for such low pass rates is the poor level of basic education in the Philippines, but also the low quality of teacher training at many institutions.¹³⁴⁷

DepEd is taking steps to improve the quality of teacher training. Teacher training institutions that fail to meet the national pass rate will be shut down.¹³⁴⁸ DepEd have also tightened the hiring policies in schools and now require those applying for teaching roles to demonstrate their skills rather than relying on paper qualifications.¹³⁴⁹

Although the pass rates for teaching exams are low, the recruitment of new teachers has increased. According to DepEd, the number of new teachers hired has increased between 2010 and 2014, peaking at 58,793 hired in 2013.

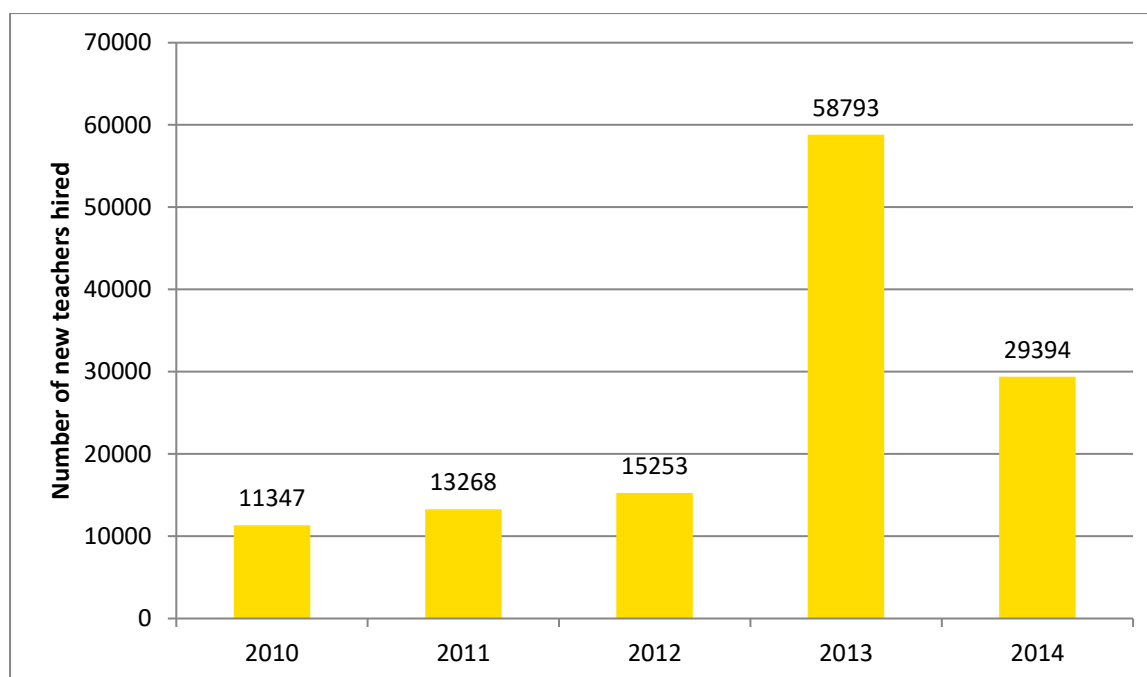
Table 7.9. Number of new teachers hired 2010-2014

¹³⁴⁶ List of passers: March 2017 LET Results Teachers Board Exam (Elementary, Secondary), accessed at: <http://www.prcboard.com/2017/03/Results-March-2017-LET-Teachers-Board-Exam-Elementary-Secondary.html>.

¹³⁴⁷ 'Most schools for teachers perform badly in licensure exams', Jee Y Geronimo, March 21 2014, <http://www.rappler.com/nation/53468-worst-schools-teachers-ph>.

¹³⁴⁸ Key Informant Interview, June 2017, Manila.

¹³⁴⁹ Key Informant Interview June 2017, Manila.



Source: Department of Education

Republic Act 8190, the Localisation Law, gives priority to the appointment and assignment of teachers who are residents of the barangay, city or municipality in which the school is located.¹³⁵⁰ Such a policy supports mother tongue teaching and ensures that schools in remote areas have teachers in place, but it is not always advantageous to the school.¹³⁵¹ Head teachers and school division superintendents have raised concerns that focusing too much on local employment, means that the need for subject specific teachers and geographical diversity take second place. Such issues are equally important and need to be given consideration.¹³⁵²

The starting salary in the Philippines for new teachers is quite high compared to neighbouring countries, at around 150 per cent of per capita GDP, however salaries only increase slowly over the years. Teachers' salaries only increase by about 15 per cent over 15 years, which is low compared to similar countries. Around 20 per cent of teachers reported they had to take on another job to supplement their earnings.¹³⁵³ Working at a second job has the potential to reduce the quality of teaching and the level of energy and commitment.

Teaching skills

Education in the Philippines has generally been rote-based, leaving learners with limited mastery of and ability to apply knowledge and skills in further education and the work place.¹³⁵⁴ The classic pedagogy of the teacher standing at the front and talking, combined with overcrowded classrooms, lack of interactive teaching and a lack of variety in the methods of delivery, often leaves children

¹³⁵⁰ An Act Granting Priority to Residents of the Barangay, Municipality or City Where the School is Located in the Appointment or Assignment of Classroom Public Schoolteachers, Republic Act No 8190, section 1.

¹³⁵¹ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 32.

¹³⁵² Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 31.

¹³⁵³ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 50.

¹³⁵⁴ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 26.

bored and not focusing on the learning.¹³⁵⁵ In a formative assessment of 65 school classrooms in four regions carried out by the Assessment Curriculum and Technology Research Centre,¹³⁵⁶ 56 per cent of teachers observed were only able to teach at class level and deliver their pre-prepared lesson although teachers are encouraged by DepEd Order No 8. S. 2015 to take an interactive and 'formative' approach and to adjust their teaching style and strategy based on student responses..¹³⁵⁷

In multigrade schools there is a need for teachers to be trained in intense pedagogy. Although around 33 per cent of elementary schools are multigrade, it would appear that the DepEd has given little emphasis to the provision of such training, with only one person in DepEd allocated at national level to support such training.¹³⁵⁸

Knowledge of subject matter is another challenge, as this has been shown to be low among teachers. According to the Philippines Public Education Expenditure and Quantitative Service Delivery Study, teacher content knowledge assessments carried out in 2014¹³⁵⁹ the average elementary or high school teacher could answer less than half of the subject content test questions for their area correctly. These are the tests which form the basis of the curriculum.¹³⁶⁰

In order to qualify as a teacher an individual has to be a graduate with at least a bachelor's degree in elementary or secondary education, although secondary teachers can also have a bachelor's degree in arts and sciences provided at least 10 units cover professional education. Teachers must also pass the licensure exam, which for secondary teachers includes a section on their proposed field of specialisation.¹³⁶¹ Although secondary school teachers can qualify as teachers after having taken a degree in sciences, many science teachers do not have a qualification in the subject area in which they teach: 73 per cent of physics teachers and 66 per cent of chemistry teachers did not study the subjects at university.¹³⁶² Limited mastery of the subject area is likely to be a growing concern with the move to the K-12 programme, as years 11 and 12 will require teachers to teach their subjects at a higher level than previously.

A World Bank report in 2016 indicates that the majority of teachers (75 per cent) received some form of professional development, with high school teachers more likely to have received professional development than primary school or Kindergarten teachers.¹³⁶³ Kindergarten teachers were the least likely to have received in-service training.¹³⁶⁴ Although teachers were generally positive about the

¹³⁵⁵ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹³⁵⁶ Formative Assessment project, Phase 2 Research Report, Assessment Curriculum and Technology Research Centre, 2016, p 7

¹³⁵⁷ Formative Assessment project, Phase 2 Research Report, Assessment Curriculum and Technology Research Centre, 2016, pp 18 and 19.

¹³⁵⁸ Key Informant Interview June, Manila.

¹³⁵⁹ As part of this study 377 grade 6 and 946 grade 10 teachers took two assessments, a subject-based content assessment for measuring teachers' knowledge of the content of the K-12 curriculum in English, Filipino, Mathematics and Science, and a short form of the Philippine government's Teacher Strengths and Needs Assessment based on the National Competency Based Teacher Standards, *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 41.

¹³⁶⁰ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p xvii.

¹³⁶¹ Article 3, RA 7836, The Philippine Teachers Professionalization Act of 1994.

¹³⁶² *Transitions to K-12 Education Systems: Experiences from five case countries*, ADB, 2015, p 27.

¹³⁶³ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 44.

¹³⁶⁴ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 44.

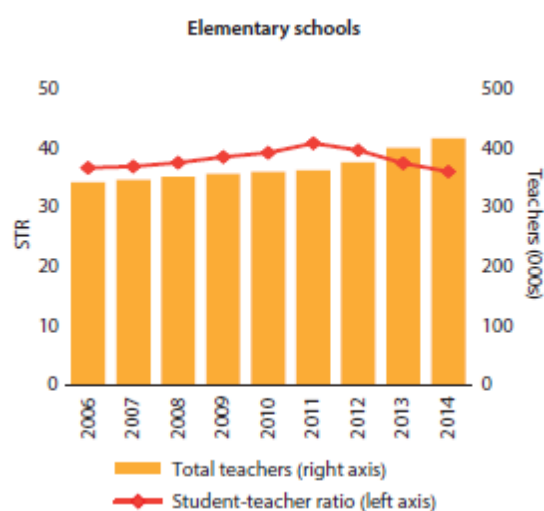
training they had received 40 per cent of teachers interviewed for the PETS-QSDS survey felt they needed more and better quality in-service training to improve their classroom teaching.¹³⁶⁵

It has proved difficult to find much information about school inspections and monitoring. Although curriculum inspection is undertaken by supervisors with technical knowledge of each subject, it has been suggested that the inspections are superficial and thinly spread and that overall, there is an insufficient level of inspection and support. The head teacher in a school is the curriculum supervisor, but there are often too many teachers within the school for the head teacher to provide effective curriculum supervision.¹³⁶⁶

Availability of teachers

In 2016, 29 per cent of elementary schools had too few teachers, a drop from 46 per cent in 2012. Over the past 10 years, the student to teacher ratio in elementary schools has been decreasing, as is shown in the table below. The average student-teacher ratio in elementary schools is 35 students per teacher. In 52 per cent of elementary schools, the student-teacher ratio is lower than 35 students. The lower student-teacher ratios can often be found in rural areas due to low numbers of students falling within a school's catchment area.¹³⁶⁷

Table 7.10. Total Number of Teachers and Student-Teacher Ratio in Elementary Schools, Philippines, 2013



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

In 2016, 37 per cent of secondary schools had too few teachers, a reduction from 70 per cent in 2012.¹³⁶⁸ The average student to teacher ratio has declined at high school level, from 40:1 in 2005 to 27:1 in 2014, and the student to classroom ratio at high school level has declined from around 69:1 to

¹³⁶⁵ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 45.

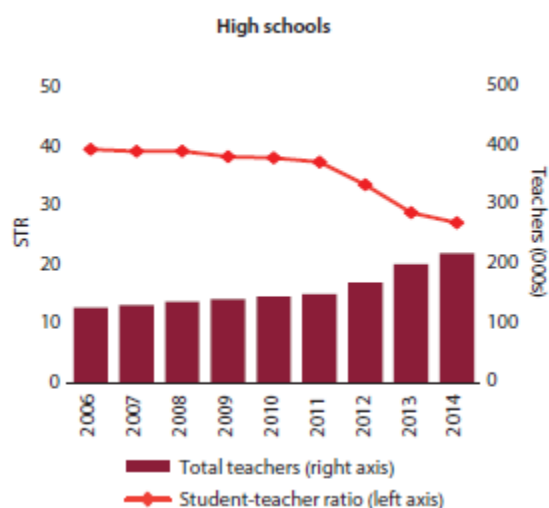
¹³⁶⁶ Key Informant Interview with representatives from UNICEF, Tuesday 13 June, Manila.

¹³⁶⁷ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p xvii.

¹³⁶⁸ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p xvii.

around 48:1.¹³⁶⁹ The DepEd goal is to have an average student-teacher ratio in high schools of 27 students per teacher.¹³⁷⁰

Table 7.11. Total Number of Teachers and Student-Teacher Ratio in High Schools, Philippines, 2013



Source: *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016

The distribution of teachers across the country is uneven. The student to teacher ratio is generally higher in urbanized cities (averaging 39 students per teacher) and lower in municipalities (averaging 29 students per teacher).¹³⁷¹ However, it is easier to recruit and retain teachers in urban settings. It has become necessary to offer financial incentives, in the form of extra pay, to teachers working in ‘hardship’ areas, which include the more remote areas, and those with a need for multigrade teachers. It does not appear, however, that the extra pay has resulted in greater retention of teachers, and many teachers in hardship posts request a transfer after six months.¹³⁷² The DepEd has not conducted any research into why teachers choose not to work in remote areas, but the reasons are likely to be the same as for other countries: isolation and separation from family and community.¹³⁷³ Another possible reason for the failure to retain teachers is that the formula for the financial incentives has not been updated since it was introduced in 1996, and is not now seen as being such an incentive as to make it worthwhile remaining in post.¹³⁷⁴

Although urban schools have poorer facilities and are more overcrowded, the best teachers still prefer to work in wealthier urban areas. The World Bank concluded that multiple dimensions of inequality remain in education, which need to be addressed in order to ensure quality education is available to all children across the Philippines.¹³⁷⁵

¹³⁶⁹ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 16.

¹³⁷⁰ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p xvii.

¹³⁷¹ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p 27.

¹³⁷² Key Informant Interview with representative from DepEd, Wednesday, 14 June 2017, Manila.

¹³⁷³ Key Informant Interview with representatives from UNICEF, Tuesday, 13 June, Manila.

¹³⁷⁴ Draft, *Data Must Speak in the Philippines*, Baseline Analysis [DRAFT].

¹³⁷⁵ *Assessing Basic Education Service Delivery in the Philippines*, World Bank, June 2016, p xxxi.

During the PETS-QSDS survey in 2014 school principals reported having a shortage of subject specialist teachers particularly of Filipino language teachers as well as mathematics, science and English. No reasons are provided for the lack of Filipino and English language teachers in the survey, but it is likely to be related to the possibility of obtaining alternative employment. Many of the shortages are in municipalities,¹³⁷⁶ which is unsurprising given that teachers prefer to work in an urban environment. In addition, there are issues with the quality of materials used by teachers.

Attendance of teachers is measured at sub-national level, but is generally seen as not being a problem.¹³⁷⁷ Reported teacher absenteeism in elementary schools is low at around 7.6 per cent. Teacher absenteeism is higher in the high schools, and particularly in those located in highly urbanized cities – almost 1 in 10 in 2014, which is 53 per cent higher than the national average. This may be due to the larger school size in these area, the greater student-teacher ratio, greater difficulties in terms of traffic congestion in the city and greater demands on teachers' time. Interestingly, children in the bottom 20 per cent of households attend schools with lower rates of teacher absenteeism.¹³⁷⁸

7.2.9. Barriers and Bottlenecks: basic education

The education system faces many challenges, as do children seeking to access a quality education. Poverty, climate change, devastating disasters, armed conflict and threats to the safety and security of children all make universal education attainment a challenge.¹³⁷⁹ Some of the underlying structural challenges to education in the Philippines, such as the lack of resources and the unequal division of resources across the regions, creates particular difficulties for children in rural communities. Additionally, the Philippines has a fast-growing population, which requires planning to ensure that educational places are increased in the right regions and municipalities.¹³⁸⁰ The sheer number of children in the education system, around 25 million 5- to 18-year-olds, can also make implementing whole-scale change a major challenge.

The key barriers and bottlenecks in the education system were mapped out by a group of key stakeholders at the consultation workshop that informed this SitAn. The group selected a key deprivation (unequal access to inclusive, quality education), and identified a causality chain of immediate, underlying and structural causes. This map is presented below.

Table 7.12. Stakeholder causality map for education

Unequal access to inclusive quality education – Equity issues: *children with disabilities, IP children, children in poor, disadvantaged, rural areas, children in conflict with the law*

Children not learning well (NAT results)

- Supplies: Lack of materials, textbooks
- Education financial system not efficient (WB-PETS, PER)
- Procurement and finance policies too difficult

¹³⁷⁶ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p 28.

¹³⁷⁷ Key Informant Interview with representative from DepEd, Wednesday, 14 June 2017, Manila.

¹³⁷⁸ Assessing Basic Education Service Delivery in the Philippines, World Bank, June 2016, p xxx.

¹³⁷⁹ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, xxii.

¹³⁸⁰ Education for All 2015 National Review Report: Philippines, <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 7.

- Low education investment (GAA)
- Low LGU investment (SEF)
- Learning is not fun, relevant to children
- Traditional teacher-centered teacher education
- Low capacity and quality of teachers teaching
- Low quality service grade
- Need for higher Education Reform (TE)

Dropouts. Repeaters (EBEIS, studies)

- Boys (mostly) need to work
- Higher non-completion and non-performance among boys
- Lack of interest of children to attend schools (2013 FLEMMS Survey)
- Malnourished children (DepED Health and Nutrition data)
- Lack of child-friendly/Nurturing School environment (e.g. WASH/MHM)
- Young (3-5 years old) children are not ready for schooling (42%NER in DCC; 70% Kinder NER)
- Parents do not send their young children to pre-school/ Kinder
- Lack of awareness on the importance of pre-school/ Kinder (including health, nutrition, early learning, stimulation)
- Limited coverage of parenting programs
- ECCD-Early Learning not a LGU priority
- Existing Pre-school/ Kinder services not accessible to marginalised, disadvantaged children
- Unable to meet standards set for quality ECCD (in facilities, teachers, etc.) - monitoring data
- Low investment from National and Local Governments (center, home and community-based ECCD services)
- Limited budget of LGU (UNICEF LGU Budget Study, Save the Children)
- ECCD/ Early Learning is not a priority of the LGU
- Lack of awareness of LGU on the importance of investing in ECCD
- Weak capacity of LGUs in planning, programming and implementation
- Weak/ absence of functional ECCD governance and management at mun./ city and barangay level
- No clear policy on local ECCD governance mechanisms
- Lack of political will of LGUs (no organized data)
- Lack of budget from Natl.
- No/ lack of national policy to provide subsidy to poor LGUs (e.g. 4th, 6th class)
- Lack of accountability of LGUs to implement sustained ECCD programmes
- Lack of coordination leading to weak/ lack of accountability mechanisms - national and local level
- Lack of national M&E Framework
- Mismatch of families and children expectations of the educational system (not developmentally appropriate)
- Lack of transition package from Pre-K to Kinder to Grades

Children with disabilities

- Some schools are not PWD friendly

- Schools and teachers lack of awareness in inclusive education
- Pupil placement policies keeps CWDs excluded
- Attitudes/ lack of awareness (inclusion for CWDs) – DepEDs
- Low awareness of family planning services

Children in remote/ poor areas

- Low adoption of homestead vegetable gardening
- No land for gardening
- No land ownership
- Lack of farming tools/ implements
- Schools have no electricity
- DepED has poor budget and procurement planning (cost of transport excluded)
- Inequitable policy of national government to support poor children.

Adolescents and OOSCY

- Children/ adolescents don't want/ not motivated to go to school (FLEMMS 2013)
- Adolescents who get pregnant do not continue schooling
- CSE not yet in school
- Life skills for children/ adolescents are not available
- No standards on school child- friendly services
- Child labor (ILO Study)
- Undocumented children
- Data collection of undocumented adolescents limited making it difficult to map out services for them
- Teaching/ educational delivery is traditional, low quality, not child-friendly, low learning achievement
- Social stigma
- Low level of knowledge of HIV among young key affected population (IHBSS, YAFS)
- Limited curriculum coverage for HIV, Teenage pregnancy, Drug abuse
- Referral system in some schools are not existing
- Lack of investment in preventive interventions for teenage pregnancy, HIV, substance abuse, mental health and violence

Children affected by Disaster, Conflict

- Children in armed conflict areas are recruited as soldiers
- Disregard of Children's Right and Child Protection; No Birth Registration
- Inflexible policy on acceptance to school of CICL
- Inflexible policy for accepting CWDs, IPs, children in conflict-affected areas
- Impact of emergency
- Schools are used evacuation centers
- Schools are not equipped appropriately to mitigate impact of emergencies
- Not a priority, no funds allocated
- Culture, beliefs, attitudes towards situations
- Children are forced to work whether paid or unpaid due to difficulties faced after disasters/ conflict.

Enabling Environment

Data

The lack of properly disaggregated data is a key issue. In particular, data which is disaggregated by socio-economic class and region and on vulnerable groups such as those with disabilities, indigenous people and other minority groups is not available. In recent years, the availability of data on education has improved with the E-BEIS and LIS systems as part of the broader movement in the Philippines to improve transparency and accountability.¹³⁸¹ However the EBEIS data is not publicly available.

There have also been challenges to ensuring the new system of data collection works. In particular, the frequent changes of leadership at national, divisional and school levels can disrupt reform processes and changes benchmarks for success.¹³⁸²

Implementation of K-12 program

Although the aim of the K-12 programme is to improve the quality of education in the Philippines, there are barriers and bottlenecks to its implementation. Progress was made in improving the basic education system in the Philippines in the years before the K-12 programme. Since the plan to move to K-12 was announced, there has been progress on recruiting teachers and building new classrooms. However, given the existing shortage of classrooms, the high student teacher ratio and high drop-out rates at secondary level, there is a risk that placing further and demanding requirements on the education system may worsen the quality of education for children, and exacerbate the current problems. As the K-12 requirement has only recently been introduced, there is limited data so far on successful implementation and the impact that it has on schools and their ability to deliver quality education to all their pupils.

A further bottleneck arises with keeping young people in education past the previous limit for compulsory education (16). With a lack of classrooms and teachers, poor teaching methods and a curriculum that does not interest a proportion of the children, when taken together with well as the pull of possible paid employment for 16 years, retaining children in education up to the age of 18 may be difficult.

Supply-side bottlenecks

Facilities and infrastructure

The poor education infrastructure is also a barrier to education in the Philippines. There are a lack of classrooms and basic facilities with many schools being overcrowded. Increasing the length of schooling by two years under the K-12 program is likely to exacerbate this. A poor quality, overcrowded environment lacking in basic facilities is likely to discourage children from attending school and reduce their educational attainment. Classrooms are also regularly destroyed by disasters and armed conflict, or used as evacuation centres, which further disrupts children's education.

¹³⁸¹ Investigations into Using Data to Improve Learning: Philippines Case Study, March 2017, p 29.

¹³⁸² Investigations into Using Data to Improve Learning: Philippines Case Study, March 2017, p 29.

Procurement systems

There are challenges in spending the education budget. The procurement system in the Philippines has strict rules, it is bureaucratic and planning is reported to be poor, which leads to delays.¹³⁸³ Much of the procurement is centralised, meaning school supplies are purchased in Manila and school construction has to be bid for in Manila, even when a school is many kilometres distant.¹³⁸⁴ In a key informant interview with DepEd it was stated that this meant that there could be economies of scale and consistency of design and this was an advantage.¹³⁸⁵ While there may be some economies of scale, the school time taken up by an overly burdensome procurement process, and the consequent delay in tendering and reaching a decision on the provider and delivery of the goods, or the completion of construction, is likely to outweigh any benefit from economies of scale. It has been suggested that the centralisation and bureaucratic nature of the current procurement system is blocking the development of the education system, and results in monies not being used efficiently and preventing rural and disadvantaged areas from obtaining the funding they need.¹³⁸⁶

The failures in the procurement process have had a practical impact on children. One of many examples, was a failure in the procurement process for the printing of an end of year accreditation and equivalency test for the alternative learning system. This resulted in students being unable to take the test, and as a result being unable to graduate for an additional year. This in turn meant that the students were not able to proceed into formal education or the next level of education. In a further example, in 2016, the government was not able to complete the procurement process for textbooks for students starting grade 11. The students had to begin the year without the necessary materials while external support was sought.¹³⁸⁷ The procurement rules also have an impact on school structure as a result of delays in obtaining the necessary materials to repair classrooms damaged by conflict or disaster.¹³⁸⁸

Demand-side barriers

Physical access

The geographical make-up of the Philippines as an archipelago with some small and remote islands makes delivery of public services including education difficult.¹³⁸⁹ It can also make getting to school challenging for children.¹³⁹⁰ There is a lack of transport infrastructure to assist children to reach school in some areas of the Philippines. In 2013, 6.2 per cent, or 2.4 million students aged 6-24, had to walk to school because there was no alternative means of transport.¹³⁹¹ This increases to more than 1 in 10 for students in Bicol, CAR, ARMM, Caraga, Zamboanga Peninsula and MIMAROPA.¹³⁹²

¹³⁸³ Key Informant Interview, 13 June 2017.

¹³⁸⁴ Key Informant Interview, 13 June 2017.

¹³⁸⁵ Key Informant Interview, 14 June 2017, Manila.

¹³⁸⁶ Key Informant Interview June 2017.

¹³⁸⁷ Key Informant Interview, June 2017

¹³⁸⁸ Key Informant Interview, June 2017

¹³⁸⁹ Transitions to K-12 Education Systems: Experiences from five case countries, ADB, 2015, p 25.

¹³⁹⁰ Education for All 2015 National Review Report: Philippines,

<http://unesdoc.unesco.org/images/0023/002303/230331e.pdf>, p 7.

¹³⁹¹ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 27.

¹³⁹² 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 27.

Social and cultural beliefs and practices

There are social barriers to children participating in school, particularly for younger children. The belief by parents and teachers that primary school aged children are too young to attend school¹³⁹³ increases the likelihood of children not being enrolled. The MIS of 2016 showed that this was the main reason for 5-year-old children not attending kindergarten.¹³⁹⁴ The MIS points out that the child being too young was still a significant reason for not sending children to school when they are aged 6–11. Further, the social view that children were too young did not shift between the beginning of the survey period (2012) and 2016 when the survey was repeated.

If children miss out on crucial early learning opportunities they are less likely to achieve in school, and may struggle to catch up with their peers, leading in turn to dropout being more likely. Although there are high enrolment rates in elementary education, a significant number of children drop out of school within the first few years. Most leavers and repeaters in elementary school were in Grades 1-3, with the highest proportion in Grade 1.

Gender

There is a clear indication that boys are increasingly dropping out of basic education, particularly at secondary level, which may be exacerbated with the introduction of the addition of senior high school. Filipino males tend to leave the education system because they need to work to provide financial assistance to the household or because they are not engaged in education and would rather be working.¹³⁹⁵ More needs to be done to encourage boys to remain in the education system, for example introducing part work/part study programmes.

Access to education for vulnerable groups

One of the key bottlenecks to education in the Philippines is the lack of access for vulnerable groups to education. The UN Committee on the Rights of the Child has raised concerns that vulnerable groups of children such as those living in poverty, those with disabilities, working children, children in armed conflict, indigenous children, children infected with or affected by HIV/AIDS and children living on the street do not have equal access to education.¹³⁹⁶

In addition, Human Rights Watch has reported that students who are lesbian, gay, bisexual and transgender (LGBT) are often bullied and face discrimination, and in some cases are subject to physical or sexual assault. Although DepEd has introduced an anti-bullying law in 2013, the policy has not been adequately enforced.¹³⁹⁷

There is a lack of data and information on the situation of vulnerable groups in the basic education system, including those with disabilities (see below).

¹³⁹³ Last Mile Learners Situational Analysis report, DepEd June 2016, p 37.

¹³⁹⁴ 2016 Multiple Indicator Survey Final Report, Demographic Research and Development Foundation, Inc, 21 November 2016, p. 152

¹³⁹⁵ Disaster management reference handbook, 2015, p 17.

¹³⁹⁶ UN Committee on the Rights of the Child, concluding observations on the Philippines, 2009, para 65.

¹³⁹⁷ "Just Let Us Be", Discrimination Against LGBT Students in the Philippines, June 2017, Human Rights Watch, p 1.

Quality

The low quality of education offered to Filipino children has been discussed in this chapter, and is not repeated here. It is, quite clearly, a barrier to educational achievement and meaningful inclusion. There are low achievement scores in basic education and teachers have limited knowledge of their subject area. Low quality basic education leaves children ill-prepared to proceed to higher education, or to proceed to employment. There are signs, however, that DepEd is addressing poor quality teacher training.

7.2. Children with disabilities

Article 24 of the CRPD sets out the rights of children with disabilities to education. Children with and without disabilities should have the same opportunities to attend schools within their own community. Schools should be accessible to children including geographically accessible and structurally accessible to ease enrolment of Children with Disabilities (CWD).¹³⁹⁸

7.2.1. Legislation and Policy

Republic Act No 7277, the Magna Carta on Disability, requires the State to ensure that disabled persons are provided with adequate access to quality education and ample opportunities to develop their skills. This includes establishing a system of special education including special education classes in public schools in cities and municipalities. The Act places a duty on the State to take into account the requirements of persons with disabilities in formulating educational policies. Further, the State is required to provide financial assistance to economically marginalised but deserving students with disabilities to pursue post-secondary or tertiary education.

DepEd Order 26, s. 1997 institutionalised special education programmes in schools, requiring each school division to have at least one special education center for children with special needs. Further, DepEd Order 72, s 2009 guaranteed the right for CWD to receive appropriate education within regular or inclusive classroom settings.¹³⁹⁹ Republic Act No. 10533, the Enhanced Basic Education Act 2013, provides that the new K-12 curriculum shall be inclusive,¹⁴⁰⁰ providing opportunities for the needs of CWD to be met in mainstream education.¹⁴⁰¹ Additionally, DepEd has formed an advisory council for the education of Children and youth with disabilities in 2011 to look into ways to improve access to education for CWD.

By 2018, DepEd plan to have 50 per cent of CWD (1 million CWD) enrolled in public or private schools, to have CWD resourced schools in all districts, to outfit 10 per cent of schools with CWD friendly infrastructure and facilities, to train 150,000 teachers and 10,000 school administrators in CWD-related matters and social marketing programmes to gain general public support for the schooling

¹³⁹⁸ CRPD general comment number 4 on the right to inclusive education, CRPD/C/GC/4, 25 November 2016.

¹³⁹⁹ DepEd Order 72, s. 2009, Inclusive Education as Strategy for Increasing Participation Rate of Children, July 6, 2009.

¹⁴⁰⁰ Enhanced Basic Education Act 2013, section 5.

¹⁴⁰¹ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 11.

and education of CWD.¹⁴⁰² DepEd also plans to provide mobile teachers and resources for CWD who cannot or do not attend school.

DSWD is also supporting the education of CWD and has implemented the *Tuloy-Aral Walang Sagabal* (TAWAG), a programme of Continuous Education to Mainstream Children with Disabilities. It offers psychiatric, physical and medical examinations, counselling, early intervention activities, occupational therapy, physical therapy, case management and the provision of assistive devices for special cases.¹⁴⁰³ Complementary to TAWAG, DSWD runs an early detection, early intervention and education programme to raise the effectiveness and efficiency of providing education to children with disabilities.¹⁴⁰⁴

The Philippines runs training programmes for educators and service providers on working with children with disabilities, as well as offering courses to parents of children with disabilities, for example in sign language. However financial constraints have limited the frequency of these programmes.

7.2.2. Participation rates

According to the Philippines census in 2010 1,442,586 persons, or 1.57 per cent of the household population of the country had a disability. This is a slight increase from 1.23 per cent in the 2000 census.¹⁴⁰⁵ The term disability is used to refer to any restriction or lack of ability (resulting from an impairment) to perform an activity in the manner or within the range considered normal for a human being. 25.8 per cent of those with disabilities were aged 19 or under.¹⁴⁰⁶ The disability figures reported in the general population are significantly lower than the WHO finding that, on average, 15 per cent of the world's population experience some form of disability, with a higher prevalence for developing countries.¹⁴⁰⁷

There have been some steps taken in the Philippines to try to include CWD in basic education. However, it was estimated in 2014 that 97 per cent of children with disabilities were not reached by the public school system.¹⁴⁰⁸

In the Philippines, inclusive education is generally considered to involve including CWD in the education system, but not necessarily in mainstream schools. The options available for educating CWD in the Philippines include: self-contained classes for CWD in special education centres or schools; CWD are pulled out of regular classes to receive individual or small group instruction in

¹⁴⁰² Five Year Development Plan for the Education of Children with Disabilities (CWD) SYs 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴⁰³ Committee on the Rights of Persons with Disabilities, Initial State Report of the Philippines, 3 November 2015, para 154.

¹⁴⁰⁴ Committee on the Rights of Persons with Disabilities, Initial State Report of the Philippines, 3 November 2015, para 156.

¹⁴⁰⁵ Persons with Disability in the Philippines (results from the 2010 Census, January 10, 2013, <https://psa.gov.ph/content/persons-disability-philippines-results-2010-census>.

¹⁴⁰⁶ Persons with Disability in the Philippines (results from the 2010 Census, January 10, 2013, <https://psa.gov.ph/content/persons-disability-philippines-results-2010-census>.

¹⁴⁰⁷ World Report on Disability, World Health Organisation, 2011, p 27-29.

¹⁴⁰⁸ Persons with disabilities: Status in the Philippines presentation, by Edgardo F. Garcia, MPA, 1st International Conference of Public Librarians, March 19-21 2014 -

<http://web.nlp.gov.ph/nlp/sites/default/files/20Mar2014/Persons%20with%20Disabilities%20by%20Edgardo%20garcia.pdf> .

resource rooms; mobile teachers who teach CWD in regular classes; and partial or full integration of CWD in regular classes.¹⁴⁰⁹ Additionally, distance education and programmes targeting out of school youth with disabilities have been introduced.¹⁴¹⁰

According to Cardno, in order for CWD to be allowed to enter mainstream education they have to be ready and considered capable of keeping up.¹⁴¹¹ There is often little or no accommodation made to address any additional needs of CWD in these mainstream classes.¹⁴¹² Where CWD are placed in mainstream classes it is based on their perceived ability, resulting in these children being placed in classes with children who are a lot younger, increasing the likelihood of dropping out.¹⁴¹³

The difficulties CWD face in accessing mainstream classes results in many CWD being taught in special education centres. In February 2017, there were 648 Special Education centres and regular schools offering the Special Education programme – 471 at elementary level and 177 at high school level.¹⁴¹⁴ The majority of special educational centres are located in urban areas.¹⁴¹⁵ 84 per cent of municipalities do not have a special education centre and 91 per cent of poor municipalities do not have one.¹⁴¹⁶ This suggests that CWD in poor and rural areas are less likely to be able to access basic education.

In financial year 2015, special education centres were spread across the regions of the Philippines as set out in Table 7.13 below. As can be seen there are some regions such as ARMM and CAR where there are very few special education centres. There are significantly fewer schools with SPED classes at secondary school level than there are at elementary level. The lack of opportunities for CWD to proceed to secondary education is likely to impact negatively on their ability to reach their potential and to secure employment as an adult. Unfortunately, there are no data on how many schools accommodate children with disabilities outside of SPED classes or special education centre provision.

Table 7.13. Number of SPED Centres and SPED classes for FY 2015

¹⁴⁰⁹ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 11.

¹⁴¹⁰ Committee on the Rights of Persons with Disabilities, Initial State Report of the Philippines, 3 November 2015, CRPD/C/PHL/1, para 157-160.

¹⁴¹¹ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 13.

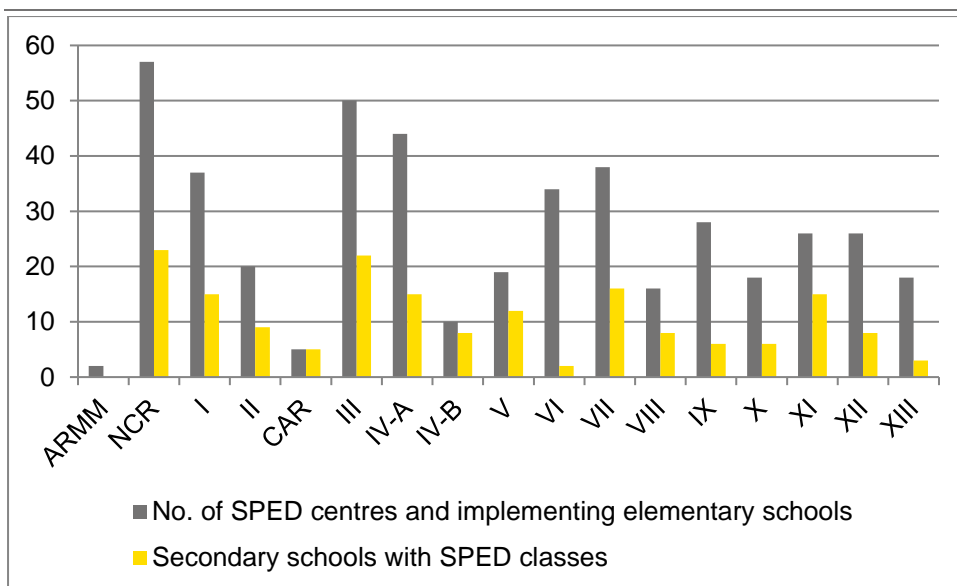
¹⁴¹² Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 12.

¹⁴¹³ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 13.

¹⁴¹⁴ 'DepEd ensures inclusive education for learners with special needs' February 24 2017, <http://www.deped.gov.ph/press-releases/deped-ensures-inclusive-education-learners-special-needs>.

¹⁴¹⁵ SPLID and UNICEF (2010), Global study on child poverty and disparities, National report Philippines, Makati City, as cited in the Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 12.

¹⁴¹⁶ Government Spending and public resources for Filipinos with disabilities from 2007 to 2013: using the UNCRPD as lens & guide for development, Philippines Coalition on the UN Convention on the Rights of Persons with Disabilities, Presented at the Legislators Forum on Disability, Manila Hotel, 31 July 2014, <http://crpdparallelreport.net.ph/wp-content/uploads/2015/04/Coalition-2013-budget-proj.pdf> p 3.



Source: Last Mile Learners Situational Analysis Report

In School Year 2008-2009, 195,783 students were enrolled in special education centres, covering both elementary and secondary levels. In school year 2012-13, 200,000 children with disabilities were enrolled in elementary school and 8,443 in high school.¹⁴¹⁷ In school year 2015-2016, this had increased to around 350,000 children with disabilities enrolled – around 250,000 at elementary level and around 100,000 at high school level.¹⁴¹⁸

Data disaggregated to regional level is available for the school year 2013-2014. According to this, there were a total of 162,782 learners at Kindergarten and elementary level who had disabilities. These represented 1.08 per cent of the total enrolment of students at kindergarten and elementary levels in school year 2013-2014. However, the way that CWD are recorded by schools, means that these numbers include children who are gifted and talented. 51.6 per cent of the students who were recorded as having a disability in school year 2013-2014 were classified as gifted or talented.¹⁴¹⁹ When the data on these students is removed the total number of children with disabilities enrolled in school year 2013-2014 comprised 0.52 per cent of the total number of students.¹⁴²⁰ This is a very low level of enrolment for children with disabilities.

Some regions in the Philippines have more gifted and talented students recorded as children with disabilities than others, as can be seen in the tables below. This suggests that there is still significant work to be done on including children with disabilities in the basic education system.

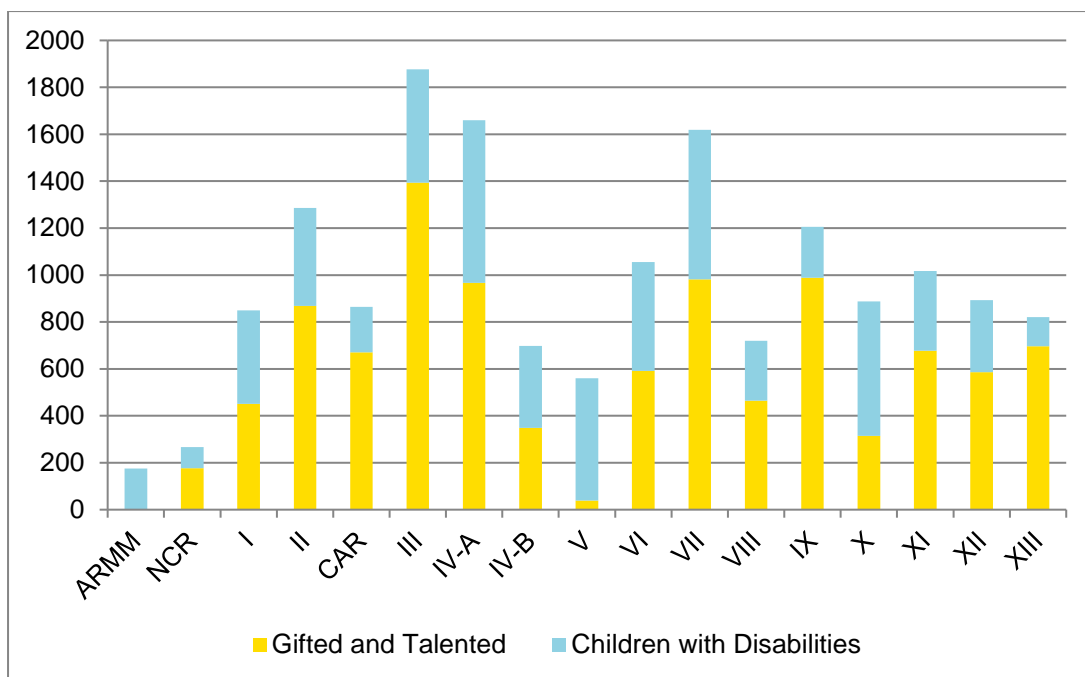
Table 7.14. Number of Children with disabilities in public schools at Kindergarten in school year 2013-2014

¹⁴¹⁷ Persons with disabilities: Status in the Philippines presentation, by Edgardo F. Garcia, MPA, 1st International Conference of Public Librarians, March 19-21 2014 - <http://web.nlp.gov.ph/nlp/sites/default/files/20Mar2014/Persons%20with%20Disabilities%20by%20Edgardo%20garcia.pdf>.

¹⁴¹⁸ 'DepEd ensures inclusive education for learners with special needs' February 24 2017, <http://www.deped.gov.ph/press-releases/deped-ensures-inclusive-education-learners-special-needs>.

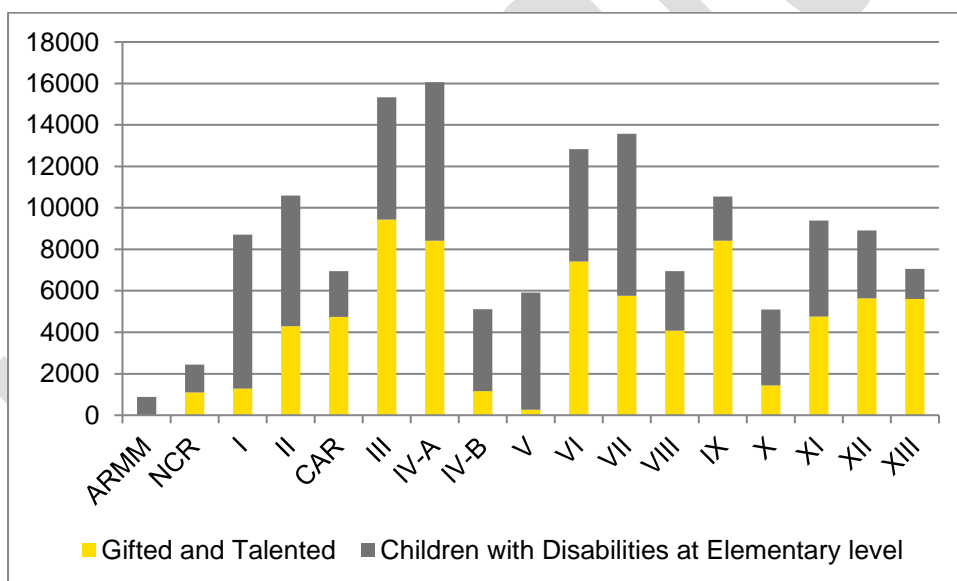
¹⁴¹⁹ Last Mile Learners Situational Analysis report, DepEd June 2016, p 67.

¹⁴²⁰ Last Mile Learners Situational Analysis report, DepEd June 2016, p 67-68.



Source: DepEd Research and Statistics Division, as presented during the DepEd Workshop on Last Mile Learners on February 5-6, 2015 at DepEd as cited in Last Mile Learners Situational Analysis report.

Table 7.15. Number of Children with disabilities in public elementary school in school year 2013-2014



Source: DepEd Research and Statistics Division, as presented during the DepEd Workshop on Last Mile Learners on February 5-6, 2015 at DepEd as cited in Last Mile Learners Situational Analysis report.

7.2.3. Barriers and bottlenecks: education for children with disabilities

Enabling Environment

Although there is legislation in the Philippines on providing inclusive education for CWD, the UN Committee on the Rights of the Child has raised concerns about the lack of a comprehensive policy to ensure that children with disabilities have equal access to education services in the Philippines.¹⁴²¹

Local DepEd offices often lack awareness on national inclusive education policies and the capacity to translate these into local inclusive education strategies.¹⁴²² Additionally there is a lack of guidance for LGUs on implementing disability related policies, and many of them consider education for CWD to be expensive and complicated to implement.¹⁴²³ This is likely to result in a lack of willingness to implement policies on inclusive education.

There is a lack of good quality, disaggregated data on CWD in the education system, and it appears that disability is underreported in the Philippines. There are socio-cultural barriers which lead to underreporting of CWD, which is often regarded as a source of shame or embarrassment for families. UNICEF and the Philippines national government are currently working on a system of early identification, prevention and intervention for CWD.¹⁴²⁴

In addition, there is concern about the accuracy of the data that is currently available on CWD. It is unhelpful that the figures for CWD are often amalgamated with the figures for gifted and talented children.¹⁴²⁵ Given the high proportion of children who are gifted and talented enrolled in special education schools, amalgamation of figures leads to a lack of clarity as to how resources are being used within special education, and whether they are being used for both gifted and talented children and children with disabilities in a somewhat equitable manner. Additionally, it is suspected that the definitions of disability used when collecting data for the census leads to underreporting. Without reliable data, it is difficult to plan effectively for inclusion of children with disabilities.¹⁴²⁶

There is no budget allocated to implement inclusive education.¹⁴²⁷ Presidential Proclamation 240 in 2002 declared that not less than one per cent of all Department's annual budgets should be spent on plans, programmes and activities for persons with disabilities. However, in 2011 DepEd spent only 0.05 per cent of its budget on disability specific appropriations.¹⁴²⁸ This money is only provided to special education centres, not to support mainstream schools in providing inclusive education, and it

¹⁴²¹ UN Committee on the Rights of the Child, concluding observations on the Philippines, 2009, para 53.

¹⁴²² Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p vi.

¹⁴²³ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 10.

¹⁴²⁴ Key Informant Interview, June, Manila.

¹⁴²⁵ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴²⁶ Interview with Social Policy Section, UNICEF Manila, June 2017.

¹⁴²⁷ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 30.

