

PD-AAS-068

41925



intrain

Trip Report

#0-101

Travelers: Dr. James Lea, Director
Ms. Lynn Knauff, Deputy Director

Country Visited: THE PHILIPPINES

Date of Trip: September 29 - October 4, 1985

Purpose: To Discuss Current and Potential
New Training Assistance Efforts

Program for International Training in Health
208 North Columbia Street
The University of North Carolina
Chapel Hill, North Carolina 27514 USA

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EXECUTIVE SUMMARY

During the period September 29 - October 4, 1985, INTRAH Director James Lea and Deputy Director Lynn Knauff visited Manila, the Philippines, for discussions related to current and potential new training assistance efforts.

The Institute of Maternal and Child Health (IMCH) was the host organization for the visit. Lea and Knauff reviewed the level of activity in the current INTRAH-IMCH contract and discussed additional activities related to IMCH's domestic work with other organizations. Discussions were held with officials of USAID, POPCOM, the Integrated Midwives' Association of the Philippines (IMAP), the Philippines Business for Social Progress organization, and the Jose Fabella Memorial Hospital. It is likely that formal proposals will be offered for a project linking INTRAH, IMCH and the IMAP.

SCHEDULE

- September 28:
- . Arrived in Manila from Bangkok at 2:55 p.m.
 - . Dinner with Dr. Sanchez and Ms. Eduarte.
- September 29:
- . Visit to Tagatay and the Development Academy of the Philippines with Dr. Sanchez and Ms. Eduarte.
 - . Meeting with Dr. C. Ajelo of JHPIEGO.
- September 30:
- . Meeting at IMCH.
 - . Briefing at USAID with Mr. Johnson and Mrs. Rionda.
- October 1:
- . Meeting at POPCOM with Attorney Jamias, Dr. Sy-Quimsim and Mrs. Vallarta, accompanied by Dr. Quitevis of IMCH.
 - . Visit to Training Center at Antipolo.
- October 2:
- . (Dr. Lea departed for Chapel Hill in the morning).
 - . Meeting with Drs. Apelo and Ramos, Miss F. Benardo, Mrs. Vallarta and Dr. Sanchez at Jose Fabella Memorial Hospital.
 - . Meeting with staff of Philippine Business for Social Progress accompanied by Ms. Eduarte, Dr. Sanchez, and Mrs. Villarta.
- October 3:
- . Attended opening session of Vasectomy seminar sponsored by Philippine Association of Surgical Sterilization.
 - . Meeting with Dr. Sanchez and Ms. Grafilo.
- October 4:
- . Meeting at IMCH.
 - . Debriefing at USAID with Mr. Johnson and Mrs. Rionda.
- October 5:
- . Departed Manila for Honolulu (via Tokyo) at 2:05 p.m.
 - . Arrived Honolulu at 8:30 a.m. on Oct. 5.

PURPOSE

The purposes of the visit were to:

1. Review IMCH/INTRAH activities of FY 85 and plan the INTRAH-assisted FY 1986 workplan with IMCH.
2. Discuss prospects for INTRAH assistance with USAID, Philippines officials and PVOs.

ACCOMPLISHMENTS

1. A workplan for FY 1986 was prepared which includes four in-country training activities (funding to be requested from the USAID \$2 million line of credit), three regional activities, one staff development workshop, and consultation and technical assistance to the IMAP in development of a training proposal (see Appendix B).
2. A meeting to explore ideas for INTRAH assistance was held at POPCOM with Director Jamias, Deputy Director Sy-Quimsim, and Training Director Villarta during which INTRAH was asked to focus on training of trainers from decentralized (regional) in-service training institutions.
3. Meetings to discuss training resources and needs were held with Drs. Apelo and Ramos at Jose Fabella Memorial Hospital's Family Planning Services facility, the staff of the Philippine Business for Social Progress, and with officers of the Integrated Midwives Association of the Philippines (IMAP).
4. A meeting was held with Dr. Ajello of JHPIEGO who told Lea and Knauff that five proposals had been developed which dealt with nursing and midwifery education.
5. A briefing and debriefing were held at USAID. INTRAH was advised to explore possibilities with Attorney Jamias rather than to present ideas for proposals. Lea and Knauff were informed that a World

Bank team (Dr. Stan Sheyer and Dr. Nick Khan) was in Manila conducting a review. Johnson distributed a draft cable of proposed procedures and guidelines for development and approval of CA's project proposals (see Appendix C). Seven CA's have been selected by POPCOM from among those who attended the July 30, 1985 meeting in Washington: INTRAH, JHPIEGO, Pathfinder, AVS, PCS, FHI and Population Council. All except Pathfinder have ongoing projects in the Philippines. During the debriefing, Knauff was asked to forward a proposal and budget in letter format to Attorney Jamias, copied to Mrs. Villarta, Mr. Johnson and appropriate persons at AID/W.

BACKGROUND

INTRAH has been assisting the IMCH to expand its regional and inter-regional training agenda and to strengthen and extend its training capacity as a means to increase training coverage for the benefit of POPCOM-sponsored and INTRAH-sponsored participants.

INTRAH visits to the Philippines are reported in Trip Reports 0-5, 0-43 and 0-100. In addition to INTRAH visits to the Philippines: Dr. Perla Sanchez, Director of IMCH, visited Chapel Hill; five IMCH trainers attended an advanced TOT course in Santa Cruz; two IMCH staff attended a three-course summer series in Chapel Hill on Evaluation and Planning; and, two IMCH staff attended INTRAH's Visual Communication workshop in Mauritius as participant/observers. INTRAH has also applied the expertise of two IMCH staff (Dr. Sanchez and Mrs. Eduarte) to Africa-based training activities: Mrs. Eduarte conducted a TOT course in Somalia with Mrs. Val Gilpin of Sierra Leone, and Dr. Sanchez will co-train with Dr. Gilberte Vansintejan in Nigeria. IMCH training staff conducted the first in a series of regional/inter-regional clinical training courses

for physician/nurse teams and will conduct an inter-regional TOT course in natural family planning in November 1985.

On July 30, 1985, INTRAH representatives attended an AID-sponsored Philippines coordination meeting in Washington to learn about POPCOM's ideas for CA's support of PVO's. The CA's were informed of a \$2 million line of credit established by USAID in support of projects with PVO's.

This visit to the Philippines was made to explore training assistance prospects with PVOs and to plan for an expanded training program with IMCH.