¹⁴²⁸ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 21.

is unclear how it is spent.¹⁴²⁹ Some special education centres are not registered with DepEd and so do not receive any funding from central government.¹⁴³⁰

CWD often leave the education system early. Although there has been an increase in enrolment of CWD, there is still a large discrepancy between the number of CWD enrolled in elementary school and the number of CWD enrolled in secondary education.¹⁴³¹ This may be due to secondary schools being further from the homes of CWD or there being a lack of facilities to support them continuing their education. CWD are also more likely to face discrimination and bullying which may increase the likelihood of CWD not continuing to secondary education or dropping out.¹⁴³²

Supply and Demand barriers

Infrastructure in schools has already been identified as an issue earlier in this report, but infrastructure for CWD is particularly lacking. There are a lack of classrooms and facilities which are accessible for CWD, as well as a lack of tailored learning materials, assistive devices and specialists.¹⁴³³ Field research carried out by Cardno suggested that a lack of funds impacted on the ability of schools to improve the accessibility of classrooms and facilities.¹⁴³⁴

There are also challenges for CWD managing the journey to school. CWD and their families often face increased transport costs, as they may not be able to attend a local school, and may be unable to use public transport where it is available. Additionally, families may face additional costs if they are required to provide assistive devices.¹⁴³⁵

CWD are often seen as not being in need of, or as unlikely to benefit from formal education. As a result, families may not prioritise sending their disabled children to school, and schools do not prioritise or seek to support families in educating their disabled children.¹⁴³⁶ Further, many CWD are not diagnosed and so their behaviour can be seen as poor or disruptive, rather than part of a learning disability.¹⁴³⁷

¹⁴²⁹ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 21.

¹⁴³⁰ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 21.

¹⁴³¹ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴³² Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 12.

¹⁴³³ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴³⁴ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 21.

¹⁴³⁵ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴³⁶ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴³⁷ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

Quality

Children with physical disabilities are often treated in the same way as children with intellectual disabilities, without any consideration of the intellectual abilities of each child and their individual ability to learn.¹⁴³⁸ This is likely to result in CWD not receiving quality education appropriate to their abilities and may reduce their educational achievements.

There has been a focus on teaching CWD in special education centres where they are kept separate from children without disabilities. While the DepEd want CWD to be in mainstream schools and only to separate those who cannot be integrated into regular classes, this policy is not being implemented. Currently, where there are no special classrooms in an area, disabled students miss out on going to school.¹⁴³⁹

According to field research carried out by Cardno, teachers in the Philippines have reported that they are not sufficiently prepared to teach in inclusive classes. Many teachers had not received any pre-service training on inclusive education at all, or had attended only a two-hour module on inclusive education.¹⁴⁴⁰ In-service training on inclusive education is based on the cascade model where a core group of teachers are trained and they retrain their colleagues. However, the key message and skills of the original training often get lost in the process.¹⁴⁴¹ The lack of training and support for teachers on providing inclusive education in mainstream classes is likely to reduce the quality of education provided to CWD in mainstream schools, resulting in CWD not being engaged and more likely to drop out.

The general barriers to children receiving quality basic education in the Philippines are identified above, and include large class sizes and teacher centred pedagogy, which also hinder the provision of inclusive education.¹⁴⁴²

7.3. Tertiary and Vocational Education

According to SDG 4.3, by 2030, all women and men should have access to affordable and quality technical, vocational and tertiary education, including university.

7.4.1. Higher education

The Commission on Higher Education (CHED) is responsible for Higher Education Institutions in the Philippines.

¹⁴³⁸ Five Year Development Plan for the Education of Children with Disabilities (CWD) Sys 2014-15 through 2018-19. A Plan prepared for the Department of Education by the Advisory Council for the Education of Children and Youth with Disabilities and Asian Institute of Management, Presentation delivered June 2014.

¹⁴³⁹ Key Informant Interview with Representative from DepEd, Wednesday, 14 June 2017, Manila.

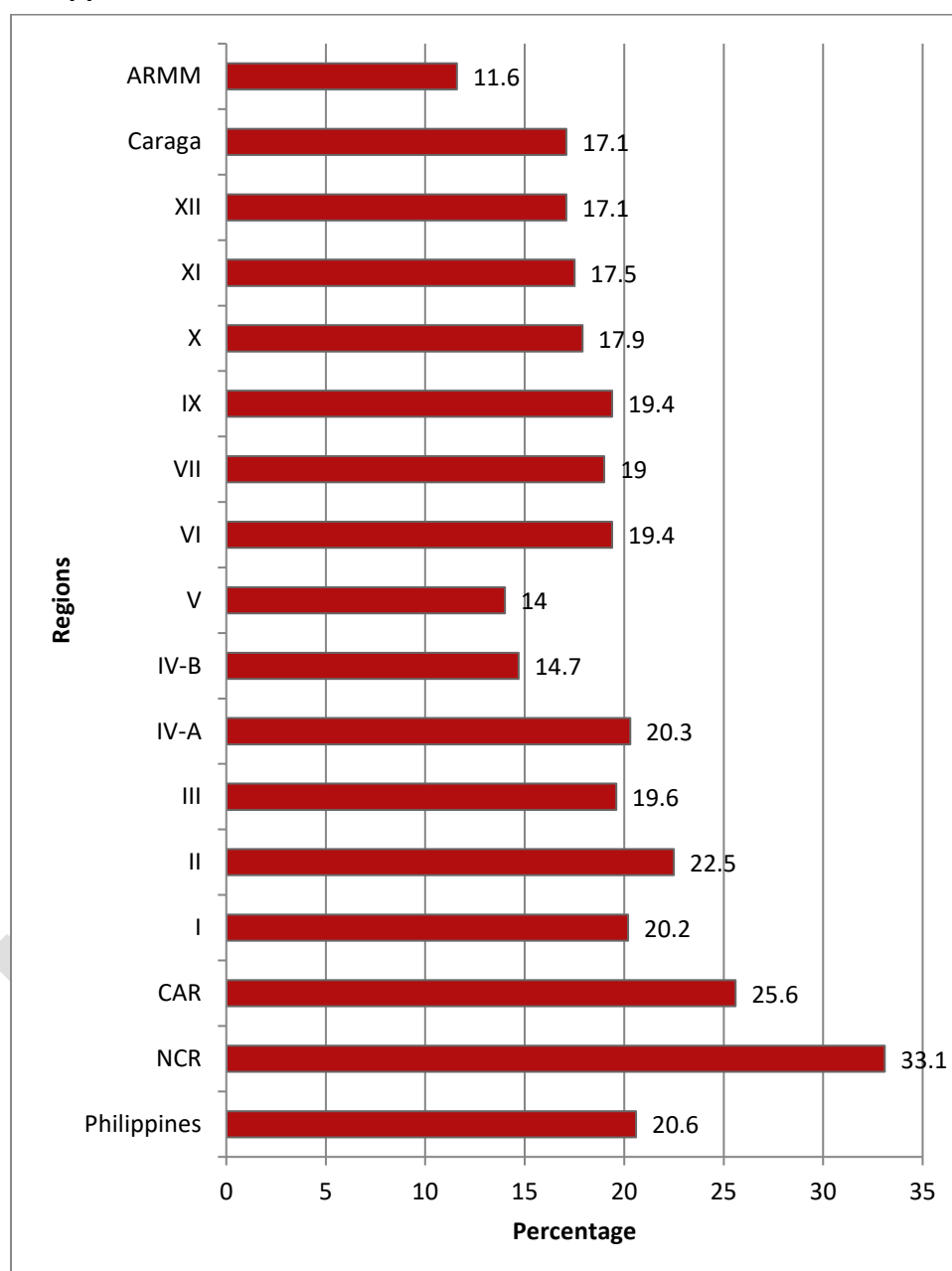
¹⁴⁴⁰ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 16.

¹⁴⁴¹ Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 16.

¹⁴⁴² Basic Education Sector Transformation, Inclusive Education and Disability Mainstreaming – Philippines, Cardno, 2016, p 22.

Until mid-2016, students in the Philippines completed secondary school and began tertiary education at age 16. In 2013, the net enrolment rate for tertiary education was 20.7 per cent of those aged 16-24, with more women (22.7 per cent) than men (18.8 per cent) enrolled.¹⁴⁴³

Table 7:16. Percentage of population who have some college or higher level of education by region, Philippines: 2013



Source: Functional Literacy, Education, and Mass Media Survey, 2013

According to FLEMMS, in 2013, 25.1 per cent of the population had completed some form of post-secondary education. 9.3 per cent had attended some college level education, while 11.3 per cent

¹⁴⁴³ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 25.

had graduated from college or higher.¹⁴⁴⁴ More women had graduated college or higher, at 13.1 per cent in comparison to 9.5 per cent of men.¹⁴⁴⁵

The percentage of the population who had completed some college or higher education varied between regions. The National Capital region had the highest percentage with 33.1 per cent. ARMM has the lowest with 11.6 per cent.¹⁴⁴⁶

The percentage of students awarded scholarships, grants and other financial assistance for tertiary education was 5 per cent in 2015. The goal in the Philippine Development Plan is to reach 10 per cent by 2022.¹⁴⁴⁷ The number of higher education graduates has also increased from 498,418 in 2010 to 632,076 in 2014 and 692,602 in 2015.¹⁴⁴⁸

7.4.2. Technical and vocational education

Technical Education and Skills Development Authority (TESDA) is responsible for delivering Technical-Vocational Education and Training (TVET) in the Philippines. The enrolment and number of graduates in TVET increased between 2011 and 2015 from 1,344,371 in 2010 to 1,785,679 in 2014 and 2,129,758 in 2015.¹⁴⁴⁹ The majority of graduates are in the age groups of 15-24 (61 per cent) and 25 to 34 (23 per cent) years old. The main income class of TVET graduates is middle socio-economic and the gender balance is about equal.¹⁴⁵⁰ In 2015, the percentage of tertiary graduates in science, engineering, manufacturing and construction was 26 per cent. The goal is to increase this figure to 40 per cent by 2022.¹⁴⁵¹

Individuals can apply for TVET at tertiary level once they have finished high school or, if they have not finished high school, they can take an aptitude test.¹⁴⁵² However there can be challenges to accessing training if an individual does not have the right documents, for example a birth certificate.¹⁴⁵³ There is also a cost to undertaking a TVET course, though some LGUs and NGOs provide scholarships for training.¹⁴⁵⁴

7.4.3. Quality of higher and vocational education

The proportion of higher education institution faculties offering a Master's degree increased from 38.87 per cent in 2010 to 40.81 per cent in 2014, although this reduced slightly to 40.34 per cent in 2015. The proportion of higher education institution faculties with a PhD increased from 11.09 per cent in 2010 to 12.54 per cent in 2014 and 12.62 per cent in 2015.¹⁴⁵⁵

¹⁴⁴⁴ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 12.

¹⁴⁴⁵ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 21.

¹⁴⁴⁶ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 22.

¹⁴⁴⁷ Table 10.5, Philippines Development Plan 2017-2022.

¹⁴⁴⁸ Table 10.3, Philippines Development Plan 2017-2022.

¹⁴⁴⁹ Table 10.3, Philippines Development Plan 2017-2022.

¹⁴⁵⁰ Table 10.3, Philippines Development Plan 2017-2022.

¹⁴⁵¹ Table 10.4, Philippines Development Plan 2017-2022.

¹⁴⁵² Key Informant Interview with representatives from UNICEF Thursday, 22 July 2017, Manila.

¹⁴⁵³ Key Informant Interview with representatives from UNICEF Thursday, 22 July 2017, Manila.

¹⁴⁵⁴ Key Informant Interview with representatives from UNICEF Thursday, 22 July 2017, Manila.

¹⁴⁵⁵ Table 10.3 Philippines Development Plan 2017-2022.

Although there are 10 times more higher education institutions in the Philippines than in neighbouring countries,¹⁴⁵⁶ the Philippines has a lacklustre performance in producing innovators (74 out of 128 in the 2016 Global Innovation Index), researchers (81 researchers per million population versus 205 in Indonesia and 115 in Vietnam) and knowledge producers (28 out of 777 journals (3.6 per cent) are listed under Thompson Reuters, Scopus or both).¹⁴⁵⁷ This is reflected in the lack of faculty with advanced degrees.

Additionally, there is a low pass rate for licensure exams, although this has increased from 33.91 per cent in 2010 to 61.45 per cent in 2014 but had decreased to 58.59 per cent in 2015.¹⁴⁵⁸

7.4.4. Barriers and Bottlenecks: Higher and vocational education

The K-12 program may cause some challenges for higher education both in higher education institutions and TVET as for a number of years there will be low or no enrolment, due to the increase in length of basic education by 2 years. This may lead to staff being laid off. However, there may be opportunities for higher education initiatives and technical and vocational colleges to get involved in providing Senior High School classes which may ameliorate some of the impacts of the reduction in tertiary level students.

There is often a mismatch between higher education and industry requirements.¹⁴⁵⁹ This has resulted in a lack of interest among young Filipinos in pursuing scientific, engineering and technical studies.¹⁴⁶⁰ Where courses do not match market needs, this leads to a lack of employment opportunity for tertiary graduates once they have completed their course. It has been suggested that this is likely to reduce the number of students proceeding to tertiary education.¹⁴⁶¹ Additionally, if the quality of teaching in science and maths in basic education is low, this is unlikely to inspire students to pursue these subjects at tertiary level, and if they are interested they may lack the skills necessary to take the course.

Another bottleneck is the lack of inclusive access for all to TVET programmes. Both TESDA and its training institutions lack capacity to respond to the needs of persons with disabilities.¹⁴⁶²

There are social barriers to more students taking TVET. For many students, a college degree is considered to enhance employability and a TVET qualification is considered to be a lesser option that does not result in the same opportunities. These are often misconceptions, and could be ameliorated in part by increasing the quality of TVET education and teachers and offering higher level qualifications which are more on a par with a college degree.¹⁴⁶³

¹⁴⁵⁶ Philippines Commission on Higher Education (CHED) data show that the Philippines had 1,923 higher education institutions in school year 2013-2014, which is more than ten times the number of institutions in Indonesia (191), Thailand (159), Vietnam (148), and Malaysia (124).

¹⁴⁵⁷ Philippines Development Plan 2017-2022, p 144.

¹⁴⁵⁸ Table 10.3, Philippines Development Plan 2017-2022.

¹⁴⁵⁹ Philippines Development Plan 2017-2022, p 144.

¹⁴⁶⁰ Philippines Development Plan 2017-2022, p 144.

¹⁴⁶¹ Key Informant Interview with representative from UNICEF Thursday, 22 July 2017, Manila.

¹⁴⁶² Philippines Development Plan 2017-2022, p 143.

¹⁴⁶³ Philippines Development Plan 2017-2022, p 143.

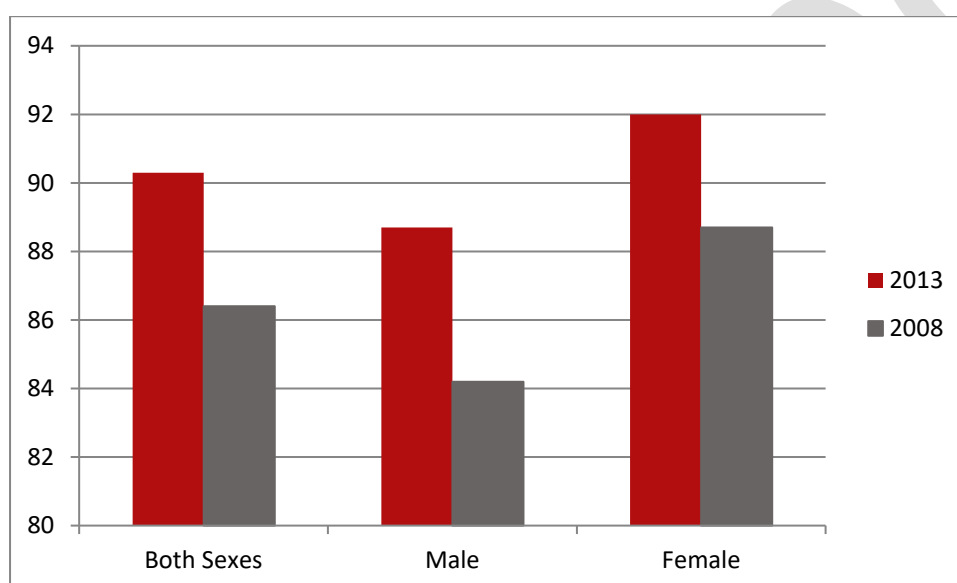
7.4.5. Literacy

In 2013, 96.5 per cent of Filipinos aged 10 years and over were basically literate, an improvement from 95.6 per cent in 2008. The proportion of basically literate women was higher (97 per cent) than men (96.1 per cent).¹⁴⁶⁴ This discrepancy is likely to be linked to the higher levels of female participation in formal education.

The proportion of basically literate 10-14 year olds was 97.4 per cent and for 15-19 year olds was 98.3 per cent.¹⁴⁶⁵ The region with the lowest rate of basic literacy is ARMM with 86.1 per cent, while the highest rate of basic literacy is in NCR with 99.5 per cent.¹⁴⁶⁶

In 2013 90.3 per cent of Filipinos aged 10-64 years old were functionally literate, with 92 per cent of women and 88.7 per cent of men functionally literate.¹⁴⁶⁷ This has increased from 2008 when functional literacy was 86.4 per cent.¹⁴⁶⁸

Table 7.17. Functional Literacy rate of population 10 to 64 years old by sex, Philippines: 2008 and 2013



Source: FLEMMS 2013

¹⁴⁶⁴ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 35.

¹⁴⁶⁵ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 35.

¹⁴⁶⁶ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 36.

¹⁴⁶⁷ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 36.

¹⁴⁶⁸ 2013 Functional Literacy, Education and Mass Media Survey, 2013, Final Report, Philippines Statistic Authority, p 38.

8. Child Protection

Under the CRC, all States have an obligation to protect children from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.¹⁴⁶⁹ One of the key ways in which this can be achieved is by the establishment and implementation of a child protection system through which a State will provide a range of services and interventions to children in order to protect them. A child protection system is also essential in implementing a range of rights and targets set out in the SDGs.

Key child protection-related SDGs

SDG	Targets	Indicators
5.2	End all forms of violence against women and girls in public and private spheres, including trafficking and sexual and other types of exploitation	Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age
		Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence
5.3	Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilations	Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18
		Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age
8.7	Take immediate and effective measures to secure the prohibition and elimination of the worst forms of child labour, eradicate forced labour, and by 2025 end child labour in all its forms including recruitment and use of child soldiers	Proportion and number of children aged 5 - 17 years engaged in child labour, by sex and age
11.7	By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, particularly for women and children, older persons and persons with disabilities	Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months
16.1	By 2030, significantly reduce all forms of violence and related deaths everywhere	Number of victims of intentional homicide per 100,000 population, by sex and age
		Conflict-related deaths per 100,000

¹⁴⁶⁹ UN Convention on the Rights of the Child, Article 19.

		population, by sex, age and cause
		Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months
		Proportion of population that feel safe walking alone around the area they live
16.2	End abuse, exploitation, trafficking and all forms of violence and torture against children	Proportion of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month
		Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation
		Proportion of young women and men aged 18 - 29 years who experienced sexual violence by age 18
16.3	Promote the rule of law at the national and international levels and ensure equal access to justice for all	Proportion of victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms
		Unsentenced detainees as a proportion of overall prison population
16.9	By 2030, provide legal identity for all, including birth registration	Proportion of children under 5 years of age whose births have been registered with a civil authority, by age

Key CRC articles

Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child's or his or her parent's or guardian's race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status

Article 7(1): States parties shall ensure the right of every child to be registered immediately after birth and to a nationality

Article 19: States parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has care of the child.

Article 20(1): A child temporarily deprived of his or her family environment, or in whose best interests cannot be allowed to remain in that environment, shall be entitled to special protection

and assistance provided by the State; (2) States parties shall in accordance with their national laws ensure alternative care for such a child; (3) This could include foster placement, kafalah of Islamic law, adoption or if necessary, placement in suitable institutions for the care of children.

Article 24(3): State parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.

Article 28(2): State Parties shall take all appropriate measures to ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the CRC.

Article 32(1): State Parties recognise the right of the child to be protected from economic exploitation and from performing work that is likely to be hazardous or to interfere with the child's education, or be harmful to the child's health or development.

Article 34: State Parties undertake to protection children from all forms of sexual exploitation and sexual abuse.

Article 35: State Parties shall take all appropriate national, bilateral and multilateral measures to prevent the abduction of, the sale of or traffic in children for any purposes or in any form.

Article 36: State Parties shall protection the child against all other forms of exploitation prejudicial to any aspects of the child's welfare.

Article 37: State Parties shall ensure that: (a) no child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment; (b) No child shall be deprived of liberty unlawfully or arbitrarily and that detention shall be used as a last resort and for the shortest appropriate period of time; (c) Every child deprived of liberty shall be treated with humanity and respect for the inherent dignity of the human person ad in a manner which takes into account their age; and (d) every child deprived of his or her liberty shall have the right to prompt access to legal and other appropriate assistance, as well as the right to challenge the detention before a court.

Article 38: State Parties undertake to (1) respect the rules of international humanitarian law in armed conflicts which are relevant to the child; (2) Ensure that persons who are under 15 years do not take a direct part in hostilities; refrain from recruiting any person who has not attained the age of 15 years into their armed forces; (4) ensure the protection of the civilian population in armed conflict.

Article 39: State Parties shall promote the physical and psychological recovery and social reintegration of a child victim of neglect, exploitation or abuse, torture or cruel, inhuman or degrading treatment or punishment or armed conflicts.

Article 40(1): State Parties recognise the right of every child alleged as, accused of, or recognised as having infringed the penal law to be treated in a manner consistent with the promotion of the child's sense of dignity and worth.

This section first examines the key child protection issues affecting children in the Philippines, along with the laws, policies and more immediate cases of these child protection issues. It then presents an assessment of the child protection system, including an analysis of barriers and bottlenecks to the effective functioning of a child protection system in the Philippines. The functioning of the child protection system is assessed as a key right of children in and of itself; gaps and challenges in the system are also examined as they of course create key barriers to the realisation of children's rights in the area of child protection.

8.1. Violence against children

The 2015 NBS-VAC¹⁴⁷⁰ showed that Filipino children suffer from a high level of violence during their childhood.

- 2 in 3 children were reported as having experienced any form of physical violence in various settings.
- 3 in 5 children were reported to have experienced some form of psychological violence in any setting.
- 1 in 4 children reportedly suffered from some form of sexual violence in any setting.

Physical violence

The (NBS-VAC noted the high prevalence of physical violence experienced by both boys and girls, with the estimated total prevalence for boys at 81.5 per cent and 78.4 per cent for girls. The Study found little variation between socio-economic classes or between those based in rural and urban areas.¹⁴⁷¹ Slightly more girls experienced violence at home (48.33 per cent) at home compared to boys (47.33 per cent). However, boys experienced more serious violence, with 4.0 per cent requiring hospitalisation as compared to girls (2.2 per cent). More than half (54.5 per cent) of the physical violence was identified as corporal punishment, such as spanking with a bare hand, rolled paper or small stick, and pulling hair, pinching or twisting of ears. 30.3 per cent suffered slapping, kicking, smothering, drowning or burning. The most common perpetrators of physical violence at home were mothers, fathers, brothers and sisters in that order, with fathers being considered responsible for the most severe physical violence.¹⁴⁷²

¹⁴⁷⁰ National Baseline Study on Violence against Children: Philippines, Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17]

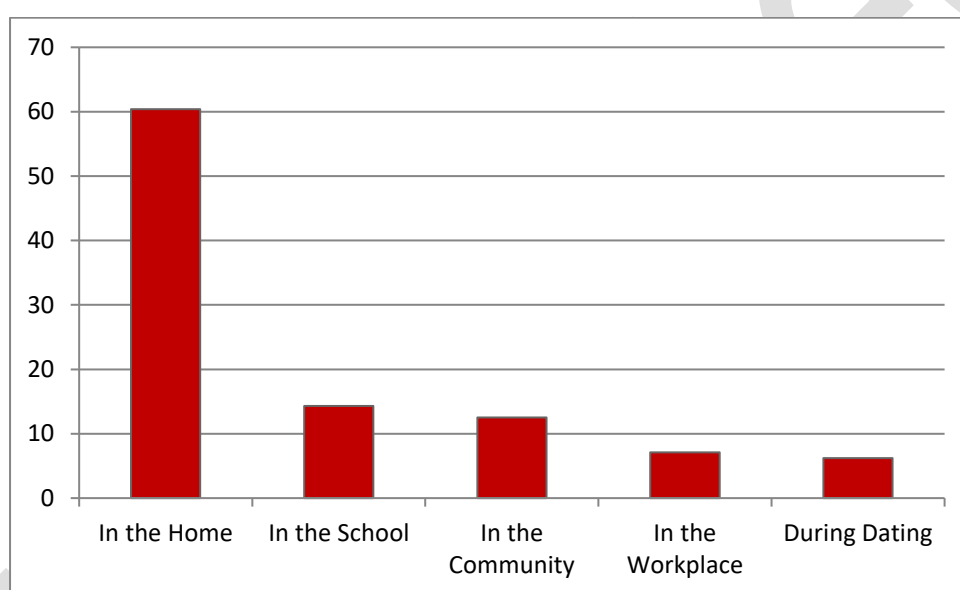
¹⁴⁷¹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.10. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁷² Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.5. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

Children experienced physical violence in schools, but to a far lesser extent than at home. 14.3 per cent of respondents who attended school reported experiencing physical violence. Pinching, either on the arms, groin or crotch area, being hit with an eraser or chalk, twisting ears, as well as spanking with a bare hand, rolled paper or small stick by a teacher or adult were the most common forms of physical violence in schools.¹⁴⁷³ Such conduct takes place despite the fact that corporal punishment is explicitly prohibited in the law (section 233 of the Family Code) and the policies of the sector (Public Schools Service Manual 1992, Manual of Regulations for Private Schools 1992 and the Code of Ethics). Other discipline methods in school include being made to stand in the sun for long periods of time and being locked in small spaces, such as cupboards and toilets.

12.5 per cent of children also reported experiencing physical violence in the community.¹⁴⁷⁴

Table 8.1. Prevalence of physical violence during childhood by settings



Source: National Baseline Study

The use of physical violence at home is driven by social and cultural norms on discipline, authoritarian parents and parents' level of education. The Baseline Study, notes that many Filipinos regard corporal punishment as showing parental love and concern, and it is culturally considered a normal and even necessary disciplinary technique. However, much of the violence has little to do with discipline and

¹⁴⁷³ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.5. 7.1 per cent of respondents reported experiencing physical violence in the workplace during childhood. 2 per cent of children with romantic partners reported experiencing physical violence during dating, with more males (5.7 per cent) reporting being physically harmed by their partners than females (3.1 per cent). Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁷⁴ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.5. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

more to do with parental histories of physical abuse, which, when combined with financial stress and substance misuse, has been found to create a ‘toxic trio’ of risk factors for violence in the home.¹⁴⁷⁵

The cultural norms of teachers and pupils contribute to the continuance of corporal punishment in schools. Community leaders and teachers who took part in the Baseline Study took the view, despite legislation and declared policy that children could become “*disrespectful and unruly*” if there was no physical discipline.¹⁴⁷⁶ Studies have shown a level of acceptance by children themselves of corporal punishment.¹⁴⁷⁷ However, while many children accept physical punishment and verbal attacks from adults as a normal part of school life, they readily identified these acts as something that “*they did not like in school because it made them unhappy.*”¹⁴⁷⁸ From the qualitative interviews and focus groups carried out in a 2009 study on violence against children in schools, children stated that they prefer a more positive form of discipline such as being talked to and corrected, guided or counselled on better behaviour.¹⁴⁷⁹

Psychological violence

Republic Act 9262, The Anti-Violence Against Women and Their Children Act 2004, defines psychological violence as “acts or omissions causing or likely to cause mental or emotional suffering of the victim, including causing or allowing the victim to witness the physical, sexual or psychological abuse of a member of the family to which the victim belongs, or to witness pornography in any form or to witness abusive injury to pets or unlawful or unwanted deprivation of the right to custody and/or visitation of common children.”¹⁴⁸⁰

Table 8.2. Prevalence of overall psychological violence during childhood

¹⁴⁷⁵ A CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.39. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

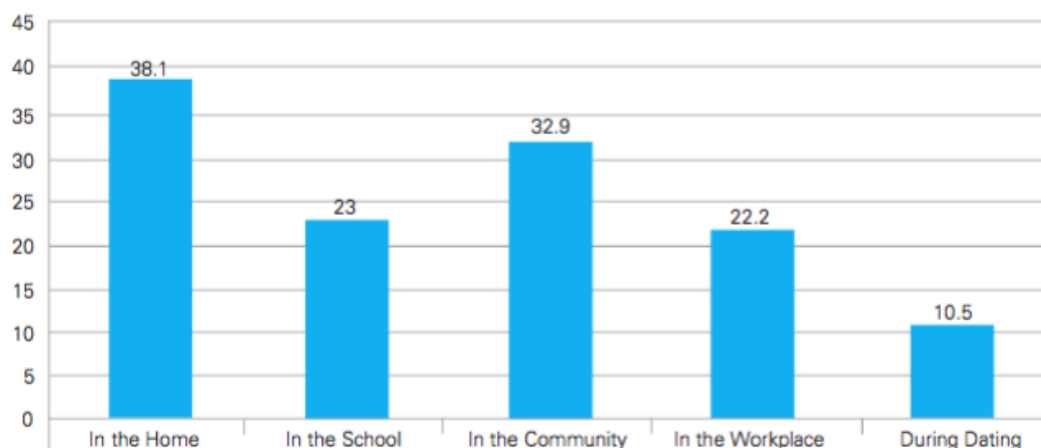
¹⁴⁷⁶ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.17. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁷⁷ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.17. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁷⁸ University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, UNICEF 2016. p.21.

¹⁴⁷⁹ Philippine Commission on Women. Republic Act 9262: Anti-Violence Against Women and Their Children Act of 2004 section 3C and implementing rules and regulations. 2004. p.3. Available at: http://www.pcw.gov.ph/sites/default/files/documents/resources/ra_9262_and_irr.pdf [13.07.17]

¹⁴⁸⁰ Philippine Commission on Women. Republic Act 9262: Anti-Violence Against Women and Their Children Act of 2004 section 3C and implementing rules and regulations. 2004. p.3. Available at: http://www.pcw.gov.ph/sites/default/files/documents/resources/ra_9262_and_irr.pdf [13.07.17]



Source: National Baseline Study

More than half of the respondents, or 59.2 per cent, to the NBS-VAC reported that they had been subjected to psychological violence during childhood.¹⁴⁸¹ The most common form of psychological violence was found to be put downs and shaming, followed by rejection;¹⁴⁸² 7.9 per cent reported suffering from severe psychological violence during childhood, which was indicated by perceived or actual abandonment by parents or guardians, with 3.3 per cent of those aged 13–17 reported experiencing severe psychological violence in the last 12 months.¹⁴⁸³ The most common perpetrators were mothers, fathers, brothers and sisters.¹⁴⁸⁴

About one-third of children in the NBS-VAC had experienced psychological violence in school, which included deliberately ignoring children and shouting at children though, interestingly, the teachers did not see such behaviour as amounting to psychological violence.¹⁴⁸⁵ Despite this view, studies have shown that this form of violence has been found to be the leading cause of mental illness and self-harm in the region.¹⁴⁸⁶

A further form of psychological violence recognised as causing emotional harm to children is that of witnessing domestic violence. In a study conducted by WorldSAFE of 1000 women aged 15–49 in 2004 in Manila, nearly half had experienced domestic violence from an intimate partner and almost

¹⁴⁸¹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.5. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁸² Journal of Interpersonal Violence. Words that hurt: a qualitative study of parental verbal abuse in the Philippines. Jennifer (M.I.) Loh, Flora Calleja and Simon Lloyd D. Restubog. 2011. 26(11). p.2251.

¹⁴⁸³ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.6 available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁸⁴ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.6, available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁸⁵ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.6. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

¹⁴⁸⁶ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.6. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

half of them stated that their children heard or saw the violence.¹⁴⁸⁷ Although this study was conducted in 2004, there is little reason to believe that the situation has changed significantly.

Peer violence

In a national study on violence against children in schools published in 2009, children's evidence was that they experienced a higher level of violence from other children than from teachers.¹⁴⁸⁸ The study found that 40 per cent of children in Grades 1–3 (ages 6–10) and 70 per cent of older school children had suffered from bullying or peer violence.¹⁴⁸⁹ In the later NBS-VAC, 60 per cent of respondents reported having experienced bullying or peer violence during childhood.¹⁴⁹⁰ More females (70.5 per cent) than males (59.8 per cent) had experienced bullying, and 35.4 per cent had experienced it in the last 12 months.¹⁴⁹¹ The most common triggers were physical appearance, status in life and skin colour. The most common methods of bullying suffered by children were verbal rather than physical abuse: being laughed at; having faces made at them; menacing gestures; being gossiped about or ignored. The most common perpetrators were other children at school and close friends. For many respondents, bullying was considered to be part of the fun among friends.¹⁴⁹²

Studies have shown that bullying and victimisation among 13- to 15-year-olds in school appears to be increasing, while physical fights appear to be decreasing. Several explanations have been given for this, but it is most likely that the use of physical violence by children has become socially less acceptable, and is more obvious and easier to address than psychological violence. It is possible that the drop in physical violence is directly related to the increase in bullying. However, it is more likely that the higher level of reported bullying is due to an increased awareness of the damage done to child victims by such behaviour, with more attention paid to bullying than a decade ago, when bullying was largely ignored by teachers or seen by them as 'normal' for children.

The damage done to children's mental health and emotional well-being by psychological violence has been recognised in the Philippines, and legislation has been passed to prevent bullying (Republic Act 10627, An Act Requiring All Elementary and Secondary Schools to Adopt Policies to Prevent and Address the Acts of Bullying in their Institutions, 2012).¹⁴⁹³ The Act defines bullying as unwanted

¹⁴⁸⁷ Asian Journal of Women's Studies. Domestic Violence in Urban Filipino Families. Serquina-Ramiro L., Madrid, B. J., Amarillo, L. E. 2004. 10(2).

¹⁴⁸⁸ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.53. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

¹⁴⁸⁹ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.53. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

¹⁴⁹⁰ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁹¹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁹² Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁴⁹³ The LawPhil Project. Republic Act No. 10627: An Act Requiring All Elementary and Secondary Schools to Adopt Policies to Prevent and Address the Acts of Bullying in their Institutions. 2012. Available at: http://www.lawphil.net/statutes/repacts/ra2013/ra_10627_2013.html [13.07.17].

physical contact; acts that cause damage to a victim's well-being; verbal and written bullying and cyber bullying. Foul language, profanity, name-calling, tormenting and commenting negatively on a victim's looks, clothes and body are all acts that fall within the definition.¹⁴⁹⁴ The Act requires all elementary and secondary schools to adopt anti-bullying policies and establish clear procedures to deal with reports of bullying.¹⁴⁹⁵ It also requires the DepEd to provide training programmes for school staff on bullying. Child Protection Committees have been established in schools composed of school head, counsellor and representatives of parents, teachers, students and the community. As of December 2013, 59 per cent of public schools had established CPCs.¹⁴⁹⁶

Gender-based violence against women and girls

The United Nations defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.”¹⁴⁹⁷ Under Republic Act 9262, the Anti-Violence Against Women and Their Children Act of 2004, violence against women and children is a crime and the Act penalises all forms of abuse and violence within the family and intimate relationships.¹⁴⁹⁸

In a 2013 survey on Violence Against Women by the Philippines National Demographic and Health Study, 19.5 per cent of women had suffered physical violence since the age of 15, though fewer girls aged 15–19 had suffered violence than older women (16.6 per cent as against 20.1 per cent aged 40–49).¹⁴⁹⁹ However, more girls had suffered violence in the previous twelve months than women. The survey found that separated, divorced or widowed women were more likely to have suffered violence than those still married, and the greater the number of children born to a woman, the more likely she is to be a victim of violence. The survey suggests that there is a negative relationship between the prevalence of violence and the wealth quintile, with women in the lowest three wealth quintiles experiencing a higher prevalence of physical violence than those in the highest two. Similarly, women with higher levels of education (i.e. tertiary education) were less likely to suffer violence. Women in ARMM were recorded as the least likely to experience violence, while women in Cagayan valley were most likely to have experienced violence since the age of 15.¹⁵⁰⁰

The most common perpetrators of violence were men: husbands, partners, boyfriends and fathers or step-fathers.¹⁵⁰¹ The NDHS notes the relationship between the use of alcohol and violence suffered

¹⁴⁹⁴ *ibid.*

¹⁴⁹⁵ *ibid.*

¹⁴⁹⁶ Education for All 2015 Review Report: Philippines. p.77. Available at: <http://unesdoc.unesco.org/images/0023/002303/230331e.pdf> [13.07.17].

¹⁴⁹⁷ UN Women. Violence Against Women. Available at: <http://www.un.org/womenwatch/daw/vaw/v-overview.htm> [13.07.17].

¹⁴⁹⁸ Philippine Commission on Women. Republic Act 9262: Anti-violence against women and their children act of 2004 and implementing rules and regulations. 2004. p.3. Available at: http://www.pcw.gov.ph/sites/default/files/documents/resources/ra_9262_and_irr.pdf [13.07.17].

¹⁴⁹⁹ National Demographic and Health Survey: Philippines. 2013. p.188-189. Available at: <https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf> [13.07.17].

¹⁵⁰⁰ National Demographic and Health Survey: Philippines. 2013. p.188-189. Available at: <https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf> [13.07.17].

¹⁵⁰¹ National Demographic and Health Survey: Philippines. 2013. p.192. Available at: <https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf> [13.07.17].

by women: 66 per cent of ever-married women whose husbands got drunk often were found to have been subjected to physical, sexual or emotional violence in the home.¹⁵⁰²

Violence against pregnant women raises the possibility of not only harming the woman, but also her unborn child. The NHDS found that 4 per cent of women aged 15–49 had experienced violence during pregnancy. Unlike other forms of violence, where the older the woman, the more likely she is to have ever experienced violence, violence in pregnancy was found to be far more common among girls aged 15–19, with 13.6 per cent subject to violence during pregnancy. Girls falling into the lowest wealth quintile are more than twice as likely as girls in the highest two quintiles to suffer violence during pregnancy.¹⁵⁰³

The NHDS suggests that the figures on reporting should be regarded with some caution and that there may be some underreporting. It is possible, given the shame attached to domestic violence, that separated, divorced or widowed women and unmarried girls were more willing to admit the violence of their intimate partners than those still married.

Among ever-married women who experienced physical violence, the main impact was depression, anxiety, sleeplessness, irritability, confusion or feelings of isolation (40 per cent). 13 per cent attempted suicide. Unfortunately, NHDS does not break down this data by age.

Sexual violence

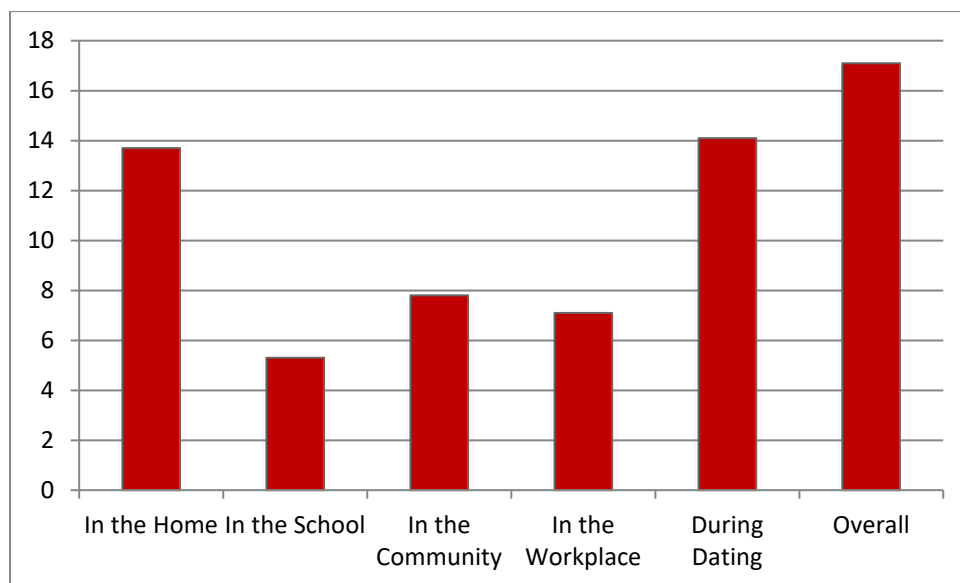
The NDHS in 2013 reported that 6.3 per cent of women aged 15–49 had experienced sexual violence in their lifetime, a considerable drop from the 9 per cent reporting such violence in the 2008 NDHS. The figure for girls aged 15–19 was 4.4 per cent, with 2.5 per cent reporting sexual violence within the previous twelve months. However, in the NBS-VAC in 2016, 17.1 per cent of children aged 13–17 reported that they had experienced sexual violence during their childhood, with 1.6 per cent experiencing it in the last 12 months. More males (24.7 per cent) than females (18.2 per cent) experienced sexual violence, both in the home and in school.¹⁵⁰⁴ This is an unusual finding and contrary to the experience of many countries, but it may provide an explanation for the difference between the figures of the NDHS and the NBS-VAC.

Table 8.3. Prevalence of overall sexual violence during childhood, by setting

¹⁵⁰² National Demographic and Health Survey: Philippines. 2013. p.200. Available at: <https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf> [13.07.17].

¹⁵⁰³ National Demographic and Health Survey: Philippines. 2013. p.193. Available at: <https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf> [13.07.17].

¹⁵⁰⁴ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.7. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].



Source: National Baseline Survey

The highest prevalence of childhood sexual violence occurred during dating, with verbal insistence, sweet-talking and verbal deception being the most usual methods for sexual coercion.¹⁵⁰⁵ Studies have shown that lack of supervision, single-headed households, the presence of a stepfather, domestic violence and the absence of both parents from the home all increase the vulnerability of children in the Philippines to sexual violence at home.¹⁵⁰⁶ Additionally, studies have shown that taboos in relation to discussion of sexuality and reproductive health with children in the Philippines have limited young people's access to information on protection and prevention of sexual violence. The lack of effective implementation of domestic legislation, for example, on the minimum age of sexual consent, is regarded as contributing to legal impunity for sexual violence against boys and girls. In addition, as in other countries, an increased rate in possession and use of smart phones and dating apps has resulted in greater opportunities for sexual violence.¹⁵⁰⁷

Sexual violence against women and girls has had a considerable and greater impact than physical violence, with 16 per cent attempting suicide, and 57 per cent suffering serious emotional effects.¹⁵⁰⁸

The UN Committee on the Rights of the Child has noted its concern at a number of issues related to sexual abuse, including alleged cases of sexual abuse of children in religious institutions¹⁵⁰⁹ and gender-based discrimination against male victims of rape, with perpetrators subject to lower penalties than those convicted of similar crimes against women and girls.¹⁵¹⁰

¹⁵⁰⁵ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.7. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵⁰⁶ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.40. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

¹⁵⁰⁷ CPN, the University of Edinburgh, University of the Philippines and UNICEF. A Systematic Literature Review of the Drivers of Violence Affecting Children: the Philippines. 2016 p.5. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf [13.07.17].

¹⁵⁰⁸ Philippines National Health and Demographic Survey 2013, Philippines Statistics Authority and ICF International, Manila, Philippines, p. 203.

¹⁵⁰⁹ CRC Committee Concluding Observations CRC/C/PHL/3-4 22 October, 2009, para. 51.

¹⁵¹⁰ UNICEF contribution to the third cycle Universal Periodic Review of the Philippines.

Cyber violence

According to the NBS-VAC, 43.8 per cent of children aged 13–17 had experienced cyber violence, with 45.3 per cent of males and 42.2 per cent of females.¹⁵¹¹ A third of these had experienced verbal abuse over the internet or mobile phone, while one-quarter were sent sexual messages. 2.5 per cent had their own nude body or sexual activities shown on the internet or mobile phone, both real and fake images. Fifteen per cent of males and 14.1 per cent of females were shown other people's sex videos and photos on the internet or mobile phone. Females were more likely to receive sex messages or words over the Internet (25.5 per cent) than males (22.8 per cent), but more males (3.2 per cent) reported having their own nude body or sexual activities, real or fake, shown on the Internet or mobile phone than females (1.8 per cent).¹⁵¹²

The high level of cyber violence indicates an emerging and threatening trend, one which has been described as a 'pandemic.'¹⁵¹³ Addressing this requires a change in social attitudes and norms and an understanding that cyber violence is a serious problem. It requires online safeguards, resources, attention and active participation from social media platform providers, civil society and government.

Collective violence¹⁵¹⁴

According to the NBS-VAC 7.8 per cent of those aged 13–17 had experienced collective violence during childhood, with males more likely to experience this (8.6 per cent) than females (7 per cent); 6.7 per cent experienced demolition or deliberate destruction of their homes and 9 per cent lived in a place where they have seen people being shot, bombs going off, people fighting or rioting.¹⁵¹⁵

There is regional variation in the prevalence of collective violence during childhood. In ARMM, there is a significantly higher prevalence of collective violence experienced by children at 30.4 per cent. The lowest prevalence of collective violence experienced by children was in CAR at 2.6 per cent.¹⁵¹⁶

¹⁵¹¹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵¹² Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵¹³ Cyber Violence against Women and Girls, A Wake-Up Call: A discussion paper from the UN Broadband Commission for Digital Development Working Group on Broadband and Gender 2015 available at broadbandcommission.org.

¹⁵¹⁴ Two indicators of collective violence were used in the National Baseline Study: experience of any form of demolition or deliberate destruction of the home; and experience of living in a place where you have seen people being shot, bombs going on, people fighting, or rioting, Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.VII Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵¹⁵ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.9. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵¹⁶ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p LXXXV. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

Further detail about the situation of children in ARMM is contained in detail in the ARMM assessment report.

About 1.6 per cent of children taking part in the survey were personally injured or beaten due to armed conflict or displacement, while 0.7 per cent admitted they were combatants or warriors in a war or community violence, or assisted older warriors in their fight against their enemies.¹⁵¹⁷

Poly victimisation

According to the NBS-VAC 15.2 per cent of respondents reported having experienced all forms of physical, psychological and sexual violence in their childhood. Almost half of children (48.2 per cent) aged 13–17 had experienced both physical and psychological harm.¹⁵¹⁸

Vulnerability of LGBT children and youth

The NBS-VAC found LGBT children to have the highest reported levels of physical violence in comparison to heterosexual males and females. Homosexual males were more likely to experience psychological violence than lesbians. Similarly, homosexual males were more likely to experience sexual violence. LGBT children are also more likely to experience physical, psychological and sexual violence at school, but there is limited research on their experiences.¹⁵¹⁹ The far higher levels of violence indicate a probable lack of acceptance of LGBT children at present.

Table 8.4. Violence against LGBT children

GENDER	Physical Violence	Psychological Violence	Sexual Violence
HETEROSEXUAL (straight) MALE (n = 1,822)	65.9	63.7	28.8
HETEROSEXUAL (straight) FEMALE (n = 1,820)	61.8	60.0	21.4
LGBT (n = 171)	75.0	78.5	33.8
Gay (65)	82.0	85.1	36.7
Lesbian (46)	70.2	75.8	23.0
Bisexual (57)	71.3	72.0	35.8
Transgender (2)	50.0	100.0	100.0
Transexual (1)	100.0	100.0	100.0

Source: NBS-VAC

¹⁵¹⁷ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p 11. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

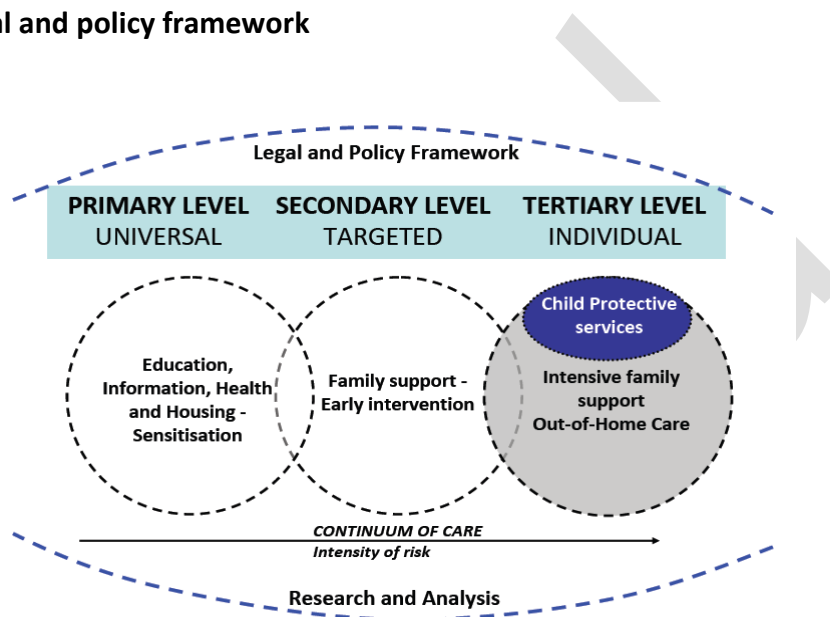
¹⁵¹⁸ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.9. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵¹⁹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.18. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

8.1.1. Legal and policy framework: violence against children

As set out by UNICEF EAPRO within its Child Protection Programme Strategy Toolkit, an effective child protection system, “requires collaboration from legal and regulatory systems, social welfare systems, and behaviour change systems.”¹⁵²⁰ Within this framework, a child protection system includes support and services to parents and children at three levels: primary (universal support); secondary (targeted group support) and tertiary (individual interventions).¹⁵²¹

Table 8.5. Legal and policy framework



Adapted from UNICEF East Asia and the Pacific Regional Office, East Asia and the Pacific Region Child Protection Programme Strategy Toolkit, 2009, 5.2, 7.

Article 19 of the CRC requires the State to protect children from “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.” Children must also be protected from all forms of corporal punishment (Articles 19 and 28(2) CRC) and other cruel or degrading forms of punishment (Articles 19 and 37 CRC).

Article 20 CRC provides additional rights in relation to the treatment of children who are deprived of family care, while Articles 32 and 34 CRC protect children against economic and sexual exploitation. These protection rights are supplemented by Article 16 of the Convention on the Rights of Persons with Disabilities, which refers specifically to the obligation on States to take all appropriate legislative, administration, social, educational and other measures to protect persons with disabilities, from all forms of exploitation, violence and abuse, including their gender-based aspects.

¹⁵²⁰ UNICEF EAPRO, Child Protection webpage, available at https://www.unicef.org/eapro/activities_3601.html.

¹⁵²¹ Figure below adapted from UNICEF East Asia and the Pacific Regional Office, East Asia and the Pacific Region Child Protection Programme Strategy Toolkit, 2009, 5.2, p. 7.

Under the CRC, parents have primary responsibility for raising and caring for their children,¹⁵²² but the State is under a duty to support them in meeting this responsibility.¹⁵²³ In order to promote family preservation, the UN Guidelines for the Alternative Care of Children recommend that States take measures, including addressing the root causes of “*child abandonment, relinquishment and separation of the child from his/her family*”¹⁵²⁴ through a series of primary, secondary and tertiary services including: birth registration, housing, health, education and social welfare. Another means by which States are required to support children and families is through social security, insurance and financial support (for discussion on social protection – see Section 9, below).¹⁵²⁵

The CRC recognises that there will be situations in which parents do not meet their children’s needs, and that in such instances the State may need to intervene in family life, but sets out specific provisions to regulate these interventions (see Articles 9 and 20 CRC). When children are deprived of family care, they are entitled to special protection and assistance and to alternative care¹⁵²⁶. The UN Guidelines on Alternative Care set out a hierarchy of care options, with a preference for placing children with family members wherever possible and if not, with, alternative family carers, institutionalisation being the least preferred option. When children are taken into alternative care settings, their rights are protected by Article 3(3) of the CRC.

The UN Committee on the Rights of the Child noted in their Concluding Observations to the Government in 2007, that the Philippines has a fairly advanced legal framework for child protection,¹⁵²⁷ which can be found in a number of different Acts.

Philippines laws on protection of children from violence

1987 Constitution: Article XV Section 3 imposes upon the State the obligation to defend the right of children to assistance, including proper care and nutrition, and special protection from all forms of neglect, abuse, cruelty, exploitation and other conditions prejudicial to their development.

Executive Order No. 209: The Family Code of the Philippines 1974 deals with the family as an institution and contains provisions relating to family disputes, legitimation, adoption; financial support and parental authority.

Republic Act No. 6972: The Barangay-level Total Development and Protection of Children Act 1990 provides for the protection of children up to the age of 6 against all forms of neglect, abuse, cruelty, exploitation and other conditions prejudicial to their development. Responsibility for such protection is placed upon the Barangay.

Republic Act No. 7610: The Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991 (as amended by Republic Act 9231, 2003) provides protection to children against all forms of abuse, neglect, cruelty, exploitation and discrimination.

Republic Act 7277: Magna Carta for Disabled Persons 1992 provides for rights of disabled persons, including women and children.

¹⁵²² Article 18 UNCRC. Art. 27 UNCRC provides that it is the parents who have the primary responsibility for securing conditions of living necessary for the child’s development.

¹⁵²³ As set out with the Preamble to the UNCRC, which states ‘the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance.’

¹⁵²⁴ UN Guidelines for the Alternative Care of Children, A/RES/64/142, 24 February 2010, Guideline 10.

¹⁵²⁵ Articles 26 and 27, UNCRC.

¹⁵²⁶ Article 20(2) UNCRC.

¹⁵²⁷ CRC Concluding observations, Philippines, CRC/C/PHL/CP/3-4, 22 October 2009, para.11.

Republic Act 7610; The Special Protection of Children against Abuse, Exploitation and Discrimination Act 1997: Its provisions protect children against all forms of violence including covers a wide range of acts, including psychological abuse, neglect, cruelty and emotional maltreatment and neglect. It also prohibits and criminalises child prostitution and other sexual abuse; child trafficking, obscene publication and indecent shows; other acts of abuse and circumstances which endanger child survival and development, including child labour, children of indigenous communities and children in situations of armed conflict.

Republic Act No. 8371: The Indigenous Peoples Rights Act of 1997, provides for the non-recruitment of children of indigenous cultural communities/indigenous peoples into the armed forces.

Republic Act 8972: The Solo Parents Welfare Act 2000, provides for benefits and privileges for lone parents and their children.

Republic Act 9231: The Act Prohibiting Employment of Children in Hazardous Areas 1999 and includes recruitment of children for use in armed conflict as one of the worst forms of child labour.

Republic Act 9208: The Anti Trafficking in Persons Act 2003 and Implementing Rules and Regulations 2002, prohibits and criminalises trafficking for the purposes of prostitution, pornography, sexual exploitation, forced labour, slavery, involuntary servitude or debt bondage, and the recruitment, transportation or abduction of children to engage in armed activities.

Republic Act 9255, an Act Allowing Illegitimate Children to Use the Surname of their Father, 2004, Amends the Family Code of the Philippines.

Republic Act 9262: The Anti-Violence Against Women and Their Children Act of 2004 criminalises acts of physical, sexual, economic and psychological abuse and violence committed against a woman or her child by any person and provides for protective measures.

Republic Act 9344L: The Juvenile Justice and Welfare Act of 2006, provides protection rights for children at risk and children in conflict with the law, including prevention, rehabilitation and reintegration.

Republican Act 9710: Magna Carta for Women 2009, sets out the rights of women;

Republican Act 9775: The Anti-Child Pornography Act of 2009 incorporates the provisions of the UNCRC, the Optional Protocol to the UNCRC on the Sale of Children, Child Prostitution and Child Pornography, ILO Convention No. 182 on the Elimination of the Worst Forms of Child Labour and the Convention against Transnational Organised Crime relating to child pornography, and establishes an Inter-Agency Council against Child Pornography.

Republic Act 9745: An Act Penalizing Torture and Other Cruel, Inhuman and Degrading Punishment (2009), recognises torture committed against children as a punishable offence.

Republic Act 10175: Cybercrime Prevention Act of 2012: Penalises cybersex for favour or consideration and acts of child pornography committed through a computer system.

Republic Act 10627: The Anti-Bullying Act of 2013: provides for schools to introduce anti-bullying policies and procedures for dealing with bullying complaints.

Republic Act 10821: The Children's Emergency Relief and Protection Act of 2015 establishes a comprehensive emergency program to protect children and support their immediate recovery during disasters. It mandates the establishment of evacuation centres and child-friendly spaces, the restoration of civil registry documents to facilitate the reunification of separated children and the training of emergency responders in child protection.

Section 2 of the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991¹⁵²⁸ is particularly important: it provides that it is the policy of the State to provide special protection to children from all forms of abuse, neglect, cruelty, exploitation and discrimination and other conditions prejudicial to their development, and sets out penalties for the commission of such conduct.

The Act defines children in need of special protection as including those:¹⁵²⁹

1. Being in a community where there is armed conflict or being affected by armed conflict-related activities;
2. Working under conditions hazardous to life, safety and morals which unduly interfere with their normal development;
3. Living in or fending for themselves in the streets of urban or rural areas without the care of parents or a guardian or any adult supervision needed for their welfare;
4. Being a member of an indigenous cultural community and/or living under conditions of extreme poverty or in an area which is undeveloped and/or lack or has inadequate access to basic services needed for a good quality of life;
5. Being a victim of a man-made or natural disaster calamity; or
6. Circumstances analogous to those above stated which endanger life, safety or normal development of children.

Although there are a comprehensive set of laws relating to child protection, the general view is that there is not, as yet, a fully functioning child protection system. Some commentators have suggested that this is due to the ‘symptom specific’ approach taken to child protection, and the practice of dealing with child protection issues reactively rather than proactively. One of the consequences of a symptom specific’ approach has been a number of different, overlapping interagency councils mandated to coordinate and oversee the implementation of the various laws.¹⁵³⁰ The 3rd Comprehensive Program on Child Protection saw this *ad hoc* approach to child protection as having resulted in an inadequate protective and caring environment for children.

Apart from wide-ranging legislation, the Government has developed a number of different national plans. Following the publication of the UNGASS outcome document, ‘A World Fit for Children,’ the Government published the Philippine National Strategic Framework for Plan Development for Children, or ‘Child 21’, which sets out a vision for children’s welfare and development up to the year 2025. Its goal is to build a ‘child-sensitive’ and ‘child friendly’ society. Following on from Child 21, the Filipino Child of the Millennium: National Plan of Action for Children 2005-2010 (the first National Plan of Action for Children) was developed to concretise the vision in Child 21 and provide a structure to deliver special protection to those children who required it. To complement the interventions in the first National Plan of Action, a Comprehensive Program on the Protection of Children was also developed jointly by the Department of Justice (DOJ) and the DSWD. The policy envisages the LGUs as the body responsible for the delivery of child protection programmes.

¹⁵²⁸ Republican Act No. 7610, as amended by Republic Act 9231, 2003.

¹⁵²⁹ Republican Act No. 7610, Special Protection of Children against Abuse, Exploitation and Discrimination Act 1997 as amended by Republic Act 9231, 2003, Section 3.

¹⁵³⁰ PLCPD Policy Brief: Improving National and Local Systems and Capacities Towards Better Child Protection in the Philippines, PLCPD and UNICEF, July 2016, p.3.

A second National Plan of Action for Children covering 2012-2017, and the third Comprehensive Program on the Protection of Children 2012-2016 followed; the third National Action Plan and the fourth Comprehensive Program are currently being finalised. The third Comprehensive Program on Child Protection 2012-2016, emphasised strengthening a multi-level child protection system to protect children who are at risk, disadvantaged and vulnerable to abuse, neglect, exploitation and violence. The aim was to respond to the 2009 concluding observations from the UN Committee on the Rights of the Child and to create a rights-based and systems-based approach to child protection.¹⁵³¹ It would appear that although progress has been made, the programme has not achieved its aims to the extent hoped.

The Philippine Plan of Action to end Violence against Children (PPAeVAC) 2017-2022 is the latest plan to be published and will be integrated into the third National Plan of Action for Children.¹⁵³² The purpose of the PPAeVAC is to provide a multi-sectoral road map designed for the progressive reduction of violence against children over the period of the Plan, and to translate the findings of the 2015 NBS-VAC into action.

8.1.2 Barriers and bottlenecks relating to violence against children

The causes and determinants of violence against children are multi-faceted. They include structural and political causes and prevailing social and cultural norms. Violence against women and children is socially and culturally accepted and condoned in many cases in the Philippines and, in particular, corporal punishment of children is seen as being necessary and helpful; 57.2 per cent of respondents to the NBS-VAC reported that they became more resilient and stronger because of experiencing violence, and community leaders and teachers stated that without it, children would become disrespectful and unruly.¹⁵³³ The UN Committee on the Rights of the Child has raised concerns that corporal punishment is not explicitly prohibited in Philippines legislation.¹⁵³⁴

Cultural and social norms, poverty, the need to work and earn income, lack of supervision for children, a lack of family support services and the reluctance to interfere in matters seen as relating to the 'family' all contribute to family violence. Studies have also shown that the social norms relating to corporal punishment have driven the prevalence of this form of violence in schools, and that this is closely linked to violent discipline at home.¹⁵³⁵

In the NBS-VAC, 39.5 per cent of the respondents aged 13–17 reported that they had committed some form of violence against another child; (42.7 per cent of males and 36.3 per cent of females); 38.2 per cent reported that they had shouted, insulted, threatened, humiliated or used verbal abuse or derogatory language, and 41.4 per cent reported having bullied someone.¹⁵³⁶

¹⁵³¹ Protecting Filipino Children from Abuse, Exploitation and Violence, A Comprehensive Program on Child Protection, 2012-2016, Building a Protective and Caring Environment for Children, p1.

¹⁵³² National Baseline Study on Violence against Children: Philippines, 2015 National Survey Results Executive Summary Recommendations p 11. See also CRC Concluding observations, Philippines, CRC/C/PHL/CP/3-4, 22 October 2009.

¹⁵³³ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P. 17. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵³⁴ CRC concluding observations, Philippines, 2009, para 42

¹⁵³⁵ A Systematic Literature Review of the Drivers of VAC, p 3

¹⁵³⁶ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.10. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

Despite the high levels of violence, the NBS-VAC found that there was a low overall disclosure of physical, psychological and sexual abuse. Only 7.3 per cent of those who reported being subjected to physical violence, 11.8 per cent of those who had experienced psychological abuse and 11.9 per cent of those who had experienced sexual abuse reported it to someone prior to the survey.¹⁵³⁷

Only 29.2 per cent of children were aware that they could report abuse and to whom, even though 69.6 per cent had attended orientation seminars, training, awareness programmes and other services on child protection and child welfare conducted by the government officials.¹⁵³⁸ Of those who disclosed abuse, 45.4 per cent sought help from a professional for their concerns, mostly teachers (40.7 per cent) and guidance counsellors (14.2 per cent), showing the importance of the school in child protection.¹⁵³⁹

The low level of reporting fits with studies, which have pointed towards a culture of silence concerning violence against children. The cultural norm, combined with a lack of support services, shaming of survivors and weak law enforcement, all contribute to a low level of reporting.¹⁵⁴⁰

It is unlikely that programmes to end violence against children will be successful and sustainable until and unless attention is paid to the level of violence against women. The UNICEF Systematic Literature Review on VAC notes that 55.5 per cent of males and 51.6 per cent of females agree that that a man can hit his wife if she does not take care of their children. In addition, the systematic literature review shows that *“adults who experienced family violence justify the use of intimate partner violence more than those who have not grown up in violent family environments.”*¹⁵⁴¹ There is clearly a need to address the inter-generational use of violence, a need for more gender and equality programmes addressing the use of violence to be taught in schools, a tougher policy and practice in combating domestic violence among local law enforcement and further work on promoting positive discipline skills, together with guidance on how to use these techniques.¹⁵⁴²

The recently published PPAeVAC identifies key strategies to address violence against children, which will be implemented over the next 5 years.

1. **Promotion of Evidence-Based Parenting Programme and Life Skills and Personal Safety Lessons**

This is seen as a key preventive strategy that will improve parents' and caregivers' knowledge and skills in evidence-based parenting, providing proper care and protection for children and adolescents, and using positive discipline; the integration of evidence-based, age appropriate, and gender-responsive parenting programmes and positive discipline in the curriculum for teachers and social workers; and develop children's and adolescents' skills in protecting themselves from violence, reporting their experience of violence, seeking help when needed, and managing their own anger and impulsivity.

¹⁵³⁷ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.12. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵³⁸ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.13. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵³⁹ Ibid.

¹⁵⁴⁰ A Systematic Literature Review of the Drivers of VAC, p. 4.

¹⁵⁴¹ University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, UNICEF 2016p. 48.

¹⁵⁴² University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, UNICEF 2016.

2. **Capability-building:** to strengthen the knowledge and skills of service providers in implementing and monitoring the above programmes. The service providers referred to here are social workers, social work assistants, child development workers, teachers, health workers, daycare workers, community organizers, barangay workers, police officers, church workers, and staff of child caring institutions. These are the service providers from government, NGOs, FBOs, community-based organizations and communities that have direct contact with parents, caregivers, children and adolescents.
3. **Comprehensive Communication for Behaviour Change (C4BC) Strategy:** this preventive communication strategy will target the whole population using various communication channels, multi-media campaigns and advocacy materials. The aim is to promote non-violent social norms and behaviour that protects children and adolescents from violence, including evidence-based programming and positive discipline for parents and caregivers, and life-skills education and personal safety lessons for children and adolescents.
4. **Children and Adolescent Participation/Mobilisation:** this will provide opportunities to children and adolescents to form associations in communities, schools, institutions, and work places, to participate in promoting social norms and behaviour that protects children and adolescents from violence, and to provide peer counselling.
5. **Direct Service Delivery:** this will involve the provision of appropriate and quality protective, social, mental, health, legal, economic and judicial services to child and adolescent victims of violence, ensuring that they are rehabilitated and reintegrated, and that violence and trauma are prevented from recurring.
6. **Monitoring, Evaluation and Research:** in order to track the implementation of the key strategies, and for evaluating the relevance, efficiency, effectiveness, impact and sustainability of the Government's collective interventions to end violence against children. Research will also allow lessons to be learned and good practices to be replicated.
7. **Policy Advocacy:** policy makers, including politicians, government officials, public servants, media practitioners, church leaders, development agencies and NGOs will be encouraged to be proactive in the creation or amendment of laws, policies, ordinances and regulations relevant to the prevention of violence and the protection of child and adolescent victims of abuse. It also involves monitoring the effective and consistent implementation of these laws, policies, ordinances and regulations at different levels.
8. **Institution Building:** the aims is to strengthen the national and subnational structures and systems responsible for implementing the key strategies and interventions that will improve parenting skills; enhance children and adolescents' capacity to protect themselves and ensure the provision of protective services for victims of violence.

The PPAeVAC sets out in detail the key strategies, the key performance indicators, the responsible agency and the required budget (PhP386,965,000 or \$7,565,038).¹⁵⁴³ The Child Welfare Council is listed as the lead agency for the development, implementation, monitoring and evaluation of the

¹⁵⁴³ No budget is given for Key Result Area 2, strategies 1 and 2 (integration of life skills into the curriculum and capacity building of practitioners and staff working with children).

PPAeVAC, with six committees organized to facilitate and coordinate Plan. The Plan is highly ambitious and is likely to require increased human resources and capacity within the Child Welfare Council and other government agencies, NGOs, CBOs and FBOs to implement such a broad and demanding programme. There must also be some doubt whether it is feasible to implement the strategies in the Plan for the anticipated budget.

Although the UN Committee on the Rights of the Child takes the view that the legal framework on violence against children is well developed, the large number of Acts, regulations, rules and protocols relating to protection from violence, raises questions about the extent to which they are understood and absorbed by those who are tasked with implementing them. At present, different laws address different forms of violence. There would be some benefit to consolidating legislation relating to the protection of children within one Act to improve accessibility and coherence. The PPAeVAC acknowledges this and has out forward, as one of its strategies, the amendment of laws, ordinances and regulations.

8.2. Child Exploitation

8.2.1. Child labour

Child labour is generally described as ‘work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development.’¹⁵⁴⁴ The difference between acceptable child work and child labour depends on “*the child’s age, the types of work performed, the conditions under which it is performed and the objectives pursued by individual countries.*”¹⁵⁴⁵

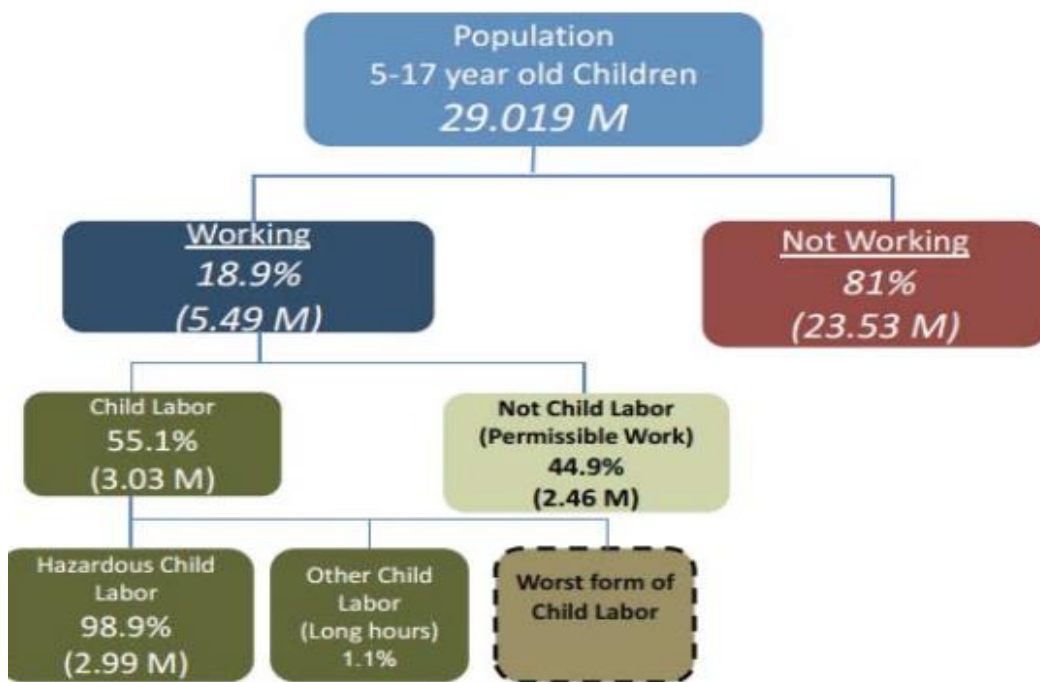
In a 2011 survey on working children in the Philippines, conducted by the ILO and the Parliamentary Union, it was estimated that 3.3 million children aged 5 to 17 worked for at least one hour during one week in October 2011. The majority of these were boys (62.9 per cent), and aged between 15 and 17 (53.2 per cent). Thirty-eight per cent were aged between 10–14 and 8.8 per cent 5 to 9. 63.3 per cent of the 3.3 million children were considered to be engaged in child labour and 61.9 per cent in hazardous child labour (one-third of whom were girls).¹⁵⁴⁶

Table 8.6. 2012 Philippine survey on working children (based on statistical evidence from the 2011 ILO/ International Labour Union survey

¹⁵⁴⁴ ILO and Inter-Parliamentary Union, *Eliminating the worst forms of child labour: A practical guide to ILO Convention No. 182*, Handbook for Parliamentarians No. 3 2002, p 16.

¹⁵⁴⁵ ILO and Inter-Parliamentary Union, *Eliminating the worst forms of child labour: A practical guide to ILO Convention No. 182*, Handbook for Parliamentarians No. 3 2002, p 16.

¹⁵⁴⁶ <https://psa.gov.ph/content/estimated-number-working-children-5-17-years-old-who-worked-during-past-week-was-33-million>.



Philippines National Statistics Office and International Labour Organisation¹⁵⁴⁷

Working children are found in diverse sectors of the Philippine economy. The 2011 Study showed that 64 per cent were in agriculture, 16.4 per cent were in sales, 9.2 per cent were in production work and 8.8 per cent were in service trades. In the formal economy, they were employed in the garment industry, wood-based industry and food industry, often as apprentices.¹⁵⁴⁸

It is possible that the numbers of children working in the informal sector may be greater, as few studies have managed to reach this group and the issue remains under-researched.¹⁵⁴⁹ For instance, evidence was given to the Committee of Experts on the Application of Conventions and Recommendations (CEACR) by the International Trades Union Confederation (ITUC) in 2013, that hundreds of thousands of children, mainly girls, worked as domestic workers in slavery-like conditions;¹⁵⁵⁰ 83 per cent of child domestic workers lived in their employer’s homes; only half of them were allowed to take one day off per month; they were on call 24 hours and a day; more than half had dropped out of school, and some of the child domestic workers were working in harmful and hazardous conditions. Evidence was also given that some of the children, especially girls, suffered physical, psychological and sexual abuses and injuries.¹⁵⁵¹ In 2016, ITUC alleged that there were at least one million child domestic workers in the Philippines.

The 2011 Survey found the largest share of the country’s child labour population to be in Central Luzon (10.5 per cent) and Bicol Region (10.4 per cent); but large proportions were also found in

¹⁵⁴⁷ Available at: http://www.ilo.org/wcmsp5/groups/public/@asia/@ro-bangkok/@ilo-manila/documents/meetingdocument/wcms_184097.pdf.

¹⁵⁴⁸ <https://psa.gov.ph/content/estimated-number-working-children-5-17-years-old-who-worked-during-past-week-was-33-million>.

¹⁵⁴⁹ Child Protection in the Philippines, A Situational Analysis, Save the Children, 2011– p 31.

¹⁵⁵⁰ Observation (CEACR) – adopted 2013, published 103rd ILC session (2014), Convention No. 182 – Philippines.

¹⁵⁵¹ Direct request (CEACR), adopted 2016 106th ILC session (2017).

northern Mindanao (8.5 per cent), CALABRAZON (8.3 per cent) and Western Visayas (8.2 per cent).¹⁵⁵²

According to the Annual Poverty Indicators Survey, those in the lower socio-economic class are more likely to have working children. Among the bottom 30 per cent of families (in terms of income) with members 5 to 17 years old, 20.6 per cent had working children while for the top 70 per cent families, 9.6 per cent had working children.¹⁵⁵³

Legal and policy environment: Child labour

Once again, the Philippines has an adequate legal and policy framework with respect to preventing and prohibiting child labour. The Philippines has ratified ILO Conventions 138 (the Minimum Age Convention 1983), 182 (Worst Forms of Child Labour Convention 1999) and 189 (Domestic Workers Convention 2011). It domesticated ILO Convention 182 in Republic Act 9231: An Act Providing For the Elimination Of the Worst Forms of Child Labour and Affording Stronger Protection for the Working Child. The Department of Labour and Employment (DOLE) has also issued Department Order No 4, which prohibits persons below 18 years old engaging in hazardous work. The minimum age for full time work is 15 years old, while those under 15 year olds can work up to 4 hours per day during daylight hours.

In 2012, the Government also passed Republic Act 10361, An Act Instituting Policies for the Protection and Welfare of Domestic Workers, which prohibits the employment of a child under the age of 15 as a domestic worker. The Act explicitly states that working children (i.e. children aged 15–18) are entitled to the minimum wage and to all the benefits set out in the Act.

A Roadmap for the Elimination of Child Labour in domestic work and the provision of adequate protection for young domestic workers of legal working age (i.e. 15) was adopted in 2015. In addition, a Joint Memorandum Circular was signed in October 2015 by DOLE, the DSWD, the National Bureau of Investigation (NBI) and the Philippine National Police, and guidelines issued to all concerned agencies for the immediate rescue and rehabilitation of abused domestic workers. Further action has been taken by DOLE who issued Department Order No 149 in February 2016 (Guidelines in Assessing and Determining Hazardous Work in Employment of Persons below 18 years of age) which lists work and activities which are considered hazardous to domestic workers below 18 years of age, and are thus prohibited.

While the legal framework is adequate, the implementation has been less than adequate. The CEACR has asked the government to ensure that Republic Act No 10361 is effectively applied and that sufficiently effective and dissuasive penalties are imposed. It has also asked for further information on the implementation of the Roadmap and the Joint Memorandum Circular, and the results achieved.

In addition to the legislation, DOLE has established the Philippine Program Against Child Labour Strategic Framework 2017-2022 which has a vision of a child labour-free Philippines. A less ambitious goal is contained in the PDP: its goal is to reduce the proportion of children aged 5–17 engaged in child labour by 30 per cent by 2022.¹⁵⁵⁴

In January 2017, the National Child Labor Committee chaired by DOLE, the DSWD, DepEd, DENR, together with the ILO and BanToxics launched three new initiatives on child labour:

¹⁵⁵² <https://psa.gov.ph/content/estimated-number-working-children-5-17-years-old-who-worked-during-past-week-was-33-million>

¹⁵⁵³ Annual Poverty Indicator Survey, Government of the Philippines (2014), p 24

¹⁵⁵⁴ Philippines Development Plan, Table 11.5, p 172

- Strategic helpdesks for Information, Education, Livelihood and other Departmental Interventions (SHIELD) against Child Labour (DSWD);
- A project to reduce child labour and improve working conditions in artisanal and small-scale gold-mining (CARING-Gold), under the ILO and funded by the USA Department of Labor; and
- A module on child labour for the family development sessions of the Pantawid Pamilyang Pilipino Program (the 4Ps), the conditional cash transfer programme of the DSWD.

The 4Ps programme, which has a reach of about 4.4 million poor households, has introduced a number of programmes to eliminate child labour including profiling child labourers, advocating for child labour-free barangays and establishments, and providing livelihood assistance to parents of child labourers. These have been combined into a programme called HELP ME (Health, Education and Training, Livelihood, Prevention, Protection and Prosecution, and Monitoring and Evaluation).¹⁵⁵⁵ The aim of this latest programme is to raise awareness on child labour and the role of the family to prevent or to end child labour, especially in its worst forms.

Causes, determinants, barriers and bottlenecks: child labour

Children are in demand by employers because they are docile, can be employed at a fraction of adult wages and seldom complain.¹⁵⁵⁶ Not surprisingly, studies have shown that children involved in hazardous child labour are especially vulnerable to violence and face particular risks of sexual exploitation and trafficking.¹⁵⁵⁷ However, there are strong traditional and cultural norms, which emphasise the importance of children helping with family duties and obligations. These cultural norms place pressure on children, especially where a family is in poverty, to becoming involved in child labour including commercial exploitation.¹⁵⁵⁸ This can be very clearly seen in cases where the family livelihood has been lost or damaged due to natural disasters, climate change or armed conflict. In these cases, especially where children have been displaced and are out of school, the family may decide that there is a need for the child to earn money for the family.

8.2.2. Commercial Sexual Exploitation

Child sexual exploitation comprises 'sexual abuse by the adult and remuneration in cash or kind to the child or third persons. The child is treated as a sexual object and as a commercial object.'¹⁵⁵⁹ The term commercial 'sexual exploitation' includes child pornography, child prostitution, child sex tourism and other forms of violence in which children are subjected to sexual exploitation for financial gain or for non-financial gain, such as for protection, a place to sleep, higher school grades, food, alcohol or drugs.

¹⁵⁵⁵ National Sector Support for Social Welfare and Development Reform Project, 2006. See also Philippines Development Plan, p 166

¹⁵⁵⁶ Child Protection in the Philippines, A Situational Analysis, Save the Children, 2011p 39.

¹⁵⁵⁷ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016 p.3.

¹⁵⁵⁸ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016, p.3.

¹⁵⁵⁹ 'The Stockholm Declaration and Agenda for Action, adopted at the First World Congress Against the Commercial Sexual Exploitation of Children, 27-31 August 1996.

Commercial sexual exploitation remains a pervasive problem in the Philippines with women and children (both boys and girls) subjected to a range of exploitation ranging from cyber-sex to prostitution.

The Young Adult Fertility and Sexuality Study in the Philippines¹⁵⁶⁰ undertaken with children and youth aged 15–24 (2013) showed a relatively low rate of commercial sex. 3 per cent of males and 1 per cent of females reported having paid or received payment for sex. The figure relating to payment for sex dropped in 2013 to about half the level found in a similar survey in 2002, though no explanation is given in the study as to why. The proportion of males who reported receiving payment for sex also reported a decline from 3.9 to 2.7 per cent. The figure among females was too low for a meaningful analysis.¹⁵⁶¹ It is possible that the reported numbers of 1524 year olds engaging in commercial sex may be an under-representation of the true rate. Commercial sex is illegal in the Philippines and there may have been a reluctance to disclose having engaged in unlawful behaviour.

The study found that commercial sex was more common among 2024 years old than 15- to 19-year-olds, and more common among those living in urban areas than rural areas. The Survey found that both types of commercial sex activities (i.e. paying or being paid) were most common in NCR and the Davao Region and were least prevalent in Cagayan Valley and ARMM. There was no clear pattern in the prevalence of commercial sexual activities by marital status or education, but there was a positive association between socio-economic status and the proportion who paid for sex. Perhaps unsurprisingly, youth in the highest quintile paid for sex to a greater extent than their poorer counterparts.¹⁵⁶²

The Philippines is known as a source, transit and destination country for domestic and cross border trafficking of women and children for sexual exploitation and forced labour. The Visayas, Cebu, and Mindanao are historically known as areas with higher rates of trafficking, with women and children from indigenous families and remote areas of the country most vulnerable to sex trafficking both internally and internationally.¹⁵⁶³ Internal trafficking is mainly to Metro Manila, Metro Cebu, central and northern Luzon and the urbanized areas of Mindanao. There are also high rates of child sex trafficking to tourist areas including Boracay, Angeles City, Olongapo, Puerto Galera and Surigao. The US Department of State notes in the Trafficking in Persons Report in 2016 that the number of child sex tourists, many of whom are from Australia, Japan, the USA and European countries, has increased.¹⁵⁶⁴

The UN Committee on the Rights of the Child has expressed concern that a number of groups of children are vulnerable to commercial sexual exploitation including street children, children involved (e.g. earning for tuition fees), ‘call girls / boys’ (who engage in seasonal prostitution mostly to address

¹⁵⁶⁰ The Young Adult Fertility and Sexuality (YAFS) Study is a series of cross-sectional surveys on Filipino youth aged 15–24 conducted since 1982 by the University of the Philippines Population Institute (UPPI) and the Demographic Research and Development Foundation (DRDF).

¹⁵⁶¹ The Young Adult Fertility and Sexuality (YAFS) Study is a series of cross-sectional surveys on Filipino youth aged 15–24 conducted since 1982 by the University of the Philippines Population Institute (UPPI) and the Demographic Research and Development Foundation (DRDF) p. 96.

¹⁵⁶² The Young Adult Fertility and Sexuality (YAFS) Study is a series of cross-sectional surveys on Filipino youth aged 15–24 conducted since 1982 by the University of the Philippines Population Institute (UPPI) and the Demographic Research and Development Foundation (DRDF) p. 93.

¹⁵⁶³ Trafficking in Persons Report, June 2017, available at [state.gov](http://www.state.gov).

¹⁵⁶⁴ US Department of State, Office to Monitor and Combat Trafficking in Persons, 2016 Trafficking in Persons Report (<http://www.state.gov/j/tip/rls/tiprpt/2016/index.htm>), Philippines, p.306-308.

the emergency needs of their families or for their own upkeep), and young female OFWs who work as ‘entertainers.’¹⁵⁶⁵

The Philippines is one of the top 10 countries producing child pornography material globally. In addition, an emerging phenomenon has been the growth in the number of young Filipino children coerced to perform sex acts for live streaming on the internet, mainly to paying foreigners. The US Department of State Trafficking in Persons Report notes that relatives are frequently found to be colluding in the sexual exploitation of the children.¹⁵⁶⁶

New technologies have also put children at risk of online sexual solicitation and grooming. Studies show that parents are often unaware of the risk to children, who are frequently unsupervised on the Internet and commonly engage in risky online behaviour.

The NBS-VAC highlighted that

- 15.6 per cent have been shown sex videos/ photos/ sexual activities of other people;
- 24.1 per cent have received sexual messages;
- 2.5 per cent have displayed themselves nude or were involved in sexual activities on the internet or cellphone.¹⁵⁶⁷

DSWD reported assisting 1,465 victims of trafficking in 2015, 1,037 of whom were women. In 2015, the NBI investigated 67 sex trafficking cases, prosecuted 8 cases against foreign sex tourists and convicted 5 for online child sex trafficking.¹⁵⁶⁸ In the first quarter of 2016, 233 cases of sexual exploitation and 214 of trafficking were reported.¹⁵⁶⁹ Online child abuse is the leading cybercrime in the Philippines making up half of all reported child abuse cases.¹⁵⁷⁰

Legal and policy framework: commercial sexual exploitation

The Philippines ratified the Optional Protocol to the UN Convention on the Rights of the Child on child sale, child prostitution and child pornography in 2002. Following the ratification, Republic Act 9208 or Anti-Trafficking in Persons Act 2003 was passed to address sexual exploitation and to incorporate the Optional Protocol. Protection was broadened by the Expanded Anti-Trafficking in Persons Act 2012, which provides for more severe penalties for traffickers and decriminalises victims of trafficking. However, protection remains limited. Article 335 of the Penal Code¹⁵⁷¹ provides that sexual intercourse with a girl under the age of 12 constitutes statutory rape, and as a result, this sets 12 years of age as the minimum age of consent. This is the youngest age of sexual consent in Asia. In addition, the definition contained in Article 355 of the Penal Code applies only to sexual intercourse

¹⁵⁶⁵ CRC/C/PHL/CO/3-4, 2 October 2009, Philippines, 2009, para 76

¹⁵⁶⁶ US Department of State, Office to Monitor and Combat Trafficking in Persons, 2016 Trafficking in Persons Report (<http://www.state.gov/j/tip/rls/tiprpt/2016/index.htm>), Philippines 306-308.

¹⁵⁶⁷ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.8. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁵⁶⁸ US State Department Trafficking in Persons Report 2016, Country Narrative, Philippines.

¹⁵⁶⁹ “DSWD urges public to report child abuse”, July 20, 2016, <http://www.dswd.gov.ph/dswd-urges-public-to-report-child-abuse/>

¹⁵⁷⁰ See Protection of Children from Online Abuse and Exploitation, Capacity Gap Analysis of Stakeholders: A summary, UNICEF, Philippines, 2016 p.4.

¹⁵⁷¹ Republic Act 3815.

by a man with a girl under the age of 12, leaving boys with an even lesser degree of protection.¹⁵⁷² The CRC Committee has expressed concern at the low age of sexual consent in the Philippines, which increases “*the vulnerability of children to prostitution and pornography.*”¹⁵⁷³ While there is no international minimum age of consent, most States set the age between 14 (considered low) and 16. The Government has established an Inter-Agency Council against Trafficking, the function of which is to monitor and oversee the strict implementation of trafficking laws and to cover the four key areas of prevention, protection, prosecution and partnership. A Philippine Anti-Trafficking in Persons Database has also been set up. Despite these innovations, the CEDAW Committee noted in their Concluding Observations to the 7th and 8th Periodic Report by the Philippines Government that the prevention of trafficking remains weak, and that the Expanded Anti-Trafficking in Persons Act 2012 was not being effectively implemented.¹⁵⁷⁴

The Optional Protocol also requires that States criminalise those who engage in sexual acts for remuneration and consideration, whether with a boy or girl up to the age of 18. The law in the Philippines provides this protection¹⁵⁷⁵ and treats the child in law, as a victim.¹⁵⁷⁶

In addition to its concerns about trafficking, the CEDAW Committee noted the increasing incidence of online sexual exploitation and abuse of children in its 2016 Concluding Observations.¹⁵⁷⁷ The government has sought to address this in its Strategic National Response Plan to Prevent and Address Online Sexual Exploitation and Abuse of Children. It recognises that it is faced with challenges, including culturally rooted challenges, the lack of a national and centralised anti-online sexual exploitation of children database and a comprehensive data collection system; the lack of penalties attached to current laws, and the lack of legislation on issues such as sexting, extra-territorial child pornography and the age of sexual consent; the lack of awareness of child protection services and the lack of relevant training and equipment. The Response Plan acknowledges that there are inadequate protection, recovery and integration programmes and that there are unacceptable delays in the judicial process, allied with a reluctance to witnesses to testify.

The aim of the Response Plan is to implement streamlined, responsive, contextualized cross-sector advocacy and prevention strategies that will address the issue of child online protection, with the aim of raising general societal awareness and lowering incidences of online child sexual abuse and exploitation. The Plan also includes strengthening of the linkage between law enforcement agencies and the Interpol International Child Sexual Exploitation Database, and amendments of the law relating to the rules of evidence.

Causes, determinants, barriers and bottlenecks: Commercial sexual exploitation

Trafficking of women and children remains a pervasive problem. The Special Rapporteur on Trafficking in Persons notes that in many cases the victims are young girls who either run away from their families to escape physical or sexual abuse or want to alleviate the economic situation of their families. Many are deceived into taking fake employment opportunities and end up being sexual

¹⁵⁷² Republic Act 3815, Penal Code, Article 335(3): Rape/ carnal knowledge is committed by a man where the woman under the age of 12.

¹⁵⁷³ CRC Committee, Optional Protocol on the sale of children, child prostitution and child pornography, ‘Concluding Observations: Philippines’, 31 January 2013, CRC/C/OPSC/PHIL/CO/1, para. 9.

¹⁵⁷⁴ CEDAW/C/PHL/CO 7-8, 25 July 2016, Para.28.

¹⁵⁷⁵ Republic Act 3815, Revised Penal Code, Article 336.

¹⁵⁷⁶ Republic Act 7610, Special Protection of Children against Abuse, Exploitation and Discrimination Act 1992, section 5.

¹⁵⁷⁷ See CEDAW/C/PHL/CO/7-8, para. 25 (d)

exploited. The growing use of new technologies has made trafficking easier, as has improved travel, particularly between the Philippines and other Asian countries.¹⁵⁷⁸

Social and cultural norms have also played their part. There is a culture of silence and fear of reporting, with the discussion of sexual violence, sexuality and reproductive health being considered taboo.¹⁵⁷⁹ At the same time, sexual exploitation of even small children, especially through child sex tourism and, increasingly, internet sexual exploitation, is tolerated in many areas of the country as an acceptable means of addressing poverty and of earning money for the family. Poor parenting, consumerism and peer influence, lack of internet safety awareness, local English proficiency, an existing sex industry and high levels of access to the internet have all contributed to the Philippines becoming a hub for online exploitation of children, now a multi-billion-dollar industry.¹⁵⁸⁰

As noted above, the legislation does not set an explicit legal age of sexual consent, and the law on statutory rape only applies to sex with girls under the age of 12. Further, if the offender marries the girl, any criminal liability ceases to exist, not only in relation to the perpetrator, but also in relation to any co-principals, accomplices or accessories after the fact.¹⁵⁸¹

The Special Rapporteur on Trafficking in Persons also noted in her 2013 report that sometimes the most excluded sections of the population of barangays resort to earning a living by engaging their children in internet pornography.¹⁵⁸² Officials in some barangays have displayed a lack of willingness to interfere in what is often seen as a 'family' issue or have claimed that they have no mandate to intervene.

The challenges in addressing trafficking in persons include lack of manpower, poor monitoring, poorly implemented legal and regulatory frameworks, weak law enforcement due to lack of capacity, an incomplete data-base (despite the establishment of the Philippine Anti-Trafficking in Persons Database), politics, budgetary concerns, cultural diversity, corruption and under-resourced social welfare.¹⁵⁸³

Somewhat surprisingly, the Philippines anti-human-trafficking efforts have lately been given the highest ranking of Tier I in the Global Trafficking in Persons Report produced by the US State Department. Despite this, in 2016, the Committee of Experts on the Application of Conventions and Recommendations (CEACR - for ILO Conventions) while noting the various measures taken by the Government to combat trafficking, requested the government to strengthen the capacity of law enforcement agencies in identifying and combating the sale and trafficking of children, and requested the government to continue providing information on the number of reported violations, investigations, prosecutions, convictions and criminal penalties imposed in cases concerning children.¹⁵⁸⁴

¹⁵⁷⁸ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016, p.4. Access to ports for migration, including easy access to Indonesia through Mindanao is also a factor in cross border sex trafficking. There are recognized links between high rates of migration and trafficking.

¹⁵⁷⁹ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016, p. 12.

¹⁵⁸⁰ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016, p.6.

¹⁵⁸¹ Republic Act 3815, section 344.

¹⁵⁸² Report of the Special Rapporteur on trafficking in persons especially in women and children A/HRC/23/48/Add.3.

¹⁵⁸³ Child Protection in the Philippines, A Situational Analysis, Save the Children, 2011, p 49.

¹⁵⁸⁴ Observation (CEACR), adopted 2016, published 106th ILC session (2017).

The Committee on the Rights of the Child has also expressed concern that there is insufficient engagement with and regulation of the private sector to prevent and combat child sex tourism.¹⁵⁸⁵

Preventing child abuse on the internet also remains a challenge for many of the same reasons, including the pace of technological change, a lack of staff, funds and skills, cooperation difficulties between agencies and a lack of coordination. In addition, barangays and the police often do not have access to computers or the internet, making them unable to determine whether a crime has been committed or to determine whether the child involved or any other person depicted is known to them. The situation has been worsened by corruption at all levels and gaps in guidelines and protocols, including a lack of protocols for the handling of forensic evidence, a system for tagging foreign sex offenders' entry to the Philippines and guidelines for issuance of search warrants for online child abuse.

Once a person is identified as being engaged in the production or dissemination of pornography, a lack of knowledge of the law on the part of prosecutors, lengthy legal proceedings, delay and inconsistent implementation of laws are a problem. In addition, *"there is no comprehensive data collection system and appropriately disaggregated data and research."*¹⁵⁸⁶ There is evidence however, that some areas, such as Cebu, have introduced a coordinated approach and have raised awareness in local communities and worked directly with the community and NGOs to address such abuse.¹⁵⁸⁷

8.3. Child marriage

According to the NDHS 2013 the percentage of women aged 20-24 who were first married before the age of 15 was 2 per cent, with 15 per cent married by the age of 18. Pre-arranged, forced and early marriages are critical issues affecting Filipino girl children, particularly Muslim and Indigenous children.¹⁵⁸⁸ Extrapolating from these figures, around 708,000 women aged 20-24 at the time of the survey were subject to early marriage.

Legal and policy framework: child marriage

Although the marriage age is set at 18 by Articles 5 and 14 of the Family Code, and a marriage is only valid under the Family Code if it is consensual, there are few effective penalties relating to early or forced marriage. Further, the Family Code conflicts with the Code of Muslim Personal Laws and indigenous peoples' customary laws which permit marriage under the age of 18.

Article 350 of the Penal Code in the Philippines provides a weak protective provision: that if one of the contracting parties to a marriage obtains the consent of the other by means of violence, intimidation or fraud, he shall be punished through a fine and/or Arresto Mayor (the lowest level of

¹⁵⁸⁵ See Committee on the Rights of the Child, Concluding Observations and Recommendations on the Initial Report of the Philippines, Submitted Under Article 12 of the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography, CRC/C/OPSC/PHL/CO/1, para. 25 (c).

¹⁵⁸⁶ Committee on the Rights of the Child, Concluding Observations and Recommendations on the Initial Report of the Philippines, Submitted Under Article 12 of the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography, June 26, 2013, CRC/C/OPSC/PHL/CO/1 para.7.

¹⁵⁸⁷ See Protection of Children from Online Abuse and Exploitation, Capacity Gap Analysis of Stakeholders: A summary, UNICEF, Philippines, 2016.