ACTIVITIES

Institute of Maternal and Child Health (IMCH)

IMCH, INTRAH's host agency, has added three components to its in-country program supported by POPCOM: a child-spacing motivation campaign, a cost recovery scheme and addition of DMPA to the method mix. These initiatives were reviewed with Dr. Lea and Ms. Knauff through a series of descriptive charts. Although research and evaluation on effects and impact had not been scheduled by POPCOM until 1987, Lea and Knauff recommended that IMCH: 1) continue to document achievements; 2) write an article on the process for development of the child-spacing project for an international journal; 3) seek assistance for research/evaluation funds and consultation from University Research Corporation (PRICOR), the AID-supported operations research contractor which will soon move into the IMCH building.

In reviewing lessons learned and achievements made during FY 85, the following points emerged during discussion:

1. The clinical course for physician/nurse teams did

meet the skills/knowledge needs of the participants and is an appropriate means for transmitting the idea of complementary and reinforcing roles. However, specific attention to and training in team-building need to be added to the curriculum if trainee team members have not worked together before the course.

2. The training center at Antipolo, built under the auspices of a foundation whose directors include Dr. Sanchez and Mrs. Eduarte, is an appropriate residential training site if participants understand and accept the reason for a remote training location, the "house rules," and the financial arrangements that IMCH has made. (A revised information bulletin was written during the visit which directly addresses these points.)
3. The budget provided by INTRAH was insufficient to meet course expenses. (A revised budget for future courses will be prepared by IMCH and forwarded to INTRAH.)
4. Rather than conducting the clinical practicum in metro-Manila, it was felt that Cebu was now ready to receive international clinical participants and would be more appropriate to trainees' own clinical situations. (A Cebu-based practicum will be a feature of the next clinical teams course and budgeted accordingly.)
5. Dr. Sanchez preferred that INTRAH continue to provide IMCH with certificates of attendance rather than IMCH providing its own certificate which certifies proficiency.

As regards pre-paid airline tickets for IMCH staff or Filipino participants, tickets issued in the U.S. are no longer acceptable, according to a new GOP policy.

The upcoming regional NFP TOT was discussed. Antionette Tejano will be the IMCH general manager of the workshop. Ms. Barbara Kass-Annese, IHPS-provided consultant, is expected to provide the major content input of the first week. Ms. Carol Brancich, IHPS staff member, is expected to provide major content input in curriculum development during the second and third weeks. She will be assisted by Dr. Segarra and Mrs. Eduarte. (Ms. Brancich was advised by Knauff to call Dr. Sanchez in order to clarify these roles).

A workplan for FY 86 was prepared (see Appendix B). It reflects four objectives:

1. Promotion and support of IMCH as an international training institution;
2. Increased training strength sufficient to provide more decentralized training;
3. Piloting of workshops for in-country participants who have potential for regional/inter-regional training;
4. Establishment of a working relationship with IMAP which could eventually result in IMCH provision of training to privately employed midwives in the regions where they work.

Officers of IMAP came to the IMCH office to discuss their needs and the prospects of assistance from INTRAH and IMCH. Mrs. Buenaventura and Mrs. Benardo described the RTSA/A-supported seminars and expressed disappointment that they were not followed-up by training since keen interest had been generated (RTSA/A was reportedly unable to fund in-country training in the Philippines as a result of budget cuts in 1983 and 1984).

It was decided that:

1. IMAP will send letters to their chapter presidents (97) to ask them to assess their constituents' interest in short-term training in family planning and maternal health.
2. IMAP, with the assistance of IMCH, will prepare a short needs assessment questionnaire for distribution to their NGO members during their annual convention, October 17-18. It was understood that persons who attend the conventions are a select sample and findings cannot be generalized to all privately-employed midwives.
3. The findings from (1) and (2) above will be collated and analyzed with the assistance of IMCH. Needs for additional information will be determined and the information obtained.
4. A proposal will be prepared by IMAP with IMCH assistance, and submitted to INTRAH in February 1986.

Project development funds will have to be provided by INTRAH for which a budget will be prepared by IMCH. It is expected that the preparatory phase and the proposal would be funded through the USAID line of credit.

Jose Fabella Memorial Hospital
(JFM) Family Planning Services

Ms. Knauff met with Dr. Apelo and Dr. Ramos, FP Services staff, and Mrs. Benardo, senior midwife in the JFM School of Midwifery. Knauff was accompanied by Mrs. Villarta of POPCOM and Dr. Sanchez of IMCH.

It was implied but never explicitly expressed by Villarte that JFM -- or Reproductive Health of the Philippines -- was the training institution POPCOM proposed for the training of rural, private sector midwives. However, the presence of Mrs. Benardo and mention of a RTSA/A-supported consultation of Dr. Ramos during IMAP seminars in July and August 1982, also supported by RTSA/A, gave the distinct impression that JFM was to be considered as a source for midwives' training supported by INTRAH.

Neither the content of the discussion nor the locale of the hospital was persuasive as justification for INTRAH to pursue JFM as a training site for rural midwives in private practice. Subsequent discussions with Mrs. Benardo and IMAP officers revealed that IMAP had the impression that INTRAH would support the consultation of Dr. Ramos just as RTSA/A had, which would thereby draw on JFM as a source for training. They, therefore, had turned to Dr. Ramos and JFM (Dr. Apelo) to lead discussion with INTRAH about training, which may explain why the visit was made to JFM.

Ms. Knauff and Dr. Apelo discussed the two Nigerian teams' training in surgical contraception which had followed their clinical skills training conducted by IMCH. Dr. Apelo and Dr. Ramos had received a fee from AVS to train the Nigerians; the training had been arranged by USAID/Manila and requested by Keys MacManus, AAO/Lagos. Dr. Apelo cited logistical problems including confusion about who was to support the trainees' per diem, arrange for their housing and for their return reservations and ticketing which had complicated the VSC training. He had assumed that IMCH was responsible, but since IMCH had not been forthcoming he had somehow arranged for those support services and received the per diems from USAID. He had only recently received the sub-contract for the Nigerians' training, although they departed the Philippines almost two months ago. Ms. Knauff assured him that neither IMCH nor INTRAH had been conferred responsibility for the Nigerians once they departed from the IMCH course, and, in fact, INTRAH was unable to support training in surgical contraception. It was agreed that the VSC sponsoring agency should be asked to specify arrangements and designate persons responsible should there be future requests for VSC training of INTRAH-supported FP clinical skills participants, and the lead-time should be sufficient for the necessary arrangements to be made.

Philippine Business for Social Progress (PBSP)

Ms. Knauff, Mrs. Villarta, Dr. Sanchez and Mrs. Eduarte visited the PBSP, which is a private non-profit foundation founded by a business consortium which included Benvenido Tan of the San Miguel Corporation. It has 120 organizational members -- all private business -- ranging from Thomas Cook, Inc. to Royal Undergarment Corp. of the Philippines, and Aboitiz and Co. Inc. to Warner, Barnes & Co. Each organization contributes 1% of net profits before taxes; the 1% is a tax write-off.

The office is in the Chinatown section of Manila (it will move to Makati in January) and vibrates with activity and productivity. PBSP action, however, occurs in rural areas where cooperatives receive technical and financial assistance, training and consultation to develop and manage small-scale development projects. The PBSP motto is "helping people who need help to help themselves." It accepts funds from outside the membership, but only up to 50% of the total operating budget.

Natural family planning services are being offered within a selected number (4) of PBSP-assisted projects. Since NFP "does not require medically-trained personnel or clinics," the PBSP Board members felt that NFP could be better integrated into rural development and family life than clinic-based or community-based distribution of contraceptives. And, since PBSP is non-sectarian, it was felt that as a non-religious organization it might be more appealing as a source of NFP services than an organization with direct ties to the Catholic Church. Be that as it may, it has been observed that the PBSP Board members tend to be both socially conscious and conservative and for those reasons have approved the NFP component in response to population/family planning imperatives and the Board members' religious affiliation.

However, it should be noted that POPCOM, not PBSP, is funding the NFP component. To date, after one year of the three-year project, there are 900 acceptor-couples which is 27% of the three-year target. Two "infertile" couples have been assisted through instruction in fertility awareness. To recruit and train NFP counselors and acceptors, the training component identifies successful NFP user-couples, trains them and then they become recruiters and counselors.

POPCOM has not funded an operations research component. PBSP feels there should be a person to conduct operations research and document the project for future transfer of lessons learned. They also need a person to package two manuals: one on the NFP "technology" and one on the process for developing an NFP component. Knauff suggested that graduate students might be used who might later become PBSP employees. Mrs. Villarta suggested that the Intern Development Program (IDP) of POPCOM be used to identify suitable persons.

PBSP does not require INTRAH assistance; however, INTRAH could be helpful in forwarding new NFP materials and in sponsoring observational site visits to the NFP project areas if opportunity arises. IMCH offered their clinics as referral sites for couples who want FP but not NFP and also offered to refer couples who came to their clinics who wanted NFP to PBSP sites if they were nearby.

It is also possible that some of PBSP's organizational members might visit Thailand, through INTRAH arrangements or sponsorship, for observation of family planning service delivery within a rural development context. This was discussed with the PBSP staff.

The Population Commission (POPCOM)

Dr. Chita Quitevis accompanied Dr. Lea and Ms. Knauff during this visit, which was made to explore POPCOM's suggestions about INTRAH's role in the PVO initiative and

appropriate PVO's with whom INTRAH might meet to discuss projects.

Dr. Ester Sy-Quimsim and Mrs. Villarta met and talked with the INTRAH team. Attorney Jamias joined the group for 10 minutes toward the end of the meeting, apologizing for her delay which was a result of a meeting with the World Bank team.

There are five POPCOM-assisted training institutions: FPOP, IMCH, MOH, Jose Fabella Hospital and University of the Philippines. Dr. Sy-Quimsim complimented IMCH on its stature as an international training institution, a result of several letters POPCOM had received. She cited a need for expanded, accelerated training both in response to governmental encouragement to increase service availability and quality, and because a recent manpower inventory had revealed that 30% of trained persons had left their jobs. She asked that INTRAH focus on support of TOT's in regional institutions; JHPIEGO was expected to support "master-level" training in educational institutions.

She and Attorney Jamias directed INTRAH to the IMAP, mentioning Dr. Ramos and Dr. Apelo, and to support of the training needs of private (midwife) practitioners. Both suggested that field preceptors (of IMCH) could follow-up the training.

Attorney Jamias mused on the Philippines' exception to the widely-accepted principle that high literacy and high employment among women encourage high contraceptive prevalence, noting that a Population Council study was being proposed to investigate this matter.

Mrs. Villarta was appointed INTRAH's POPCOM liaison and agreed to make appointments with PVO's for Lea and Knauff.

USAID/Manila

With the departure of Dallas Voran, Bill Johnson and Zynia Rionda are handling POP/FP matters in addition to

their other responsibilities. It is expected that a replacement for Voran will arrive in January 1986.

Johnson advised INTRAH to approach the POPCOM meeting with no agenda other than to explore ideas for projects. When asked whether funding for projects would be additive or supplementary to the CA's budget, Johnson said the decision was ST/POP/IT's.

Johnson distributed a copy of the proposed guidelines and procedures for developing projects (under the line of credit). (See Appendix C.)

During the debriefing, Johnson indicated that if INTRAH were to develop a project -- or had ideas for projects -- a letter and rough budget should be sent to Attorney Jamias with copies to USAID, IMCH, Mrs. Villarta and Dr. Sy-Quimsim. These documents should be pouched to USAID/Manila.

FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

POPCOM

Findings

- . A \$2 million dollar line of credit has been established by USAID for support of POP/FP activities of PVO's through CA's. The CA's selected by POPCOM are: INTRAH, JHPIEGO, FHI, AVS, Pathfinder, POPCOUNCIL and PCS.
- . A POPCOM staff member is assigned to each CA (INTRAH's is Mrs. Bethel Villarta, Director of Training).
- . All proposals developed by CA's with their PVO partners must go through POPCOM for approval by Attorney Jamias, Dr. Sy-Quimsim, and the staff member liaison. The funds, however, go directly to the PVO, not through POPCOM.
- . Most sources of POPCOM's external assistance terminate in 1986.

- . There are five training institutions supported by POPCOM: IMCH, FPOP, MOH , Jose Fabella Hospital and University of the Philippines.
- . A recent POPCOM manpower inventory revealed that 30% of trained persons had left their jobs.
- . INTRAH assistance was directed towards IMCH and IMAP.

Conclusion

IMCH is the most likely POPCOM-supported training institution to receive INTRAH support through the PVO line of credit, both to expand its own training program and capability, and to assist IMAP.

Recommendation

A letter outlining INTRAH's proposed strategy together with a rough budget should be forwarded (via pouch to USAID) to Director Jamias and copied to Dr. Sy-Quimsim, Mrs. Villarta and Mr. Johnson. The letter should direct attention to the proposed IMCH in-country training activities contained in the FY 86 workplan and the agreement expressed by IMAP to be assisted by IMCH.

IMCH

Findings

- . The IMCH/INTRAH program of training activities has been mutually satisfactory, and the FY 86 training plan warrants continuing support to IMCH by INTRAH.
- . The IMCH training and service activities supported by POPCOM do not include support for operations research despite the obvious need to evaluate effects and impact of new approaches (child-spacing campaign, use of DMPA, and the cost-recovery scheme) for increasing service acceptance.