¹⁵⁸⁸ CRC state report, Philippines, 2009. The Code of Muslim Personal Laws and indigenous customary laws contradict the Family Code which sets the age of marriage at 18. The national law takes precedence in the Philippines, see s.22 Republic Act No .9054.

penalty for a criminal offence).¹⁵⁸⁹ However, the Philippines also has provisions in the law that could be seen as condoning forced marriage. Article 344 of the Penal Code and Article 266-C of the Anti-Rape Law 1997 both provide that a subsequent valid marriage between the perpetrator and the offended party extinguishes the criminal action or the penalty for rape.¹⁵⁹⁰

Causes and determinants: child marriage

The root causes of early and forced child marriage are mainly poverty, conflicts, insecurity and vulnerability to the impact of natural disasters.¹⁵⁹¹

8.4. Birth registration

SDG 16.9 requires that by 2030, all children's birth should be registered, in order to provide them with a legal identity. Under the current Philippine's legislation, all births are required to be registered within 30 days from the time of birth at the local civil registry office of the city/municipality where the birth occurred.¹⁵⁹²

The rate of birth registration in 2010 was 90.2 per cent, the latest year for which registration rates are available. This represents an increase of over 10 per cent from 2000, when the rate was 83 per cent.¹⁵⁹³ Provinces in ARMM are estimated as having the lowest rate of registration and the highest percentage of unregistered children in the country.¹⁵⁹⁴ The results of the 'Count Every Child Survey' suggest that the occupation and education level of the parents are the most significant factors related to whether or not a child's birth is registered, and that the age group, sex and civil status of the parents are far less influential.¹⁵⁹⁵ Of those with no education only 56.9 per cent were familiar with birth registration, compared with 92 per cent of those who had completed secondary education and 97.6 per cent of those who had completed college. Only 13.8 per cent of those with no education had been registered at birth, compared to 88.3 per cent of those who had completed secondary education.¹⁵⁹⁶

Muslim parents taking part in the Count Every Child Survey were less familiar with the requirement to register a birth (79.7 per cent) and were less likely to have had their birth registered (48 per cent) than Roman Catholics (88.4 per cent were familiar with birth registration and 82.2 per cent were registered at birth).¹⁵⁹⁷ Similarly, parents of Tausug and T'boli ethnicities were less familiar with birth registration (78.8 per cent and 79.8 per cent respectively) and less likely to have been registered at birth (46.1 per cent and 77.4 per cent respectively) in comparison to those of Tagalog ethnicity, 89.9 per cent of whom were familiar with birth registration and 84.7 per cent of whom were registered at birth.¹⁵⁹⁸

¹⁵⁸⁹ Article 350, Revised Penal Code.

¹⁵⁹⁰ Article 266-C, Anti-Rape Law, 1997.

¹⁵⁹¹ CEDAW concluding observations, Philippines, 2016, para 50

¹⁵⁹² <https://psa.gov.ph/civilregistration/civil-registration-procedure>

¹⁵⁹³ <http://data.worldbank.org/indicator/SP.REG.BRTH.ZS?locations=PH>

¹⁵⁹⁴ Philippines Count Every Child Survey Report p 21, THIS NEEDS A FULL REFERENCE- UNICEF HAVE YET TO PROVIDE

¹⁵⁹⁵ Philippines Count Every Child Survey Report p 23,.

¹⁵⁹⁶ Philippines Count Every Child Survey Report p 25,.

¹⁵⁹⁷ However, Muslim parents are also likely to be living in ARMM and to be poorer.

¹⁵⁹⁸ Philippines Count Every Child Survey Report p 24

Children born out of wedlock in the Philippines are classified as “illegitimate children” in national laws. However, they may be legitimated through marriage of the parents and may use the name of the father where there is an acknowledgement of paternity (Republic Act 9255, An Act Allowing Illegitimate Children to Use the Surname of Their Father).¹⁵⁹⁹ The UN Committee on the Rights of the Child has raised concerns about the discriminatory practices faced by children born out of wedlock, and has recommended the abolition of the classification of illegitimate children.¹⁶⁰⁰

Failure on the part of the parent to register the birth of a child, can have profound consequences on the child. A birth certificate is needed to enrol a child in school, to obtain a passport or, when they are older, to vote, to take a professional licensure exam, open a bank account, get married, get a job or claim benefits.¹⁶⁰¹

8.4.1.1. Barriers and bottlenecks: birth registration

The obstacles identified in relation to birth registration in the Count Every Child survey were high costs; lack of public awareness; the difficulty of the process and the short length of time in which a child’s birth must be registered.¹⁶⁰² Only parents or court-appointed legal guardians can register the birth of a child,¹⁶⁰³ which can only be done in person by attendance before a local Civil Registrar (in municipalities, municipal districts and cities).¹⁶⁰⁴

Where a late fee or penalty is imposed, this constitutes a serious deterrent particularly in areas which have a high poverty rate, especially given the additional costs of travelling to the office to register a child, which can be as much as the average monthly income.¹⁶⁰⁵ The UN Committee on the Rights of the Child has raised concerns regarding the cost of birth registration and late fees.¹⁶⁰⁶ In 2009 and 2011 under the 4Ps programme, the government provided mobile birth registration units and free birth registration to indigenous, indigent and marginalised parents who had failed to register their children’s birth’s, to enable children to be registered at schools. It is not clear whether the mobile birth registration units have continued their work, in the light of the much higher rates of registration.¹⁶⁰⁷

Table 8.7. Obstacles to birth registration

¹⁵⁹⁹ Amending for the Purpose Article 176 of Executive Order No. 209, the Family Code of the Philippines.

¹⁶⁰⁰ CRC/C/PHL/CO/3-4, 2 October 2009, Philippines, 2009, para 30

¹⁶⁰¹ Philippines Count Every Child Survey Report p 1,

¹⁶⁰² Philippines Count Every Child Survey Report p 52

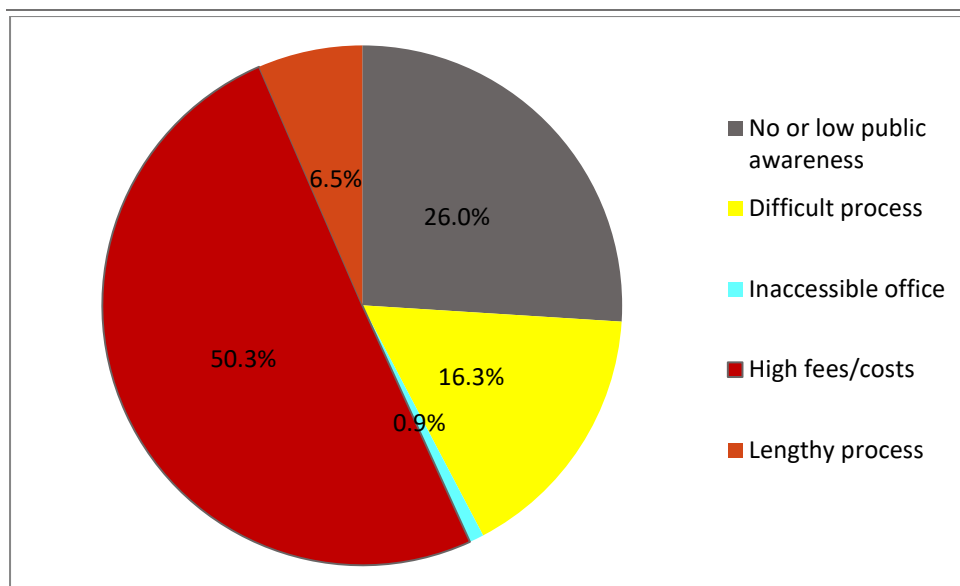
¹⁶⁰³ Executive Order No. 209, as amended; NSO. (2013). “Civil Registration Facts.” Available on <http://census.gov.ph/civilregistration/facts>

¹⁶⁰⁴ Philippines Count Every Child Survey Report , p 26

¹⁶⁰⁵ Philippines Count Every Child Survey Report p 53

¹⁶⁰⁶ CRC/C/PHL/CO/3-4, 2 October 2009, Philippines, 2009,

¹⁶⁰⁷ It is possible that there is a reluctance to register disabled children, as disability is still regarded as shameful by some families and communities.



Source: *Philippines Count Every Child Survey Report, Everychild*

8.5. Children in disasters

During disasters, children separated from their parents are at a higher risk of violence, abuse, exploitation and neglect. Prolonged displacement can cause changes in social relations, behaviour, physical reactions and emotions.¹⁶⁰⁸ There has been limited research into post-disaster violence against Filipino children. However local agency reports showed an increase in the number of rape and sexual abuse cases after Typhoon Yolanda (Haiyan) in 2013. There were also behavioural changes, including involvement in harsh or dangerous labour, sexual violence and an increase in the number of out of school children after Yolanda.¹⁶⁰⁹

Republic Act 10821, the Children’s Emergency Relief and Protection Act 2015, establishes a comprehensive emergency programme to protect children and support their immediate recovery during disasters. It mandates the establishment of evacuation centres and child-friendly spaces, the restoration of civil registry documents to facilitate the reunification of separated children and the training of emergency responders in child protection. It also puts in place heightened surveillance against child trafficking and other violence against children in the aftermath of disasters and calamities and seeks to reduce the use of schools as evacuation centres. There is little information as yet on the level of implementation of the Act or its effectiveness (for more on protection of children in disasters see section 3.1).

¹⁶⁰⁸ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.19. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁰⁹ A Systematic Review of the Drivers of Violence Affecting Children in the Philippines, University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation & UNICEF Philippines, 2016, p.7.

The particular vulnerability of street-connected children

The term ‘street child’ refers to children and youth in urban areas for whom the street is his or her habitual abode and/or livelihood.¹⁶¹⁰ They may or may not be supervised by adults. Some children have families to return to, whereas others have been abandoned or effectively excluded from their home.¹⁶¹¹

In 2005, The UN Committee on the Rights of the Child in their Concluding Observations to the Philippines second periodic report on implementation of the CRC noted their ‘grave’ concern about the number of children living in the streets and their vulnerability to various forms of violence and abuse, including sexual abuse, exploitation and substance abuse.¹⁶¹² In 2010, in their response to the third and fourth periodic reports, the CRC Committee ‘remained seriously concerned at the high number of children living in the streets.’¹⁶¹³

The number of street children in the Philippines is difficult to establish, with figures stating that the national prevalence had increased from 250,000 to 1.5 million in 1990s, with an estimation of 50,000 to 75,000 in Manila alone in 2002¹⁶¹⁴. The National Project on Street Children of the DSWD and the National Council for Social Development reporting in 2006, estimated that the youth population in major cities comprised of 13 per cent street children. Their data also found that over 220,000 street children were living in 65 major cities in the Philippines, with national data showing that 60,000 of these children are sexually exploited or prostituted.¹⁶¹⁵ A detailed breakdown of these children is difficult to obtain due to their constant mobility. However, the majority of visible street children are boys.¹⁶¹⁶ As well as sexual exploitation and prostitution, street children face a number of other risks, including discrimination, exploitative work, violence and delinquency, the use and abuse of dangerous substances and the involvement in trafficking drugs.¹⁶¹⁷

In 2010, a cross-sectional survey of 311 street children and 528 non-street children aged 13 to 17 years was undertaken in Manila. Street children were grouped into two categories, children who spent considerable time on the streets but were living with or had contact with immediate family

¹⁶¹⁰ UNICEF defines ‘street children’ as ‘Any girl or boy who has not reached adulthood, for whom the street in the widest sense of the word, including unoccupied dwellings, wasteland, and so on, has become his or her habitual abode and/or source of livelihood, and who is inadequately protected, directed, and supervised by responsible adults’ (Williams, 1993). There have been many debates about terminology and whether the term ‘street children’ is stigmatizing and may remove the focus on other marginalized children (Davis and Miles, 2015). New emerging terms such as ‘streetactive’, ‘street-connected’ or ‘street-involved’ children are increasingly being used, and refer to a broader definition of “children for whom the street is a reference point and has a central role in their lives” (Thomas de Benitez, 2007). See Systematic Literature Review of the Drivers of Violence against Children, UNICEF 2016, p.59.

¹⁶¹¹ Consortium for Street Children. A study of policies and programmes in the Philippines addressing the right if street children to education. Henry R. Ruiz. 2006. Available at: <http://www.streetchildrenresources.org/resources/a-study-of-policies-and-programmes-in-the-philippines-addressing-the-right-of-street-children-to-education/> [11.07.17]

¹⁶¹² CRC/C/15/Add.258 (2005) Para. 82.

¹⁶¹³ CRC/C/PHL/CO/3-4 (2010) Para. 74.

¹⁶¹⁴ *Drug Use Among Street Children in the Philippines*. Levi Njord et al. Asia-Pacific Journal of Public Health 22(2) 203-211, 2010 at p.203.

¹⁶¹⁵ Pediatrics International. Protecting children’s rights in a developing country. Perla D Santos Ocampo. 2002.

¹⁶¹⁶ Consortium for Street Children. A study of policies and programmes in the Philippines addressing the right if street children to education. Henry R. Ruiz. 2006. Available at: <http://www.streetchildrenresources.org/resources/a-study-of-policies-and-programmes-in-the-philippines-addressing-the-right-of-street-children-to-education/> [11.07.17]

¹⁶¹⁷ Pediatrics International. Protecting children’s rights in a developing country. Perla D Santos Ocampo. 2002.

were defined as ‘children on the street’.¹⁶¹⁸ Those who had run away from home and were living primarily on the street with no immediate contact with family were defined as ‘children of the street’. 171 street children in this study were ‘children on the street’ (48.5 per cent male, 51.5 per cent female) and 140 were ‘children of the street’ (70.7 per cent male, 29.3 per cent female).¹⁶¹⁹

Street-connected children have a heightened risk of exposure to particular child protection issues and poor outcomes across many outcome areas. The study mentioned above found that ‘children of the street’ were 2.0 times more likely to smoke tobacco, 1.3 times more likely to use alcohol, 36.7 times more likely to use inhalants, and 5.5 times more likely to use illegal drugs than non-street children. ‘Children on the street’ were 8.7 times more likely to use inhalants and 2.8 times more likely to use illegal drugs than non-street children. The reasons for using illegal drugs and harmful substances included dealing with feelings of worry, helping them forget about their problems and alleviating hunger pangs. The study also discovered that all street children were significantly more likely to have been given or sold a drug in the past 30 days. From the findings, the authors concluded that street children in the Philippines are at a greater risk of abusing drugs than non-street children, with street children not in immediate contact with their family being at greatest risk.¹⁶²⁰

The CRC Committee expressed concern in their 2010 Concluding Observations about the practice of ‘clean-up of street dwellers’ and ‘round-ups’ of street children. These practices involve the police taking street children into custody, depriving them of their liberty for a period of time, followed by release, but without any resolution of the child’s problems or any offer of services. However, removal of children from the streets has often taken a far more extreme and far more dangerous form, with street children targeted for execution. Between 2010 and 2013, investigation of the Tagum City death squad (TDS) in the Philippine island of Mindanao was carried out by Human Rights Watch.¹⁶²¹ The death squad included ex-convicts, as well as street children and former members of the NPA. Killings by the TDS ‘appeared were believed to be rooted in the anti-crime campaign by the Mayor who wanted to rid the city of ‘weeds,’ a term including petty criminals, drug dealers and street children. The targets of the TDS were often drawn from what was known as the ‘order of battle,’ a list of individuals drawn from various sources, including community leader, neighbourhood watchmen, and police intelligence officers and even individual citizens.¹⁶²² Similar death squads were active in Davao, with an estimated 80 children killed in a decade up to 2009, and in Cebu and Manila.¹⁶²³ The killings were addressed by the Philippine Commission on Human Rights, who held a hearing into the deaths in 2009. The Commission on Human Rights continues to address the issue.¹⁶²⁴

Since the launching of President Duterte’s campaign against illegal drugs in June 2016, it has been reported that 31 minors under the age of 18 (mostly street children) have been killed by police and

¹⁶¹⁸ *Drug Use Among Street Children in the Philippines*. Levi Njord et al. *Asia-Pacific Journal of Public Health* 22(2) 203-211, 2010 at p.205.

¹⁶¹⁹ *Drug Use Among Street Children in the Philippines*. Levi Njord et al. *Asia-Pacific Journal of Public Health* 22(2) 203-211, 2010 at p.206.

¹⁶²⁰ *Drug Use Among Street Children in the Philippines*. Levi Njord et al. *Asia-Pacific Journal of Public Health* 22(2) 203-211, 2010 at p.207.

¹⁶²¹ Human Rights Watch. “One Shot to the Head”: Death Squad Killings in Tagum City, Philippines. 2014. Available at: https://www.hrw.org/sites/default/files/reports/philippines0514_ForUpload_0_0_1.pdf [11.07.17].

¹⁶²² Human Rights Watch. “One Shot to the Head”: Death Squad Killings in Tagum City, Philippines. 2014. Available at: https://www.hrw.org/sites/default/files/reports/philippines0514_ForUpload_0_0_1.pdf [11.07.17].

¹⁶²³ *Tough Justice: on the trail of Philippine death squads*, the Independent newspaper (UK), 31st May 2009.

¹⁶²⁴ The Human Rights Commission announced the continuation of a probe into the Davao death squad on 20th March 2017.

vigilantes, some being direct targets and others being innocent bystanders.¹⁶²⁵ In an October 2016 interview, President Duterte admitted to the killing of children and innocent individuals and promised to investigate the killings. However, he also referred to such children as “collateral damage.”¹⁶²⁶ This, alongside the strict curfew for minors, has left many street children feeling hunted, either by vigilantes or by the government picking children up after curfew and taking them to shelters.¹⁶²⁷

Legislation and policy

Street children are generally regarded in government policy and law as being vulnerable and in need of protection. However, at the same time, they are regarded as being anti-social and as potential criminals, with the latter being the more common public opinion.¹⁶²⁸

Section 2 of the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1991,¹⁶²⁹ provides that it is the policy of the State to provide special protection to children from all forms of abuse, neglect, cruelty, exploitation and discrimination and other conditions prejudicial to their development, and sets out penalties for the commission of such conduct. The Act goes on to define ‘children in need of special protection’ as including those living in or fending for themselves in the streets of urban or rural areas without the care of parents or a guardian or any adult supervision needed for their welfare.¹⁶³⁰ This covers both children ‘in the street’ and ‘of the street.’ However, implementation of this provision has been weak, with few statutory services for children.

Republic Act 9344, the Juvenile Justice and Welfare Act of 2006 in declaring State policy, repeats the provisions of the Special Protection of Children against Abuse, Exploitation and Discrimination Act relating to the right of the child to proper assistance and special protection. However, the 2006 Act also defines ‘a child at risk’ as a child who is vulnerable and at risk of committing criminal offences because of personal, family and social circumstances. Being a street child is treated as falling within the definition. However, section 58 of the Juvenile Justice and Welfare Act of 2006 provides that individuals under the age of 18 shall be ‘*exempt from prosecution for the crime of vagrancy and prostitution...and sniffing of rugby (a type of contact cement)...such prosecution being inconsistent with the United Nations Convention on the Rights of Child: provided, that said persons shall undergo appropriate counselling and treatment programme.*’¹⁶³¹ It is unclear though, whether, in the absence of counselling and treatment programmes, children can continue to be prosecuted.

¹⁶²⁵ Al Jazeera. Children and Duterte’s drug war: Lessons from the past.

<http://www.aljazeera.com/indepth/features/2017/02/children-duterte-drug-war-lessons-170216121942335.html> [11.07.17].

¹⁶²⁶ Al Jazeera. Rodrigo Duterte interview: Death, drugs and diplomacy. 16 Oct 2016. Available at:

<http://www.aljazeera.com/programmes/talktojazeera/2016/10/exclusive-rodrigo-duterte-war-drugs-161015100325799.html> [11.07.17].

¹⁶²⁷ Al Jazeera. Children and Duterte’s drug war: Lessons from the past.

<http://www.aljazeera.com/indepth/features/2017/02/children-duterte-drug-war-lessons-170216121942335.html> [11.07.17].

¹⁶²⁸ New Mandala. Saving street kids in Duterte’s Philippines. Clara Siagian. 07 Jul 2016. Available at:

<http://www.newmandala.org/saving-street-kids-dutertes-philippines/> [11.07.17].

¹⁶²⁹ Republic Act No. 7610, as amended by Republic Act 9231, 2003.

¹⁶³⁰ Republic Act No. 7610, Special Protection of Children against Abuse, Exploitation and Discrimination Act 1997 as amended by Republic Act 9231, 2003, Section 3.

¹⁶³¹ The LawPhil Project. Statutes. Republic Acts. 2006. Republic Act No. 9344: Juvenile Justice and Welfare Act of 2006. Available at: http://www.lawphil.net/statutes/repacts/ra2006/ra_9344_2006.html [11.07.17]

Challenges and gaps in the response to street children

Attitudes towards street children remain at best, ambivalent. On the one hand, there is recognition that street children are at risk and in need of protection, but on the other hand, they are regarded as anti-social, a nuisance, and likely to commit criminal acts. The degree to which street children are at risk of abuse, violence and exploitation does not appear to be fully appreciated or acted upon by State bodies.

The UN Committee on the Rights of the Child noted the lack of a systematic and comprehensive strategy to address the situation and protect children living in the streets. This remains the case at the time of writing. Although there are a number of NGOs providing services for street children, these children continue to have limited access to adequate nutrition, clothing, housing, social and health services and education. Furthermore, as the UN Committee pointed out street children, face health risks, including environmental health risks, such as toxic and hazardous wastes and air pollution.

In their 2005 Concluding Observations, the Committee recommended that the Government should:¹⁶³²

- (a) develop a comprehensive strategy with active participation of street children, non-governmental organisations and other relevant professionals to address the high number of street children, with the aim of reducing and preventing this phenomenon;
- (b) secure that children living in the streets are not unlawfully arrested and detained, to protect them from police brutality and where needed, to secure their access to adequate legal services;
- (c) ensure that street children are reached through trained street educators and counsellors and provided with adequate nutrition, clothing and shelter as well as with social and health services and educational opportunities, including vocational and life-skills training, in order to support their full development and provide them with adequate protection and assistance;
- (d) provide street children with adequate recovery and social reintegration services for physical, sexual and substance abuse and to promote reunification with their families, when feasible;
- (e) reduce and prevent the environmental health risks faced by children living in the streets, inter alia, through raising awareness about environmental health risks among these children and instructing appropriate behaviours protecting them from these risks;
- (f) support the efforts of street children to organise themselves in order to enhance their self-esteem;
- (g) collaborate with and support non-governmental organisations working with and for street children.

These priorities remain and have yet to be fully addressed.

¹⁶³² CRC/C/PHL/CO/3-4, 2 October 2009, Para. 83.

8.6. Access to a comprehensive child protection system

8.6.1. Child protection system in the Philippines

The child protection system in the Philippines at national, regional and provincial level and the systems, mechanisms and institutions established are generally considered to meet international standards for child protection law and policy.¹⁶³³

The aim and objective of the Filipino child protection system and the various child protection laws is to provide special protection to children from all forms of abuse, neglect, cruelty, exploitation and discrimination and other conditions prejudicial to their development; to impose sanctions against those who commit such acts; and ensure programmes for prevention and deterrence of child abuse, exploitation and discrimination are available and implemented, as well as the provision of ‘crisis’ services.

The child protection system relies upon two national bodies. One of these is the Council for the Welfare of Children (CWC), created by the Child and Youth Welfare Code 1974. It is the focal inter-agency body of the Philippines on child welfare and is chaired by the DSWD. Its priorities are:

- Integration of children’s development agenda in national and local development plans;
- Putting in place a fully operational and highly effective management information system, monitoring and evaluation mechanisms for national plans of action and the implementation of the Convention of the Rights of the Child (CRC) and other international conventions as well as resource bank on children;
- Heighten advocacy and social mobilization for an effective and wide scale implementation of the UNCRC within the Philippine social and cultural context
- Legislative and policy review and revisions to harmonize national and local laws with CRC and other international conventions.¹⁶³⁴

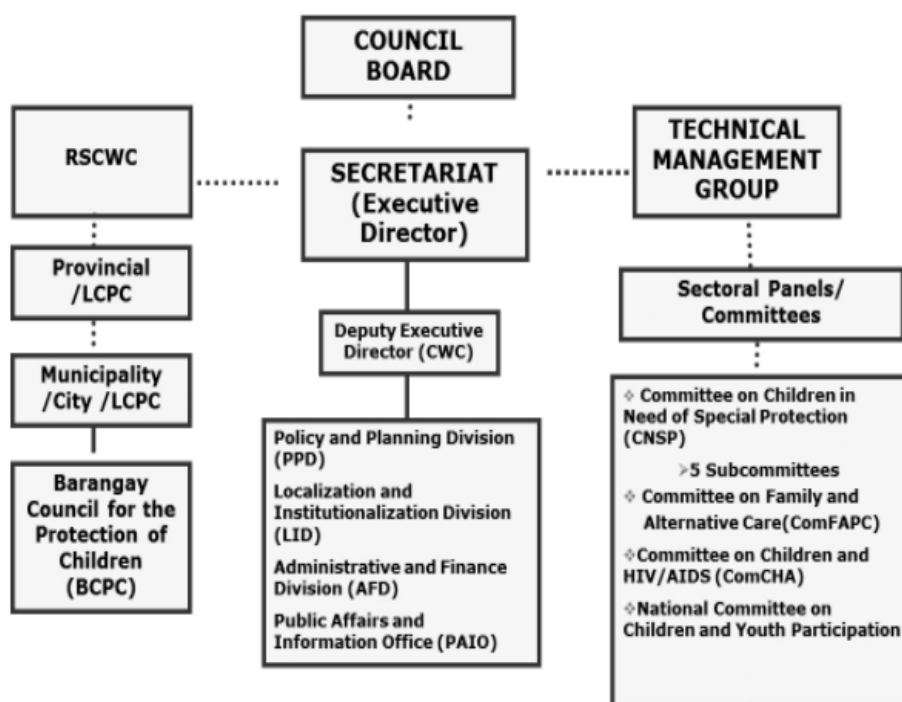
Underneath the Council are the Regional Subcommittees for the Welfare of Children, which guide the development and implementation of CWC policy and directives, and below that the Provincial, municipal and city local child protection councils and then the barangay child protection councils.

Table 8.8. Organizational structure of child protection system

¹⁶³³ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF Philippines, 2016, p 52.

¹⁶³⁴ See Council for the Welfare of Children, ‘thrusts and priorities,’ cwc.gov.ph.

Organization structure



Source: Council for the Welfare of Children

Article 87 of the Child and Youth Welfare Code 1974 provides that each barangay shall encourage the organization of an LCPC. However, DILG Memorandum Circular 2002-121 expands this Article and provides for the creation of the LCPCs at all levels of the LGU (as can be seen in table 8.8) and sets out the specific functions and membership for each level.

The Municipal and City Councils for Child Protection have responsibility for policy making and planning for child protection services,¹⁶³⁵ as well as for preparing the annual work and financial plan; coordinating stakeholders in the child protection system; maintaining a data base on children in their area; advocating for the establishment and maintenance of playgrounds, day care centres and other facilities; assisting children in need of special protection and referring cases filed against child abusers to proper agencies and institutions; provision of capacity building programmes for those working with children, documenting best barangay practices etc.¹⁶³⁶ It appears that in some areas, they are also involved in individual case decisions following investigation.

The Council membership includes representatives of DepEd; the labour and employment officer; the planning and development officer; the budget officer; the health officer; the DSWD officer; the nutrition officer; the PNP Director; the Treasurer; the Barangay president, the PTA President, a child

¹⁶³⁵ See Arce C., Improving National and Local Systems and Capacities Towards Better Child Protection in the Philippines, PLPCD Briefing, UNICEF, July 2016, p.7.

¹⁶³⁶ DILG Memorandum Circular 2002-121 (Revised Guidelines on the Organization and Strengthening of the LCPC Incorporating Thereat Early Childhood Care and Development Coordinating Committees at the Provincial, City, Municipality, and Barangay Levels). See also Guidelines in Monitoring the Functionality of the Local Council for the Protection of Children (LCPC) at all Levels and for Other Purposes. DILG Memorandum Circular No. 2005-07. Manila: DILG; Revised Guidelines in Monitoring the Functionality of the Local Council for the Protection of Children (LCPC) at all Levels and for Other Purposes. DILG Memorandum Circular No. 2008-126. Manila.

representative and 3 NGO representatives. The Council is chaired by the Council Member for the Committee on Women and Children.

There are potential problems with this multi-sectoral approach. There is a risk that it may lead to child protection by committee rather than by dedicated, skilled social workers within a well-managed child protection service. This is especially so when there is a general lack of social workers on the ground. Few of the LCPC membership will have received training on or have experience of working in child protection, yet they may need to reach decisions on referral and protection of a child or the provision of specialist services.

Second, members of the LCPC have other jobs and other responsibilities apart from child protection. Many of them will be on the other Councils that the child protection laws require to be established at local government level, including the Municipal Interagency Council Against Trafficking and Violence Against Women and Their Children (under the Anti-Trafficking in Persons Law) and the Interagency Council Against Child Pornography (under the Anti-Child Pornography Act). The Anti-Trafficking in Persons Law, the Anti-Violence Against Women and Children, the Anti-Pornography Law and the Juvenile Justice and Welfare Law between them require about 16–17 regional sub-committees or interagency committees, totalling at least 64 regional bodies composed more or less of the same government agencies. This has led to coordination bottlenecks, duplication of functions and fragmented and reactive interventions, all of which have to be implemented by LGUs, who lack the resources and capacities.¹⁶³⁷

The role of the barangay LCPC is set out in Article 87 of the Child and Youth Welfare Code and is wide. One part of its remit is to protect and assist abandoned or maltreated children which generally involves reporting alleged cases to the social worker in the LGU. By the end of 2010 only 36 per cent of provinces, 56 per cent of cities, 44 per cent of municipalities and 34 per cent of barangays had functioning LCPCs.¹⁶³⁸ Where barangay councils do exist, they often lack resources for the protection of children, limiting the work they can do. Quite frequently they also lack power to engage effectively with the formal system.¹⁶³⁹

Where there is no LCPC, and little access to LGU social workers, informal systems that identify, prioritise and address child protection appear to operate in some locations.¹⁶⁴⁰ Although informal systems can resolve some child protection issues, some practices, for example marrying off a girl who has been raped to the perpetrator in order to save face (and exculpate him from criminal prosecution), may be positively harmful.¹⁶⁴¹ Without training and supervision there is also a risk that discriminatory and non-participatory decisions may be made.

The second national body is the National Task Force for Children in Need of Special Protection, created following the passing of Republic Act 7610, the Special Protection of Children against Abuse, Exploitation and Discrimination Act 1997. It is principally responsible for coordinating and monitoring the investigation and prosecution of cases involving violations of the Special Protection of Children against Abuse, Exploitation and Discrimination Act and other child-related criminal laws. Under Executive Order No. 275, the National Task Force has the following responsibilities:

1. To establish a system for collecting periodic reports from member agencies on cases filed before them including the status of such cases;

¹⁶³⁷ Improving Child Protection in the Philippines, PLCPD-UNICEF, 2016.

¹⁶³⁸ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, p 21.

¹⁶³⁹ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, p 51.

¹⁶⁴⁰ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, p 57.

¹⁶⁴¹ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, p 58.

2. To request member agencies and other government bodies to address specific issues brought to the Committee's attention that require immediate action;
3. To coordinate with other inter-agency councils and other similar structures and mechanisms for synchronization and harmonization of actions on the legal protection of children;
4. To develop and/or recommend policies and guidelines to address gaps and issues identified in the investigation and prosecution of cases as well as in the legal protection of children;
5. To formulate a uniform protocol for capacity-building of duty bearers and other stakeholders with emphasis on multi-disciplinary approach;
6. To call upon non-member agencies for assistance when necessary in the exercise of its functions and duties.

The National Task Force is chaired by the Secretary of Justice and co-chaired by the DSWD. Its membership includes the Chairperson of the Commission on Human Rights, the Secretaries of Foreign Affairs Labour and Employment, Tourism, Interior and Local Government, Health and Education; the Commissioner of Immigration, the Director of the NBI, the Chief of the PNP; the Prosecutor General and three representatives of NGOs or private bodies working with or advocating for children. The National Task Force is responsible for the Comprehensive Programme on Child Protection, while the Council for the Welfare of Children is responsible for the National Plan of Action for Children. The National Task Force has also produced the Protocol for Case Management of Child Victims of Abuse, Neglect and Exploitation.

It is unclear why there are two national bodies, both of whom are focused on the welfare and protection of children, and which have many of the same government department members.

The Special Protection of Children against Abuse, Exploitation and Discrimination Act provides little detail as to how 'child protection' is to be effected or delivered. However, the Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under s.32 of the Act contain more practical detail and impose a mandatory duty on health professionals and government workers to report incidents of possible child abuse.¹⁶⁴² The Rules and Regulations also require an authorised officer or social worker of the DSWD to attend at the child's home to undertake an investigation of the alleged abuse within 48 hours.¹⁶⁴³ If the investigation discloses serious abuse or neglect the child *must* be removed from home and placed under protective custody.¹⁶⁴⁴ The DSWD on completing the investigation may ask the court to suspend parental authority and transfer authority to another family member or a children's home etc.¹⁶⁴⁵ A guardian ad litem must be appointed for the child wherever a criminal complaint for child abuse is filed,¹⁶⁴⁶ though not apparently when the proceedings are purely civil, even where the DSWD nevertheless wishes to remove the child from his or her home.

¹⁶⁴² Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under section 32 of Republic Act 7610, Sections 4 and 5.

¹⁶⁴³ Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under section 32 of Republic Act 7610, Section 8.

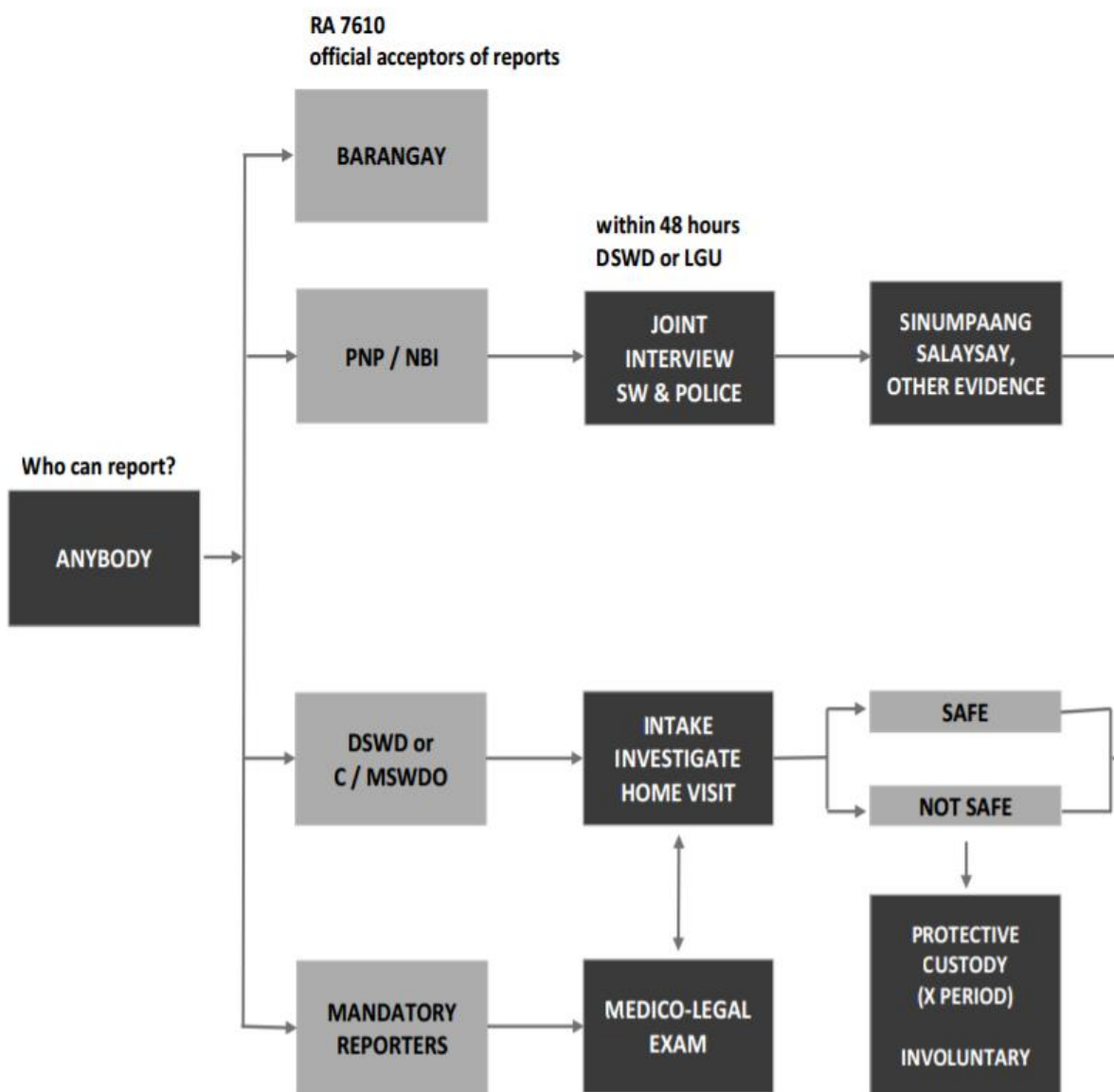
¹⁶⁴⁴ Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under section 32 of Republic Act 7610, Section 9.

¹⁶⁴⁵ Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under section 32 of Republic Act 7610, Section 15.

¹⁶⁴⁶ Rules and Regulations on the Reporting and Investigation of Child Abuse Cases issued under section 32 of Republic Act 7610, Section 19.

The Protocol for Case Management, issued in 2011 by the National Task Force sets out the procedure to be followed where it is suspected that a child is the victim of abuse in great detail. If followed, this would provide a very full and complete child protection process.

Table 8.9. Protocol for Case Management, 2011



Source: Council for the Welfare of Children

8.6.2. Alternative care

There is very little information available on how many children are in need of alternative care, or the extent to which this is available for children. It was not possible to find any information about the use of kinship care, though it is believed to be wide-spread and the most common form of alternative care. There is evidence that foster care exists, but it appears that it only exists to a limited extent. Figures from the DSWD indicate that there were 1,487 children in foster care in April 2017.¹⁶⁴⁷ Given

¹⁶⁴⁷ Data provided by DSWD?

the rate and level of violence, this number must be treated as representing only a fraction of the children who are in need of foster care.

In January 2017, there were 2,534 children in residential care managed by DSWD.¹⁶⁴⁸ DSWD also reported that there were 28 accredited children’s homes, but does not provide any information about the numbers of children accommodated in such homes. The details of over 100 non-governmental children’s homes in the Philippines can be found on a very superficial search of the internet, and it must be assumed that many of these are not accredited. One home advertises that visits are welcome and ‘parties’ with the children can be arranged at special request, an approach which might be termed ‘orphan tourism’, and a matter of concern. Many of the homes are run by relatively small evangelical organizations in the USA, and there is no information on how stable their funding is. There is no indication of how many children are living in un-accredited homes.

The UN Committee on the Rights of the Child has raised concerns about the high number of institutionalised children and reports of physical and emotional violence of children in residential care. They have recommended that the State advance the deinstitutionalisation of children and enhance the standards of care and monitoring of children placed in foster care or residential care.¹⁶⁴⁹ However, safe deinstitutionalisation in the face of such a general lack of community based services may pose a very real challenge.

In 2017, DSWD figures show that 5,961 children were either in the process of being adopted or were available for adoption, of which 2,716 were cleared for inter-country adoption.¹⁶⁵⁰ No disaggregated information is provided on children available for adoption and the destination countries of children cleared for inter-country adoption is not provided. The Philippines is a party to The Hague Convention on Inter-Country Adoption, and Inter-country adoption is governed by Republic Act 8043, the Inter-Country Adoption Act of 1995 and Republic Act 9523 (2009) which amends the process relating to declaring a child legally available for adoption. A child can only be placed for inter-country adoption where all possibilities of domestic adoption have been exhausted and it is in the best interests of the child.

8.6.3. Barriers and bottlenecks: child protection system

There are a multiplicity of barriers and bottlenecks with respect to the full implementation of a secondary and tertiary child protection system. These are partly political, partly structural and partly due to a lack of financial and human resources, expertise and training. A consultation with child protection stakeholders saw the barriers and bottlenecks as the following:

Table 8.10. Stakeholder causality map: child protection

¹⁶⁴⁸ Data provided by DSWD?

¹⁶⁴⁹ CRC concluding observations, Philippines, CRC/C/PHL/CO/3-4, 22 October 2009, para 47-48

¹⁶⁵⁰ Data provided by DSWD?

Immediate Causes

- Lack of Parental supervision
“НІЯК” /Face Saving
- Child victims don't report abuse

- Lack of administrative data or fragmented/ in consistent

- Acceptance of parents on use of corporal punishment
- Lack of awareness on positive discipline and children's rights
- Limited reach of parenting support interventions

•LACK OF CHILDREN TO PARTICIPATE IN THE ISSUES THAT AFFECT THEM

- Inadequate access or availability of quality CP services (including accessibility in the context of disabilities)
- Preventative, Response, Protection, Rehabilitation, Restorative Re-integration
- Lack of Social Workers
- Insufficient child protection in emergency services (birth registration, psycho-social, support, sexual abuse and exploitation prevention, Etc.)
- Lack of administration data or fragmented/in consistent. Lack of Information management system
- Acceptance of parents on use of corporal punishment
- Lack of awareness on positive discipline and children's rights
- Limited reach of parenting support interventions participate in the issues that affect them

Underlying Causes

Children do not have the knowledge and skills to protect themselves

- Cultural/Social norms
- Parents working elsewhere
- Detained/imprisoned parents
- Single parents
- Orphaned children
- Perpetrators were also victims
- Inter-generational violence
- Intra-sectoral violence

- Lack of capacity to analyze data on children

Social and Cultural norms on physical violence, deference to parents in disciplining children and children as property of parents.
(social norms- Traditional cultural “to make the child remember a lesson, physical pain is inflicted”)

Governance on national and sub-national (poor prioritization, lack of investment, lack of capacity on result base and planning, poor appreciation of M&E (cross-cutting))

Structural Causes

Definition of Rape is discriminatory (Children with disabilities)
Low age of sexual consent (12 years old)

Lack of harmonized M & E Framework

Absence of National Framework on parenting
Lack of the Law on corporal punishment

Low capacity of the leaders and implementers in the government
Inadequate space for civil society and children's participation in governance (structure)

Cross cutting Structural Causes of violence against children

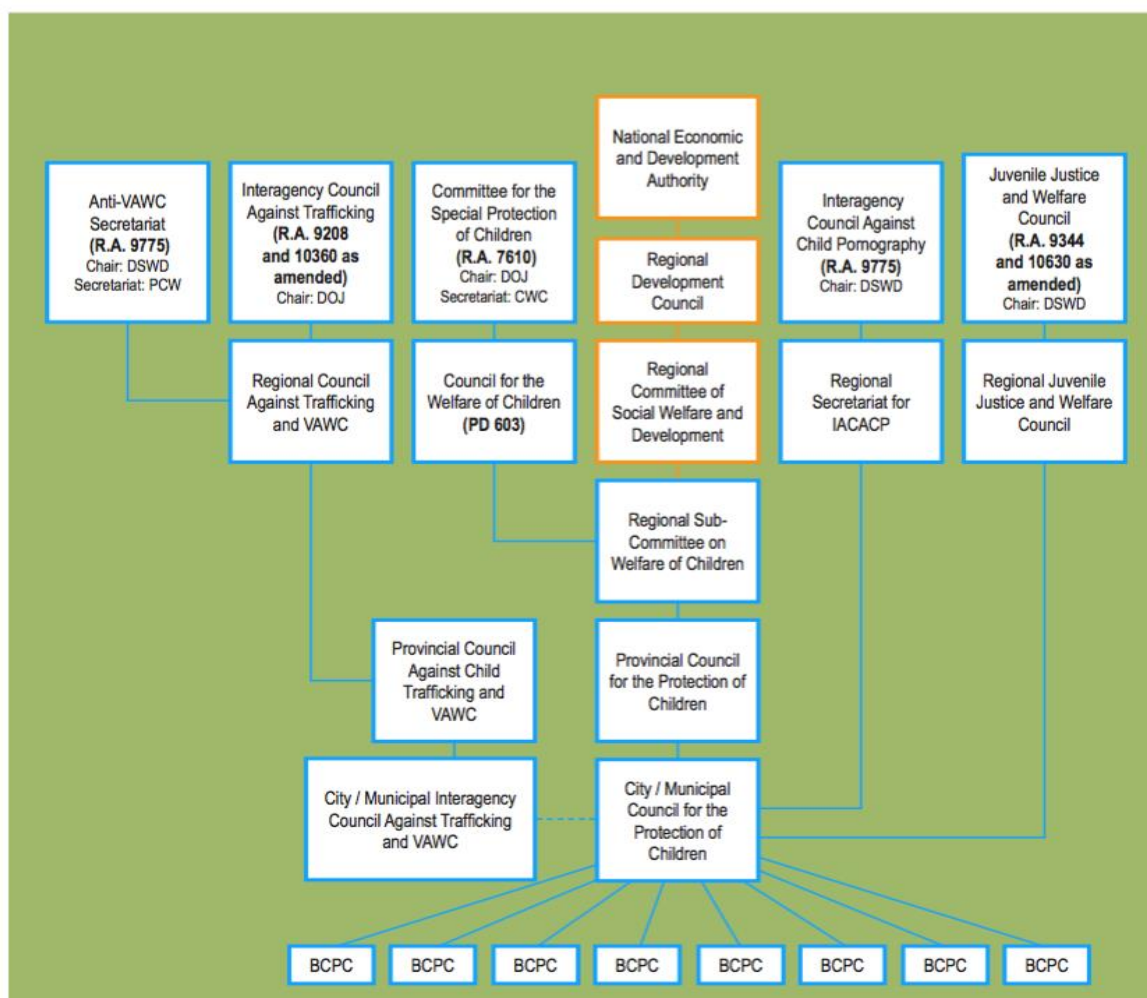
- Feudal, patriarchal colonial history;
- Discrimination (CWD, IP, Low-land, highland ethnicity);
- Corruption;
- Lack of transparency and accountability of policy makers;
- Monopoly of political and economic power;
- Pervasive culture of impunity;
- Poverty and economic disparities.

Enabling environment

In addition to the issues identified in the causality map, a number of other barriers and bottlenecks have been identified.

As can be seen from the Table below, there are a multiplicity of formal structures within the child protection system, including councils, committees and working groups, which has resulted in confusion and inefficiency and are regarded by many as excessive. It has been pointed out that despite all the different bodies involved, not one of them has been designated as the lead coordinating body for child protection with overall responsibility and oversight for implementation of the laws, strategic programming and results monitoring.¹⁶⁵¹

Table 8.11. Inter-agency bodies engaged in child protection



Source: PLCPD Policy brief: Improving National and Local Systems and Capacities Towards Better Child Protection in the Philippines

There is great reliance on the LCPCs, and particularly the Barangay LCPC, but little emphasis on the role to be played by DSWD in delivering child protection services on the ground. LGUs are in general

¹⁶⁵¹ Arce C., PLCPD Policy brief: Improving National and Local Systems and Capacities Towards Better Child Protection in the Philippines

under-resourced, which results in under-resourcing of the LCPC at municipal, city and barangay level. Although there is a 1 per cent budget allocated for programmes and services for children, this is often spent on activities other than child protection. Only those vying for the Child-Friendly Municipality/City tend to provide special funds for child protection.¹⁶⁵² Administrative bodies with low financial resources, also tend to have lower individual capacities, with lower rates of awareness of the relevant laws and lower core competencies.