- . Further decentralization of training is desired by IMCH. Its CTT members are for the most part only part-time trainers and they are the trainers for regional TOT's and follow-up as well as for INTRAH-supported courses. These trainers carry a heavy burden and there are only five of them (Eduarte, Eraldo, Segarra, Tejano and Tady).
- . IMCH is a logical source of technical assistance for IMAP, but IMCH staff are already stretched thin.
- . The information bulletins supplied by IMCH to international participants required updating that reflects use of Antipolo as a residential training center.
- . Budgeting for future physician/nurse team training should more nearly reflect IMCH's costs.

Conclusions

- . In-country training activities which appear in the IMCH FY 86 training plan are likely candidates for support through the PVO earmarked funds.
- . Operations research should be conducted as part of the three new program approaches
- . The current CTT is insufficient in number to carry an increased training load.

Recommendations

- . The CTT should be augmented with trained trainers from the regions. The training of those trainers should be supported by INTRAH.
- . The FY 86 IMCH/INTRAH training plan should be supported by INTRAH through its available funds and through application of the PVO-earmarked funds.
- . IMCH should seek operations research assistance from PRICOR/URC and FHI.

- . A clinical course practicum should be tried-out in Cebu for the next group of physician/nurse teams.
- . INTRAH and IMCH should negotiate a more realistic budget for support of physician/nurse team training.

IMAP

Findings

The Integrated Midwives Association of the Philippines (IMAP) is the most likely PVO candidate for INTRAH assistance through IMCH in training privately-employed midwives.

- . IMAP has 97 chapters.
- . IMAP has a continuing education committee, but it is headed by a volunteer chairperson whose understanding of and awareness about training are not strong.
- . IMAP received financial assistance from RTSA/A and consultation from Dr. Rebecca Ramos of JFM, for a series of three-day contraceptive technology seminars in 1981 and 1982. These were not followed-up by IMAP, which had/has neither the financial nor technical resources to do so.
- . IMAP has an annual convention, a membership of 5,000 midwives and a network of leadership through its 97 chapters. Neither the strength of the local leadership nor its chapters is known.
- . Privately-employed midwives are probably unlikely to be able to attend courses of two-weeks (or more) duration.

Conclusion

By working through IMCH, a PVO and an employer of midwives, an IMAP/IMCH working relationship can be established which would give IMAP a continuing, credible

source of technical assistance for project development, continuing education and reality-testing.

Recommendations

INTRAH's existing relationship and experience with IMCH should be expanded to include financial support -- and technical assistance, if required -- for development of a plan and project for the training of privately-employed midwives (who are IMAP members) in FP services delivery. Training topics should include not only contraceptive technology but also counseling, client management, services' management, client follow-up, and recording/reporting.

IMCH should assist IMAP to assess training needs and to determine preferred duration of training courses. A training proposal should be developed which reflects this information; IMCH should assist in proposal preparation.

Other Recommendations

1. INTRAH should put PBSP on the mailing list for new materials in NFP and other FP-related information distributed by INTRAH to host-country institutions.
2. INTRAH should request concerned USAID Missions or AID Affairs Offices to contact AVS directly if VSC training is to be given to INTRAH-supported participants of clinical FP courses conducted by IMCH.

APPENDIX A

PERSONS CONTACTED/MET

USAID/Manila

Mr. William Johnson	Chief, Health/Population/ Nutrition
Mrs. Zynia L. Rionda	Population Project Officer
Ms. Joy Riggs-Perla	Health Development Officer

IMCH

Dr. Perla B. Sanchez	Executive Director
Dr. Chita S. Quitevis	Director of Clinical Services
Dr. Aida Segarra	Medical Training Specialist
Ms. Asuncion Eduarte	Director for Training
Ms. Miriam C. Grafilo	Director for Support Services
Ms. T. Mendoza	Regional Supervisor
Ms. M. Ligaya Dabatos	Regional Preceptor
Ms. Feliciano Eraldo	Nurse Training Specialist
Dr. Victor C. Valenzuela	Board Member
Ms. Antoinette Tejano	Nurse Training Specialist

Commission on Population (POPCOM)

Attorney Eugenia G. Jamias	Executive Director
Dr. Ester Sy-Quimsim	Deputy Director
Mrs. Bethel Buena Villarta	Senior Manager for Training

Philippine Business for Social Progress (PBSP)

Mr. Ernesto D. Garilao	Executive Director
Ms. Ruth Calianta	Senior Manager
Ms. Nenita Flores	Family Welfare Project Officer

Dr. Jose Fabella Memorial Hospital, Family Planning Service

Dr. Ruben Apelo	Director
Dr. Rebecca Ramos	Physician in Charge and Trainer

(Drs. Apelo and Ramos are also the founders and staff of "Reproductive Health of the Philippines," a new organization).

Integrated Midwives Association of the Philippines (IMAP)

Mrs. Amparo S. Buenaventura	President
Mrs. Avelina J. de Leon	Chairperson of the Continuing Education Committee
Mrs. F. Benardo	Former president and Registrar/Senior Midwife, School of Midwifery at Jose Fabella Memorial Hospital.

JHPIEGO

Dr. C. Ajello

Asia Program Officer

Population Communications Services (PCS)

Mr. Jose Ramos

Regional Program Coordinator

APPENDIX B

IMCH/INTRAH

FY 86 WORK PLAN

October 1, 1985 - September 30, 1985)

<u>COMPONENT</u>	<u>DATES</u>	<u>PARTICIPANTS/ CATEGORY</u>	<u>TRAINERS CONSULTANT CO-TRAINERS</u>	<u>COMMENTS</u>
1. NFP TOT: Regional/ Inter- Regional	Nov. 11-29, 1985 (Prep. Nov. 2-10)	20	IMCH CTT C. Brancich, IHP B. Kass-Annese, IHP	CTT will organize, manage, conduct. Kass-Annese will be content specialist during first week; Brancich will be content specialist & co-manager for 2nd & 3rd weeks. IMCH Manager is Tonette Tejano.
2. TOT:Regional	Jan. 6-24, 1986 (Prep. Jan. 3-5)	11: 6 Asian Center 5 IMCH	George Walter, IHP	

IMCH/INTRAH (cont.)