The management of child abuse is seen as multi-sectoral with national and local government agencies, NGOs and FBOs, and multi-disciplinary professionals, including the police, prosecutors, judges, lawyers, social workers, doctors, psychiatrists, psychologists, barangay officials and others working together as a team to provide appropriate protection, legal and social services to a child victim of abuse, neglect and exploitation. It is up to the LGUs social worker to coordinate this multi-sectoral team. Given that there is generally only one social worker in the LGU who already has heavy statutory responsibilities, it is unlikely that he or she will have sufficient time to spend on coordination. Consideration needs to be given to changing the system to empower the social worker to call on such agencies, statutory bodies and professionals as may be required, together with a statutory duty on the agencies etc. to cooperate.

Although there are some good national and regional government policies and approaches, and the Protocol on Case Management represents good practice, implementation at local government level remains a problem.¹⁶⁵³ In practice, many LGUs do not have a local council or have a non-functioning one, and there is a similar story at grass roots level in the barangays. The organization and operation of LCPCs depends heavily on the initiative and support of local chief executives such as the mayor. Where a LCPC does not exist, and there is a lack of collaboration between the different bodies responsible for children, there is generally an absence of unified programmes of action.¹⁶⁵⁴

In some areas where a council on child protection does not exist, at barangay, municipal or city level, and there is a low level of access to local government DSWD services, community based child protection networks have been established. This is particularly the cases in areas with high Muslim populations. The networks are often led by capable individuals trusted by the community, and aim to raise the profile of child protection and develop and deliver a response to cases of abuse, exploitation and neglect of children in ways aligned with community values. Their authority is based on the reputation of the organization or individual, and not on legislation or a State mandate. There are 16 community based child protection networks operating in Mindanao, serving around 3,000 people, which incorporate Muslim traditional practices relating to children and child protection, and involve youth.¹⁶⁵⁵ While a community approach to raising awareness of child protection and addressing child protection issues as they arise can be very effective, there needs to be some form of supervision to ensure that such an approach does not operate to the disadvantage of the child who is entitled to all the protections that the law offers him or her, even if this clashes with a cultural

¹⁶⁵² Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.14. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁵³ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF, Philippines, 2016, p 56

¹⁶⁵⁴ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.14. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁵⁵ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF, Philippines, 2016p 59.

norm. Second, a community-led service is often unsustainable. Such groups are often dependent upon a strong, even charismatic individual to lead them and ensure that the service is effective. When that person can no longer lead the service, the service frequently reduces in effectiveness or withers away.

In addition to these barriers, it has been noted that the three-year local government electoral cycle causes distraction and discontinuity and impedes progress on child protection.¹⁶⁵⁶

Data availability

There is a lack of detailed official data on the number of child protection referrals made to DSWD, though limited data on the number of child protection cases handled by DSWD is available. The figures are contained in Table 8.12 below. In 2014, there were 4,873 cases reported nationally, while in 2015 the number decreased to 3,473.¹⁶⁵⁷ Reported cases in the first quarter of 2016 reached 2,147,¹⁶⁵⁸ showing a likely increase of referrals over the year. As can be seen from Table 8.12, the largest number of referrals are for neglect, followed by sexual abuse.

The low reported figures raise concerns. It is not possible to determine from the data available whether cases are not being reported, whether the level of identification of child protection cases is low or, more simply, accurate data is not being kept by LGUs. Taking into account that there are around 45 million children in the Philippines, and that multiple studies undertaken since 2000¹⁶⁵⁹ have shown that there is a high prevalence of violence and abuse of children, these figures must be taken to significantly under-represent the number of children in need of child protection services.

Table 8.12.¹⁶⁶⁰

¹⁶⁵⁶ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, UNICEF, Philippines, 2016, p 55.

¹⁶⁵⁷ According to the Policy Development and Planning Bureau of the DSWD.

¹⁶⁵⁸ "DSWD urges public to report child abuse", July 20, 2016, available at <http://www.dswd.gov.ph/dswd-urges-public-to-report-child-abuse/> last accessed on 13.07.2017.

¹⁶⁵⁹ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. p.17. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁶⁰ Table 12.6 Philippines Statistical Authority Yearbook 2016.

**NUMBER OF REPORTED CASES OF CHILD ABUSE SERVED BY THE DSWD
BY TYPE OF ABUSE AND BY SEX
2014 and 2015**

Type of Abuse	2014			2015		
	Total	Male	Female	Total	Male	Female
Total	4,873	1,689	3,184	4,373	1,391	2,982
Abandoned	812	457	355	665	338	327
Neglected	1,659	863	796	1,582	853	729
Sexually abused	1,172	5	1,167	1,147	7	1,140
Rape	662	4	658	644	6	638
Incest	451	1	450	455	0	455
Acts of Lasciviousness	59	-	59	48	1	47
Sexually exploited	180	13	167	116	6	110
Victims of pedophilia	13	8	5	5	2	3
Victims of prostitution	113	-	113	53	0	53
Victims of pornography	30	5	25	14	3	11
Victims of cyber pornography	24	-	24	44	1	43
Physically abused/ maltreated	442	209	233	306	134	172
Victims of child labor	39	14	25	35	7	28
Victims of Illegal recruitment	34	4	30	51	2	49
Victims of Child trafficking	465	92	373	418	28	390
Victims of armed conflict	6	-	6	27	10	17
Involved	1	-	1	1	0	1
Affected	5	-	5	26	10	16
Others ¹	64	32	32	26	6	20

¹ Includes emotionally abused, sexually abused, molested, exploited children and others

Source: Department of Social Welfare and Development

There is an urgent need to put in place a more sophisticated data collection system including details on the age of children, the action taken on referral, the length of time that the child was the subject of child protection proceedings, the outcome of investigation of allegations of abuse etc. action taken by DSWD and the local protection councils at local government level, services provided etc. Without such information, it will be difficult for both central and local government to plan and develop an effective and coherent child protection system.

Supply-side gaps and challenges

Service provision at the present time is limited. The DSWD has provided services in the form of crisis intervention units which provide services such as immediate rescue and protection; augmentation assistance during disasters; direct financial and material assistance and referrals for medical, legal, psychosocial, temporary shelter and other services, and some foster care and residential care. It would appear though, that these services are geographically limited and not available country-wide.¹⁶⁶¹ Services for certain groups, and particularly for street children, are very limited and often consist of rounding up such children, detaining them and eventually releasing them without addressing their needs. Government operations to rescue street children in Manila have been heavily

¹⁶⁶¹ Child Protection in the Philippines, A Situational Analysis, Save the Children, 2011, p 18.

criticised for being ineffective, indiscriminate and involuntary and becoming child protection issues in themselves.¹⁶⁶²

NGOs have made a big difference in ensuring responses and assistance are provided to children, but they too, do not offer services country-wide. They mainly operate in urban centres and do not reach many geographically isolated and disadvantaged communities.¹⁶⁶³ Further, as with community services they are frequently unsustainable: they are reliant on donor funding, which can run out, or be removed or not renewed with little notice, leaving children at risk.

The Child Protection Network Foundation raised funds to establish Women and Children Violence Prevention Units in hospitals and provided training for medical staff attached to the units and police investigating cases through the units. As of 2012, 62 units had been established in 35 provinces and 7 cities. An administrative order in March 2013 directed that the units should be established in all government hospitals.¹⁶⁶⁴

Demand-side barriers

Although only a small number of children are recorded as being referred for child protection services, the real demand must be regarded as far higher. Children in the Philippines suffer from a high rate of violence, sexual exploitation, child labour, lack of parental care, child marriage, armed conflict, displacement and natural and man-made disasters. In more developed child protection systems, child protection referrals usually involve between 2–5 per cent of the child population.¹⁶⁶⁵ Not all children who are referred will require child protection services, but most referrals will require some initial investigation. In the Philippines, with a child population of around 45 million, this would amount to around 900,000 children, if the lower figure of 2 per cent were taken: a far cry from the 4,373 children referred in 2015.

The low number of referrals undoubtedly has many causes: lack of awareness among professionals and practitioners working with children and the general public of the need to refer, when they should refer or to whom they should refer. Referrals will also be hampered by the low number of trained and employed social workers, as this inevitably leads to low rates of identification of children at risk and suffering harm.

Quality

¹⁶⁶² Child Protection in the Philippines, A Situational Analysis, Save the Children, 2011, p 19.

¹⁶⁶³ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.15. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁶⁴ Strengthening CP systems in Emergencies, Haiyan evaluation report, p 49.

¹⁶⁶⁵ See Child Maltreatment, Facts at a Glance, National Center for Injury Prevention and Disease Control, USA, 2014 available from [cdc.gov](http://www.cdc.gov); U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Child Maltreatment 2012 [online]. Washington, DC: Government Printing Office; 2012. Available from <http://www.acf.hhs.gov/sites/default/files/cb/cm2012.pdf>; Child Protection Australia, 2015-2016, Australian Institute of Health and Welfare available at aihw.gov.au. and Children in Need Census 2010 -2011, Statistics: Children in Need and Child Protection, Department for Education, 28th September 2011:

The quality of child protection services in the Philippines is unknown, and there appears to have been little research in this area. Social workers have a vast mandate, well beyond child protection, and such tasks cannot feasibly be managed within the existing limited resources and capacity,¹⁶⁶⁶ which must inevitably impact on the quality of services. The quality of alternative care services is also an unknown, as there appear to be a significant number of unaccredited children's homes.

In the PDP, the legislative agenda for 2017 to 2022 includes the Philippine Adoption Act for Abandoned and Neglected Children and for Children with Special Needs. This is intended to improve the quality of foster care for abandoned and neglected children, particularly those with special needs.¹⁶⁶⁷

If secondary and tertiary child protection services are to be delivered effectively there needs to be a well-managed and dedicated child protection service in every LGU, and a very significant expansion in the number of social workers, together with a programme of specialist training to allow for the full implementation of the Protocol on Case Management.

¹⁶⁶⁶ Strengthening Child Protection systems in the Philippines, Child Protection in Emergencies, p 54

¹⁶⁶⁷ Philippines Development Plan p 178.

8.7. Children in conflict with the law

Children in conflict with the law are defined in section 6 of the Juvenile Justice and Welfare Act 2006, as amended by Republic Act 10630 (2013) as between 15 to 18 years of age. As can be seen from the Tables below, and in line with the statistics of every other country, the majority of children in conflict with the law in the Philippines are male, and the crime most commonly committed is that of theft.¹⁶⁶⁸ Children represent a low percentage of the total population in conflict with the law, despite many press reports in the Philippines that the juvenile crime rate is increasing and that children under 15 are committing crimes under the control of crime groups. As can be seen in Table 8.13, there has been an increase in the numbers of children coming into contact with the police/criminal justice system since 2009, but this does not necessarily reflect an increase in child crime: the demographic make-up of the population is changing, and coming into contact with the police or criminal justice system does not necessarily mean that the children are charged or convicted of crimes. The figures must, therefore, be treated with some caution.

Table 8.13 Children coming into contact with the police 2002 - 2011

Year	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Child	5657	3283	2644	2471	1955	1825	2158	2735	4246	5318	5308
Adult	85776	83704	77253	76758	71226	65944	66846	502665	324083	246358	217836
% crimes committed by Children	6.2%	3.8%	3.3%	3.1%	2.7%	2.7%	3.1%	0.5%	1.3%	2.1%	2.4%

Source: UN Crime Survey

The information on the number of children coming into contact with the police or criminal justice system is provided by the PNP. These are commonly known as ‘arrest statistics’. There is no available information on how many of these cases did not proceed or were informally resolved by the parties, or the number of children who were charged or convicted of an offence. There are, however, figures for the number of children formally diverted from formal legal proceedings.

¹⁶⁶⁸ UN Crime Survey. See also Universalia: Evaluation of the Intervention and Rehabilitation Program in Residential Facilities and Diversion Programs for Children in Conflict with the Law, 2015. According to the National Baseline Survey on Violence Against Children. UNICEF, 2016, 1.2 per cent of respondents aged 13-17 arrested or charged with a crime, had their cases resolved locally at Barangay level. The most common offences reported were vagrancy and physical assault.¹⁶⁶⁸ 0.5 per cent of respondents reported having been arrested and brought to the police, all of whom were first offenders, and were mostly for physical assault. Less than 1 per cent of respondents reported being imprisoned, with the average duration of imprisonment being for 7.9 days. However, these figures do not appear in alignment with the UN Crime Survey and it is unclear why 13 and 14 year olds are included in the survey as they are under the minimum age of criminal responsibility.

Table 8.14. Gender of children in contact with the criminal justice system (UN Crime Survey)¹⁶⁶⁹

Cases	2005	2006	2007	2008	2009	2010	2011	2012	2013
Total no. of children in formal contact with the police and/ or criminal justice system ¹⁶⁷⁰	1,883	1,955	1,825	2,158	2,735	4,246	5,318	5,308	7,825
Male children in formal contact with the police and/or criminal justice system		1,899	1,787	2,146	2,720	4,228	5,295	4,581	
Rate per 100,000 male juveniles aged 17 or under		9.86	9.26	11.13	14.13	22.01	27.42	23.60	
Female children in formal contact with the police and/or criminal justice system	96	56	38	12	15	18	23	493	
Rate per 100,000 female juveniles aged 17 or under	0.52	0.30	0.21	0.07	0.08	0.10	0.13	2.71	
Total no. of juveniles convicted ¹⁶⁷¹	50	32							
Juveniles held in prisons, penal institutions or correctional institutions ¹⁶⁷²	1,803	1,232	585	381	302	412	479	424	439
Male juveniles held			553	369	286	400	463	409	412
Rate per 100,000 male juveniles aged 17 or under			2.87	1.91	1.49	2.08	2.40	2.11	2.11
Female juveniles held	92	48	32	12	16	12	16	15	25
Rate per 100,000 female juveniles aged 17 or under	0.5	0.5	0.26	0.07	0.09	0.07	0.09	0.08	0.14

Source: UN Crime Survey for the Philippines

The rate of offending by girls recorded in the statistics is very low, though this is to be expected and is replicated worldwide. There was, though, a very significant but unexplained rise in the number of girls brought into formal contact with the police/criminal justice system in 2012, the latest year for which figures are available. The rise does not seem to have been the subject of any debate and it is not known whether the rate of offending has subsisted since 2012.

¹⁶⁶⁹ All crime incidents, whether reported by the victim(s), witness(es) or third party(ies), must be recorded in the Police Blotter (the main source of crime data which shall be the basis for preparing and accomplishing the UCPER). Significant changes in crime reporting were noted with the inclusion of specific violations of special laws such as carnapping and cattle rustling; and addition of crime cleared data that enumerates the number of crime incidents filed in court; that is, crime solution rate will be quantified only if the court issued a decision. Under the current system of crime measurement and analysis, data for 2009 was set as the baseline for future research, study and comparison. Thus, crime statistics in 2009 cannot be compared with those data obtained in the previous years (2008 and earlier) since the parameters were no longer the same;

¹⁶⁷⁰ "Formal Contact" with the police and/or criminal justice system may include persons suspected, or arrested or cautioned, for a criminal offence, at the national level.

¹⁶⁷¹ "Persons Convicted" means persons found guilty by any legal body authorized to pronounce a conviction under national criminal law, whether or not the conviction was later upheld. The total number of persons convicted should also include persons convicted of serious special law offences but exclude persons convicted of minor road traffic offences, misdemeanours and other petty offences.

¹⁶⁷² "Persons Held in Prisons, Penal Institutions or Correctional Institutions" means persons held in Prisons, Penal Institutions or Correctional Institutions on a specified day and should exclude non-criminal prisoners held for administrative purposes, for example, persons held pending investigation into their immigration status or foreign citizens without a legal right to stay.

The data provided in the two Tables above is taken from the UN Crime Survey for the Philippines, with figures submitted by the Philippines Government. The figures do not match those on the number of children in conflict with the law provided by the DSWD. It was not possible to obtain any information on the discrepancy in the figures.

Table 8.15. Children in conflict with the law: DSWD

	2006	2007	2008	2009	2010	2011
UN Crime Survey	1,955	1,825	2,158	2,735	4,246	5318
DSWD	8861	2759	2362	2959	1207	2335

Data on the handling of children’s cases by the police after 2012 is not available from the Statistical Yearbook, which does not disaggregate the data on adults and children. Data is, however, available from 2012–2016 in a Situation Analysis on the Juvenile Justice System, based on a comprehensive desk review initiated by the National Secretariat of the Juvenile Justice and Welfare Committee in 2016.¹⁶⁷³

Table 8.16. Number of children handled or served the Philippine National Police Force 2012–2016

Year	Number of CICL Handled/Served by PNP by Year
2012	4,095
2013	5,937
2014	9,844
2015	7,947
2016	9,655

Philippine National Police, 2012 to 2016

The number of children in conflict with the law handled or served by the police as listed in Table 8.16 shows a significant increase from 2013. An explanation given for the increase was the improved data collection through the Crime Information, Reporting and Analysis System.¹⁶⁷⁴ However, it is difficult to attach much weight to these figures, as it is unclear whether the figures include children who were below the minimum age of criminal responsibility and thus not capable in law of committing a crime. This concern arises as in Table 8.17 which covers the period January to June 2017, children under the age of criminal responsibility are included in the figures. In addition, it is unclear whether children who aged 12–15 were handled by the police for a serious crime which imposed criminal liability or

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¹⁶⁷⁴ The Juvenile Justice and Welfare Act 2006 as amended by R.A. 10630 in 2013, provides for the establishment of a centralized information management system.

whether they were alleged to have committed a minor offence, which would leave them below the minimum age of criminal responsibility.

Table 8.17. Age of children handled or served by the Philippines Police Force, January- June 2017

Age Group	Number of Children Served by PNP	Percentage
5 years old and below	11	0.18%
6-8 years old	65	1.08%
9 - 11 years old	360	5.96%
12-15 years old	2,290	37.89%
Above 15 but below 18 years old	3,318	54.90%
Total	6,044	-

Source: Philippine National Police, January to June, 2017,

When further inquiry was made in relation to the inclusion of those under the minimum age of criminal responsibility in the statistical data, it was explained that these children had still committed an offence, but could not be charged in a criminal court. This appears to be a misunderstanding of the concept of the minimum age of criminal responsibility.

Between 2012 and 2015 the top five reported offences by children according to the Philippines National Police were theft (49 per cent), physical injuries (22 per cent), robbery (9 per cent) rape (7 per cent) and violation of RA 9165 (the law prohibiting use by minors of volatile substances to induce intoxication or alter auditory, visual or mental processes) (3 per cent).¹⁶⁷⁵

Table 8.18. Offences reported to the Philippines National Police (children)

	2005	2006	2007	2008	2009	2010	2011	2012	2013
Total no. of children brought into formal contact with the police and/or criminal justice system¹⁶⁷⁶	1,883	1,955	1,825	2,158	2,735	4,246	5,318	5,308	7,825
Theft		846	941	1079	1085	1631	2366	1,972	
Physical Injuries		122	106	124	279	612	726	796	
PD 1619		216	67	76	90	31	106	58	

¹⁶⁷⁵ UNICEF Philippines Fact sheet on Children in Conflict with the Law, 2017

¹⁶⁷⁶ "Formal Contact" with the police and/or criminal justice system may include persons suspected, or arrested or cautioned, for a criminal offence, at the national level.

Robbery		136	96	141	193	380	315	366	
Rape		194	201	208	238	312	323	309	

Source: UNICEF Philippines Fact sheet on Children in Conflict with the Law, 2017

As of 31 May 2017, the statistics available indicate that 39 children (38 boys and one girl) under the age of 18 were in detention, making up 0.09 per cent of the prison population.¹⁶⁷⁷ This is likely to be a very significant underestimate of the number of children deprived of their liberty, particularly given that detention of children pending trial is still the intervention of choice by actors in the juvenile justice system.¹⁶⁷⁸

It can be concluded that the available data on juvenile offending is not of sufficient quality and not sufficiently accurate to permit a true and accurate picture of juvenile crime in the Philippines to be built up. The number of children detained by the police appears unrealistically low as does the overall number of children in contact with the criminal justice system. It was not possible to obtain conviction figures for children other than for the years 2004 and 2005 where, once again, the figures are so low that they cannot be regarded as credible. An additional unknown (except for the first six months of 2017) is how many of the children who came into contact with the criminal justice system were under the minimum age of criminal responsibility and consequently exited the criminal justice system.

There is little information on the background or geographical location of children who come into contact with the law, but ‘abandonment, neglect and non-satisfaction of needs’ appear to be the dominant reasons.¹⁶⁷⁹

8.7.1. Legal and policy framework: children in conflict with the law

The Juvenile Justice and Welfare Act 2006 (RA 9344) (as amended by RA 10630) established a comprehensive restorative juvenile justice and welfare system in the Philippines. It provides for the protection of the rights of children in conflict with the law, has rehabilitation and reintegration of children as its underlying philosophy and makes detention of a child in conflict with the law a matter of last resort. Its provisions are consistent with international standards.

The Act creates a Juvenile Justice and Welfare Council, headed by the Department of Social Welfare and Development, as an inter-agency body, responsible for coordinating the implementation of the new juvenile justice system as set out in the Juvenile Justice and Welfare Act. The mission of the Council is to institutionalise the restorative justice and welfare system for children at risk and children in conflict with the law through effective implementation of the law and the coordination of stakeholders.¹⁶⁸⁰ The membership of the Council is set out in RA 10630 (amending the Juvenile Justice and Welfare Act) and includes the various departments and agencies of government as well as NGOs

¹⁶⁷⁷ National Bureau of Corrections, <http://www.bucor.gov.ph/Inmate%20Profile%20In-Confinement.html>

¹⁶⁷⁸ See Children in Conflict with the Law, Fact Sheet, UNICEF 2017. The Chair of the Juvenile Justice and Welfare Council has stated that there were 52,000 children in custody prior to the Juvenile Justice and Welfare Act 2006.

¹⁶⁷⁹ Delos Santos, M., Padawil A. K., Venda C. B., Juvenile Justice and Welfare Law Implementation@ The Philippine Urban Poor City Case, International Journal of Humanities and Management Science (IJHMS) Volume 4, Issue 1 (2016) 69-75.

¹⁶⁸⁰ The various tasks allocated to the Juvenile Justice and Welfare Council are set out in section 9 of the Act.

who play a part in juvenile justice. Many of the stakeholders are the same as those who sit on the Council for the Welfare of Children and the National Task Force on Children in need of Special Protection, and it is likely that there is considerable overlap of tasks.

The Juvenile Justice and Welfare Council has been active. It has issued Rules and Regulations implementing the Juvenile Justice and Welfare Act;¹⁶⁸¹ Guidelines and Procedures on the Management of Children at Risk and Children in Conflict with the Law; the PNP National Police Manual on Handling and Treatment of Children at Risk and Children in Conflict with the Law; and the Department of the Interior and Local Government Guidelines for the LGUs on the development of Comprehensive Local Juvenile Intervention programs.

The Juvenile Justice and Welfare Act 2006, raised the minimum age of criminal responsibility from 9 to 15. This was amended by Republic Act 10630. Although the age of criminal responsibility remains 15, a child who is aged 12–15 and who commits a serious offence, including homicide, rape or robbery, or any other offence punishable by more than 12 years' imprisonment, will be deemed to be a neglected child and must be placed in a *Bahay Pag-asa*, or an Intensive Juvenile Intervention and Support Centre. Placement must not be for less than a year after which the Intensive Juvenile Intervention and Support Centre has to submit a psychiatric report to the Court recommending either reintegration or extension of the placement. Similar provisions apply to children aged 12–15 who are repeat offenders. In effect, this reduces the minimum age of criminal responsibility to 12, the lowest acceptable minimum age of criminal responsibility according to the UN Committee on the Rights of the Child.¹⁶⁸²

The increase in the age of minimum criminal responsibility contained in the Juvenile Justice and Welfare Act has met with considerable resistance. There was a failed attempt to pass an amendment to the Act to reduce the minimum age of criminal responsibility to 9 years of age in 2013, which was repeated once more in House Bill 002, introduced in 2016. At the time of writing of this analysis, the minimum age of criminal responsibility remains at 15. The UN Committee on the Rights of the Child has raised concerns about recent initiatives to lower the minimum age,¹⁶⁸³ as have other actors, including the Child Protection Network in the Philippines and the Juvenile Justice and Welfare Council.

Under the Juvenile Justice and Welfare Act it is possible, where a child admits an offence for which the penalty is not more than six years imprisonment, for that child to be diverted pre-trial, thus avoiding formal judicial proceedings. The decision to divert a child may be made at the police investigation stage or the inquest or preliminary investigation stage and at all times up to the end of the trial. Where the possible penalty is over 6 years, only the court can order that the child be diverted.

Diversion can take a number of forms, and can include family group conferencing, mediation or conciliation at which a diversion contract can be agreed. The possible forms of diversion programmes are set out in section 31 of the Juvenile Justice and Welfare Act and must include adequate socio-cultural and psychological responses and services for the child. The programme may include restitution, reparation, an apology, care, guidance or supervision orders, counselling for the child and family, attendance at various programmes, training and seminars and participation in education, vocation and life-skills programmes.

¹⁶⁸¹ Resolution No 4 of the Juvenile Justice and Welfare Council.

¹⁶⁸² UN Committee on the Rights of the Child, General Comment 10, CRC/C/GC/10.

¹⁶⁸³ CRC/C/PHL/CO/3-4, 2 October 2009, Philippines, para 80.

According to data for 2013, 134 children in conflict with the law were released on recognizance, 433 were sent to Community-Based Custody/Supervision, 119 were sent to mediation or diversion and 1,365 were diverted to community-based programmes.¹⁶⁸⁴ It is not possible to ascertain what proportion of children were diverted as compared to subject to legal proceedings, as the accessible data does permit such distinctions to be made.

The Family Court

Republic Act 8369, The Family Courts Act 2007, brought all family-related cases, including criminal charges against children into one Court. The Act requires a Family Court to be established in each province and city of the country. – the Family Court. The Family Court has exclusive jurisdiction over criminal cases involved children, including:

- (a) Where one or more of the accused is below 18 years of age but not less than 9 years of age, or where one or more of the victims is a minor at the time when the offense was committed;
- (b) Cases against minors cognizable under the Dangerous Drugs Act;
- (c) Violations of RA 7610 or the Special Protection of Children Against Child Abuse, Exploitation and Discrimination Act, as amended by RA 7658; and
- (d) Cases of domestic violence against children including all forms of abuse, cruelty, exploitation, violence, and discrimination and all other conditions prejudicial to their development.¹⁶⁸⁵

There are over 114 designated family courts in the various judicial regions of which about 105 are operational with judges.

8.7.2. Barriers and bottlenecks in the child justice system

Enabling environment and resources

It has been suggested that the implementation of the Juvenile Justice and Welfare Act has got off to a relatively slow start as acceptance of the change in approach to juvenile justice from one of punishment to one of rehabilitation and reintegration has taken time. There have been some additional issues, which has impacted on implementation of the Act, such as lack of diversion programmes, funding, staffing and the provision of training.¹⁶⁸⁶ UNICEF has noted that LGUs require considerable support and mentoring to establish the required facilities and programmes.¹⁶⁸⁷

Research in June 2014 in Batangas City explored the main obstacles to implementation of the Act with the police, family court judges and social workers.¹⁶⁸⁸ Answers and views varied between the different groups.

¹⁶⁸⁴ UNICEF Philippines Fact sheet on Children in Conflict with the Law, 2017

¹⁶⁸⁵ Republic Act No 8369, The Family Courts Act 1997, section 5.

¹⁶⁸⁶ Council for the Welfare of Children, UNICEF. National Baseline Study on Violence against Children: Philippines, Executive Summary. 2016. P.22. Available at: https://www.unicef.org/philippines/PHL_NBSVAC_Results_ES.pdf [13.07.17].

¹⁶⁸⁷ UNICEF, Fact Sheet on Children in Conflict with the Law, 2017.

¹⁶⁸⁸ Bilog F. E., Implementation of the Juvenile Justice and Welfare Act of 2006 (RA 9344): Inputs to Policy Amendments, Asia Pacific Journal of Multi-Disciplinary Research, Vol.2 No.3 June 2014.

Table 8.19.

Reason (by importance)	Police	Family Court	City Social Welfare Dept
1	Child's lack of interest / understanding of his/her constitutional rights	Absence of separate justice system for juveniles	Lack of interest and sense of responsibility of the parents of the child regarding the consequences of the child's act
2	Fear of the child in conflict with the law to the law enforcer or agent of person in authority (<i>ie fear of admitting guilt</i>)	Child's lack of interest / understanding of his/her constitutional rights	Child's lack of interest / understanding of his/her constitutional rights
3	Resistance of the child to the use of handcuffs or other instruments when necessary.	Lack of authentic birth certificate/records to determine the age of the child.	Lack of coordination between and among those implementing the juvenile justice system
4	Lack of authentic birth certificate/records to determine the age of the child.	Budget deficit for proper implementation	Lack of authentic birth certificate/records to determine the age of the child.
5	Lack of separate detention cell for men and women.	Lack of proper facilities, equipment and financial resources	Lack of formal and intensive training of personnel
6	Lack of separate detention cell for children in conflict with the law from adult offenders.	Inadequate programmes for the rehabilitation of minors	Lack of cooperation from child in conflict with the law
7	Short period during turn- over of custody of the child to the SWD officer or other accredited NGOs, after child apprehension	Lack of supporting documents / evidence to determine the culpability of the child	Lack of constant monitoring of a child in conflict with the law
8	Inability of child's parents or guardian, social worker, or legal counsel during custodial investigation.	Difficulty in deciding the case within 24 hours from receipt of the appropriate pleading of all interested parties	Lack of budget
9	Powerful political influence/intervention	Backlog of cases	Lack of support from the LGU
10.	Lack of cooperation by the parents	Security and assuring the presence of the child at the trial	Lack of a youth detention home

11.	Inability of licensed social worker to assist a child in conflict with the law.	Delay of the court order in relation to detention of child in jail pending trial	Lack of information for the preliminary background investigation of a child in conflict with the law
12.	Unreadiness for the implementation of the Law.	Lack of assured confidentiality of records and proceedings	Inability of licensed social worker to assist a child in conflict with the law
13.	Lack of coordination between and among implementers of the juvenile justice system	Powerful political influence/intervention	Unreadiness for the implementation of the Law.
14.	Lack of formal and intensive training of PNP personnel.	Non-use of records in other proceedings, except when beneficial to offender and with his written consent	Powerful political influence/intervention
15.	Ineffective intervention / rehabilitation programs.	Ordering transfer of youth to detention home	Ineffective intervention/ rehabilitation programmes.

An evaluation of intervention and diversion programs for children in conflict with the law¹⁶⁸⁹ in 2015, found that there were a number of obstacles to ensuring that children had access to interventions and diversion programmes in the manner intended by the Act. These included delay in bring children to trial, which resulted in children staying for long periods of time in pre-trial detention institutions or other facilities before being officially admitted into the rehabilitation, intervention, or diversion programs; a lack of developed and available intervention programmes for children in conflict with the law; a lack of capacity on the part of juvenile justice actors and the weak commitment of the LGUs on whom the responsibility (and cost) of providing intervention and diversion programmes lies. It has also been found, in an audit of Family Court cases, that diversion has not been utilised as an effective mechanism for the child’s rehabilitation and integration in society, as indicated by the low number of cases where diversion was implemented and in the even lower success rate of diversion programmes.¹⁶⁹⁰

Section 49 of Republic Act 10630 requires that each province and highly-urbanized city is made responsible for building, funding and operating a *Bahay Pag-Asa* (a 24-hour pre-trial ‘child-care’ institution) in their area and each of these must contain an intensive juvenile intervention and support centre. Regional Juvenile Justice and Welfare Committees were established in 2015 to assist with this process. To ensure that there is sufficient funding, expected expenditures on the local juvenile intervention programme for children at risk and children in conflict with the law must be included in the LGUs annual budget. Highly-urbanized cities and provincial governments are required to include a separate budget for the construction and maintenance of the Home including the operation of the intensive Juvenile Intervention and Support Centre within the Home. It has been noted that in 2015, only a handful of LGUs had complied with section 49.

¹⁶⁸⁹ Yang: S. X., Evaluation of the Intervention and Rehabilitation Program in Residential Facilities and Diversion Programs for Children in Conflict with the Law, Universalis 2015.

¹⁶⁹⁰ UNICEF Situational Analysis of the Family Courts, unpublished, forthcoming 2018.

The Act also mandated the Juvenile Justice Welfare Council to develop a three- to five-year Comprehensive Local Juvenile Intervention Program (CLJIP) using the National Comprehensive Juvenile Intervention Programme as a guide. It is up to the DILG to monitor the compliance of the LGU and to issue the necessary guidelines for the development, budget allocation, implementation, monitoring and evaluation of their CLJIP.¹⁶⁹¹

DILG issued guidance in 2015, setting out the steps that need to be taken to develop and establish a CLJIP, including requirements on data gathering and establishing baseline data using standard data gathering tools.¹⁶⁹² The guidance also provides step by step guidance on the procedures to be followed and ways of working with children and families.

The budget allocation for the CLJIP is to be sourced from the 1 per cent Internal Revenue Allotment allocated for the strengthening and implementation of the programmes of the local child protection councils for children at risk and children in conflict with the law.¹⁶⁹³ Each LGU should have a three-year investment plan and an annual investment plan to ensure the sustainability of the programs. In May 2016 there were 34 *Bahay Pag-Asa* across the country.

Despite the fact that the Juvenile Justice and Welfare Act provides that the child has a right to have restrictions on his or her personal liberty kept to a minimum, detention of children, including children under the minimum age of criminal responsibility and administrative detention of children (i.e. without a court order) remains an issue. In January 2016 spot inspections at four detention centres in Manila were carried out.¹⁶⁹⁴ Numerous children were found to have been detained, some of them for up to 21 months, in overcrowded cells and in squalid conditions. No education or activity was offered, other than cleaning and food preparation and some children were kept in their cells 24 hours of the day with limited daylight. Older children were mixed with younger children, some below the age of criminal responsibility. Many children had no form of identification and no papers concerning their detention. The UN Committee on the Rights of the Child expressed concern about the number of detained children in their Concluding Observations in 2009 and the children's lack of access to medical care and legal safeguards.¹⁶⁹⁵

The UN Committee on the Rights of the Child welcomed the prohibition of torture and other cruel, inhuman or degrading treatment or punishment in the administration of juvenile justice contained in the Juvenile Justice and Welfare Act 2006. However, in their Concluding Observations in 2009, the Committee raised concerns about the high number of reported cases of torture, inhuman and degrading treatment of children in detention. The Committee against Torture has also expressed concern that children are arrested without warrant and the excessive length of pre-trial detention in

¹⁶⁹¹ Rule 24.e of the Revised IRR of 9344 as amended by RA 10630

¹⁶⁹² Section 12 of the Juvenile Justice and Welfare Act requires that a register of all children in conflict with the law be established.

¹⁶⁹³ It is likely that this comes out of the 1 per cent allocated for child protection as a whole.

¹⁶⁹⁴ These were carried out at the request of the Social Welfare Secretary following reports in the foreign media. The inspection team included senior representatives of the DSWD-Standards Bureau, DSWD – Protective Services Bureau, the Juvenile Justice and Welfare Council National Secretariat and the Regional Juvenile Justice Council and the Representative of the Commission on Human Rights. See Preda Foundation, 'What Philippine Officials Found in Child Detention Centers'. January 15, 2016.

¹⁶⁹⁵ CRC/C/PHL/CO/3-4 2 October 2009 , para 80

the recent UPR of the Philippines in 2017.¹⁶⁹⁶ It would appear from the data that a very low number of these cases results in the prosecution and conviction of the child, which raises the issue of why the children were detained in the first place and whether deprivation of liberty was a matter of last resort.¹⁶⁹⁷

Data

Crime statistics for Philippines nationally are compiled by the Philippines National Police. Statistics on legal assistance provided by the government (i.e. legal aid) are compiled by the Public Attorney's Office. The Supreme Court is responsible for court data, while data on prisoners is collected by the Bureau of Corrections and the Bureau of Jail Management and Penology. It is not easy to access data, and not all of the data provided to the UN Crime Survey by the government is available on government sites.

Data on children in the justice system, whether as offenders, victims or witnesses is, at present, incomplete and differs according to the body providing the data. The data is also unhelpful as it is not 'unpacked'. Comprehensive data needs to include how many children are alleged to have committed crimes; how many are apprehended for a crime; how many are diverted without charge or subject to other community based programmes; how many are charged; how many proceed to trial; how many are convicted and the sentence handed down. Data also needs to be collected on children deprived of liberty; whether administrative or judicial; where the child is detained, length of detention and measures for release. All such data needs to be disaggregated by gender, age, geographical location, ethnicity and on other grounds required by the UN Committee on the Rights of the Child in their treaty- specific guidelines on the form and content of periodic reports.¹⁶⁹⁸

The lack of accurate, harmonised data about children in conflict with the law, and especially in relation to charges, convictions and disposals is a challenge that has been taken on board by the National Juvenile Justice Welfare Committee, which is in the process of developing a centralised information system.

Supply-side gaps and challenges

There are an insufficient number of intervention and diversion programmes across the country and funding new intervention and diversion programmes is a major issue. While the LGUs are required to provide a *Bahay Pag-asa* with an intensive juvenile intervention and support centre, they are not under the same level of statutory obligation to develop diversion programmes. Not all LGUs have provided for the development of such services in their budget. While NGOs are able to provide some of the services, this is unlikely to be sustainable in the long term. Although money is allocated to the LCPC, there are many demands to be met, and it is not clear that there is sufficient funding to develop the level of services required.

It needs to be recognized that working with children to address their offending behaviour and, often, family dysfunction, requires staff who are trained to work with children and families. The Universal

¹⁶⁹⁶ A/HRC/WG.6/27/PHL. The comments with respect to pre-trial detention are not exclusively relevant to children and there is no available data on the length of time that children are held in pre-trial detention.

¹⁶⁹⁷ CRC/C/PHL/CO/3-4 2 October 2009, Philippines, para 40.

¹⁶⁹⁸ CRC/C/58/Rev.3 3 March 2015.

Evaluation of intervention and diversion programs notes that technical assistance provided by UNICEF in the form of training for diversion was valued. As new programmes are established, it would be helpful if further training could be offered, perhaps through the Regional Juvenile Justice and Welfare Committees, either directly to staff, or to a cohort of trainers. Existing programmes are also likely to benefit from further training, perhaps in the form of coaching and feedback.

There is some information on the efficacy of intervention and diversion programmes. Research in Northern Mindanao has shown that the numbers of children in conflict with the law have decreased due to community based programmes.¹⁶⁹⁹ However, it is not clear how rigorous the research was, nor was there any evidence as to the views of children and parents on the programmes. Such information, and long-term follow up of recidivism is essential to enable effective programmes to be developed and offered. Other research indicates that there has been a far lower success rate of diversion programmes.¹⁷⁰⁰

Demand-side barriers

It is difficult to determine the level of demand for intervention and diversion services without data indicating the true offending rate; details about the numbers of children at risk of offending; the areas where these children live and where programmes and resources should be targeted. Clearly, there is a demand for such services, particularly where such services work closely with DSWD, the LCPCs and the DepEd.

Quality

Standards relating to the operation of the various services are to be set by the Juvenile Justice and Welfare Council, who set guidelines in May 2015 on how to develop a CLJIP. In addition, a Barangay Protocol in Managing Cases of Children at Risk and Children in Conflict with the Law was issued in March 2017 providing information on how to handle child-related cases, including diversion proceedings and prevention. It is also intended to act as a practical guide to barangay officials and other duty bearers in assisting and managing children at risk and children in conflict with the law effectively. The Guide is comprehensive and is an attractively presented document, but the length of the Guide (100 pages), and the breadth of the subject matter covered in the guide, as well as the complexity of the contents may be off-putting to barangay level officials and potentially beyond their capacity to absorb and implement. A short 'how to' guide for diversion and interventions might be more appropriate, leaving other issues relating to children for another document.

Clearly, there is a need to address the conditions and quality of services provided to children who are deprived of their liberty. As so little information is available about implementation of services and programming in relation to child protection, it is not possible to provide an assessment or analysis about the quality of services available. However, the enabling environment and supply-related barriers suggest that services that do exist are likely to be underfunded and under-supported, which is likely to lead to limitations on quality.

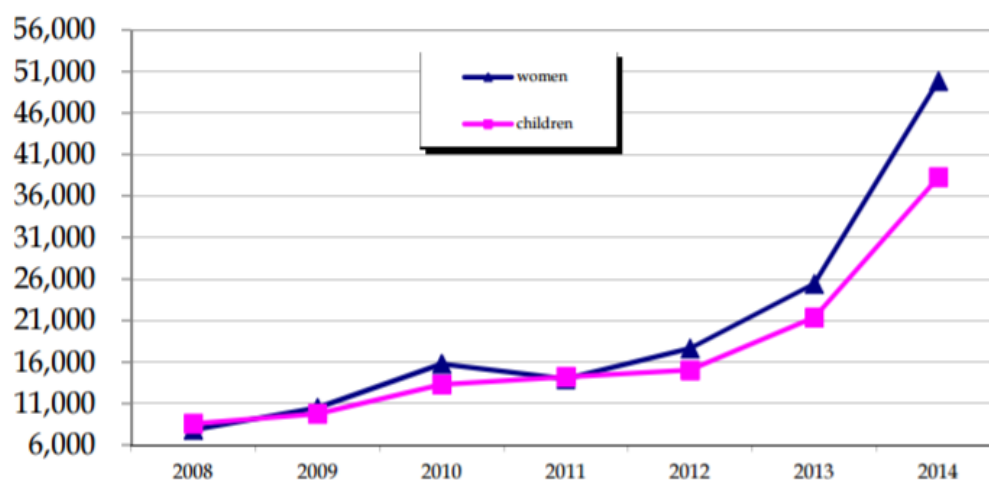
¹⁶⁹⁹ Fabre R.P et al: Intervention Programs for Children in Conflict with the Law (CICL): Gearing towards Sustainable Development, American Journal of Social Sciences, Arts and Literature Vol.3 Mp.3 2016, PP1-6

¹⁷⁰⁰ UNICEF Situational Analysis of the Family Courts, unpublished, forthcoming 2018.

8.8. Access to child-friendly justice for child victims and witnesses

Children are far more likely to be the victims of crime than they are to be the perpetrators of crime. The figures in Table show a big increase in the number of reported cases of violence against children since 2012.¹⁷⁰¹ It is unclear whether this is due to more violence being committed against children, or a raised awareness and increased reporting of violence or a different mode of recording of incidents of violence by the police.

Table 8.20. Reported cases of violence against women and children 2008-2014



Source: Philippines Statistics Authority

The following Table indicates the nature of reported crimes against children over the years 2008–2014. Sexual offences and physical violence and other forms of maltreatment are the most common offences committed against children according to the statistics. Again, there has been a very significant rise in the number of offences against children: reported crimes rose more than fourfold between 2008 and 2014. It has not been possible to find an explanation for the rise. The figures may reflect a greater level of violence against children, but they may also represent an increasing refusal to grant impunity to those who use violence against children, or implementation of the Protocol for Case Management of Child Victims of Abuse, Neglect and Exploitation issued by the National Task Force for Children in Need of Special Protection. However, it may also reflect a change in the way that the police record crime. There is no information in the crime statistics on the perpetrators of offences against children, and in particular, there is no information on how much child-on-child offending is contained within these statistics.

Table 8.21. Reported crimes committed against children by classification of offence, 2008-2014

¹⁷⁰¹ Meeting SDG 16.3.

Classification of Offense	2008	2009	2010	2011	2012	2013	2014
Total	8,588	9,787	13,313	14,221	15,028	21,361	38,269
Rape	2,981	3,040	3,356	3,623	3,355	4,234	6,283
Incestuous rape	229	211	144	183	253	262	399
Attempted rape	221	251	288	257	253	334	512
Acts of lasciviousness	876	918	1,111	1,194	1,227	1,748	2,775
Physical injuries/maltreatment	1,450	2,368	3,628	3,204	3,566	5,952	10,088
Kidnapping	17	37	34	31	56	56	112
RA 9208 (Child Trafficking)	70	-	124	88	103	125	147
Others	35	90	56	173	795	1,640	4,425
Violation of RA 7610 (Child Abuse)							
Child labor	1	6	3	3	4	5	12
Child prostitution/pornography	13	12	7	7	7	3	10
R.A. 9262	52	60	87	88	84	268	420
Other forms of child abuse	2,048	2,040	3,592	4,463	3,930	5,586	10,988
Other related crimes							
Parricide/attempt/frust	6	24	15	21	13	18	37
Neglect/ Abandonment	7	5	23	16	13	16	91
Sexual harrassment/assault	31	42	27	24	17	21	51
Inducing a minor to abandon home	2	3	3	-	6	6	9
Seduction	72	67	77	72	85	150	254
Murder	61	47	68	75	62	62	99
Double murder			2	1	4	1	2
Attempted/Frust murder	39	81	87	97	105	94	85
Abduction	96	108	99	153	112	154	329
Homicide/ attempt/frust	80	119	132	137	149	156	207
Abortion	1	3	1	2	1	3	7
Simple seduction	6	33	43	29	30	5	16
Unjust vexation	65	81	105	105	148	194	338
Theft/robbery/hold-up/snatching	112	115	155	133	157	202	533
Others (RIR to Hom)	17	26	46	42	493	66	40

Source: Philippine National Police.

Although it is extremely helpful to have information on reported crime, it was not possible to find information on how many arrests were made in relation to crimes with child victims, the number of prosecutions by offence or convictions. Further, there does not appear to be any data on how many child victims and witnesses participate in trials.

8.8.1. Legal and policy framework

There are two practice documents which address the treatment of child victims and witnesses. The first, is the Protocol for Case Management of Child Victims of Abuse, Neglect and Exploitation. This sets out the process to be followed by those responsible for the criminal justice process from the time that a complaint is made involving a child victim or witness. The Protocol is detailed, progressive and reflects current understanding of good practice in dealing with child victims. In particular, it minimises the extent to which the child has to take part in legal processes. It requires those involved in the criminal justice process to ensure that a face to face confrontation between the child and the alleged perpetrator is to be avoided through various means, including the use of screens, one way mirrors and other devices to shield the child. More importantly, at the preliminary investigation stage, if the parties are represented by counsels, counsels must submit their questions 3 working days before the preliminary investigation takes place. Only the investigating prosecutor is permitted to question the child and must use simple, developmentally appropriate and non-threatening words.¹⁷⁰² This is all consistent with current understandings of good practice.

¹⁷⁰² Protocol for Case Management of Child Victims of Abuse, Neglect and Exploitation, Para. 8 page 28.

It is unclear to what extent local police stations are equipped with a child-friendly room for interviewing children, or the extent to which special police officers, who have received training in interviewing child victims are available in police stations. It is also not known to what extent the Protocol relating to questioning of child victims and witnesses, the use of recording equipment and other measures to shield the child are implemented nationally. The Protocol sets a high standard and requires a great deal of administrative organization and training. While the introduction of a good practice document is welcome, it would be helpful to map the level of implementation and use of the Protocol and any administrative or training gaps.

Where a trial of a perpetrator is to take place, the social worker assigned to the child should enrol the child victim or witness in a 'Kids Court Programme' if there is one in the area to familiarise the child with the court process. The prosecutor also plays a role, and should prepare the child before their evidence is given in court. It has not been possible to determine the extent to which such programmes exist.