FY 86 WORK PLAN

(October 1, 1985 - September 30, 1985)

COMPONENT	DATES	PARTICIPANTS/ CATEGORY	TRAINERS CONSULTANT CO-TRAINERS	COMMENTS
3. Field Preceptor Skills Course	Feb. 17-28, 1986	15 field Preceptors from Luzon, Visayas & Mindanao	Eraldo, IMCH and 5 Field Preceptors/Trainers	
4. NFP Training for Private Sector Midwives	Apr. 14-25, 1986	20 Midwives from Regions III and IV	IMCH CTT	pending results of needs assessment
5. Integrated Visual and Group Communication Skills for Clinic and Community Education	May 19-June 6, 1986 (Prep. May 11-18, 1986)	16 Field Preceptors from April 1985 Preceptors Basic Course	Group Communications Trainers: Eduarte, IMCH Eraldo, IMCH Visual Communications Trainers: Murphy, INTRAH Mende, IMCH	(Budgeted at \$10,148 for 20 persons)

IMCH/INTRAH (cont.)

FY 86 WORK PLAN

(October 1, 1985 - September 30, 1985)

COMPONENT	DATES	PARTICIPANTS/ CATEGORY	TRAINERS CONSULTANT CO-TRAINERS	COMMENTS
6. Evaluation Follow-up Workshop: Regional (Bankgok)	May 12-23, 1986	Grafilo, IMCH Dabatos, IMCH Sanchez, IMCH	INTRAH	
7. Clinical Team Training (Physicians/Nurses): Regional/Inter-Regional	Jul. 14-Aug.23,1986 Jul. 14-31 in Manila Aug. 1-20 in Cebu Aug. 21-23 in Manila	8 Teams (16 persons; 8 MDS/8RNS)	IMCH	
8. Contraceptive Update for Pharmacists I. Drug Store Owners II. Hospital Pharmacists	I. 2 days in Sept. II. 2 days in Sept.	30 Pharmacists from Metro Manila 20 Hospital Pharmacists	IMCH: Aida Segarra and Asuncion Eduarte	

IMCH/INTRAH (cont.)

FY 86 WORK PLAN

(October 1, 1985 - September 30, 1985)

COMPONENT	DATES	PARTICIPANTS/ CATEGORY	TRAINERS CONSULTANT CO-TRAINERS	COMMENTS
9. Preparation for and Consultation to IMAP/IMCH Private Sector Midwives Train- ing Project	Oct. 1985 - June 1986		IMCH	
10. Project Review and Planning for FY 1987	September 1986	IMCH and INTRAH		

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APPENDIX CDraft of Guidance on Process for Developing Proposals

VZCZCMLI *
 RR RUEHC
 DE RUEHML #9650
 ZNR UUUUU ZZH
 R 170742Z SEP 85
 FM AMEMBASSY MANILA
 TO SECSTATE WASHDC 9016
 RT
 UNCLAS SECTION 01 OF * MANILA 28650

CLASS: UNCLASSIFIED
 CHRG: AID 09/13/85
 APPRV: OPHN:WHJOHNSON
 DRFTD: OPHN:WHJOHNSON:
 CLEAR: 1.OPHN:ZLFIONDA
 2.PJ:RRHODA
 DISTR: OD PO OPHN-2
 CSR
 5/GG

AIDAC

E.O. 12356: N/A
 SUBJECT: DOLLARS 2 MILLION EXPANSION OF ST/POP
 - ASSISTANCE TO PHILIPPINES

REF: (A) MANILA 26395, (B) SINDING MEMO OF 9/19/85
 - (C) MANILA 14119

1. USAID HAS REVIEWED REFERENCE B WITH POPCOM AND MISSION. ADDITIONAL GUIDELINES FOR UTILIZATION OF SUBJECT FUNDS FOLLOW.

2. USAID CLEARANCE -- USAID ADMINISTRATIVE NOTICE NO. 82-66 REQUIRES THAT ALL CENTRALLY FUNDED PROJECT PROPOSALS BE REVIEWED AND APPROVED BY THE MISSION CENTRALLY FUNDED PROJECT APPROVAL COMMITTEE (MCFPAC). 'MIS REQUIREMENT WILL STILL HOLD FOR ALL CENTRAL POPULATION PROJECTS WHICH ARE NOT JOINTLY PROGRAMMED WITH MISSION. HOWEVER, SINCE PROJECTS FINANCED FROM SUBJECT LINE OF CREDIT WILL BE JOINTLY PROGRAMMED WITH USAID, REVIEW AND APPROVAL OF MCFPAC WILL NOT BE REQUIRED.

3. THE FOLLOWING ADDITIONAL GUIDELINES HAVE BEEN SUGGESTED BY POPCOM:

- A. PRIORITY AREAS FOR ASSISTANCE ARE: SERVICE DELIVERY, ADOLESCENT FERTILITY MANAGEMENT, DEMAND GENERATION AND TRAINING.

- B. SUGGESTED LOCAL INSTITUTIONS FOR EACH AREA ARE:

- I) SERVICE DELIVERY: INSTITUTE OF MATERNAL AND CHILD HEALTH (IMCH), FAMILY PLANNING ORGANIZATION OF THE PHILIPPINES (FPOP), GABRIEL MEDICAL ASSISTANCE GROUP (GMAG), PHILIPPINE OBSTETRICS AND GYNECOLOGICAL SOCIETY (POGS), PHILIPPINE MEDICAL WOMEN'S ASSOCIATION (PMWA), PHILIPPINE HOSPITAL ASSOCIATION (PHA), SILLIMAN UNIVERSITY MEDICAL CENTER (SUMC), NATIONAL LEAGUE OF PUERICULTURE CENTERS (NLPC), PHILIPPINE FEDERATION OF NATIONAL FAMILY PLANNING (PFNFP), PHILIPPINE BUSINESS FOR SOCIAL PROGRESS (PBSP).

- II) ADOLESCENT FERTILITY MANAGEMENT: POPULATION CENTER FOUNDATION (PCF), ACCESS AND CENTER OF ALTERNATIVE (COAL).

III) DEMAND CREATION: POPULATION CENTER FOUNDATION (PCF), COMMISSION ON POPULATION (POPCOM), PHILIPPINE OCCUPATIONAL AND INDUSTRIAL MEDICAL ASSOCIATION (POIMA), OCCUPATIONAL HEALTH NURSES ASSOCIATION OF THE PHILIPPINES, INCORPORATED (OHNAF).

- IV) TRAINING: IMCH, UNIVERSITY OF THE PHILIPPINES/PHILIPPINE GENERAL HOSPITAL (UP/PGH), JOSE FABELLA, MARY JOHNSTON, PRSP, SELF-EMPLOYMENT ASSISTANCE (SEA).

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- C. SUGGESTED PROCEDURES

- I) INTERESTED COLLABORATING AGENCIES (CA) COMMUNICATE TO MISSION VIA AID/W THEIR INTENTION TO VISIT THE PHILIPPINES, PURPOSE OF THEIR VISIT, NAMES OF VISITOR, AND DATES/DURATION OF VISIT. REQUEST SHOULD BE RECEIVED AT LEAST 30 DAYS PRIOR TO VISIT.

- II) USAID CLEARS VISIT WITH POPCOM AND ADVISES AID/W.

- III) POPCOM ARRANGES SCHEDULE OF MEETINGS WITH LOCAL NGOS.

- IV) CA REPRESENTATIVE(S) VISIT POPCOM AND USAID UPON ARRIVAL FOR ORIENTATION/DISCUSSIONS.

- V) CA AND LOCAL NGO OFFICIALS PRESENT DRAFT PROPOSALS WITH REQUEST FOR CONCURRENCE TO POPCOM WITH COPY TO USAID.

- VI) POPCOM OFFICIALLY CLEARS PROPOSAL OR PROVIDES COMMENTS BY LETTER TO CA AND NGO WITH COPY TO USAID.

- VII) CA PRESENTS PROPOSAL TO HEADQUARTERS AND HEADQUARTERS PRESENTS TO AID/W FOR APPROVAL.

- VIII) AID/W APPROVES, SENDS TWO COPIES OF FINAL PROPOSAL BY AIR POUCH TO USAID, REQUESTS USAID CONCURRENCE BY CABLE.

- IX) USAID OFFICIALLY SUBMITS FINAL PROPOSAL

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TO POPCOM WITH STANDARD FORM REQUESTING APPROVAL.

- X) POPCOM RETURNS FORM TO USAID INDICATING APPROVAL OR COMMENTS.

- XI) USAID CABLES DECISION CLEARED BY USAID PROGRAM OFFICE TO AID/W.

- D. MONITORING AND REPORTING

- POPCOM WILL CLOSELY MONITOR THE IMPLEMENTATION OF CA-ASSISTED PROJECTS. COPIES OF PROGRESS AND FINANCIAL REPORTS ROUTINELY SUBMITTED BY NGO TO CA WILL BE PROVIDED TO POPCOM AND USAID. ANY OTHER SPECIFIC REPORTING THAT POPCOM OR USAID MAY REQUIRE WILL BE SO INDICATED WHEN PROPOSALS ARE REVIEWED.

- E. ASSESSMENT

- AROUND ONCE A YEAR POPCOM MAY REQUEST A GENERAL MEETING WITH OPERANT CAS SIMILAR TO THE JULY 31, 1995 MEETING IN AID/W TO GAUGE OVERALL WORK PROGRESS AND TO DISCUSS ANY ISSUES OR PROBLEMS RELATING TO IMPLEMENTATION.

- F. IN CASES WHERE CAS MAY APPOINT EITHER: (A) RESIDENT EXPATRIATE OR FILIPINO STAFF OR CONSULTANTS; OR (B) U.S.-BASED CONSULTANTS FOR THE SOLE PURPOSE OF WORKING WITH THE PHILIPPINE CA PROJECT, THEIR APPOINTMENTS SHOULD BE CLEARED WITH POPCOM.

4. USAID/POPCOM WISH TO ENCOURAGE THOSE CAS ALREADY ACTIVE TO EXPAND THEIR ASSISTANCE SO THAT NUMBER OF CAS OPERATIVE IN PHILIPPINES WILL NOT BECOME TOO LARGE. SPECIFICALLY MENTIONED FOR ENCOURAGEMENT WERE: INTRAH, JHPIEGO, PATHFINDER, PCS, FHI, AVS, POPCOUNCIL. POPCOM ALSO INTERESTED IN CEDPA FOLLOW UP WORK WITH PBSP WHERE CEDPA HAS AN ALUMNUS.

5. BIGGEST GAP THAT NEEDS TO BE FILLED IS IN SERVICES AREA. POPCOM PREFERS PATHFINDER TO WORK IN THIS AREA BECAUSE OF EXPERIENCE WITH ADOLESCENT FERTILITY AND ADVANTAGES OF WORKING WITH A LOCAL REPRESENTATIVE. IF PATHFINDER INTERESTED, POPCOM WILLING TO CONSIDER PROVIDING FREE OFFICE SPACE FOR PATHFINDER OFFICE IN MANILA. REQUEST AID/W CONTACT PATHFINDER AND ADVISE.

6. USAID GENERALLY CONCURS IN ABOVE GUIDELINES. REQUEST AID/W COMMENTS, CONCURRENCE ON SUGGESTED GUIDELINES. BOSWORTH

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“Helping people
who need help to
help themselves”



Philippine Business
For Social Progress

How is PBSP organized and managed?

The organization of the Foundation rests on its membership base. Membership in PBSP is open to business corporations, who believe that they have a common obligation and responsibility which must be discharged to the national community. Apart from sharing their financial resources, the PBSP membership commits to respond to requests for their technical expertise from PBSP-assisted communities.

A 15-man Board of Trustees, annually elected from the member-companies, manage and control the activities of the Foundation. These Trustees determine policies which may be necessary for the management of PBSP.

A 9-man Executive Committee, composed of the Foundation's officers and representatives of four member-companies exercise all power necessary for the management of the business and affairs of the Foundation in between meetings of the Board of Trustees.

A professional staff composed of men and women of various academic backgrounds and experiences, is headed by the PBSP President, and an Executive Director.



PBSP Member-Companies

Board of Trustees

Executive Committee

President

Executive Director

- - LRDP - Laguna Rural Development Project
- CRTD - Center for Rural Technology Development