The Rules on Examination of a Child Witness were promulgated by the Philippines Supreme Court in 2000. As with the Protocol, the Rules reflect current understanding of good practice for child witnesses. Under the Rules, every child is presumed qualified as a witness and it is up to the opposing party to prove that they are not. Age in and of itself is not enough to challenge competency.¹⁷⁰³ The Rules also permit the court to appoint a guardian ad litem for a child who is a victim or a witness to a crime in order to promote the best interests of the child. The responsibilities of the guardian ad litem include, but are not limited to: attending all interviews, depositions, hearing and trial proceedings in which a child participates, making recommendations to the court concerning the welfare of the child; explaining, in language understandable to the child, attending all legal proceedings including police investigations; and assisting the child and his/her family in coping with the emotional effects of crime and subsequent criminal or non-criminal proceedings.¹⁷⁰⁴ In addition to the guardian ad litem, a child has the right to be accompanied by one or two support persons of his or her own choosing to provide emotional support during the trial process. The support person can hold the child's hand while he or she gives evidence but must not answer on behalf of the child.

A facilitator may also be appointed by the Court if the child is unable to understand or respond to the questions asked. This person is permitted to rephrase questions from counsel in language that the child can understand.

For child witnesses, the rules create a comfortable courtroom environment, provision of interpretation assistance, the giving of testimony at appropriate hours ensuring the child is well rested, using toys or other items to assist the testimony process etc.¹⁷⁰⁵ The Rules also permit the use of live-link evidence from the child (i.e. giving evidence outside the court-room) and the use of video recorded rather than live evidence.

It is not known to what extent the courts have been able to implement the Rules on the giving of evidence by children. The Rules are demanding and require considerable expenditure and administrative organization. As with the Protocol, it would be helpful to know how many courts nationally have the facilities to implement the Rules, and have trained judges, prosecutors and counsel to enable these progressive Rules to be implemented fully. It is likely that full implementation will pose a very real challenge, especially in more rural areas where there are fewer cases involving child victims, without a specific budget allocation.

¹⁷⁰³ Rules on Examination of Child Witnesses, para 6.

¹⁷⁰⁴ Rules on Examination of Child Witnesses, para 5.

¹⁷⁰⁵ Rules on Examination of Child Witnesses Para 10-16.

8.8.2. Barriers and bottlenecks: access to child-friendly justice for child victims and witnesses

Data availability

There is limited data on children who are victims and witnesses to crime. Apart from improving data collection in relation to those cases that are reported to the police, it has been recommended that a crime victimisation survey should be carried out at regular intervals.¹⁷⁰⁶

Without sufficient data in relation to cases involving children in contact with the law, it is extremely difficult to determine the level of implementation of child-friendly justice and children's access to it.

Supply-side constraints

The Philippines Judicial Academy in collaboration with the Child Protection Network has developed a competency enhancement training programme (CET) covering the provisions in Republic Act 7610, Republic Act 9344 and the child-oriented Rules of Court. The purpose of the training is to sensitise court personnel to the needs of child victims and witnesses, to assist them in dealing with child victims and witnesses in the court setting and on how to manage the court room when there are child victims and witnesses. The training was inter-disciplinary and included judges, clerks of the court, prosecutors, social workers, interpreters and lawyers representing the children. Research on the impact of the training programme indicated that it had succeeded in its aim of sensitising judges and court personnel and had changed the way that they dealt with child victims and witnesses in line with good practice. Initially delivered to 52 staff, this programme continues to be offered by the Judicial Academy to all family judges. Interestingly, this training programme did not appear to include police who are the first point of contact that the child victim or witness has with the criminal justice system. At present, there are an insufficient number of specialised police officers to handle child victims, especially those who have been subject to child abuse.

A further CET on online sexual exploitation and abuse against children has also been developed.

There is little information to be found on supply of services for child victims and witnesses, especially in relation to witness preparation, witness support or counselling. In order to understand the situation for children in contact with the law fully, it would be essential to gain a broader insight into supply-side barriers, including the availability of services and programming and of specially trained staff.

The Protocol for Case Management of Child Victims of Abuse, Neglect and Exploitation and the Rules on Examination of Child Witnesses is a good practice instrument, but little is known about the level of implementation nationally, or the training that is provided on the instrument.

Demand-side barriers

A common concern in relation to administration of child-friendly justice for child victims and witnesses is, for example, the willingness of the child or the child's family to pursue or withdraw a case. As noted by the UNSG in relation to children who are victims of grave violations, stigmatisation and fear of reprisal can lead to a child settling even serious cases through informal measures or outside of formal procedures, in order to have the matter settled, and to ensure that community harmony is preserved. This is a particular risk in relation to traditional forms of justice, but can, and does, also occur within the formal justice system. The greatest barrier to reporting and to accessing

¹⁷⁰⁶ Astrologo C.J. (Philippines Statistics Authority) and Garcia J.H.M. (Department of Justice) 2016.

justice is social-cultural beliefs and norms stigmatising abuse and preventing reporting and access to justice system for child victims.

Other demand-side barriers in relation to accessing justice, include barriers such as remoteness of police stations and court buildings, the difficulty faced by children or parents in accessing them, and the inability of victims or witnesses to afford transport or time off work. Delay in processing cases and repeated adjournments also leads to many child victims and their families deciding they no longer wish to continue to participate in criminal proceedings.

Quality

As there is so little information available about implementation of services and programing in relation to child protection, it is not possible to provide an assessment or analysis about the quality of services available. However, the enabling environment and supply-related barriers suggest that services that do exist are likely to be underfunded and supported, perhaps leading to limitations of quality.

9. Child poverty, inequality and access to social protection

Economic well-being and equitable access to basic services are essential to ensure that children are able to survive and thrive in all areas, and that development reaches and supports the most vulnerable groups of children. A comprehensive social protection system is essential for reducing the vulnerability of the most deprived persons – including children – to poor development outcomes. Social protection systems can strengthen the capacity of families and carers to care for their children and help remove barriers to accessing essential services, such as healthcare and education, and can thereby help close inequality gaps. Social protection measures can also help to cushion families from livelihood shocks, including unemployment, loss of a family member or a disaster, and can build resilience and productivity among the population.

According to UNICEF, social protection is *“the set of public and private policies and programmes aimed at preventing, reducing and eliminating economic and social vulnerabilities¹⁷⁰⁷ to poverty and deprivation, and mitigating their effects.”*¹⁷⁰⁸ Social protection systems are essential to ensuring that the rights of children to social security¹⁷⁰⁹ and a standard of living adequate for their physical, mental, spiritual, moral and social development¹⁷¹⁰ are realised. According to the CRC, States are required to *“take appropriate measures to assist parents and others responsible for the child to implement this right [to an adequate standard of living] and shall in case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing.”*¹⁷¹¹ Effective social protection measures are also essential to achieving SDG 1: to eradicate extreme poverty (which is currently measured as people living on less than \$1.25 a day) for all people everywhere by 2030, and to reduce at least by half, the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.

In order to achieve this, SDG 1.3 requires the implementation of ‘nationally appropriate social protection systems and measures for all, including [social protection] floors.’ A social protection floor consists of two main elements: essential services (ensuring access to WASH, health, education and social welfare services); and social transfers (a basic set of essential social transfers in cash or in kind, paid to the poor and vulnerable).¹⁷¹²

Key poverty and social protection SDGs

SDGs	Targets	Indicators
1.1	By 2030, eradicate extreme poverty for all people everywhere, currently	Proportion of population living under international poverty line (US\$1.25 a day)

¹⁷⁰⁷ UNICEF distinguishes between the two as follows: ‘[p]overty reflects current assets or capabilities, while vulnerability is a more dynamic concept concerned with the factors that determine potential future poverty status. Vulnerability considers both an individual’s current capabilities and the external factors that he/she faces, and how likely it is that this combination will lead to changes in his/her status.’

¹⁷⁰⁸ UNICEF, *Social Protection Strategic Framework* (2012), p 24

¹⁷⁰⁹ CRC, article 26

¹⁷¹⁰ CRC, article 27

¹⁷¹¹ CRC, article 27(2)

¹⁷¹² ILO and WHO, ‘The Social Protection Floor: A joint crisis initiative of the UN Chief Executive Board for Coordination on the Social Protection Floor’, October 2009 available at: <http://www.un.org/ga/second/64/socialprotection.pdf>

	measured as people living on less than \$1.25 a day	
1.2	By 2030, reduce at least by half the proportion of men, women and children living in poverty in all its dimensions according to national definitions	Proportion of population living under national / regional food poverty line
		Proportion of population living under national / regional basic needs poverty line
1.3	Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable	Social protection index / indicator (depth and breadth of social protection system)
1.4	By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance	Proportion of population experiencing severe deprivation of number of basic needs / services (multi-dimensional poverty assessment)
		Social protection index / indicator (depth and breadth of social protection system)
Key CRC Articles		
<p>Article 2: Every child has the right to enjoyment of CRC provisions without discrimination on the ground of a child’s or his or her parent’s or guardian’s race, colour, sex, language, political or other opinion, national, ethnic or social origin, property, disability, birth or other status</p> <p>Article 6(2): States parties shall ensure to the maximum extent possible the survival and development of the child</p> <p>Article 27 (1) Every child has the right of every child to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development; (2) State parties shall take appropriate measures to assist parents / carers to implement this right and shall provide material assistance and support programmes where needed</p> <p>Article 26: Every child has the right to benefit from social security, including social insurance</p>		

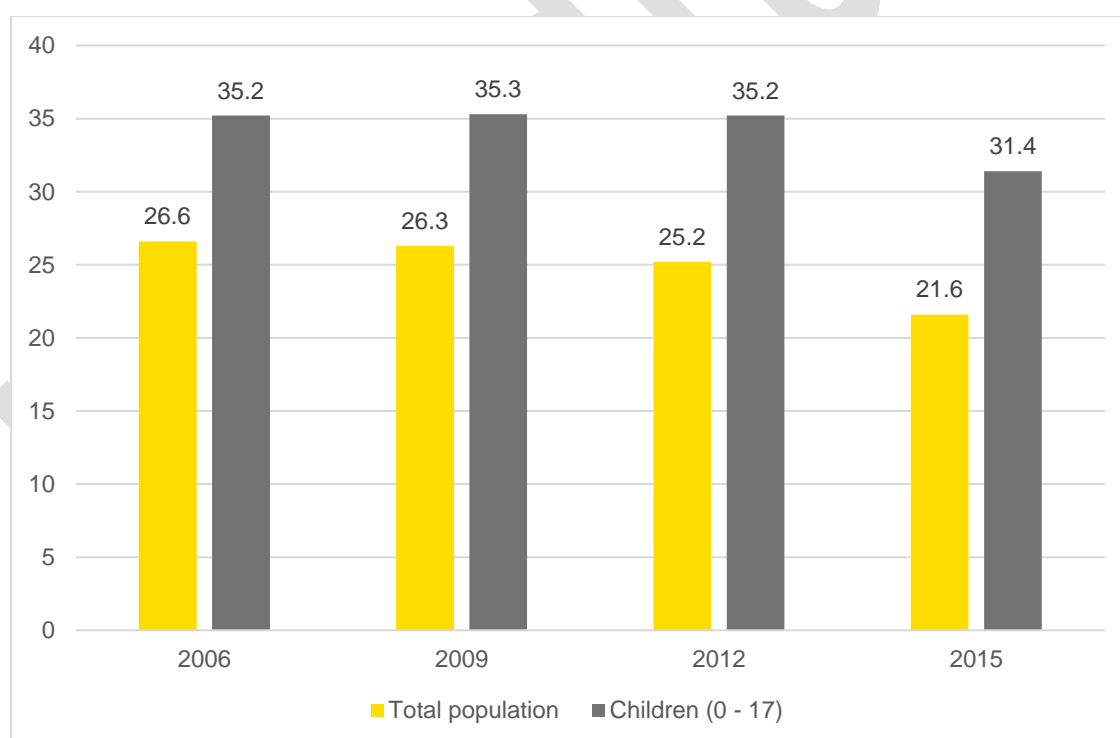
9.1 Profile of child poverty and inequality

As set out above, rates of overall food and basic needs poverty have decreased in incidence and magnitude between 2012 (when the incidence of food poverty was 10.4 per cent and basic needs poverty was 25.2 per cent) and 2015 (when the incidence of food poverty was 8.1 per cent and basic needs poverty, 21.6 per cent). If this downward trend continues, it indicates that the Philippines may be able to reach SDG target 1.2 of a reducing by half the number of persons living below national poverty lines by 2030. Nonetheless, poverty rates, along with rates of economic and human development, are characterised by stark regional disparities in the Philippines, and pockets of

significant poverty persist in some parts of the country, and have increased significantly in some locations – in Western Mindanao (including ARMM) in particular. The presence of persistent and increasing rates of poverty in some locations and among some groups may impede the Government’s ability to reach the poverty-related targets in the SDGs, and also to reach the targets set out in the PDP: the reduction of basic needs poverty incidence to 14 per cent and of food poverty by 5 per cent by 2022,¹⁷¹³ and the virtually eradication of poverty by 2040.¹⁷¹⁴

Poverty rates are high for children in the Philippines, and poverty appears to disproportionately affect children. The impacts of poverty are more significant for children, and there is growing evidence that children experience poverty more acutely than adults: the negative impacts of poverty on their development can have profound and irreversible effects into adulthood. It has also been noted that, when a family moves into poverty (e.g. as a consequence of an economic shock), children often suffer by being withdrawn from school and draw into working in forms of hazardous labour.¹⁷¹⁵ In 2015, 31.4 per cent of children (0–17 years) were living below the basic needs poverty line, compared to 21.6 per cent of the total population.¹⁷¹⁶ While rates of child poverty have dropped between 2012 and 2015, this was consistent with the drop in poverty rates overall, indicating that children continue to be disproportionately vulnerable to living in poverty.

Table 9.1. Basic needs poverty incidence: total population and children (0–17), 2006–2015



Source: Philippines Statistics Authority, Release: Farmers, fisherman and children consistently posted the highest poverty incidence among basic sectors, 30 June 2017 (FIES data)

¹⁷¹³ PDP p 11.

¹⁷¹⁴ PDP p 9,

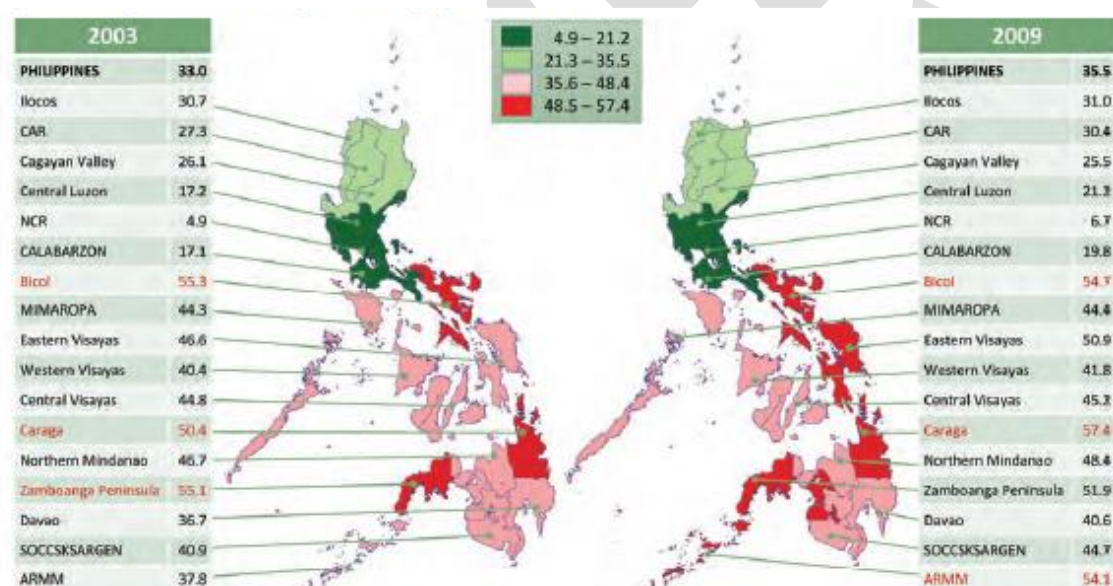
¹⁷¹⁵ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p. 23.

¹⁷¹⁶ Philippines Statistics Authority, Release: Farmers, fisherman and children consistently posted the highest poverty incidence among basic sectors, 30 June 2017, available at: <https://www.psa.gov.ph/poverty-press-releases>.

While no very recent data are available, survey data from 2009 indicate that children are also particularly vulnerable to food poverty. In 2009, 15.7 per cent of children (5.9 million) lived below the food poverty line of \$245 per year and were considered to be living in extreme poverty.¹⁷¹⁷ This is more than double the rate of food poverty among the overall population (7.9 per cent in 2009). Although the incidence of food poverty among children remained roughly the same between 2003 and 2009, the magnitude increased by around 670,000 children.¹⁷¹⁸

The data illustrates stark disparities in rates of child poverty in the Philippines, as it does among the population more generally. NCR appears to have a relatively low incidence of child poverty (6.7 per cent in 2009), compared to Caraga (57.4 per cent in 2009) and Bicol (54.7 per cent in 2009). Poverty trends are also starkly disparate by location. In particular, ARMM has had a large increase in the percentage of children living in poverty from 37.8 per cent in 2003 to 48.2 per cent in 2006 and 54.1 per cent in 2009). This equates to an increase of 11 per cent per year.¹⁷¹⁹ These disparities in the incidence of poverty and poverty trends are illustrated in the following map.

Table 9.2. Poverty head count rate among children (%) by region, 2003 and 2009



Source: Authors' estimates based on Matched Family Income and Expenditure Survey (2002, 2006 and 2009), and Labor Force Survey (January 2004, 2007 and 2010).

Regionally, NCR (1.1 per cent), Central Luzon (7.3 per cent) and CALABARZON (5.7 per cent) had the lowest rates of children living in extreme poverty; however Central Luzon had a rapid growth in the number of extremely poor children at 10 per cent annually since 2003. ARMM has also had rapid growth of the percentage of children living in extreme poverty, at around 8 per cent annually.¹⁷²⁰

¹⁷¹⁷ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*.

¹⁷¹⁸ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*.

¹⁷¹⁹ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 10.

¹⁷²⁰ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, p 13.

The data also indicate that families with children are more likely to be living in poverty than families without children. According to the Family Income and Expenditure Survey carried out in 2009, one in every four families that have children (26 per cent) were living below the basic needs poverty line, which is higher than the incidence of families who were living below the basic needs poverty line overall (20.9 per cent).¹⁷²¹ Again, there was significant disparities in the incidence of poverty among families with children at the subnational level, with one-third of families with children living below the basic needs poverty line coming from Bicol, Central Visayas and Western Visayas, and poverty rates well above those at the national level in CARAGA (45 per cent) and ARMM (44 per cent), and well below in others (e.g. NCR, 4 per cent).¹⁷²²

It is important to note that poverty is not necessarily a fixed state: children and families can move in and out of poverty in response to a whole range of factors. An analysis based on Family Income and Expenditure Survey data from 2003, 2006 and 2009 found that 14 per cent of children were chronic or persistently poor (i.e. they were living below the poverty line in all three years), while around 30 per cent moved in and out of poverty during this time frame.¹⁷²³ Chronic poverty appears to be particularly associated with living in a rural location: one in five rural families were considered chronically poor, while only five in 100 urban families were chronically poor.¹⁷²⁴

While these measures of poverty (based on income and consumption) demonstrate significant levels of poverty among children and families with children, a high proportion of children have also been found to be living in poverty according to multi-dimensional measurements. A multi-dimensional approach recognizes that poverty is multi-faceted, and broader than deprivation of income. It is characterised by a range of deprivations (education, work, housing, communications and access to information and income). According to a multi-dimensional assessment carried out in 2014, using data from the 2009 Family Income and Expenditure Survey and the 2010 Labour Force Survey, 24.1 per cent of children experienced a severe deprivation of at least one type (most frequently, electricity), 12.1 per cent experienced at two types of deprivation and five per cent experienced four types of deprivation.¹⁷²⁵

The figure below illustrates the deprivations in each area for children aged 6–17 years. It shows there are huge challenges in improving the welfare of children especially in terms of electricity, information, income and basic living amenities. Some of these will overlap and so make the situation of poor children worse than it appears purely on incidence rates.¹⁷²⁶ The diagram also shows that the situation in rural areas is generally worse than urban areas.

Table 9.3. Dimension of poverty for children aged 6–17 years, 2009

¹⁷²¹ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015).

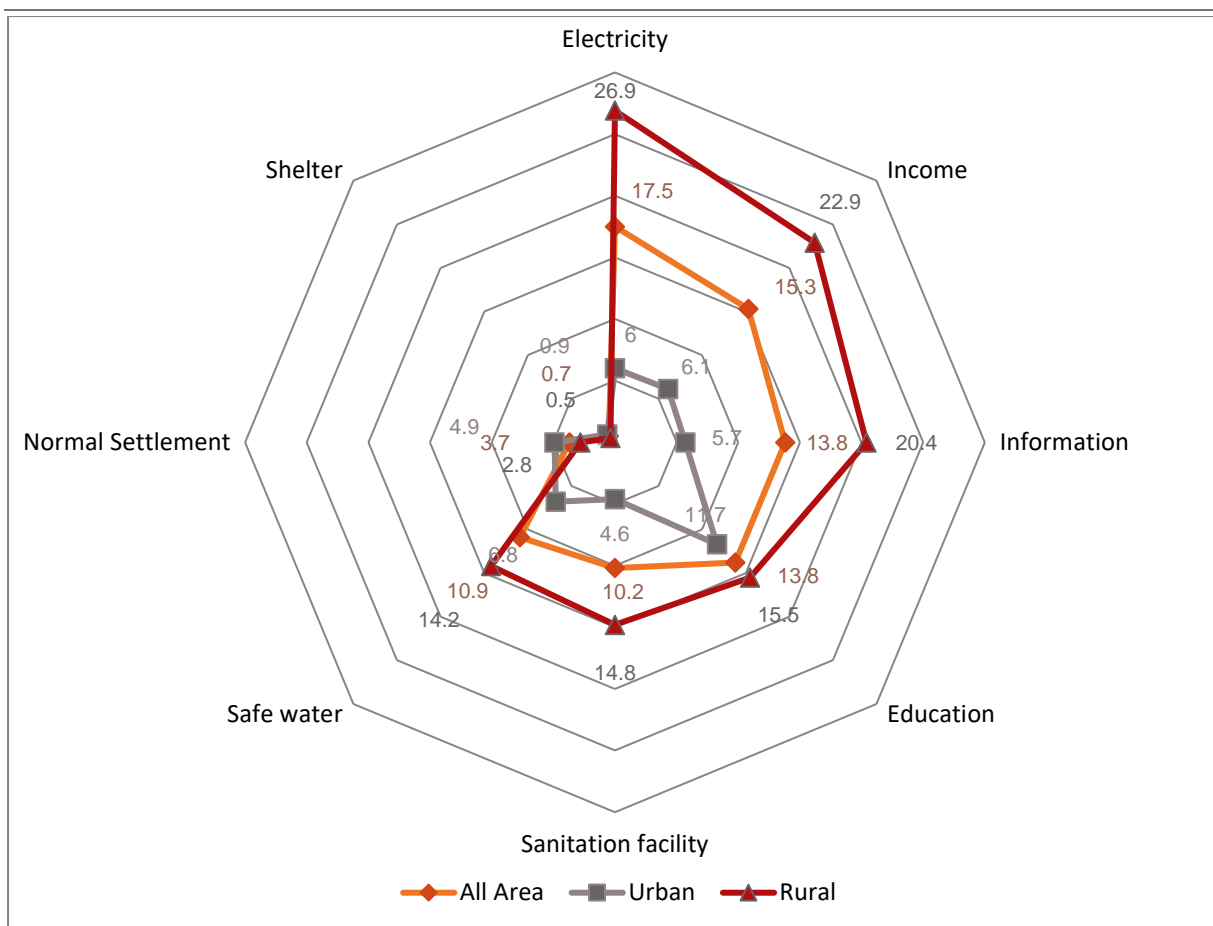
¹⁷²² Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015).

¹⁷²³ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015), p. 24.

¹⁷²⁴ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015), p. 24.

¹⁷²⁵ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015), p. 24.

¹⁷²⁶ Philippines Statistical Authority and UNICEF, *Child Poverty in the Philippines*, (2015), p. 81.



Source: *Child Poverty in the Philippines Report*, source data based on Author’s estimates based on Family Income and Expenditure Survey, National Statistics Office

The Committee on the Rights of the Child, in its periodic review of the Philippines in 2009, expressed concern about large disparities in the standard of living between different regions as well as in access to basic services.¹⁷²⁷

9.1.1 Child poverty: risk factors and equity issues

In addition to the geographic disparities in child poverty rates across the Philippines, a number of other characteristics are associated with increased vulnerability to poverty.

Geographic location

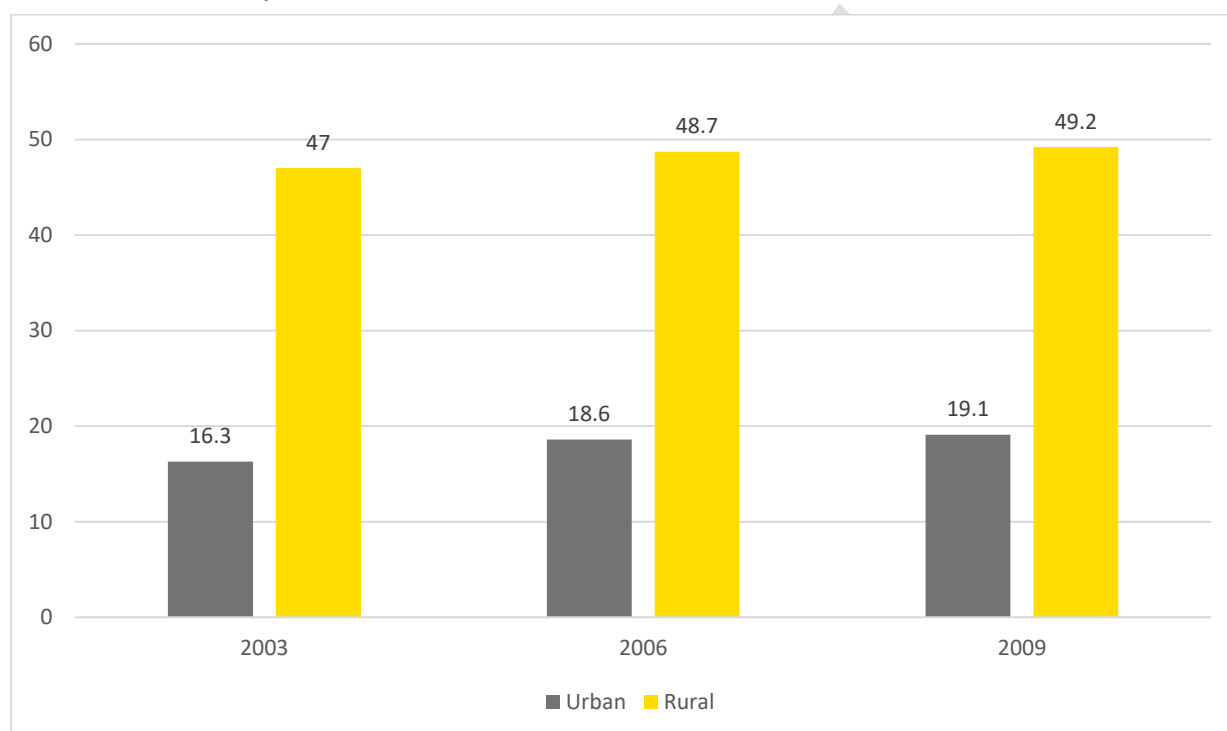
Children in rural areas are more likely to be living in poverty – as noted above, living in a rural location is also associated with a greater likelihood of chronic poverty and greater risk of being deprived of basic needs. According to data from the 2009 Family Income and Expenditure Survey, children living in urban areas were much less likely to be living in poverty (19.1 per cent) compared to those living in rural areas (49.2 per cent).¹⁷²⁸ Three in four income poor children live in rural areas, and this has increased at a rate of roughly 2.7 per cent per year from 2003–2009 (from 47 per cent in 2003 to 48.7

¹⁷²⁷ CRC concluding observations, Philippines, 2009 para 63.

¹⁷²⁸ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 9.

per cent in 2006 and 49.2 per cent in 2009). Although only a quarter of income poor children live in urban areas, their annual rate of increase was almost twice the rate of increase than rural areas: from 16.3 per cent in 2003 to 18.6 per cent in 2006 and 19.1 per cent in 2009.¹⁷²⁹

Table 9.4. Basic needs poverty incidence, urban v rural locations, 2003, 2006 and 2009 (FIES data)



Source: *Child Poverty in the Philippines*, Philippines Statistical Authority and UNICEF p. 10

Children in rural areas also made up 82 per cent of the total number of extremely poor children in 2009, and 24 per cent of those did not have enough income to meet basic food needs.¹⁷³⁰ Urban families also had a significantly lower incidence of extreme (food) poverty in 2009, at 6.2 per cent in 2009, compared to rural families, at 23.7 per cent.¹⁷³¹

However, it has noted that significant pockets of poverty also exist in urban areas, in particular, among persons living in informal ‘squatter’ settlements. The proliferation of urban squatter settlements has accompanied rapid urbanisation in the Philippines (see chapter 2). The rapid urbanization and proliferation of informal settlements has been fuelled in part by migration of persons from rural locations to pursue economic opportunities in cities.¹⁷³² In 2014, the National Housing Authority, in coordination with local governments, estimated the number of families in informal settlements at around 1.5 million (15 per cent of the Philippines’ total urban population). Though other estimates have put the percentage of informal settlement dwellers at between 30 and

¹⁷²⁹ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 10.

¹⁷³⁰ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 13/

¹⁷³¹ Family Income and Expenditure Survey data: Philippines Statistics Authority, *Official poverty statistics of the Philippines* (2015), Tables 1 and 3.

¹⁷³² See section 2, above.

60 per cent of all urban residents.¹⁷³³ In Metro Manila alone, there are reportedly 526 informal settlement communities containing some 2.54 million individuals.¹⁷³⁴ The discrepancies in estimates relate to the different definitions used to define informal settlements / dwellings. According to the Philippines National Housing Authority, a broad definition is used to define informal settlements/dwellings that includes:

- Lots without the consent of the owners;
- Danger areas along river banks, railways, under the bridge and others;
- Areas designated for government infrastructure projects;
- Protected/forest areas, except for Indigenous persons;
- Areas for priority development, if applicable; and
- Other government/public lands or facilities not intended for human habitation.¹⁷³⁵

Informal settlements vary considerably, but tend to be characterised by deterioration, significant overcrowding, a lack of basic conveniences and are often in hazardous, polluted locations.¹⁷³⁶ While there are no nationally representative data on poverty levels among families and individuals living in urban settlements, the Philippines Housing and Urban Development Coordinating Council has reported ‘deep levels of urban poverty’ among informal settlement dwellers;¹⁷³⁷ in particular chronic urban poverty and exposure to physical, economic, social, legal and environmental risks on a day-to-day basis.¹⁷³⁸

The proportion of children living in informal urban settlements grew significantly from 2003 to 2009 in NCR, CALABARZON, SOCCSKARGEN and Northern Mindanao.¹⁷³⁹ Children living in urban slums are typically deprived of a number of basic needs, including exposure to health and environmental risks caused by unsanitary living conditions and poor quality drinking water and food storage facilities and exposure to indoor pollution, and social problems, including exposure to violence and drugs.¹⁷⁴⁰ Also, because children are deprived of tenure, they can experience difficulties ensuring regularity of schooling.¹⁷⁴¹ Children living in urban slums are likely to be exposed to a cycle of poverty and deprivation: “the lack of access to employment and livelihood opportunities, capital, basic urban services, education, health and social networks’ entrench and reinforce existing deprivations and

¹⁷³³ Housing and Urban Development Coordinating Council (HUDCC), *Developing and national informal settlement upgrading strategy for the Philippines* (2014), p. 38.

¹⁷³⁴ Junio M Rragio, ‘Urban slums report: the case of Metro Manila’ in *Understanding slums: Case studies for the Global Report on Human Settlements* (2003), available at https://www.ucl.ac.uk/dpu-projects/Global_Report/pdfs/Manila.pdf.

¹⁷³⁵ Housing and Urban Development Coordinating Council (HUDCC), *Developing and national informal settlement upgrading strategy for the Philippines* (2014), p. 4.

¹⁷³⁶ Junio M Rragio, ‘Urban slums report: the case of Metro Manila’ in *Understanding slums: Case studies for the Global Report on Human Settlements* (2003), available at https://www.ucl.ac.uk/dpu-projects/Global_Report/pdfs/Manila.pdf.

¹⁷³⁷ Housing and Urban Development Coordinating Council (HUDCC), *Habitat III: The Philippine national report* (2016), para. 2.6.1.

¹⁷³⁸ Housing and Urban Development Coordinating Council (HUDCC), *Developing and national informal settlement upgrading strategy for the Philippines* (2014), p. 65.

¹⁷³⁹ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF.

¹⁷⁴⁰ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF.

¹⁷⁴¹ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF.

*inequality.*¹⁷⁴² A qualitative study carried out in five cities (Manila, Pasay, Quezon, Cebu and Davao) in 2005 found that children in informal settlements were at particular risk of working on the street and dropping out of school, and also faced a range of protection risks, including domestic violence, neglect, sexual exploitation and drug abuse; they were also found disproportionately at risk of coming into conflict with the law.¹⁷⁴³ The report noted the particular vulnerability of Indigenous children in informal urban settlements: “children from Indigenous communities forced into cities by warfare or economic displacement are not only relegated to the worst portions of degraded urban settlements; they often lose their cultural rights.”¹⁷⁴⁴

Gender

According to Family Income and Expenditure Survey data, there does not appear to be any difference in poverty levels between boys and girls (0–17 years). According to the most recent Survey (2015), women were only slightly more likely to be living in poverty than the overall population (22.5 per cent of women were living under the basic needs poverty line, compared to 21.6 per cent of the overall population).¹⁷⁴⁵ Interestingly, female-headed households have consistently been found to be at lower risk of poverty than male-headed households (for instance, in 2009, 16.1 per cent of female-headed households were living below the basic needs poverty line, compared to 27.7 per cent of male-headed households).¹⁷⁴⁶

Nonetheless, it is clear that women experience other manifestations of disadvantage and disempowerment. As set out above (see section 2), women lack access to the (formal) job market: according to the most recent Labor Force Survey, of the 24.9 million persons over 15 years not in the labour force, 70.2 per cent were women.¹⁷⁴⁷ This has followed a period of slow growth in which the share of women in waged employment in the non-agriculture sector rose by only one percentage point from 2000 to 2011.¹⁷⁴⁸ Further, women only earn an estimated 60 per cent of men’s annual earnings.¹⁷⁴⁹

Women’s labour market participation is lower than men’s due to gender stereotyping of jobs that create barriers to women’s entry, regulations prohibiting women from entering certain jobs, disincentives due to standards relating to childbearing and child-rearing and less access to credit, networking and interaction with business and government officials.¹⁷⁵⁰ Also, social norms that relegate women to the domestic sphere restrict the time available for work and limit opportunities to work in the formal sector. In the Philippines, women provide 84 per cent of total child care work, and in 2011, it was found that 31 per cent of working-age women reported that they were not in the

¹⁷⁴² Housing and Urban Development Coordinating Council (HUDCC), *Habitat III: The Philippine national report* (2016), p. 65.

¹⁷⁴³ UNICEF Innocenti Research Centre and Institute of Philippine Culture, Ateneo University, Manila, *Making Philippine cities child friendly: Voices of children in poor communities* (2005).

¹⁷⁴⁴ UNICEF Innocenti Research Centre and Institute of Philippine Culture, Ateneo University, Manila, *Making Philippine cities child friendly: Voices of children in poor communities* (2005) at p. xiv.

¹⁷⁴⁵ Philippines Statistics Authority, Release: Farmers, fisherman and children consistently posted the highest poverty incidence among basic sectors, 30 June 2017, available at: <https://www.psa.gov.ph/poverty-press-releases>.

¹⁷⁴⁶ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF, Table 3.2.

¹⁷⁴⁷ Philippines statistics authority, April 2016 Labor Force Survey - <https://psa.gov.ph/content/employment-situation-april-2016-final-results>.

¹⁷⁴⁸ Asian Development Bank and ILO, *Gender equality in the labour market in the Philippines* (2013), p. 9.

¹⁷⁴⁹ Asian Development Bank and ILO, *Gender equality in the labour market in the Philippines* (2013), p. 9.

¹⁷⁵⁰ Asian Development Bank and ILO, *Gender equality in the labour market in the Philippines* (2013).

labour force in 2011 because of household or family duties, compared to only three per cent of men.¹⁷⁵¹

According to PCW, women tend to work in low-paying and insecure jobs in the informal economy and thereby lack the social protection and work benefits. They are therefore “*at high risk in times of illness, disability, work injury, maternity, unemployment and old age.*”¹⁷⁵² Their income may be compromised if they become pregnant or they or their children get sick.¹⁷⁵³

Also, having an income does not necessarily mean that women have control over their income: “*women’s control over their own earnings is influenced by education, marital status, age, household composition, debt and social norms.*”¹⁷⁵⁴

Family size

Children from larger families are more likely to live in poverty than those from smaller ones. In 2009, more than half of families (51.5 per cent) with seven or more members lived below the poverty line, which had increased from 48 per cent in 2003 and 50.2 per cent in 2006. In comparison, in 2009 only 15.2 per cent of children in families with only three to four members lived in poverty; a small increase from 15.1 per cent in 2003 but a reduction from 15.6 per cent in 2006.¹⁷⁵⁵ Larger families (over six members) had a higher rate of extremely poor children (26.3 per cent) compared to those with three to four members (4.0 per cent).¹⁷⁵⁶

Table 9.5. Child poverty incidence by household size, 2009 (FIES data)

¹⁷⁵¹ DOLE Decent Work Statistics (2011), in Asian Development Bank and ILO, *Gender equality in the labour market in the Philippines* (2013).

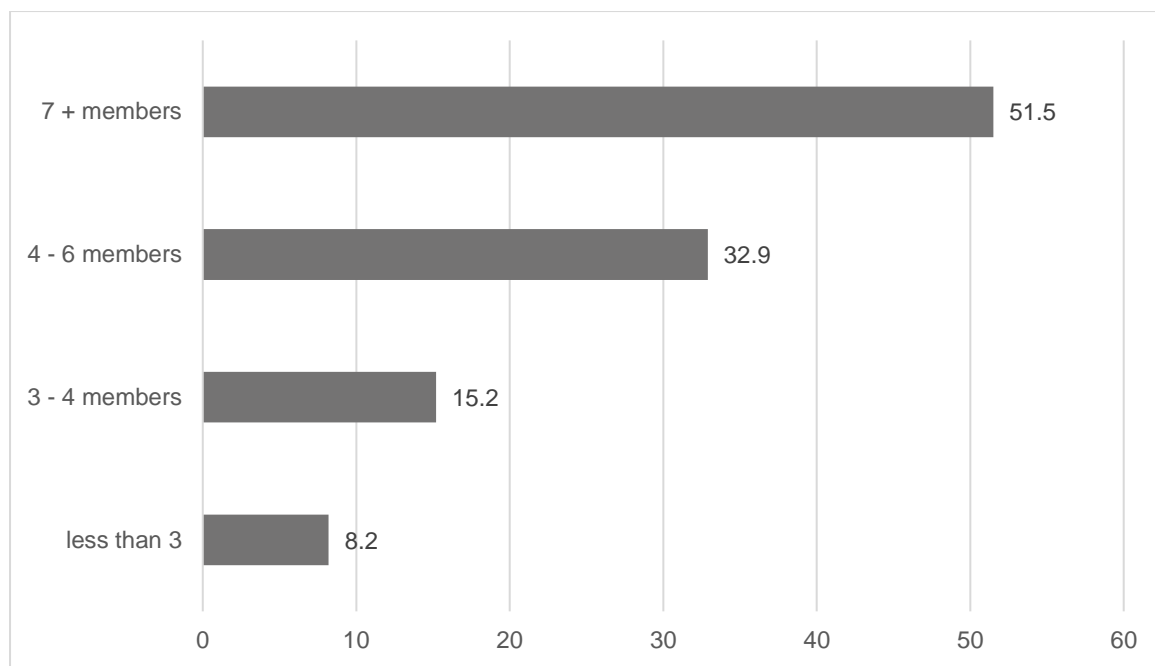
¹⁷⁵² In Fritzie Rodriguez, ‘Why many of the hungry are women’, *Rappler*, 25 March 2014, available at: <http://www.rappler.com/move-ph/issues/hunger/53801-gender-inequality-women-hunger>.

¹⁷⁵³ Fritzie Rodriguez, ‘Why many of the hungry are women’, *Rappler*, 25 March 2014, available at: <http://www.rappler.com/move-ph/issues/hunger/53801-gender-inequality-women-hunger>.

¹⁷⁵⁴ Asian Development Bank and ILO, *Gender equality in the labour market in the Philippines* (2013).

¹⁷⁵⁵ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 8.

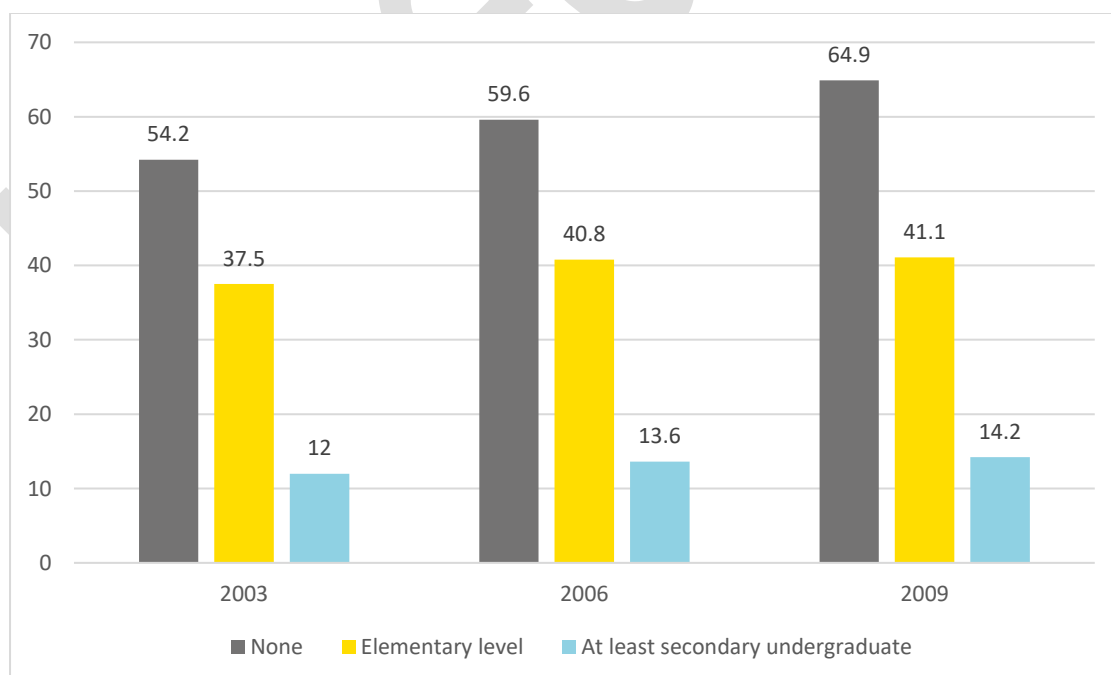
¹⁷⁵⁶ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 13.



Education level of household head

The educational level of the household head is positively associated with poverty. As demonstrated in the chart below, persons with no education are significantly more likely to be living under the basic needs poverty line than those with at least secondary graduate level (14.2 per cent compared to 64.9 per cent in 2009).

Table 9.6. Basic needs poverty rates by educational level, 2003, 2006 and 2009



Source: *Child Poverty in the Philippines*, Philippines Statistical Authority and UNICEF p. 14

Employment sector

Households with heads working in less formal employment sectors are also more likely to be living in poverty. In particular, farmers, fishermen and those who are self-employed or performing unpaid family work were more likely to be living in poverty: in 2015, 34.3 per cent of farmers, 34 per cent of fishermen and 30.6 per cent of self-employed persons were living below the basic needs poverty line, compared with 21.6 per cent of the overall population.¹⁷⁵⁷ Subsistence farmers appear to be more at risk of poverty than commercial farmers, which has been attributed to ‘a lack of productivity enhancing inputs, such as irrigation, seeds and others.’¹⁷⁵⁸

Children from marginalised groups

In addition to these associations, children belonging to a number of other groups have been identified as being particularly prone to child poverty. During the consultation with key stakeholders that took place in Manila to inform this report, the following groups of children were identified.

Table 9.7: Groups of children particularly at risk of poverty

- | |
|---|
| <ul style="list-style-type: none"> • Street children; • Child workers; • Children from indigenous communities; and • Children with disabilities.¹⁷⁵⁹ |
|---|

Source: data from consultation workshop

while there are limitations on the availability of nationally representative data to confirm these associations, available data does indicate that children from these groups are more at risk of poverty.

Indigenous Peoples

As noted above (see chapter 3), Indigenous children continue to experience social discrimination, economic marginalisation and political disempowerment, along with socio-economic exclusion. There does not appear to be to any recent data available to establish poverty levels in Indigenous Communities. However, they are reported to be “*the most disadvantaged peoples, representing the poorest of the poor and the most vulnerable.*”¹⁷⁶⁰ IPs tend to be concentrated in the most disadvantaged parts of the country. Mindanao, where 61 per cent of IPs live, contributes 31 per cent to total poverty incidence, and parts of Mindanao, including ARMM, are among the poorest provinces

¹⁷⁵⁷ Philippines Statistics Authority, Release: Farmers, fisherman and children consistently posted the highest poverty incidence among basic sectors, 30 June 2017, available at: <https://www.psa.gov.ph/poverty-press-releases>

¹⁷⁵⁸ Office of the President of the Philippines, *National Anti-Poverty Programme (2010 – 2016), Part 1*, p. 16.

¹⁷⁵⁹ The workshop participants also identified ‘urban poor’ as a particular group who was at increased risk of poverty; however, this has been addressed above.

¹⁷⁶⁰ Institute for Autonomy and Governance, *The situation of Indigenous children: A participatory research with Indigenous children and their communities in Mainland ARMM*, p. 16

in the country.¹⁷⁶¹ These areas also tend to be characterised by poor health, nutrition and educational outcomes for children.¹⁷⁶²

Problems in land access and use continue to interfere with livelihoods: in particular, the encroachment of corporate mining operations onto the lands of IPs and the presence of military personnel has limited the ability of IPs to work on their land and has caused indigenous children to drop out of school.¹⁷⁶³ Mining has also resulted in environmental degradation, causing a reduction of agricultural production, water pollution, decreased fish catch and health problems.

Poverty and vulnerability appears to be compounded by lack of Government services in areas where IPs live. These areas are often geographically isolated and remote, with limited economic opportunities.¹⁷⁶⁴

Children with disabilities

Unfortunately, as set out above (see Table 9.7), there are limited data on the children with disabilities, including on the extent and nature of poverty and deprivation among these children.¹⁷⁶⁵ However, it has been noted that children with disabilities likely experience social exclusion and deprivation as a result of lack of access to education, (as examined above), social services and lack of access to the job market.