Associate Director for Operations

Associate Director for Support Services

Visayas

Luzón

LRDP

CRTD

Accounting

HRD Unit

R & D

Dev Com

Mindanao

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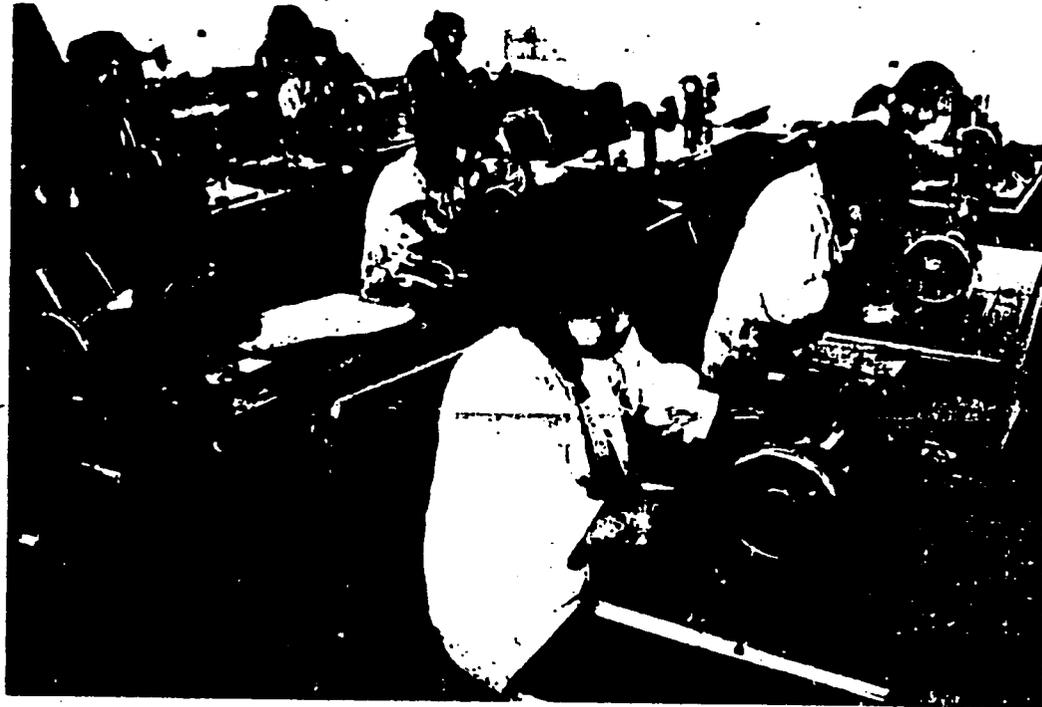
What projects are eligible for PBSP assistance?

Before any action is taken on a project submitted for PBSP assistance, the following features should be present. The project should:

- Be sponsored by a private organization, preferably with a legal personality, and proven management capability or by a community group which is functioning as an organization.
- Benefit a clearly defined benefi-

ciary community or a group of people who will eventually constitute a geographic community. This community must have expressed a need for developmental assistance and the desire and willingness to participate actively in planning and implementing the project.

- Work towards the development of a community with clear objectives and viable means to achieve them.
- Promote self-help and self-sufficiency among the project beneficiaries.
- Serve as a model for other similar projects and be therefore, replicable.



However, while some project proposals do not comply with the above criteria, in cases wherein a proponent and its beneficiary community show interest, willingness, and potential promise to meet the criteria, PBSP may directly assist them to develop the project in accordance with the above criteria or refer them to other groups, which may be in a position to help the prospective proponent to take the necessary steps to comply with PBSP requirements.

Statement Of Policy

- a. All the social development activities undertaken or supported by PBSP with the approval of its Board of Trustees are to be understood as activities of the total membership of PBSP taken collectively, not of individual members or groups of members. This is so even if, with reference to certain projects, the more active and personal participation of individual members are requested and/or given.
- b. Since PBSP represents its membership in this collective manner, it acts independently of any individual member, whether corporate or personal, in the performance of the tasks for which it was organized.
- c. PBSP is non-denominational as far as religions is concerned, and non-partisan as far as politics is concerned. PBSP cannot, therefore, be expected to support the purely religious activities of religious organizations, nor assist in projects designed to advance aims which are political and partisan in nature.
This does not, however, preclude PBSP from cooperating both with government and with religious organizations in joint social development ventures which are in harmony with its social development objectives.
- d. PBSP regards as its distinctive contribution to national development the fact that it does not merely gather together funds from the private sector in order to make them available for social development projects, but it does this in accordance with a definite social development approach, method and program.
The PBSP social development approach, method and program are designed to apply to carefully selected areas of development not only the funds, but also the special competence of those who are engaged in the management

of business enterprises. PBSP seeks to focus on these development areas not only the financial but the managerial and technological resources of the business sector and thus, it hopes to enable businessmen to discharge their social responsibility for the total well-being of the nation.

- e. Besides undertaking social development projects on its own initiative, PBSP will assist projects initiated by others. However, such assistance will be limited to projects which fall within the areas of interest defined by the PBSP approach, method and program.
As a matter of policy, the greatest proportion of PBSP funds shall be used directly for social development projects of high impact which result not only in the maximization of economic profit but also in the maximization of social benefits for the total well-being of a community through an integrated process of total human development.
- f. The investment and allocation of PBSP funds is the responsibility of a Board of Trustees composed of representatives of different sectors of the Philippine business community.
All projects undertaken or supported by PBSP must conform to the criteria and the order of priorities established by this Board.
- g. The planning, revision and evaluation of projects will be the responsibility of a professional staff, which shall submit its findings and recommendations to the Executive Committee for approval. Those projects which are approved by the Executive Committee shall in turn be submitted to the Board of Trustees for final approval.
- h. The Executive Committee shall make a complete report on PBSP's finances and operations to the Board of Trustees at its regular quarterly meeting.

Statement Of Commitment

We believe

FIRST: Private enterprise, by creatively and efficiently utilizing capital, land and labor, generates employment opportunities, expands the economic capabilities of our society, and improves the quality of our national life.

SECOND: The most valuable resource in any country is man. The higher purpose of private enterprise is to build social and economic conditions which shall promote the development of man and the well-being of the community.

THIRD: The growth and vigorous development of private enterprise must be anchored on sound economic and social conditions.

FOURTH: Private enterprise must discharge its social responsibility towards society in a way which befits its unique competence. It should involve itself more and more in social development for the total well-being of the nation.

FIFTH: Private enterprise is financially and technologically equipped to participate actively in social development. In terms of scientific technology and managerial competence, private enterprise can help provide the total approach for social development in our depressed communities.

SIXTH: Private enterprise, together with other sectors of society, shares obligations and responsibilities which it must discharge to the national community. The ultimate objective of private enterprise is to help create and maintain in the Philippines a home worthy of the dignity of man.

THEREFORE, we hereby pledge to set aside out of our company's operating funds an amount for social development equivalent to one per cent (1%) of the preceding year's net profit before income taxes, for which sixty percent (60%) shall be delivered to, and for management and allocation by a common social development foundation, to be known as Philippine Business for Social Progress.