Working children

Perhaps unsurprisingly, poverty is highly correlated with working children. It has been calculated, based on merged datasets of the 2009 Family Income and Expenditure Survey and the 2010 Labour Force Survey that almost half of the population of working children (47 per cent) are from the poorest income group, and about seven in 10 children who work come from the poorest 40 per cent of the population.¹⁷⁶⁶ Though it has been noted that child work is not exclusively a practice among the poor, and that just over eight per cent of working children come from the richest 20 per cent of the population.¹⁷⁶⁷ Data also demonstrates that child work is more prevalent among families experiencing other forms of deprivation (e.g. those without sanitary toilet facilities, safe water sources and access to electricity).¹⁷⁶⁸ Child labour tends to reinforce intergenerational poverty by impeding a child's access to education and increasing the risk of exploitation.¹⁷⁶⁹

¹⁷⁶¹ UNICEF, The situation of Indigenous children in ARMM: A participatory research with Indigenous Children and their communities in Mainland ARMM (unpublished), p. 19.

¹⁷⁶² UNICEF, The situation of Indigenous children in ARMM: A participatory research with Indigenous Children and their communities in Mainland ARMM (unpublished), p. 19.

¹⁷⁶³ UN Committee on Economic, Social and Cultural Rights, Situation of Indigenous Peoples in the Philippines: Statement by TEBTEBBA – Indigenous Peoples' International Center for Policy Research and Education Philippines to 59th session, 26 September 2016.

¹⁷⁶⁴ International Workgroup for Indigenous Affairs, Indigenous Peoples in the Philippines, available at: <http://www.iwgia.org/regions/asia/philippines> .

¹⁷⁶⁵ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 80.

¹⁷⁶⁶ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 80.

¹⁷⁶⁷ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 87.

¹⁷⁶⁸ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 90.

¹⁷⁶⁹ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 90.

Street children

The extent of children living on the street and the risks associated with this has been addressed above (chapter 8). It has also been noted, unsurprisingly, that living on the street is strongly associated with poverty and deprivation.

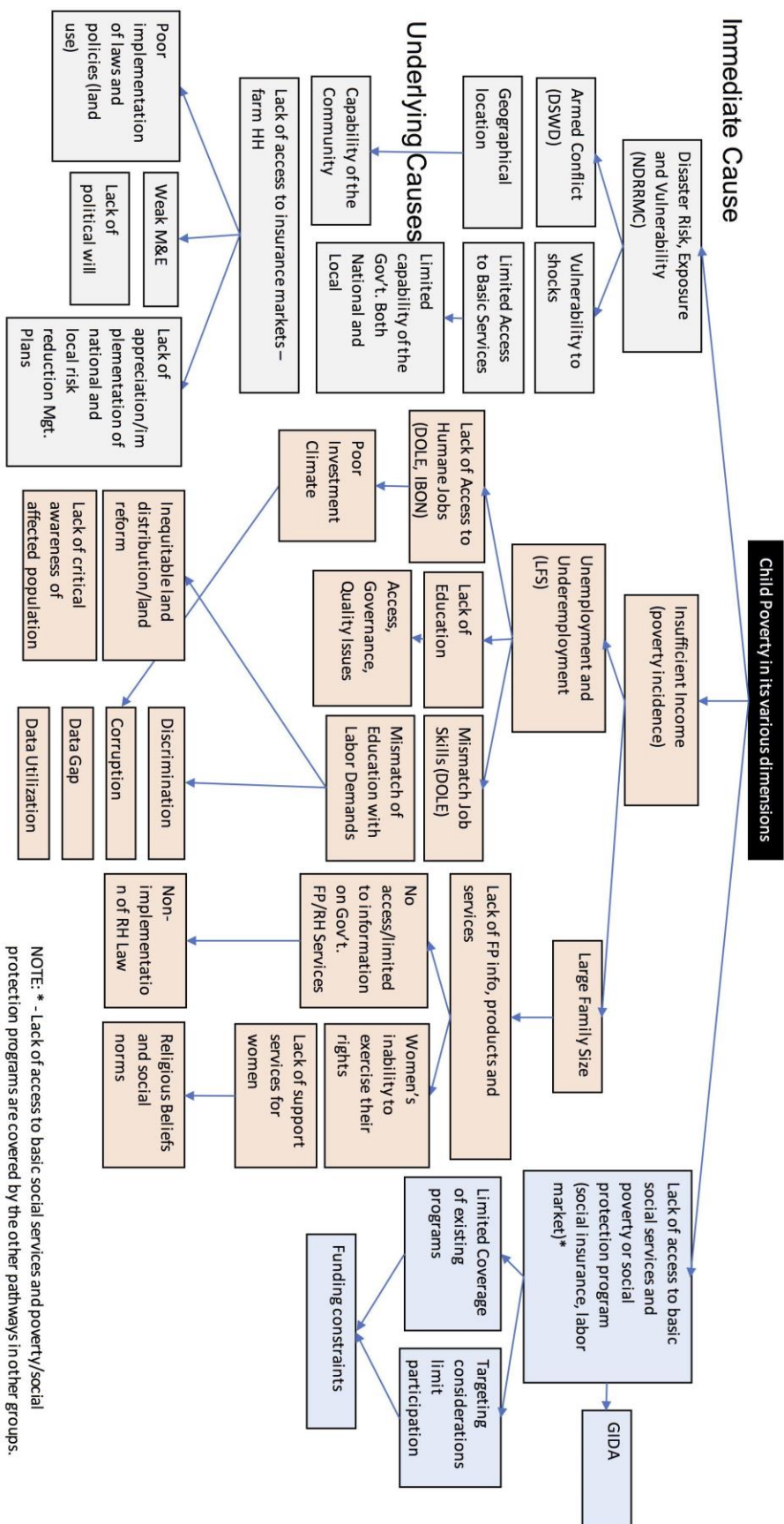
Lack of data on the levels and experiences of poverty and vulnerability among these marginalised groups of children entrenches their social exclusion and invisibility, and minimises the ability for effective policy and programming interventions to address their vulnerability.

9.2 Causes of child poverty

The causes of poverty in the Philippines are complex, intersecting and operate at different levels. These immediate, underlying and structural causes of child poverty were mapped out by key stakeholders and experts during a consultation workshop in Manila, and were used to inform this analysis. The causality map is presented below (table 9.8) and represents consensus reached by the key stakeholders and experts. As can be seen, causes are complex, nebulous and relate to a range of deprivations that have been identified throughout this report.

Table 9.8 Stakeholder causality map: child poverty

SOCIAL PROTECTION CAUSALITY DISCUSSION



According to existing research, poverty in the Philippines has a range of key immediate, underlying and structural causes.

9.2.1. Limited and uneven economic growth

One of the main underlying reasons for the slow pace of poverty reduction (compared to other Asian countries) is the slow pace of economic growth, which has limited the extent of quality employment opportunities, especially in sectors in which large number of the poor work.¹⁷⁷⁰ While the economy has shown growth in recent years, this growth has been uneven and largely driven by the industrial and services sectors, and not the agriculture sector where the majority of workers are poor.¹⁷⁷¹ Inequality therefore persists, while economic growth is not diversified across all sectors.¹⁷⁷²

Data indicates that economic growth has not corresponded with a reduction in poverty in the Philippines. Estimates on the ‘growth elasticity’ of poverty reduction (an indicator of whether economic growth has affected poverty positively) have found that economic growth has had little or even negative impact on poverty reduction in the Philippines.¹⁷⁷³ This might indicate that growth has not been inclusive and that there are segments of the population that are chronically poor.¹⁷⁷⁴ Though it is noted that between 2012 and 2015, overall poverty levels did decline, as set out above.

9.2.2. Poor quality job market

Poor economic growth has had a negative impact on the creation of economic opportunities. Economic growth has not kept up with the growth in the number of persons entering the labour force¹⁷⁷⁵ (though it is noted that the most recent data show a significant decline in unemployment). As noted above, however, underemployment rates remain high. Most of the growth in recent years has been in the services sector, which is characterised by informal working arrangements.¹⁷⁷⁶

A recent World Bank study¹⁷⁷⁷ noted the extent of ‘pervasive in-work poverty’, indicating that it is the lack of *quality* jobs and the lack of access to quality employment opportunities for the poor that contributes to poverty: “*economic growth has created enough jobs to absorb the increase in the working age population but has failed to improve job quality.*”¹⁷⁷⁸ It found that poverty is caused by low earning capacity of the poor, behind which are the contributing underlying causes of low education of the poor, and the scarcity of quality, productive job opportunities. The poor tend to hold jobs that are informal, temporary or casual and low paid. The informality of these opportunities mean that the poor are denied the protections of labour laws and regulations, including minimum wages and access to benefits, including social protection measures. Economic growth has therefore not led to growth in wages.¹⁷⁷⁹

¹⁷⁷⁰ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 39.

¹⁷⁷¹ World Bank, *Philippines economic update*, April 2017, p. 18.

¹⁷⁷² Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 39.

¹⁷⁷³ Balisacan and Pernia (2002), Balisacan and Hill (2007) and Habito (2009 in Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 40.

¹⁷⁷⁴ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 40.

¹⁷⁷⁵ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 43.

¹⁷⁷⁶ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 40.

¹⁷⁷⁷ Rutkowski, Jan J., ‘Employment and poverty in the Philippines’, *Philippines Social Protection Note*, No. 9, December 2015.

¹⁷⁷⁸ Rutkowski, Jan J., ‘Employment and poverty in the Philippines’, *Philippines Social Protection Note*, No. 9, December 2015, p. 3.

¹⁷⁷⁹ Rutkowski Jan J., ‘Employment and poverty in the Philippines’, *Philippines Social Protection Note*, No. 9, December 2015.

9.2.3. Episodes of food inflation

High inflation has had an impact on poverty levels, reducing the positive impact of economic growth. Rising food prices (for example, like that experienced in the latter half of 2014 owing to the effects of Typhoon Haiyan/Yolanda), affect the poorest the most, as they spend most of their income on food, increasing the severity of poverty¹⁷⁸⁰ and impeding their ability to lift themselves out of poverty. However, it should be noted that in recent years, the Philippines has enjoyed low inflation: the annual average inflation rate in 2016 was 1.8 per cent (compared with 5.5 per cent 10 years ago – 2005).¹⁷⁸¹

9.2.4. Failure to manage population growth

As noted above, population growth remains rapid in the Philippines, owing to a persistently high fertility rate. The high fertility rate can, in part, be attributed to restrictive laws, social norms and inefficient service delivery systems that create barriers on access to contraception (see section 4, above). Family size is positively associated with poverty, as demonstrated above. Population growth also contributes to poverty through the rapid expansion of the labour force, contributing to unemployment and slowing per capita income growth.¹⁷⁸²

9.2.5. Inequality

As noted above, high levels of inequality persist in the Philippines, notwithstanding a drop in the Gini coefficient calculated in 2015. The gap in income of the poorest 20 per cent and richest 20 per cent is high. Inequality slows the reduction of poverty through limiting the ability of the poor to move out of poverty. According to a World Bank report, a portion of the gains of economic growth accrue to the owners of capital – given the high levels of inequality in the Philippines, the gains in growth have gone to a ‘very small segment of the population.’¹⁷⁸³ Inequality can also impact on poverty indirectly through slowing economic growth, which in turn, negatively impacts poverty reduction.¹⁷⁸⁴

In the Philippines, income inequality is compounded by inequitable distribution of land ownership. Studies have shown that a country’s initial land distribution influences its economic growth and human development performance: a developing country with initial high land inequality can be expected to have lower long-term income growth and slower pace of poverty reduction than a country characterised by more equitable land distribution.¹⁷⁸⁵

9.2.6. Budget and revenue allocation

Inequality between geographic areas is compounded by budgeting allocation systems from the National Governments to the LGUs, which results in wide variations in spending capacity among

¹⁷⁸⁰ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 44; see also PDP, section 4-3.

¹⁷⁸¹ Central Bank of the Philippines (Bangko Sentral Ng Pilipinas), *Inflation rates, 1998 – 2016*, available at: http://www.bsp.gov.ph/statistics/spei_new/tab34_inf.htm.

¹⁷⁸² Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 45; World Bank, *Philippines economic update*, April 2017, p. 18.

¹⁷⁸³ World Bank, *Philippines economic update*, April 2017, p. 18.

¹⁷⁸⁴ Naschold, F., ‘Why inequality matters for poverty’, *Inequality Briefing Paper No. 2*, March 2002 (Overseas Development Institute), p. 1.

¹⁷⁸⁵ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities* (2009), p. 46.

LGUs. LGU budgets rely heavily on internal revenue allocation,¹⁷⁸⁶ and this allocation is based on population and land area, as summarised in the table below.

Table 9.9 Internal revenue allocation formula

Allocation of IRA to LGUs			
Total share of national internal revenue taxes collected	Total share of the 40% by the various LGUs	Formula for total allotment for each LGU type	
STEP 1	STEP 2	STEP 3	
40%	23% to provinces	Population (50%)	= Actual IRA for each LGU
	23% to cities	+	
	34% to municipalities	Land area (25%)	
	20% to barangays	+ Equal share (25%)	

Source: Oxford Policy Management, *The integration of equity in sub-national PFM systems in the Philippines: Sub-national case study report: volume 1 (2017)*

The formula does not consider horizontal imbalances between geographic areas, and is not needs based (e.g. it is not based on poverty measurements). It has therefore “*potentially widened geographical disparities in levels of economic development*”¹⁷⁸⁷ and may “*influence inequity in basic service delivery across the regions.*”¹⁷⁸⁸ For instance, the formula, based on population size, favours cities and, given that poverty levels are highest in rural and less populous areas, this system creates uneven access to funding across the country to implement social welfare and other programmes, thereby entrenching uneven economic growth across the country. It has also been argued that the very small budget allocations given to regions with the highest concentrations of IPs has “*resulted in generally poorer living conditions and higher incidence of poverty in regions where IPs are found or concentrated.*”¹⁷⁸⁹

9.2.7. Shocks and exposure to risks and hazards

As set out in chapter 3, exposure to regular shocks and risks caused by conflicts, natural disaster and environmental poverty impacts negatively on poverty levels and entrenches inequality.

9.2.8. Lack of and inequitable access to basic services

As illustrated throughout this report, there are significant gaps in children’s and families’ access to basic services, including health, WASH, nutrition, education and social welfare services, with access

¹⁷⁸⁶ Oxford Policy Management, *The integration of equity in sub-national PFM systems in the Philippines: Sub-national case study report: volume 1 (2017)*.

¹⁷⁸⁷ Manasan (2007) in Oxford Policy Management, *The integration of equity in sub-national PFM systems in the Philippines: Sub-national case study report: volume 1 (2017)*.

¹⁷⁸⁸ Oxford Policy Management, *The integration of equity in sub-national PFM systems in the Philippines: Sub-national case study report: volume 1 (2017)*.

¹⁷⁸⁹ Carino (2012) in UNICEF, *The situation of Indigenous children in ARMM: A participatory research with Indigenous Children and their communities in Mainland ARMM (unpublished)*, p. 19.

to these services uneven across the country and across different groups of children. Children from rural or remote areas, children with disabilities, children from Indigenous communities and LGBTI children experience additional barriers in accessing services. Lack of access to services is a key cause of poverty in the Philippines, which often has the effect of entrenching existing vulnerabilities and cycles of deprivation and poverty.

9.3 Social protection systems in the Philippines

Social protection encompasses many different types of systems and programmes, including social insurance programmes (e.g. contributory schemes to provide security against for risk, such as unemployment, illness, disability etc.); social assistance programmes (non-contributory measures such as regular cash transfers targeting vulnerable groups, such as persons living in poverty, persons with disabilities, the elderly or children); and social care services (child protection prevention and response services, detailed in section 6). There has been a growing acceptance in recent times that social security, in particular, the provision of regular cash transfers to families living in and vulnerable to poverty should be a key component of a social protection system. Cash transfers provide households with additional income that enables them to invest in children’s wellbeing and human development.¹⁷⁹⁰

9.3.1 Legal, policy and institutional framework for social protection

Law and policy

Under the Constitution of the Philippines, the Government is required to ‘promote a just and dynamic social order that will ensure the prosperity and independence of the nation and free the people from poverty through policies that provide adequate social services, promote full employment, a rising standard of living, and an improved quality of life for all.’¹⁷⁹¹

The Government passed Republic Act 8425, the Social Reform and Alleviation of Poverty Act in 1997, which institutionalized the Social Reform Agenda of the Government, and created the National Anti-Poverty Commission to serve as an advisory body in implementing the Social Reform Agenda. The Social Reform Agenda required the adoption of an *“area-based and focused intervention to poverty alleviation wherein every poor Filipino family shall be empowered to meet its minimum basic needs of health, food, nutrition, water and environmental sanitation, income security, shelter and decent housing, peace and order, education and functional literacy, participation in governance, and family care and psycho-social integrity.”*¹⁷⁹² The Social Reform Agenda focused on the following priorities: access to quality basic services; asset reform and access to economic opportunities; sustainable development of productive resources; and democratizing the decision-making management processes. It also codifies several sector-specific flagship programmes for farmers and landless rural workers, fisherfolk, IPs, informal sector workers, urban poor and members of other disadvantaged groups including women, children, youth, persons with disabilities, the elderly and victims of natural disasters.¹⁷⁹³

¹⁷⁹⁰ UNICEF, Social Protection Strategic Framework (2012).

¹⁷⁹¹ Section 9, Constitution of the Philippines.

¹⁷⁹² Section 2, Social Reform and Alleviation of Poverty Act 1997 (RA 8425).

¹⁷⁹³ Section 4, Social Reform and Alleviation of Poverty Act 1997 (RA 8425)

In 2007, the Government adopted its first official definition and framework for social protection, under Resolution 1 of the National Economic Development Authority (NEDA)¹⁷⁹⁴ – Social Development Committee: social protection was defined as “*policies and programmes that seek to reduce poverty and vulnerability to risks and enhance the social status and rights of the marginalized by promoting and protecting livelihoods and employment, protecting against hazards and sudden loss of income, and improving people’s capacity to manage risks.*” It set out a framework for social protection, defining four major components of social protection:

- **Social insurance Programmes** that seek to mitigate income risks by pooling resources and spreading risks across time and classes. Beneficiaries pay a premium over a period of time to cover or protect them from loss of income or unemployment as a result of illness, injury, disability, retrenchment, harvest failure, maternity, old age etc.
- **Social Welfare Programmes:** preventive and development interventions that seek to support the minimum basic requirements of the poor, particularly the poorest of the poor, and reduce risks associated with unemployment, resettlement, marginalization, illness, disability, old age and loss of family care. These programmes usually take the form of direct assistance via transfers in cash or in kind to poor or marginalized groups, as well as social services, including family and community support, alternative care and referral services.
- **Social Safety Nets:** stop-gap measures or urgent responses that address effects of economic shocks, disasters and calamities on specific vulnerable groups with the specific objective of providing relief and transition to specifically targeted groups. Measures may include emergency assistance, price subsidies, food programmes, employment programmes, retraining programmes and emergency loans
- **Labour market interventions:** measures aimed at enhancing employment opportunities (for instance, trade policies and skills development and training) and protecting the rights of workers (e.g. through labour standards such as minimum wages).

Following the outbreak of the global financial crisis, the Government issued two Administrative Orders (232 and 232-A) in 2008, which clustered social welfare programmes in a National Social Welfare Programme Cluster, which was headed by the Chair of the Social Security System and implemented by the DSWD. There was, reportedly, however, little information on how the cluster was to function, and some groups also questioned the President’s appointment to the position of Social Security System Chair.¹⁷⁹⁵

In 2009, the Cluster commissioned the Development Academy of the Philippines to conduct an assessment of social welfare and protection programmes in the country (‘Review and Strengthening of the National Social Protection and Welfare Program’). The study recommended that social welfare programs should be harmonized in order to avoid overlaps and improve targeting of areas and

¹⁷⁹⁴ The resolution was approved by the SDC - Cabinet Level composed of the National Economic and Development Authority (NEDA), Department of Labor and Employment (DOLE), Housing and Urban Development Coordinating Council (HUDCC), Department of Social Welfare and Development (DSWD), Department of Education (DepEd), Department of Health (DOH), Department of Interior and Local Government (DILG) and Department of Agriculture (DA).

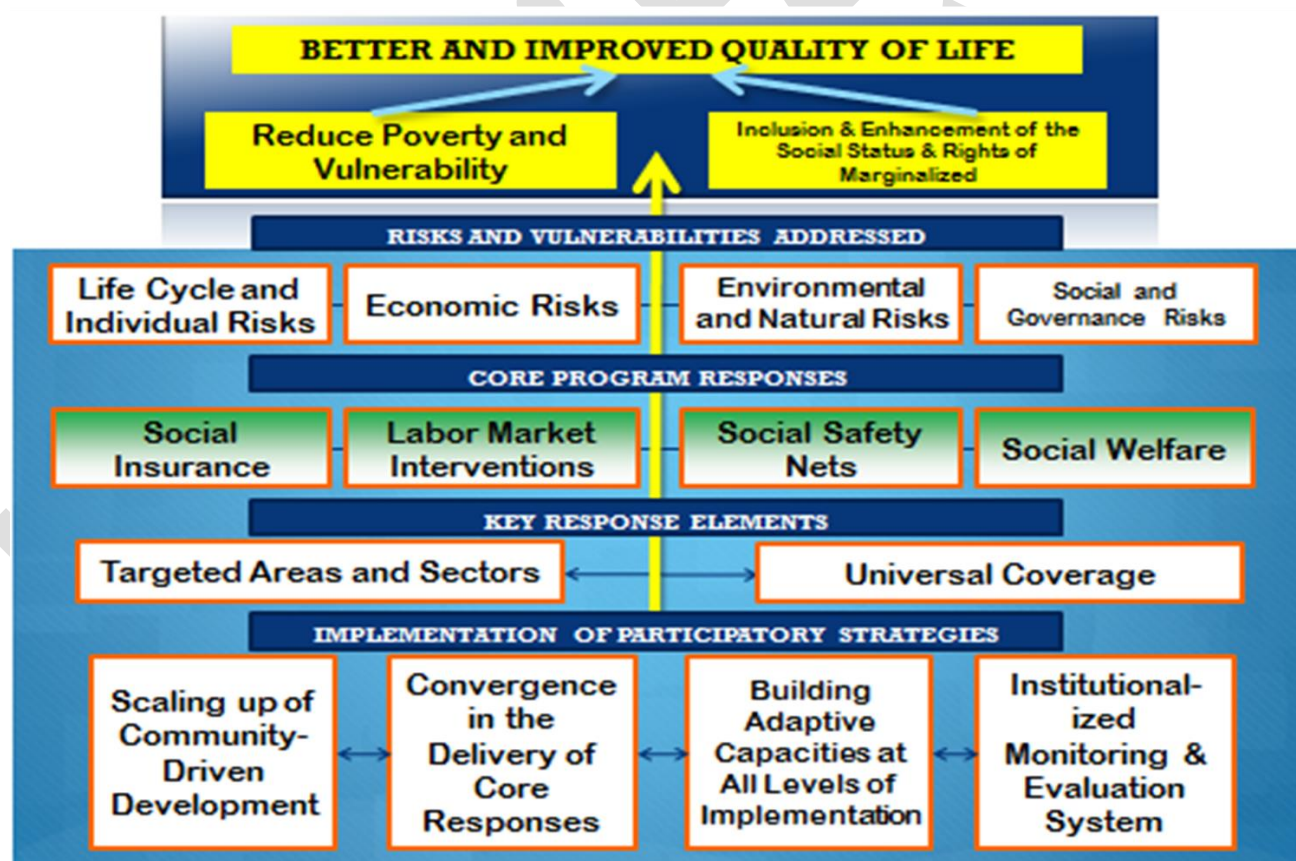
¹⁷⁹⁵ Jose Carlos Maningat, ‘Social protection in aid of corporations? The Filipino workers’ dilemma with social security’, *Asia Round-Table on Social Protection, Social Protection Discussion Paper Series*, December 20155, p. 3.

beneficiaries. It was also recommended that government should harmonize and coordinate poverty reduction in crafting interventions and strategies.

In response to these recommendations, in 2012 the Social Protection Operational Framework and Strategy was developed by a group of institutions, including NEDA, DSWD and others and approved by NEDA's Social Development Cluster. The aim of the Framework and Strategy and its accompanying Action Plan is to 'provide adequate social protection to the people in a coordinated, inclusive and effective manner.' The specific objectives of the Social Protection Operational Framework and Strategy are to: protect and prevent people from falling from their current income / consumption levels due to various risk factors; build capacity and adaptability to ensure that better quality of life is maintained and sustained; expand opportunities for income expansion and improve human capital investments in the long term; and sustain the standard of living in spite of exposure to risks of different types. The following diagram presents the aims, core response strategies and implementation strategies of the Social Protection Operational Framework and Strategy.

Table 9.10 Social protection operational framework and strategy

**SOCIAL PROTECTION OPERATIONAL FRAMEWORK
and STRATEGY
(SDC Resolution no. 3, s. 2012)**



Source: Policy Development and Planning Division, DSWD, 'The Philippine Social Protection Framework and Strategy: An Overview', 5 June 2015, presentation to Area-Based Dialogue, Makati City

The Framework and Strategy promotes the harmonization of social protection measures through mandating all Government agencies to utilize a centralized targeting system (the DSWD's Household Targeting System for Poverty Reduction) and work together to ensure universal coverage for basic

rights and services (basic education, health and nutrition, shelter, water and sanitation). It also aims to ensure the localization of converged social protection programmes through ‘bottom up budgeting’ (a process to increase the participation of the public in governance and budgeting at the local level) and the Comprehensive Integrated Delivery of Social Services Programme. However, the Framework uses a risk-based approach, according to which social protection is conceived as a tool to address risks and vulnerabilities arising from various sources. This may ‘simplify poverty reduction into a form of risk management (risk prevention, mitigation and coping without addressing its root causes.’¹⁷⁹⁶

Social protection is also explicitly included in the PDP, through its ‘reducing inequality’ pillar, which ‘aims to build the socioeconomic resilience of individuals and families by reducing their vulnerability to various risks and disasters’, through ‘universal and transformative social protection for all Filipinos.’¹⁷⁹⁷

In addition to these broad laws and policies, a range of other laws and regulations relate to various sector-specific social protection measures, for example the National Health Insurance Act of 1995 (discussed above in chapter 4) and the Republic Act 8282, the Social Security Law 1997, which sets out the benefits and entitlements of beneficiaries of the social insurance programme, and establishes the Social Security System (the corporate body) and Social Security Commission, which manage the social insurance scheme.

Key Institutions

Many Government and several private sector institutions are involved in implementing particular social protection measures, as illustrated in chart 9.11 below. In addition, several multi-sector bodies have been established to coordinate the implementation of the Government’s responses to poverty and its social protection measures at the national level.

The Anti-Poverty Commission was established pursuant to Republic act 8425, the Social Reform and Poverty Alleviation Act 1997 in order to serve as the coordinating and advisory body for the implementation of the Government’s Social Reform Agenda.¹⁷⁹⁸ The mission of the Anti-Poverty Commission is “to undertake policy advocacy, oversee anti-poverty efforts, and ensure meaningful and inclusive people’s participation in governance and nationalist development.”¹⁷⁹⁹ It has a coordination role, and coordinates with national and local government agencies and the private sector to support the implementation of all social reform and poverty alleviation programmes, and policy development. It has a particular focus on 14 ‘basic sectors’: farmers and rural landless workers; artisanal fisherfolk; Indigenous Peoples and minority communities; informal sector workers; senior citizens; persons with disabilities; women; children; youth students’ cooperatives; NGOs; and victims of calamities and disasters.¹⁸⁰⁰

The Social Development Committee of NEDA established a Subcommittee on Social Protection in 2009, which is co-chaired by NEDA and DSWD. It has a range of functions which are designed to support the implementation of the Social Protection Operational Framework and Strategy.

¹⁷⁹⁶ Jose Carlos Maningat, ‘Social protection in aid of corporations? The Filipino workers’ dilemma with social security’, *Asia Round-Table on Social Protection, Social Protection Discussion Paper Series*, December 20155, p. 4.

¹⁷⁹⁷ PDP, 11-9.

¹⁷⁹⁸ Section 5, Social Reform and Alleviation of Poverty Act 1997 (RA 8425).

¹⁷⁹⁹ National Anti-Poverty Commission, *Service charter*, available at: <http://www.napc.gov.ph/articles/service-charter>.

¹⁸⁰⁰ National Anti-Poverty Commission, *Service charter*, available at: <http://www.napc.gov.ph/articles/service-charter>

In 2011, the Human Development and Poverty Reduction Cluster was created by Executive Order of the President, as part of an initiative to cluster government institutions around five key results / objectives, one of which is “*poverty reduction and empowerment of the poor and vulnerable – to translate the gains from good governance into direct, immediate and sustainable benefits for the poor and marginalized segments of society.*”¹⁸⁰¹ According to this Executive Order, government institutions are required to engage LGUs, along with other key stakeholders, in pursuit of poverty reduction and empowerment of the poor. The Cluster is chaired by the National Anti-Poverty Commission and includes members from a range of relevant government Departments and bodies. The Human Development and Poverty Reduction Cluster has been continued under the current administration.

The current administration has demonstrated a commitment to addressing poverty, through the issuance of Executive Order 1 in 2016,¹⁸⁰² which sets out a plan for streamlining the management and supervision of key poverty-related agencies under the Office of the Cabinet Secretary.

9.3.2 Social protection programmes and systems

The beginnings of the current social protection system in the Philippines date back to the 1930s, when the Government Service Insurance System was established, replacing several existing pension schemes for Government employees. A similar pension scheme was later adopted for the private sector in the 1950s.¹⁸⁰³

Since that time, and following the adoption of several laws and policies as set out above, a plethora of social protection programmes have been developed. Many of these programmes were introduced in response to a crisis and are ‘scattered in different regions, coordinated and run by several institutions and have limited funding.’¹⁸⁰⁴ The table below sets out the key programmes in each social protection pillar (it is not intended as an exhaustive list).

Table 9.11. Illustrative list of social protection programmes

	Description	Key programme(s)
	Contributory risk mitigation strategies through pooling resources to spread risk through	The Social Security System (SSS) , and Government Service Insurance System for government employees, provides insurance for members and beneficiaries against old age, disability and death, and for women include sickness and maternity benefits. SSS covers employers, employer and self-employed as well

¹⁸⁰¹ Executive Order No. 43, ‘Pursuing our social contract with the Filipino People through the reorganisation of Cabinet Clusters’, 13 May 2011.

¹⁸⁰² Executive Order No. 1, ‘Reengineering the Office of the President towards greater responsiveness to the attainment of development goals’, 2016.

¹⁸⁰³ Global Network, *Social protection in the Philippines: A case study on the country’s social security model and conditional cash transfer program* (2010), p. 3.

¹⁸⁰⁴ ILO Philippines, *Social protection: Building comprehensive social protection floors and comprehensive social security systems*, available at <http://www.social-protection.org/gimi/gess/ShowCountryProfileBackground.action?id=453>.

Description		Key programme(s)
		<p>as farmers, fisherfolk, agricultural workers non-working spouses and househelpers.</p> <p>Philhealth, the National Health Insurance Programme (discussed above in section 4) provides a range of health benefits to beneficiaries, including inpatient care; maternity and new-born care; outpatient treatment for tuberculosis, rabies and leptospirosis; a benefit package covering certain cancers, cardiovascular surgeries, dialysis and kidney transplants; primary care benefits include screening for breast cancer and cervical cancer; and small medicines benefit.¹⁸⁰⁵ Coverage reached 93 million (92 per cent) in 2015, 61 million of whom are the vulnerable (informal economy, indigent, sponsored and senior citizens).</p>
	Direct assistance to the poor through cash and in-kind transfers	<p>The Government's flagship social welfare programme is the Pantawid Pamilyang Pilipino Program (4Ps): a conditional cash transfer programme implemented by DSWD that is aimed at reaching the poorest households. It currently reaches 4.4 million households (see below).</p> <p>A range of other social welfare programmes have been implemented, such as educational assistance programmes, National Housing Authority Programmes and individual medical assistance programmes.¹⁸⁰⁶</p>
	Risk-coping mechanisms to provide relief against economic shocks	<p>A range of programmes are implemented, including price subsidy programmes; emergency employment; and disaster management programmes, such as the DSWD cash-for-work and food-for-work measures to victims of natural disasters, and DOLE's Integrated Livelihood and Emergency Employment Programme which provides vulnerable, displaced and unemployed workers</p>

¹⁸⁰⁵ Universal Health Coverage in the Philippines- Progress on Financial Protection Goals, Policy Research Working Paper 7258, World Bank Group, p 3

¹⁸⁰⁶ Global Network, *Social protection in the Philippines: A case study on the country's social security model and conditional cash transfer program* (2010), p. 5.

Description		Key programme(s)
		with short-term employment at minimum wage, which includes a range of insurance and benefits. ¹⁸⁰⁷ Disaster relief assistance was given to an average of 59 per cent of families affected by natural and human-induced calamities between 2011 and 2015. ¹⁸⁰⁸
	Measures aimed at improving employment opportunities and worker's rights	A range of skills development programmes, self-employment support, provision of labour market information and career assistance services are implemented by DOLE. The Technical Education and Skills Development Authority provides vocational training, facilitates scholarships, develops standards and certifications. ¹⁸⁰⁹

As suggested above, the Government's **4Ps conditional cash transfer programme** is the flagship social protection measure designed specifically to provide protection to poor and vulnerable families and improve outcomes for children in these families. It is the only large-scale social protection programme that is specifically child-focused, with goals and targets aimed at improving outcomes for vulnerable children. The programme was extended following a pilot in 2007, and it now covers 4.4 million beneficiaries; it is the third largest conditional cash transfer programme in the world.¹⁸¹⁰ The programme is managed by DSWD and involves the giving of direct cash transfers to poor households on the basis that certain conditions are met; conditions relate to the health, education and nutrition of the children of beneficiaries (0–18 year olds).¹⁸¹¹ In order to receive benefits under the Programme all conditions must be met by household beneficiaries.

The 4Ps has two types of cash grants that are given out to household-beneficiaries depending on the number of children and type of grant (education or health grant). Households can receive PhP500 per household per month for complying with health conditions, including taking-up pre- and post-natal care; and ensuring children receive vaccines and health check-ups, and deworming pills (to a total of PhP6,000 every year), and an education grant of PhP300 per child enrolled in day care or elementary education and PhP500 a month per child enrolled in secondary education to a maximum of three children for 10 months of the year. The maximum total grant per household is PhP2,000.¹⁸¹²

¹⁸⁰⁷ ILO Philippines, *Social protection: Building comprehensive social protection floors and comprehensive social security systems*, available at <http://www.social-protection.org/gimi/gess/ShowCountryProfileBackground.action?id=453>

¹⁸⁰⁸ PDP p 171

¹⁸⁰⁹ ILO Philippines, *Social protection: Building comprehensive social protection floors and comprehensive social security systems*, available at <http://www.social-protection.org/gimi/gess/ShowCountryProfileBackground.action?id=453>

¹⁸¹⁰ World Bank, *The state of social safety nets* (2015); SWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>

¹⁸¹¹ DSWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>

¹⁸¹² DSWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>.

The cash grants are distributed to the household-beneficiaries through bank payments or alternative payment schemes.¹⁸¹³

To be eligible for the programme, beneficiaries must live in a poor municipality, and be living below the poverty line; households must also have children and / or a pregnant woman.¹⁸¹⁴ Beneficiaries of the 4Ps programme are selected through the National Household Targeting System for Poverty Reduction, which uses a range of indicators to identify who and where poor households are. The targeting system uses a proxy means test methodology to estimate the level of economic welfare of a household based on its socioeconomic and demographic characteristics. The Targeting System is implemented by DSWD and is used by several other government programmes to target the poor.¹⁸¹⁵

The programme is managed and implemented by an advisory Committee (under the DSWD) at the national level and through the 17 DSWD regional offices. It is supported on the ground by around 12,000 field facilitators (called municipal and city links), who work with participating households, which are organized into parent groups. LGUs have designated at least one full-time staff member to support the programme.¹⁸¹⁶

The 4Ps programme has expanded significantly since its inception. It now operates in all 17 regions in the Philippines, covering 79 provinces, 143 cities and 1,484 municipalities. As of August 26, 2015, there are 4,353,597 active household-beneficiaries, of which 570,056 are indigenous households and 217,359 have at least one person with a disability. The program also covers 10,235,658 schoolchildren aged 0 to 18, from the total registered with an average of two to three children per household.¹⁸¹⁷ In addition, the 4Ps programme covered around 4.4 million households with PhilHealth, and it has also been used to distribute unconditional cash transfers to victims of natural disasters.¹⁸¹⁸ The budget for the programme has also increased by nearly 200 per cent to PhP62.3 billion between 2011 and 2105 (which represents 0.1 per cent of GDP, 2015).¹⁸¹⁹

A two-wave evaluation of the 4Ps programme carried out by the World Bank in 2011¹⁸²⁰ and 2014¹⁸²¹ using random control trial methodology found that the programme was reaching most of its key objectives. Overall, the programme was meeting its objectives of keeping poor children in school by increasing enrolment among younger children (3–11 years) and increasing attendance among older children (6–17 year olds). The first wave evaluation found that the programme had not had a significant impact on increasing enrolment among older children aged 12–17 years. However, it was not explicitly designed to improve schooling of children above 14 years. The second wave evaluation

¹⁸¹³ DSWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>.

¹⁸¹⁴ DSWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>.

¹⁸¹⁵ Luisa Fernandez, 'Design and implementation features of the National Household Targeting System in the Philippines', *Philippine Social Protection Note*, No. 5, June 2012, p. 1.

¹⁸¹⁶ Karin Schelzig, 'Social protection brief: The social protection support project in the Philippines', *ADB Briefs*, No. 38, July 2015, p. 2.

¹⁸¹⁷ DSWD, Official Gazette, Pantawid Pamilyang Pilipino Program, available at <http://www.officialgazette.gov.ph/programs/conditional-cash-transfer/>.

¹⁸¹⁸ NEDA, *Socio-economic report* (2015), p. 58.

¹⁸¹⁹ World Bank, *Philippines economic update: Advancing the investment agenda* (April 2017), p. 18; Karin Schelzig, 'Social protection brief: The social protection support project in the Philippines', *ADB Briefs*, No. 38, July 2015, p. 2.

¹⁸²⁰ World Bank, *Philippines Conditional Cash Transfer Programme Impact Evaluation 2012* (2013).

¹⁸²¹ World Bank, *Keeping children healthy and in school: Evaluating the Pantawid Pamilya using regression discontinuity design second wave impact evaluation results* (2014).

found that the gross enrolment rate of children aged 12–15 years, however, was higher for children living near the poverty threshold who were enrolled in the 4Ps programme.

The programme was also found to be meeting its objectives of keeping poor children healthy, assisting in improving the long-term nutritional status of younger children (6–36 months), through enabling a more nutritious diet for families and helping to improve health-seeking behaviours among beneficiaries when children are ill. It also found that families who received the 4Ps programme spent more on health and education than poor families who were not enrolled in the programme, and that beneficiary households spent less on goods such as alcohol.

However, it found that there was no impact in increasing full immunization rates among children in beneficiary households. It also did not find an overall increase in per capita consumption among poor beneficiaries, though there was some evidence that poor beneficiary households were saving more. It was found that this could indicate a challenge in beneficiaries meeting and reporting on compliance with the programme's conditions, due to lack of supply of relevant services and lack of effective monitoring and reporting systems to verify compliance with the conditions (this is discussed below in the barriers and bottlenecks section).

Other programmes that have been introduced in the Philippines to increase social protection for children include Modified Conditional Cash Transfer schemes, which targets families most in need of special protection (street children, indigenous people, migrant families, families with children with disabilities, families with child labourers and those displaced by man-made or natural disasters); homeless street families and those with children under 14 whose income is below the provincial poverty threshold.¹⁸²² There are also a number of programmes to support street children, street families and Badjao, children in armed conflict and children in conflict with the law.¹⁸²³

The Modified Conditional Cash Transfer Program for Indigenous People in Geographically Isolated and Disadvantaged Areas is a pilot programme designed to overcome some barriers among IPs in accessing the 4Ps scheme, for instance, targeting challenges and enrolment barriers compounded by geographic isolation. The Programme, run by DSWD, provides the same cash benefits as the 4Ps programme, provided that the same health and education conditionalities are met (the main modification is the replacement of the Family Development Sessions with Community and Family Development Sessions which non-beneficiary community members are able to join, to discuss issues facing Indigenous communities in addition to parenting and care giving). The MCCT provides additional support services based on assessments carried out by DSWD Community Facilitators to address health, education, sanitation, and livelihood needs (e.g. through the provision of goods for farming and cash for work programmes), along with capacity building training, and activities to promote the rights and self-determination of IPs.¹⁸²⁴ A recent qualitative assessment of the Programme found that beneficiaries were generally in favour of the programme and recognised its benefits, including *“the program’s contributions to the improvement of their life situation, the education of their children, as well as the recognition it gives to their traditions and beliefs.”*¹⁸²⁵

¹⁸²² Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 87.

¹⁸²³ Child Poverty in the Philippines, Philippines Statistical Authority and UNICEF p 88.

¹⁸²⁴ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017.

¹⁸²⁵ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017.

However, problems meeting the programmes conditions, caused by a lack of services in geographically isolated areas, continued to cause access barriers.¹⁸²⁶

9.4 Barriers and bottlenecks in the social protection system

9.4.1 Enabling environment

Legal and policy framework

The effective implementation of social protection requires a strong policy and legal framework that promotes and facilitates coordination between relevant government and private sector institutions and cohesion of different programmes and measures. In the Philippines, social protection measures are delivered by a range of individual Government and private sector institutions according to their mandates, and individual measures tend to be underpinned by specific laws and policies. This lack of a joined-up and cohesive policy and legal framework has led to a lack of coordination in the implementation of social protection programmes.

While some steps have been undertaken in the Philippines to create a cohesive and coordinated framework for social protection, as set out above, challenges remain. The overarching social protection policy, the Social Protection Framework and Strategy, is a welcome effort to encourage cohesion among various actors; however, as noted above, the Framework and Strategy take a risk-based approach, which appears to minimise the conceptualisation of poverty and its causes into a series of risks, and mitigation of these risks.

Linked to this lack of cohesion in social protection is the absence of a nationally-defined universal social protection floor: a set of basic universal guarantees covering essential health care and income security for children and families. Establishing a national social protection floor would help to ensure a comprehensive system that provides essential protection for the population.

Another notable gap in the legal framework is that the 4Ps programme – the Government’s flagship social welfare programme for the poorest families – does not have legislative footing. This makes the programme more vulnerable to being scaled back or ended by unsupportive political influences. This is particularly significant given the historic opposition to the CCT programme, based on the belief that it is effectively a ‘dole out’ (though it is noted that political and public support for the 4Ps programme has increased over its life time).¹⁸²⁷ Without a basis in law, the programme could be significantly altered or scaled back without the political debates and processes that are necessary to pass an amendment to law. However, a Bill was put before Parliament in 2015 that is designed to enshrine the 4Ps programme in law.¹⁸²⁸ It should be noted though, that the risk of scaling back is reduced by the fact that the continuation and development of the 4Ps programme is contained in the PDP, which places it on the Government’s agenda for the next five years.

Governance and coordination

¹⁸²⁶ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017

¹⁸²⁷ Aniceto C. Orbeta Jr and Vincente B. Paqueo, ‘Pantawid Pamilyang Pilipino Programme: boon or bane?’ in Vincente B. Paqueo, Aniceto C. Orbeta Jr. and Gilberto M. Llanto, Philippine Institute of Development Studies, *Unintended consequences: The folly of uncritical thinking* (2017).

¹⁸²⁸ *Pantawid Pamilyang Pilipino Program Act of 2015*, filed on 16 September 2015, 16th Congress, by Recto, Ralph G.

The lack of a cohesive, joined up law and policy framework for social protection, as set out above, has led to *“a lack of...institutionalised coordination, with several departments undertaking uncoordinated and sometimes ineffective programmes.”*¹⁸²⁹ According to NEDA, in 2011, ‘there were so many uncoordinated and overlapping poverty-reduction-related programs, reflecting the lack of coordinative mechanisms among various agencies’¹⁸³⁰

This lack of coordination has also impacted on monitoring and evaluation of social protection programmes, which require unification in order to achieve economies of scale.¹⁸³¹

In addition, the mandates of the key national-level coordinating bodies, the National Anti-Poverty Commission and NEDA’s Subcommittee on Social Protection appear to overlap to some extent, causing confusion as to which areas are within the mandate of each organization. It has also been reported that the National Anti-Poverty Commission suffers from a lack of funding and capacity to carry out its mandate.¹⁸³²

The lack of coordination between different agencies filters down to the local level. For example, it has been noted that the 4Ps programme’s conditionality requirements have caused difficulties for families in accessing the required benefits. According to an Asian Development Bank publication, *“there are challenges in ensuring enough schools, full immunisation and deworming and pre—and post-natal care and delivery health facilities. Some of these challenges are related to the supply of educational and health facilities...This calls for more active coordination with the Departments of Education and Health.”*¹⁸³³ According to a report by the Philippine Institute for Development Studies, the lack of ability to put in place adequate education and health services to ensure that households could meet the conditionality requirements of the 4Ps programme has undermined its implementation. The 4Ps programme was scaled up during a time when expansion of these services was underway, but has been delayed by *“the rigid institutional structure and weak procurement system.”*¹⁸³⁴

A key informant interviewed for this study noted that:

*“The CCT won’t make any difference if you don’t have the health staff there to give the medical attention. It’s really dependent on synchronization and funding across the agencies, and this is not always in place.”*¹⁸³⁵

According to a recent assessment of the Modified Conditional Cash Transfer Programme for IPs, lack of health and education services in geographically isolated areas created a barrier to compliance with the Programme’s conditions. Within 30 study sites, researchers identified *“geographically isolated areas within the geographically isolated barangay[s],”* with health and education facilities located in

¹⁸²⁹ Karin Schelzig, ‘Social protection brief: The social protection support project in the Philippines’, *ADB Briefs*, No. 38, July 2015, p. 1.

¹⁸³⁰ Celia M. Reyes and Aubrey D. Tabuga, Philippine Institute for Development Studies, ‘The Conditional Cash Transfer Programme in the Philippines: Is it reaching the extremely poor?’ in *PIDS Discussion Paper Series No. 2012-42* (2012).

¹⁸³¹ ILO Regional Office for Asia and the Pacific, *Social protection in Asia: Philippines*, 2015, p. 1

¹⁸³² Celia M. Reyes and Aubrey D. Tabuga, Philippine Institute for Development Studies, ‘The Conditional Cash Transfer Programme in the Philippines: Is it reaching the extremely poor?’ in *PIDS Discussion Paper Series No. 2012-42* (2012).

¹⁸³³ Karin Schelzig, ‘Social protection brief: The social protection support project in the Philippines’, *ADB Briefs*, No. 38, July 2015, p. 3.

¹⁸³⁴ Celia M. Reyes and Aubrey D. Tabuga, Philippine Institute for Development Studies, ‘The Conditional Cash Transfer Programme in the Philippines: Is it reaching the extremely poor?’ in *PIDS Discussion Paper Series No. 2012-42* (2012).

¹⁸³⁵ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

the most densely populated parts of the barangays, limiting access by children and families to facilities that are essential for compliance with the programme's conditions.¹⁸³⁶

The implementation of other social welfare programmes is impacted by the devolved structure of governance in the Philippines (this is in contrast to the 4Ps programme, which is operated at the national level). According to this structure, social welfare services are implemented at the local (LGU) level, and there is a lack of monitoring of LGU's performance in implementing social protection (and other social welfare) measures, and lack of coordination between LGUs.¹⁸³⁷

It also appears that there is a lack of connection between the social protection and child protection systems at all levels. Child protection services are not well connected to the wider social protection policy framework and agenda, and social welfare services targeting children and vulnerable families appear to be fragmented across social protection and child protection systems and programmes.¹⁸³⁸ As explored above (chapter 7), poverty is linked to experiences of particular forms of violence and child protection risks, and it is important to link the systems designed to address these risks and vulnerabilities.