PBSP Member Companies

ABOITIZ AND COMPANY INC. ◦ ABOITIZ MANUFACTURING CORPORATION ◦ ABOITIZ SHIPPING CORPORATION ◦ ADVERTISING AND MARKETING ASSOCIATES ◦ AIRCON, INCORPORATED ◦ AMERICAN WIRE AND CABLE CO., INC. ◦ ANDRES SORIANO CORPORATION ◦ ARCA AND COMPANY, INC. ◦ ARISTOCRAT, INC. ◦ ATLANTIC, GULF AND PACIFIC CO. OF MANILA, INC. ◦ ASIAN APPRAISAL CO., INC. ◦ ATLAS CONSOLIDATED MINING AND DEVELOPMENT CORPORATION ◦ ATLAS FERTILIZER CORPORATION ◦ BANCO FILIPINO ◦ SANCOM DEVELOPMENT CORPORATION ◦ BELL CARPETS, INC. ◦ BELL HOBART MANUFACTURING, INC. ◦ BELISLE INVESTMENT AND FINANCE COMPANY, INC. ◦ BINALBAGAN-ISABELA SUGAR COMPANY, INC. ◦ BOOKMARK, INC. ◦ BUSINESS RELATIONS INTERNATIONAL, INC. ◦ CANLUBANG AUTOMOTIVE RESOURCES CORP. ◦ CEBU OXYGEN & ACETYLENE CO., INC. ◦ CEBU SHIPYARD AND ENGINEERING WORKS, INC. ◦ CENTRAL AZUCARERA DON PEDRO ◦ CITIBANK, N.A. ◦ CITY SAVINGS & LOAN ASSOCIATION, INC. ◦ COLUMBIAN MOTORS CORPORATION ◦ COMMUNICATIONS ELECTRICAL EQUIPMENT AND SUPPLY CO., INC. ◦ CONNEL BROS. CO. (PHILIPPINES) ◦ COTABATO LIGHT AND POWER COMPANY ◦ CUMMINS DIESEL SALES AND SERVICE CORPORATION OF THE PHILIPPINES ◦ DAVAO LIGHT AND POWER COMPANY, INC. ◦ DELGADO BROTHERS, INC. ◦ D.M.G., INC. ◦ DOMESTIC INSURANCE COMPANY OF THE PHILIPPINES ◦ EASTERN TEXTILE MILLS, INC. ◦ EDWARD KELLER LTD. ◦ THE EDWARD J. NELL COMPANY ◦ ELECTRO DIESEL SALES & SERVICE, INC. ◦ FAR EAST BANK AND TRUST COMPANY ◦ FEDERAL INSURANCE CO., INC. ◦ F.E. ZUELLIG (M), INC. ◦ FLORO BLUE PRINTING ◦ FRANCISCO MOTORS CORPORATION ◦ GRIFFITH LABORATORIES ◦ HERITAGE MARKETING CORPORATION ◦ H.H. BAYNE ADJUSTMENT CO. ◦ HOOVEN COMALCO INDUSTRIES, INC. ◦ IBM PHILIPPINES, INC. ◦ ILIGAN RECAPPING CORPORATION ◦ IMPERIAL DE GUZMAN, DEE & COMPANY, INC. ◦ INSULAR BANK OF ASIA AND AMERICA ◦ JACKBILT CONCRETE BLOCK CO.,

INC. ◦ JARDINE DAVIES INC. ◦ JOAQUIN CUNANAN & COMPANY ◦ KELLER-COLEMAN, INC. ◦ LA DICHA CIGAR AND CIGARETTE FACTORY ◦ LA TONDENA, INC. ◦ LEPANTO CONSOLIDATED-MINING CO. ◦ LOVSTED & CO., INC. ◦ LU DO & LU YM CORPORATION ◦ MABUHAY VINYL CORPORATION ◦ MAKATI STOCK EXCHANGE ◦ MANILA ELECTRIC COMPANY ◦ MARIA CRISTINA CHEMICAL INDUSTRIES, INC. ◦ MARSMAN & COMPANY, INC. ◦ MARILAG CORPORATION ◦ MENZI & COMPANY, INC. ◦ MERCURY DRUG CORPORATION ◦ MOBIL OIL PHILIPPINES, INC. ◦ MODERN GLASS DISTRIBUTORS, INC. ◦ MULMAC INDUSTRIAL CONSTRUCTION CORP. ◦ NATIONAL INDUSTRIAL GASES CORPORATION ◦ NATIONAL LEAD COMPANY (PHIL.), INC. ◦ NEGROS NAVIGATION COMPANY, INC. ◦ NEWSPRINT SALES CORPORATION ◦ NORTHERN MOTORS, INC. ◦ PALL ROCES CORPORATION ◦ PAPER INDUSTRIES CORPORATION OF THE PHILIPPINES ◦ PFIZER, INC. ◦ PHELPS DODGE PHILIPPINES, INC. ◦ PHILEX MINING CORPORATION ◦ PHILIPPINE ADVERTISING COUNSELLORS, INC. ◦ PHILIPPINE COMMERCIAL AND INDUSTRIAL BANK ◦ PHILIPPINE INSURANCE ASSOCIATES, INC. ◦ PHILIPPINE PACKING CORPORATION ◦ PHILIPPINE TOBACCO FLUE-CURING & REDRYING CORPORATION ◦ PHILIPPINE VETERANS BANK ◦ PHILIPPINE WALLBOARD CORPORATION ◦ PHILIPPINE WELDING EQUIPMENT, INC. ◦ PILIPINAS SHELL PETROLEUM CORPORATION ◦ PILLSBURY-MINDANAO FLOUR MILLING CO., INC. ◦ PRIVATE DEVELOPMENT CORPORATION OF THE PHILIPPINES ◦ PUREFOODS CORPORATION ◦ QUEZON CITY THEATRICAL ENTERPRISES, INC. ◦ RADIOWEALTH, INC. ◦ REDV COCONUT PRODUCTS, LTD. ◦ REFRIGERATION INDUSTRIES, INC. ◦ RIZAL THEATRICAL COMPANY, INC. ◦ ROBERT LIPTON & COMPANY ◦ ROXAS Y CIA. LTD. ◦ ROYAL UNDERGARMENT CORPORATION OF THE PHILIPPINES ◦ SAN MIGUEL CORPORATION ◦ SARMIENTO ENTERPRISES, INC. ◦ THE SHELL CHEMICAL CO. (PHILS.), INC. ◦ THE SHELL COMPANY OF THE PHILIPPINES ◦ SHELL DISTRIBUTION COMPANY, INC. ◦ SMITH, BELL & COMPANY, INC. ◦ SYCIP, GORRES, VELAYO & COMPANY ◦ SYSTEMS & BUSINESS EQUIPMENT CORPORATION ◦ TE-LENTAN BROTHERS & SONS, INC. ◦ THOMAS COOK, INC. ◦ UNITED LABORATORIES, INC. ◦ UNIVERSAL TEXTILE MILLS, INC. ◦ VICTORIAS INSURANCE FACTORS CORPORATION ◦ WARNER, BARNES & COMPANY, INC.

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