Budgeting and finance

While the Government budget for social protection has expanded in recent years mainly as a result of the expansion of the 4Ps programme and health care for the poor, it is still below the regional average. According to the ILO's World Social Protection Report in 2014/15, the Philippines spent just under four per cent of its GDP on social protection, which was up from 2.9 per cent in 2009 (the majority of this was spent on healthcare and social protection for elderly persons). This is less than half of the regional average (Asia), which was seven per cent of GDP and was well below the OECD average of 21 per cent.¹⁸³⁹ In 2015, the World Bank reported that only 0.57 per cent of GDP in the Philippines was spent on social welfare programmes (programmes targeting the poor), and 0.4 per cent of this was attributed to the 4Ps programme.¹⁸⁴⁰

The Asian Development Bank's Social Protection Indicator, which is a measurement of social protection spending and recipients (calculated by dividing the total expenditure on social protection by the total potential beneficiaries of social protection and comparing this with GDP per capita), found (in 2012) that the Philippines ranked fairly low in terms of the coverage and depth of social protection, as illustrated in the chart below. The Philippines had a Social Protection Indicator of 2.2, which was below that calculated for the South-East Asia region (2.8).

Table 9.12. Social protection indicator (ABD) in South East Asian countries, 2012

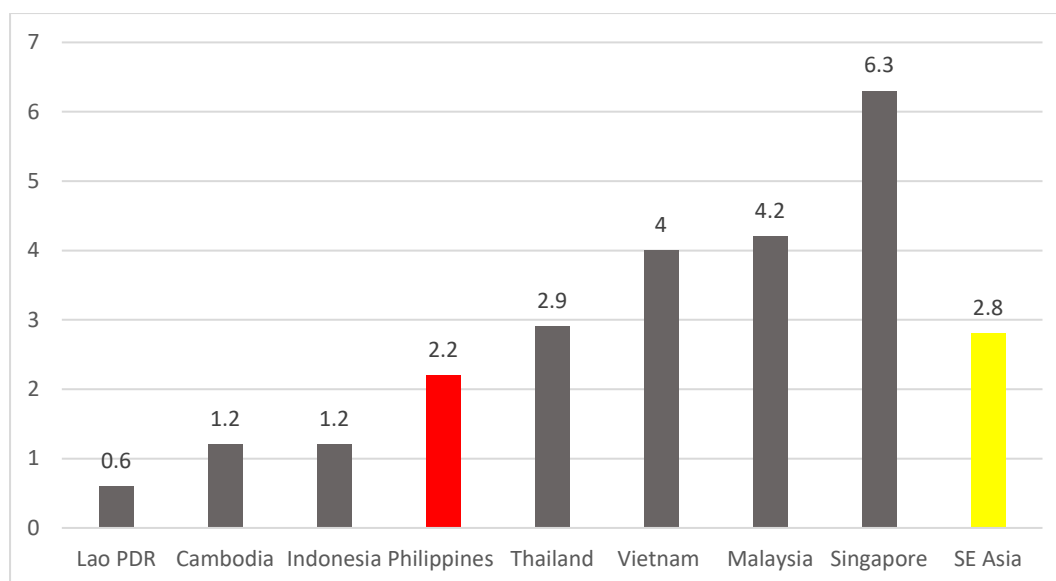
¹⁸³⁶ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017

¹⁸³⁷ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

¹⁸³⁸ ILO, Child protection and social protection: Social protection must be regarded as one element in a broad strategy aimed at ensuring protection of children, PowerPoint, 5 June 2015, available at:

¹⁸³⁹ OECD, *A decade of social protection development in selected Asian countries* (2017), p. 55.

¹⁸⁴⁰ World Bank, *The state of social safety nets* (2015)

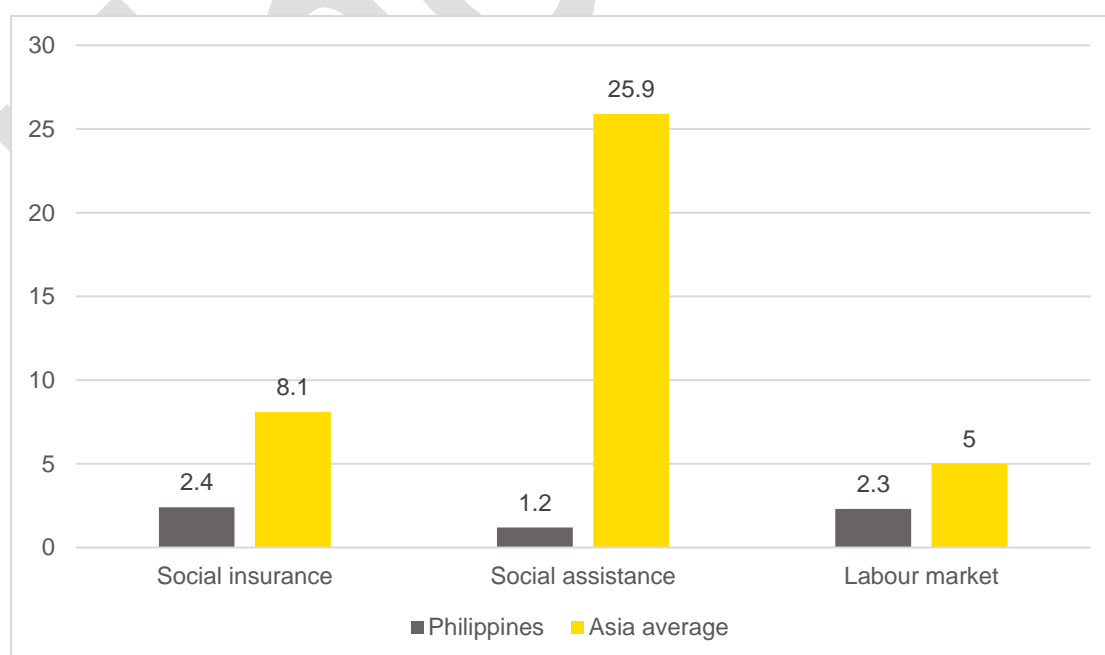


Source: Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*

This indicates that funding for social protection is still lacking and lagging behind the regional average, despite increases in recent years.

It appears that the limited spending on social protection has impacted heavily on the depth (i.e. average benefits received by actual beneficiaries). As indicated in the chart below, the depth of benefits in the Philippines is considerably below the regional average for Asia particularly in terms of social welfare measures (which are programmes aimed at the poor and vulnerable). This indicates that the level of benefits received by beneficiaries may not be sufficient to ensure that they are lifted out of poverty.

Table 9.13. Depth social protection indicator (ADB) by type of programme, 2012



Source: Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*

The level of benefits received by recipients of the 4Ps programme has been questioned for being possibly too low. The amount of the cash grant received has not changed since the start of the programme in 2008, and so has not been adjusted for inflation. The cash grant was calculated with reference to the distance of the poor from the basic needs poverty line. When the programme began, the amount of the grant was about 20 per cent of the poverty line, but, allowing for inflation, it is now worth less – around 15 per cent of the poverty line.¹⁸⁴¹ This likely limits the impact of the programme in responding effectively to poverty, and limits the ability of families to increase consumption (as was found in the evaluations mentioned above) or be cushioned against shocks (though, according to the evaluations mentioned above, the programme had led to families in some areas being able to save).

Lack of data and data utilisation

Lack of data and lack of data use continues to pose a challenge to the effective design of policies and targeting of resources to address poverty. Lack of data on the non-income dimensions of poverty has been noted, partly as a result of lack of horizontal systems of information flow between different Government institutions; this is a particular issue for the design and implementation of cross-sector/integrated programmes.¹⁸⁴²

“The problem is, normally we just look at income deprivation – not other aspects of deprivation: housing, access to social services etc. In terms of deprivations, there are different studies of different line agencies, but nothing bringing it together.”¹⁸⁴³

A recent report by Asian Development Bank highlighted limitations and challenges in vertical and horizontal information flows that limit the ability for the Government to use data to inform programme and policy development: ‘in the current state of information flows, the LGUs often do not use statistics generated by the national agencies; they either fail to collect data from their constituents or the data collected are unreliable.’¹⁸⁴⁴

Poverty is a multi-sector issue, and lack of harmonisation and sharing of data between Government agencies is also a key barrier to ensuring a complete understanding of poverty and deprivation, and to effective evidence-based policy development and programming.

Ensuring effective monitoring and evaluation of programmes is also a challenge that can lead to inefficient use of resources (though it is noted that the 4Ps programme is being subjected to robust monitoring and evaluation). According to a key informant from the DSWD, *“monitoring is a big problem. Here we tend to implement programme after programme but the quality is not good. There is vast data out there but no one uses that data to aid decision making and policy making.”¹⁸⁴⁵*

Lack of disaggregated data that highlights the equity dimensions of poverty is also a gap. As noted above, there is very limited data on poverty among particularly marginalised groups, including persons with a disability, IPs, urban poor etc. This limits the understanding of poverty and experiences of deprivation among already marginalised groups and impairs the ability to target effective policy and programming interventions that respond to their needs.

¹⁸⁴¹ NEDA, *Socio-economic report (2015)*, p. 58.

¹⁸⁴² Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities (2009)*, p. 14.

¹⁸⁴³ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

¹⁸⁴⁴ Asian Development Bank, *Poverty in the Philippines: Causes, constraints, opportunities (2009)*, p. 14.

¹⁸⁴⁵ Interview with representatives of Protective Services Bureau and Standards Bureau, DSWD, 16 June 2017, Manila.

9.4.2 Supply barriers

Human resources

A shortage of human resources at the local level also appears to have impeded the delivery of social protection services to families and communities. The 4Ps programme, along with several other social welfare programmes, are implemented by DSWD and through LGUs (though as noted, the 4Ps programme is operationalised at the national level). This has led to uneven delivery of social welfare services at the local level, due to the lack of monitoring of implementation of programmes at the local level and the low resources and capacity of LGU staff in some areas.¹⁸⁴⁶

There is a shortage of social workers in LGUs, and a lack of capacity and skills at the local level, as illustrated by two key informants from the DSWD who were interviewed as part of this report:

“The LGUs– they are inadequate. Even the people who are working, you will go to one LGU who only have on social welfare officer doing everything from womb to tomb. You would even see local social welfare offices headed by non-social workers, because of political favours and nepotism.”¹⁸⁴⁷

Gaps in specialist knowledge and skills (knowledge and skills required to work effectively with children; gender sensitivity etc.) were reported to be a bottleneck to the effective delivery of social welfare services by a group of key stakeholders at a validation workshop to inform this report. Stakeholders who participated in the workshop also noted the lack of partnerships and coordinated working between LGUs and civil society service providers at the local level. A more joined up approach between Government and civil society service providers could improve the range and quality of services and help to ensure coordinated and effective service delivery to vulnerable children and families.

The 4Ps programme has also faced challenges due to limited staff at the local level to implement the programme. As noted above, there is one Municipal or City Link officer at LGU level (a social welfare officer or nurse), and they are required to manage 800 households on average, and this number can go up to 1,200 households. This creates considerable difficulty in ensuring that compliance with the programme’s conditions are monitored effectively, and in carrying out necessary case work (coordination, carrying out family development sessions etc.).¹⁸⁴⁸ According to a key informant interview, the Government is imposing a benchmark that the 4Ps programme is unable to go over eight per cent of expenditure on operational costs; therefore while more staff are needed to ensure that it is implemented properly, DSWD are unable to recruit any more as the operational costs of the programme are already at eight per cent.¹⁸⁴⁹

Operational issues

Operational issues have also impacted on the effective implementation of social protection measures. The targeting of social protection measures to the poorest and most vulnerable is impeded by lack of an effective system, or, where it is utilised, challenges in the Household Targeting System methodology. The Household Targeting System, developed primarily to support the 4Ps programme, has been heralded as an effective and objective system for identifying those most in need of social

¹⁸⁴⁶ Interview with representatives of Protective Services Bureau and Standards Bureau, DSWD, 16 June 2017, Manila.

¹⁸⁴⁷ Interview with representatives of Protective Services Bureau and Standards Bureau, DSWD, 16 June 2017, Manila.

¹⁸⁴⁸ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

¹⁸⁴⁹ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

protection measures.¹⁸⁵⁰ However, it uses a series of proxy indicators in order to carrying out means testing (e.g. household consumption, education of household members, housing conditions etc.). The test assumes that a beneficiary is living in a dwelling, as the calculations are based, in part, on the condition of the house etc. This has led to the exclusion of homeless persons and many IPs, as illustrated by a key informant:

“The proxy means test requires a house...it’s calculated on the basis of what materials your house is made from etc. So this excludes homeless persons and many IPs – they were not initially included in the programme as they can’t provide answers to questions about their housing.”¹⁸⁵¹

These challenges led to the development of the Modified Conditional Cash Transfer Programme which specifically targets the most vulnerable members of society that may be excluded from the 4Ps programme (homeless, IPs etc.). However, at this stage, this programme is only a pilot.

There have also been challenges in ensuring compliance with the programme’s conditions. The compliance data relies on other institutions – schools, health facilities – having the capacity and motivation to monitor compliance of programme beneficiaries, and they may lack the capacity and personnel to do this effectively.¹⁸⁵²

9.4.3 Demand-side barriers

Geographic isolation

Children and families in geographically isolated areas experience barriers to enrolment in social protection programmes and in meeting conditions of the 4Ps and MCCT programmes (as set out above). According to a recent assessment of the MCCT for IPs, one of the reasons families were not able to access the MCCT was that their household was *“too far away to be visited by the listing team,”* which enrol beneficiaries onto the programme.¹⁸⁵³ Physical barriers also resulted in delays and lack of regularity in beneficiaries receiving cash payments: *“getting to the payout venue from their places of residence involves major effort on their part because of the distance and the terrain.”¹⁸⁵⁴*

Coverage and equity issues

Overall, social protection in the Philippines benefits the non-poor (though this may change with the expansion of the 4Ps programme). According to the ABD’s social protection indicator, the expenditure and coverage of social protection is mainly attributed to social insurance measures, which are largely limited to the non-poor (primarily consisting of contributory schemes for formal sector workers).

¹⁸⁵⁰ Luisa Fernandez, ‘Design and implementation features of the National Household Targeting System in the Philippines’, *Philippine Social Protection Note*, No. 5, June 2012, p. 1.

¹⁸⁵¹ Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

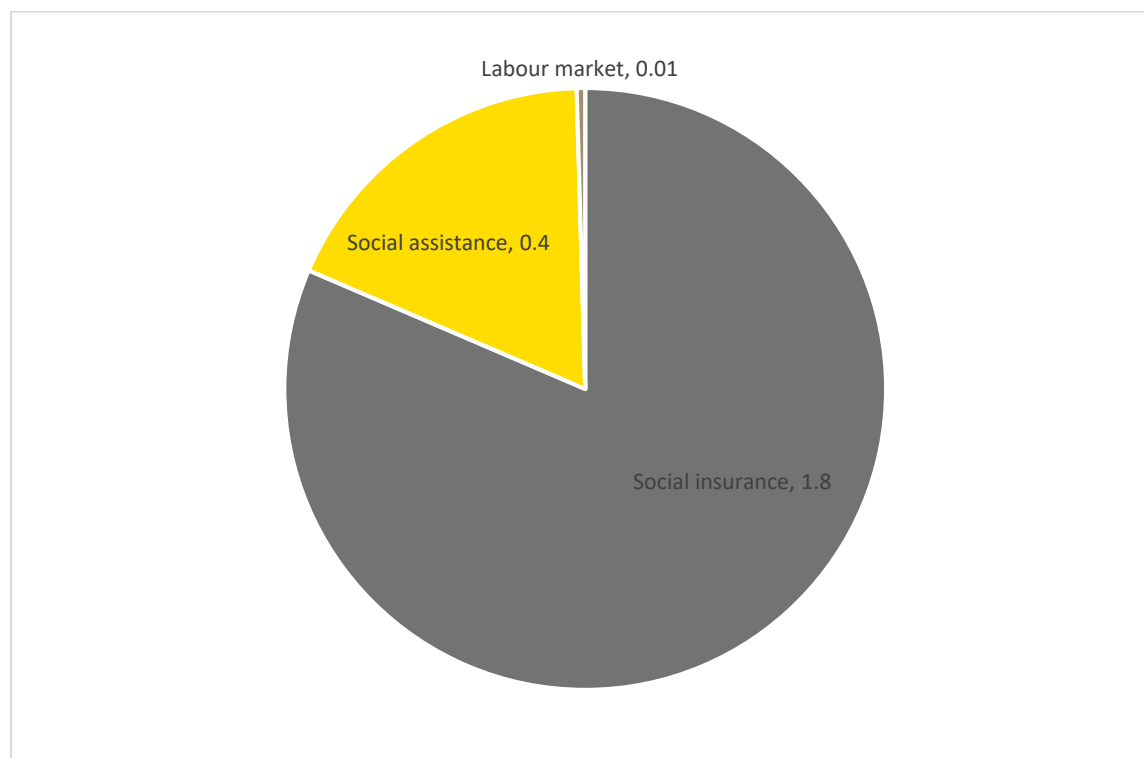
¹⁸⁵² Interview with Social Policy Team, UNICEF Philippines, Manila, 13 June 2017.

¹⁸⁵³ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017.

¹⁸⁵⁴ Population Institute, College of Social Sciences and Philosophy, University of the Philippines, *Assessment of the Modified Conditional Cash Transfer Programme for Indigenous Peoples in Geographically Isolated and Disadvantaged Areas*, June 2017.

As illustrated in the chart below, social insurance measures accounted for 1.8 of the total social protection indicator – far greater than social assistance (0.4) and labour market programmes (0.01) in 2012.

Table 9.14. Social protection indicator for type of social protection measure, 2012



Source: Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*

Social insurance covers around 34 per cent of the population, though informal sector workers (many of whom are poor) and IPs have very limited access to these programmes.¹⁸⁵⁵ Also, social insurance measures benefit more men than women: the ADB Social Protection Indicator for men is higher than it is for women (1.3 compared to 1.0).¹⁸⁵⁶ As examined above, women have less access to formal employment opportunities, and are therefore less likely to be enrolled in social insurance schemes.¹⁸⁵⁷

It also appears that the poor are not the main recipients of social protection measures. The ADB Social Protection Indicator shows that social protection measures benefit the non-poor more than the poor (the Social Protection Indicator for non-poor was 3.7 and for the poor was only 0.5, based on data from 2012).¹⁸⁵⁸ It was also reported by the World Bank in 2015 that only 35 per cent of the poorest quintile received any social safety net transfer.¹⁸⁵⁹

¹⁸⁵⁵ ILO Regional Office for Asia and the Pacific, *Social protection in Asia: Philippines*, 2015, p. 1

¹⁸⁵⁶ Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*, p. 116

¹⁸⁵⁷ See also Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*

¹⁸⁵⁸ Asian Development Bank, *The social protection indicator: assessing results for Asia (2016)*, p. 115

¹⁸⁵⁹ World Bank, *The state of social safety nets (2015)*

10. Conclusions and implications for policy and practice

This report has demonstrated that, while the Philippines has shown good progress in securing children's rights in a number of areas, in other areas, progress has been slow and many children continue to be exposed to significant rights violations and an inability to thrive and achieve. Despite a strong commitment to improving children's outcomes, as evidenced by the generally robust and comprehensive law and policy frameworks relating to children, and despite overall strong economic growth and development in recent years, improved outcomes for children have not kept pace.

What is perhaps most striking is the *uneven* performance of the Philippines in meeting children's rights and key development targets – results remain starkly uneven by geographic area and in terms of particular groups of children: children from poor families, children living in rural locations and informal urban settlements, children affected by armed conflict and natural disasters, children with disabilities and children from Indigenous communities were found to have considerable gaps in their access to services and achievement of outcomes in health, nutrition, education, WASH and social welfare.

Economic growth in the Philippines has not been inclusive, and it has not lifted the most vulnerable and deprived out of poverty or improved their outcomes. Entrenched inequalities exacerbated by armed conflict and natural disasters have delayed the country's ability to fulfil children's rights and meet relevant development targets. In order to improve the situation of children in the Philippines and ensure that the country is on course to meeting its development targets, it is essential that these inequalities are addressed.

Inequalities have been exacerbated by the impacts of conflict and disasters in the Philippines. The exposure of the country to natural disasters and the enduring conflicts across the country, particularly in ARMM, have resulted in grave human rights violations against children and slowed development in parts of the country, leading to limited economic opportunities, difficulties delivering social services (including education, WASH, health and social welfare services), and fuelling high levels of poverty and deprivation. This has led to particularly poor outcomes for children in conflict-affected areas.

The analysis found a number of gaps, barriers and bottlenecks that are at the core of the Government's uneven performance in ensuring that children's rights are protected, respected and fulfilled. These issues appear to have a cross-cutting effect, negatively impacting the different Government sectors that work to improve outcomes for children, and impeding the ability of the multiple laws, policies, programmes and initiatives to have a real and measurable impact on children. These key findings have important implications for policy and practice. These implications are set out below under the relevant findings, and could be used to inform and guide future policy and planning relating to children in the Philippines and the development of more concrete and specific recommendations for action. In order to ensure that the implications drawn from the study's findings are relevant and responsive to the Philippines context, researchers sought inputs from groups of key experts and stakeholders during validation workshops that took place in Manila in August 2017.

The implications drawn out below represent a convergence of the authors' own analysis, and inputs from these groups of key stakeholders and experts.

10.1 Enabling environment

A strong enabling environment, includes a comprehensive law and policy framework; the provision and adequate financing of services for children; social-cultural norms that are supportive of children's rights; and the availability and use of a solid evidence base. Robust data collection and reporting systems are essential to enable effective planning and targeting of resources for children and families, for promoting children's rights and for improving outcomes for all children. The study found considerable gaps in the existence of an enabling environment for children.

10.1.1 Gaps in law and policy frameworks

It has been noted throughout the report that, generally, laws and policy frameworks in the Philippines are comprehensive and supportive of children's rights. Barriers and bottlenecks to the protection and fulfilment of children's rights tend to impede the *implementation* of laws and policies, rather than stemming from gaps in the law and policy framework itself.

However, there are nonetheless a number of gaps and challenges. Criminal laws are not sufficiently comprehensive, which reduces the legal protection to children against violence: corporal punishment is not prohibited; the law contains a very low age of sexual consent (12 years); and criminal responsibility for rape may be expunged if a perpetrator subsequently marries the victim. In addition, the law does not recognise that boys can be victims of rape.

Other laws have had the effect of restricting access of children and adolescents to basic services. Laws do not always recognise the evolving capacities of children and do not accord them the right to independent access to services, including, for example, sexual reproductive health services (independent access to sexual reproductive health services and products is restricted to those over the age of 18).

Legal and policy frameworks in some areas appear to be quite fragmented and issue-specific, which impedes the cohesive and cooperative working needed to address children's issues comprehensively and holistically. Child protection and social protection systems, for instance, are fractured into a set of issue or programme-specific laws and policies. This lack of a joined-up and cohesive policy and legal framework has led to a lack of coordination in the implementation of social protection and child protection programmes.

It is also clear that the fragmented and issue-specific approach in sectors that are relevant to children has resulted in a lack of focus on and inability to respond effectively to the multi-faceted needs of particularly vulnerable or marginalised groups of children. In particular, insufficient attention has been given the particular needs of Indigenous children, children with disabilities, urban poor, and adolescents.

In addition, it was found that there is insufficient capacity and priority afforded to effective planning for implementation of laws and policies. Too often, policies and laws have remained largely 'on paper', as insufficient attention or effort is made to ensure that essential systems, frameworks and finances are in place to ensure that a law or policy is able to be implemented effectively.

➤ **Implications for policy and practice (law and policy frameworks)**

- There is a need to review and amend criminal laws to ensure that they provide comprehensive protection against all forms of violence against children and that they provide equal protection to boys and girls;

- A robust review/assessment system should be developed to ensure that all new laws and policies are child-sensitive, responsive to the gender dimensions of children's issues and sensitive to the needs of particularly vulnerable groups of children – this system should include avenues for meaningful child and youth participation;
- There is a need to build capacity and improve planning at the stage of formulating laws and policies relating to children: financial planning, allocating necessary resources, ensuring structures are in place, including proper accountability mechanisms, effective monitoring systems and the provision of training for those who will be responsible for delivery of the new policy or law, etc.;
- There is a need to consolidate the multiplicity of laws relating to children into one piece of legislation (e.g. a 'Magna Carta for Children'). In particular, there is a need to develop a comprehensive law and policy framework setting out the child protection system, and ensuring a move away from an issue-specific and fragmented approach to child protection;
- A legal review should be carried out to ensure that there are no barriers to children's and adolescent's independent access to services, and that law recognizes the evolving capacities of children and their ability to consent to receiving services and interventions.

10.1.2 Governance and coordination challenges

Strong institutions, good governance practices and robust frameworks for cooperation at all levels are essential in ensuring that laws and policies are implemented effectively and that they are translated into improved outcomes for children. Unfortunately, weak institutions, poor cooperation and poor governance were found to be key bottlenecks to the fulfilment of children's rights across all sectors. The study found that delivery of basic services to children is hampered by poor governance, with corruption, misallocation of resources, political instability, and uncoordinated government agencies as some of the key governance challenges.

10.1.3. Lack of horizontal coordination

Providing services for children that are comprehensive and effective requires a coordinated effort across multiple agencies, and also effective coordination across different levels of government. The report found that, across the board, a lack of coordination between sectors and agencies at all levels of government has caused challenges in delivering essential services to children and families.

Insufficient cooperation and coordination between government sectors and agencies has also resulted in insufficient attention being paid to multi-sector issues, and a limited ability to address the needs of children in a holistic and comprehensive manner – e.g. addressing determinants of health; responding to the social aspects of poor nutrition and so on.

While there have been some good attempts to coordinate sectors better and foster more 'joined up' working between sectors, oversight or coordination bodies tend to suffer from a lack of capacity and poor funding and have been hampered by the difficulty in stepping out of a culture of 'silo working.' Further, the multiplicity of formal structures, including coordination and oversight bodies, and lack of clear demarcation between these bodies, has caused confusion, overlaps and gaps. The lack of coordination between government agencies at the top level has filtered down and caused challenges at the local level, impeding the effective delivery of comprehensive services for children and families.

10.1.4. Impacts of devolution and lack of vertical coordination and integration

The report found that the devolved governance structure in the Philippines has created a key bottleneck to the full realisation of children's rights, with a negative impact on the quality of service delivery to children and families. Particularly in areas that are devolved to LGUs pursuant to the LGU Act 1991 (including health, WASH, ECCD and child protection), a lack of coordination and vertical integration has caused fragmentation problems, impairing effective service delivery.

National level policies and laws are generally not effectively disseminated to the local level and have been inconsistently interpreted and applied at the local level. Limited technical and human capacity at the local level has left LGUs struggling to implement laws, policies and programmes for children. Moreover, policies and programmes, even those within the same sectors (health, social protection, WASH) are being implemented at different levels of government. These different programmes are not generally well coordinated across the different levels of government, once again causing overlaps, inconsistencies and gaps.

Weak supervision and monitoring of LGUs and weak accountability mechanisms has also created a barrier to the provision of quality services for children and families.

Devolution has also entrenched inequalities: LGUs are heavily reliant on internal revenue allotment and internal revenue is allocated to LGUs on the basis of land mass and population rather than according to need-based calculations (e.g. according to levels of poverty and deprivation of services). This has meant that well-resourced areas with strong LGUs are in a better position to provide comprehensive services, but that LGUs with more limited budgets may opt not to prioritize social services for children and families, and may lack the resources and technical capacity to implement these services.

10.1.5. Other governance challenges

The report has found that a range of other governance challenges, including corruption, financial mismanagement and a lack of oversight and accountability mechanisms, has limited the ability for the Government to provide quality services to children and families.

➤ **Implications for policy and practice (governance and coordination)**

- It is necessary to improve coordinated working between different government agencies on issues and programmes relating to children. In particular, there is a need to complete a review of the multiple oversight and coordinating bodies relating to children and children's issues, and to streamline and harmonise multi-sector work across all areas. It would be helpful to ensure that the national oversight body for issues relating to children – the Council for the Welfare of Children – is sufficiently resourced and empowered to encourage effective, cooperative working among the different Government agencies and sectors in issues relating to children;
- There is a need for national and regional agencies to provide the necessary support and capacity development to ensure that all LGUs are able to implement government laws, policies and programmes targeting children and families effectively. In order to achieve this, it is necessary to ensure that DILG and the relevant line Ministries have the mandate, power and resources to support LGUs in implementing laws, policies and programmes for children and families;

- There is a need to improve oversight and accountability mechanisms for LGUs to ensure that there are strong incentives for delivering effective, quality services for children and families and for achieving key targets in outcomes for children. Targets could be linked to the SDGs;
- Improved transparency and accountability mechanisms are also necessary to tackle corruption and financial mismanagement, and ensure the appropriate, efficient and effective use of resources toward improving outcomes for children;
- Consideration could be given to changing the Inland Revenue Allocation formula so that it is focused on need, in order to help reduce disparities in resources across LGUs and to help reduce inequalities in outcomes for children.

10.1.6 Budgeting and finance

A well-resourced social services sector and efficient public finance management systems are essential to ensuring that laws, policies and programmes aimed at fulfilling children's rights are able to be implemented effectively. However, the report found that social sector financing in the Philippines is fragmented, often with insufficient government investment and high inequity, making this a core bottleneck to the fulfilment of children's rights.

Budget for social services for children and families

A fundamental barrier to fulfilling children's rights and ensuring good outcomes for children in the Philippines is the inadequate financing allocated to essential sectors. Health, social welfare / social protection, WASH (especially sanitation) and ECCD, in particular, are sectors / services in which budget allocations are inadequate and well below regional averages. Moreover, lack of analysis and publication of a children's budget (total government spend on children) has resulted in limited transparency and accountability for adequate funding of children's services and programmes.

The devolved governance structure, within which many social services are budgeted for and provided at the local level by LGUs, has led to wide disparities in spending on social services. At the local level, funding for services for children and families is dependent on local Chief Executives, and the level of funding for devolved or partially-devolved sectors and services, including health, nutrition, WASH, child protection and social protection, is highly variable. The disparities in budgets for social services among LGUs is compounded by the IRA allocation formula mentioned above, through which IRA funding for LGUs is not assessed according to need. Also, insufficient supervision of LGU spending has made it difficult to ensure accountability for public expenditure on particular services and programmes.

Budget utilisation and public finance management

There have also been challenges in utilising social sector allocations, due to strict procurement rules and (in the education sector) centralised procurement systems, which are slow. This has resulted in the failure to ensure the supply of essential services (schools, school supplies, WASH supplies and infrastructure, health facilities and supplies and social welfare and child protection services), and inadequate responses to emergencies. This is compounded by the fact that Government agencies at all levels (particularly LGUs) lack the technical skill and human capacity to ensure sound public finance management. Policies and programmes are often not properly costed, which inevitably impairs their effective implementation.

Concerns over financing in some sectors (e.g. health) has had implications in relation to emergency preparedness and the extent to which social services sectors are able to respond to and finance vital services during emergencies.

➤ **Implications for policy and practice (budgeting and finance)**

- There is a need to increase government spending in the social sectors (particularly health, nutrition, WASH, child protection and social protection) to ensure that quality services are available to meet demand;
- It is suggested that a 'child budget' be presented by government at all levels to ensure transparency and improve accountability for public spending on services and programmes for children and families. Alternatively, it is suggested that social audits of budgets be carried out by independent bodies. These initiatives could take place in the context of existing mechanisms (e.g. the Gender and Development plans and budgets);
- There is a need to build capacity and skills at all levels of government for improved public finance management and planning;
- There is a need to improve oversight and accountability mechanisms of public spending by LGUs;
- It is suggested that a robust review of the Procurement Law be carried out and recommendations made for reform to improve efficiency of public finance systems, while retaining transparency and anti-corruption safeguards. It is suggested that special procurement rules be adapted to ensure that procurement challenges do not undermine the ability for relevant agencies to respond swiftly in the event of emergencies.

10.1.7. Lack of data and ineffective use of data

Robust data collection and monitoring systems, and effective analysis and use of data is important in ensuring that government priorities are well informed, and that policies and programmes are effectively designed and targeted. The report demonstrates that there are significant challenges in the Philippines in the operation and quality of data collection systems and problems ensuring that available data is properly used to inform programmes and policies.

The report identified limitations and challenges in vertical and horizontal information flows that limit the ability for the Government to use data to inform programme and policy development. National and local information systems are poorly integrated and weakly governed, leading to data gaps, redundancies and duplications. There are also unclear accountabilities for data collection at all levels of government.

There appears to be a lack of horizontal information sharing, with data collection systems existing in sector 'silos', leading to an inability to track children through the relevant systems. This has also resulted in an inability for government to use integrated, comprehensive data to gain rounded understandings of issues: e.g. the social determinants of health; social aspects of nutrition; non-income dimensions of poverty and so on.

The key underlying challenge with data collection, management and use is a lack of clear accountability within government for 'data' and therefore an absence of a government framework for overall leadership, quality control and oversight of government generated data. Data collection and management is highly fragmented, and this has undermined the quality and use of data.

In addition, there is a lack of proper monitoring and evaluation of programmes, leading to inefficient targeting of resources and a culture of failing to utilise the data that do exist.

Across all sectors, there is a lack of disaggregated data in particular on the situation of vulnerable children, including children in conflict with the law, children in need of child protection services, children with disabilities, IPs and children living in informal urban settlements in particular. This has made the needs of these already marginalised groups of children invisible and has led to gaps in policies and programmes that respond to their unique needs.

➤ ***Implications for policy and practice (data collection and use)***

- There is a need to carry out a holistic assessment of data collection systems in the Philippines in order to identify how to better ensure horizontal and vertical integration of systems and identify gaps in data relating to children – this assessment should include consideration of the extent to which current systems capture data relating to particularly marginalised or vulnerable groups of children;
- It is important to ensure that a plan for addressing challenges in data collection and management is developed, and that an adequate budget is available to implement the plan;
- It is important to improve accountability and oversight mechanisms for data collection and reporting, particularly at the local level – incentives or sanctions could be attached to data submission requirements;
- It is important to ensure that issues relating to particularly vulnerable groups of children are captured in survey and administrative data;
- There is a need to mandate an agency to have responsibility for managing and oversight of data collection relating to children;
- There is a need to improve freedom of information and open data access.

10.1.8. Socio-cultural norms and practices

Social and cultural norms can support or impede the realisation of children’s rights. The report found that a number of ways that social-cultural norms have created a barrier to the full realisation of children’s rights in the Philippines. Certain norms impact on violence against children: the acceptance of corporal punishment as a disciplinary measure was found to support physical violence against children. Social and cultural norms that place women in a subordinate position to men can fuel violence against women and children. Stigmatisation of violence, particularly sexual violence, can lead to under-reporting and lack of access to justice for victims.

Social and religious norms also play an important role in determining health and nutrition outcomes in the Philippines. For example, conservative socio-religious norms that stigmatise sexual activity among young unmarried people were found to have a significant restrictive impact on access to family planning services, by suppressing demand among adolescents and leading service providers to deny access. Norms relating to gender roles that require women to take full responsibility for household duties and childrearing can impact on children’s nutritional outcomes in a context in which women are increasingly likely to be engaged in paid work outside the home, but in which their household ‘responsibilities’ have not lessened.

Social norms relating to gender roles and expectations have also negatively impacted on educational outcomes for boys.

➤ **Implications for policy and practice (socio-cultural norms and practices)**

- It is important that policies and programmes be developed or strengthened which focus on addressing socio-cultural norms and practices that impede the full realisation of children's rights;
- The role and impact of social norms and practices on children's rights and outcomes needs to be better understood: it is important that research be carried out examining these norms and practices and drawing out lessons on how to address norms and practices that impair the realisation of children's rights.

10.2 Lack of supply of services to meet basic needs

The adequate supply of quality services for children and families, including education, health, WASH, child protection and social protection measures and services, is essential in ensuring that the Government meets its obligations to fulfil the range of children's rights. In the Philippines, however, lack of Government spending on social services, including health, nutrition, child protection, social protection, education and WASH has led to a lack of supply of essential services for children, especially in rural and remote areas. Inadequate supply of human and other resources has led to a failure to ensure basic services for children are delivered. The supply of services is hampered in most sectors by the fragmentation problems stemming from the devolved governance structure and lack of vertical integration in service delivery.

10.2.1. Human resources

A shortage of quality, trained professionals at the local level has impaired the delivery of social services to children and families. In some sectors, significant shortages of particular types of professionals (e.g. doctors, dentists and psychologists; social workers who specialise in the delivery of services to children and families; qualified childcare workers) across the country has impaired the quality of service delivery. Ratios of professionals, such as health workers, teachers, social workers and sanitation engineers to populations in many areas across the country are below relevant Government targets and well below regional (i.e. SE Asian) averages.

Human resources are also unevenly spread throughout the country; remote and geographically isolated areas, disaster prone and conflict-affected areas less appear to experience chronic shortages of key professionals across all sectors.

There is also a shortage in the supply of *well trained and qualified* professionals; particularly those who have specialist knowledge and training in providing services to children, adolescents and families in need, in gender sensitivity, and in meeting the unique needs of marginalised groups, such as children with disabilities and Indigenous children. Professionals in some sectors (WASH and ECCD in particular) are paid quite low salaries and are not required to have university qualifications, limiting the supply of qualified professionals in some sectors. Moreover, nepotism among LGU Executives has meant that better qualified professionals may be overlooked in the interests of family and political favours.

Lack of partnerships between government and civil society providers of social services has also led to an inability to capitalise on the strong civil society sector in some parts of the country to strengthen government service delivery and address gaps in provision.

10.2.2. Supplies, logistics and procurement

Supply chain bottlenecks have had a negative impact on the delivery of basic services to children and families. Inadequate supply and logistics management systems have led to delays in getting essential supplies (e.g. health, education, WASH supplies) to beneficiaries. This has resulted in stock-outs of vaccines, essential medicines and medical supplies in health facilities, particularly in rural areas, and lack of availability of education supplies, including textbooks and other resources. These bottlenecks inevitably also affect demand: where children and families routinely experience lack of needed medicines and supplies or lack of educational provisions in schools, they are less likely to see the value in accessing these services.

Cumbersome procurement rules and systems have contributed to an inability to ensure essential supplies for the delivery of quality social services. The procurement system is bureaucratic, strict and slow, resulting in delays and an inability of services providers to acquire essential supplies. Delays in procurement has led to an inability for some agencies (e.g. DepEd) to absorb their budgets, resulting in significant underspends.

Moreover, planning is reported to be poor, with an inability to properly forecast demand, stocktake and distribute supplies in order to meet demand. This lack of effective planning has also led to delays in procurement. Limited technical capacity at all levels of government for financial planning and management has contributed to poor planning.

10.2.3. Inequalities and disparities

The availability of quality social services varies considerably across the country; across the board, supply of services is poorer in rural areas (particularly areas that are geographically isolated and remote), and in informal urban settlements.

Services do not always meet the needs of particular groups of children: children with disabilities; Indigenous children; street-connected children; and working children, causing them to miss out on receiving services, entrenching their marginalisation and deprivation.

➤ **Implications for policy and practice (inequalities and disparities)**

- There is a need to carry out a national review of human resource gaps / shortages in the delivery of services to children, possibly creating a strong incentives system to attract and retain skilled workers to less 'desirable' areas;
- There is a need, in particular, to carry out a review of the standards on social workers to population ratios and develop a plan to ensure full coverage of social workers across the country. Consideration should also be given to the development of specialist social workers for the delivery of child protection and social protection services, including services for children in conflict or contact with the law;
- There is a need to consider how integrated packages of services could be developed for specific groups of children: children with disabilities; adolescents; and Indigenous children;
- There is a need to review and remove barriers to the provision of services by private and civil society providers; there is also a need to develop a more joined-up approach between government and non-government service providers in order to strengthen the capacity of government for delivery of key services, ensure quality of services and avoid gaps and overlapping systems and services;

- There is a need to develop specialist positions in all sectors for the delivery of services to children; there is also a need to improve training and skills among service providers for working with children, and to sensitise professionals on gender and working with marginalised groups of children;
- There is a need to review government procurement and distribution systems for the provision of essential services and commodities for children;
- The incentivising and retention systems for professionals in rural and remote areas should be revised and strengthened.

10.3 Demand-side barriers

While a supply of adequate social services is essential to fulfilling children's rights, it is also important to ensure that sufficient demand exists for these services. Parents, families, and communities need to be aware of the importance of children accessing and using services – education, health, nutrition, WASH, child protection and social welfare services; and need to know how to access services. Barriers to accessing services, including cost, physical barriers and social and cultural beliefs or practices, should also be addressed.

The report found a range of barriers across the country that restrict demand for essential social services for children and families.

10.3.1. Awareness and knowledge

A lack of knowledge or awareness among caregivers and community members has created a barrier to the full realisation of children's rights and improved outcomes for children. For instance, lack of knowledge on reporting abuse, lack of understanding of good nutrition and infant feeding practices, limited awareness of the impacts of open defecation and poor hygiene practices, and limited understanding of health issues and sexual health have all contributed to limiting demand for essential services.

10.3.2. Financial barriers

Financial barriers were found to have restricted access to some services. Healthcare costs appear to play a significant role in suppressing demand for basic health care services in the Philippines, including through 'informal payments' or 'donations' made for subsidised public facilities. Food insecurity faced by a large number of families in the Philippines is a significant barrier to adequate nutrition, with such food insecurity exacerbated by financial burdens and access constraints. Resource barriers has also impeded access to improved WASH.

10.3.3. Practices and beliefs

Social and religious norms play an important role in determining outcomes for children in the Philippines. For example, as was noted earlier, conservative socio-religious norms that stigmatise sexual activity among young (unmarried) people were found to have a significant restrictive impact on access to family planning services, by suppressing demand among adolescents and leading service providers to deny access. Stigma associated with violence, in particular sexual violence, has resulted in under-reporting and limited demand for justice and social services.

Social norms relating to gender roles have also limited access to education for boys.

10.3.4. Physical access barriers

The geographical make-up of the Philippines as an archipelago with some small and remote islands makes delivery of public services to children and families challenging. There is a lack of transport infrastructure to get children to health facilities, schools, police and social welfare services in some areas of the Philippines. Physical access barriers particularly affect Indigenous children; many of whom live in geographically isolated areas.

➤ ***Implications for policy and practice (demand-side barriers)***

- There is a need to ensure that relevant government policies and programmes focus adequate attention on demand-side barriers to the realization of children's rights;
- There is a need to develop and implement an integrated communications plan to raise awareness and sensitize communities to violence against children and encourage reporting;
- Platforms for community engagement for adolescents should be strengthened;
- Rights education and comprehensive sexuality education in schools should be developed / strengthened and integrated into the national curriculum;
- The private sector should be engaged to promote key messaging on children's rights and to support the development of beliefs and practices that support children's rights;
- There is a need to engage religious leaders in behavior change strategies;
- There is a need to ensure that policies and programmes relating to children have a gender perspective and inclusion lens.

10.4 Barriers to the provision of quality programmes and services

It is important that key social services for children and families are of good quality; quality should be constantly benchmarked and reviewed in a transparent manner. Across the board, lack of effective M&E systems has limited the data available to review quality of services in the Philippines. However, on the evidence available, it does appear that quality is a key bottleneck to the realisation of children's rights and improved outcomes for children. Education indicators, for example, teacher to pupil and classroom to pupil ratios, and data on teacher and student attainment, indicate that education quality is a significant issue that negatively impacts on outcomes for children. Lack of quality monitoring is also a key barrier in child protection (alternative care services for children are not always accredited or monitored); health care facilities, especially in rural and remote areas; and WASH facilities.

➤ ***Implications for policy and practice (quality)***

- There is a need to ensure that monitoring, evaluation and reporting systems are embedded into policy development and service delivery;
- Improved oversight of LGU service delivery is needed along with incentives to meet quality standards;
- There is a need to improve accreditation process and guidelines and compliance with quality standards for key services;
- There is a need for the strengthening of child and youth participation to ensure that laws, policies and programmes are of good quality and responsive to their needs.

ANNEX 1: Ratification of Treaties relating to children

<i>Treaty</i>	<i>Signature date</i>	<i>Ratification</i>	<i>Past reports</i>	<i>Next report due</i>
CRC	26 January 1990	21 August 1990	1 st – due 19 September 1993, submitted 21 September 1993 2 nd – due 19 September 1997, submitted 23 April 2003 3-4 – 19 September 2007, submitted 18 Jan 2008	19 September 2017
CRC OPAC	8 September 2000	26 August 2003	due – 26 September 2005, submitted – 15 May 2007	
CRC OPSC	8 September 2000	28 May 2002	Due – 28 Jun 2004, submitted 24 August 2009	
CRC OP IC (individual complaints)	No	No		
CAT		18 Jun 1986	1 st – due 25 Jun 1988, submitted 28 April 1989; 2 nd – due 25 June 1992, submitted 17 Jan 2008; 3 rd – due 15 May 2013, submitted 25 Nov 2014	13 May 2020
CAT OP		17 April 2012	n/a	
ICCPR	19 December 1966	23 October 1986	1 st – due 22 Jan 1988, submitted 22 March 1988; 2 nd – due 22 Jan 1993, submitted 26 August 2002; 4 th due 1 Nov 2006, submitted 12 Sept 2010	Overdue since 31 October 2016
ICCPR OP 2 (abolition of death penalty)	20 September 2006	20 November 2007	n/a	
CEDAW	15 July 1980	5 August 1981	1 st – due 4 September 1982, submitted 22 October 1982; 2 nd – due 4 September 1982, submitted 22 October 1982; 3 rd – 4 September 1990, submitted 20 Jan 1993; 4 th due 4 September 1994, submitted 22 April 1996; 5 th – 6 th due 4 September 2002, submitted 27 July 2004; 7 th – 8 th due 1 September 2010, submitted 16 Jan 2015	Due July 2020
CERD	07 March 1966	15 September 1967	1 st – due 4 January 1970, submitted 24 March 1970; 2 nd – due 4 January 1972, submitted 10 February 1972	Overdue since 4 January 2012

Treaty	Signature date	Ratification	Past reports	Next report due
			3 rd – due 4 January 1974, submitted 25 February 1974 4 th – due 4 January 1976, submitted 23 July 1976 5 th – due 4 January 1978, submitted 25 January 1978 6 th – due 4 January 1978, submitted 21 March 1980 7 th – due 4 Jan 1980, submitted 29 January 1982 8 th -10 th – due 4 January 1984, submitted 12 July 1985 11 th 14 th – due 4 January 1990, submitted 21 February 1997 15 th – 20 th – due 4 January 2006, submitted 30 June 2008	
ICESCR	19 December 1966	7 Jun 1974	1 st - submitted 3 October 1977 2 nd – submitted 17 October 1983 3 rd – submitted 6 April 1988 4 th – submitted 28 Jun 1994 5 th – due 30 Jun 1995, submitted 18 December 2006 6 th – due 30 June 2013, submitted 25 November 2014	31 October 2021
CPRD	25 September 2007	15 April 2008	1 st – due 03 June 2010, submitted 24 November 2014	unknown
ILO No 138	4 June 1998			2019
ILO No 182	28 November 2000			2019