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MCH PROGRAM DESCRIPTION

Philippines



Overall MCH and health sector situation

The Philippines has a population of around 88.6 million, around 37 percent of whom are under age 15. The country's high population growth rate remains a significant factor in the incidence of poverty and poor health status. While infant and under-5 mortality has significantly improved in the past 5 years, there has been no significant reduction in maternal mortality and neonatal deaths for the same period. Malnutrition and infectious diseases like diarrhea, pneumonia, and tuberculosis continue to account for a significant part of the disease burden. Some 20 percent of the population still lacks access to safe water and sanitation. However, the estimated prevalence of HIV/AIDS has remained below 3 percent among most-at-risk groups.

The Philippines' population growth rate of 2.04 percent outstrips the country's ability to generate jobs and provide basic services; consequently 44 percent of the population continues to live on \$2 a day or less. In 2005, the total expenditure on health represented only 3.3 percent of the GDP. Furthermore, the education system,

once considered to be among the best in Asia, has deteriorated sharply over the last 30 years in terms of quality, affordability, and GOP budget allocation.

MCH interventions at the Mission level

Priority areas of MCH interventions include antenatal, delivery, postpartum, and newborn health services, immunization, breastfeeding, maternal and child nutrition through micronutrient supplementation and food fortification, as well as the appropriate management of common childhood illnesses. Consistent with country objectives, the USG MCH assistance is aimed at accelerating the reduction in maternal and child deaths and promoting overall well being, especially among women and children. USG assistance directed at key national agencies and local governments will cover 40 percent of the country's population by 2011, with a focus on the poor and under-served women and children. At the end of FY08, an estimated 14.4 million people in USG-assisted sites nationwide are targeted to have access to high-quality and affordable MCH services.

Delivery approaches and mechanisms supporting expanded coverage/use of interventions

USAID supports various aspects of MCH implementation, such as the development and implementation of national policies particularly related to standards, regulation, and financing of MCH strategies and the development of health management and operational capacities of local government units (LGUs) to better provide quality health services, especially to the poor. In addition, USAID supports the expansion of MCH services, food fortification, and micronutrient supplementation through the private sector, such as through a network of private midwives and through company-based health providers in over 400 businesses nationwide. Demand-side interventions are also supported through BCC and social marketing as part of the communications strategies of the Department of Health (DOH) and LGUs, as well as through mobilization of community-based organizations.

Specific actions supported as part of the MCH approach

USAID supports the DOH in the establishment of an integrated MCH strategy, supported by issuance of a national policy and technical guidelines. The strategy includes a core service package for MCH, identifying a service catchment area and establishing an effective service delivery structure and network of providers. To improve budget allocation and spending of DOH funds related to MCH, USAID supports the development of a joint budget execution plan and utilization tracking mechanism. This financing scheme is linked to a grant mechanism aimed at strengthening LGU capacities for MCH implementation.

USAID support is also directed at leveraging national government resources for improved program performance at the local level, such as expanding access to social health insurance among the poor and indigents, increasing the utilization of maternal and newborn services by women and children, and enhancing the capacity of the public and private providers to deliver quality MCH information and services.

The USAID program's geographic focus

USAID support to the health sector covers the entire country as it provides technical assistance to the DOH. More intensive support is provided to 42 provinces (13 of which solely focus on strengthening private sector participation) through its various cooperating agencies (CAs) that cover the focus areas of local health systems development, tuberculosis prevention and control, private sector participation, and health promotion. In all these areas, support for MCH areas is being provided either as a direct deliverable or related product of the CA. DOH takes a lead in coordinating donor activities in MCH and meets regularly with all the donors.

The Mission program's relationship to the country's health sector and development plans and strategies

USAID's family health program is consistent with the Philippine Government's commitments to MDGs 4 and 5 as well as to its National Objectives for Health of reducing maternal and child mortality in the country. In pursuing these goals, USAID support through policy and systems development, local health systems strengthening and increasing private sector participation complements current health sector reform efforts of the country.

Potential for linking Mission MCH resources with other health sector resources and initiatives

USG investments (e.g., PMI, PEPFAR, Title II, OFDA, water, etc.)

USAID is developing the Philippine Water Revolving Fund (PWRF), a facility designed to catalyze the transition to market-based lending by using public and donor resources to leverage private sector funds for water and sanitation infrastructure. FY08 efforts will focus on setting up the fund, strengthening capacity of the PWRF administrator, preparing projects, and addressing critical water and financial-sector policy issues. In conflict-affected areas of Mindanao, USAID will fund community water supply systems. USAID will also assist local governments and private partners to design and install affordable sanitation systems.

Investments and initiatives of other donors and international organizations

The WHO, UNICEF, JICA and the World Bank support the DOH's immunization program and enhancing local capacity to manage obstetric complications. The German Development Agency is supporting development of water and sanitation sector roadmaps expected to further enhance sector investment. The Philippines Development Forum Working Group on Local Government is seeking to rationalize municipal project financing, including water projects. Under the Philippine Water Revolving Fund (PWRF) initiative, USG collaborates with the Japan Bank for International Cooperation (JBIC) and other stakeholders. The Joint Special Operations Task Force – Philippines (JSOTF-P) provides maternal and child health services through targeted medical missions.

Planned results for the mission's MCH investments over the next 5 years

The Philippines' long-term goals for MCH are (1) to reduce the MMR from 209 per 100,000 live births (DHS) in 1993 to 53 by 2015; and (2) to reduce the U5MR from 64 per 1,000 live births in 1993 to 21 by 2015.

MCH COUNTRY SUMMARY: PHILIPPINES	VALUE
MCH FY08 BUDGET	3,720,000 USD
Country Impact Measures	
Number of births annually*	2,225,000
Number of under-5 deaths annually	89,000
Neonatal mortality rate (per 1,000 live births)	17
Infant mortality rate (per 1,000 live births)	29
Under-5 mortality rate (per 1,000 live births)	40
Maternal mortality ratio (per 100,000 live births)***	230
Percent of children underweight (moderate/severe)****	28%
Birth Preparedness and Maternity Services	
Percent of women with at least one antenatal care (ANC) visit	93%
Percent of women with at least four antenatal care (ANC) visits	69%
Percent of women with a skilled attendant at birth	60%
Percent of women receiving postpartum visit within 3 days of birth*****	34%
Newborn Care and Treatment	
Percent of newborns whose mothers initiate immediate breastfeeding	54%
Immunization	
Percent of children fully immunized at 1 year of age	60%
Percent of DPT3 coverage	79%
Percent of measles coverage	80%
Maternal and Young Child Nutrition, Including Micronutrients	
Percent of mothers receiving iron-folate	77%
Percent of children receiving adequate age-appropriate feeding	58%
Percent of children under age 5 receiving vitamin A supplement in the past 6 months	76%
Percent of children under 6 months exclusively breastfed	34%
Treatment of Child Illness	
Percent of children with diarrhea treated with ORT	59%
Percent of children with diarrhea treated with zinc	N/A
Percent of children with pneumonia taken to appropriate care	46%
Water, Sanitation, and Hygiene	
Percent of population with access to improved water source**	93%
Percent of population with access to improved sanitation**	78%
<p>* Census International Database ** Joint Monitoring Programme for Water Supply and Sanitation 2008 Report *** Source: WHO Maternal Mortality Report 2007 **** Source: State of the World's Children Report 2008 ***** This number is based only on mothers whose last live birth occurred outside a health facility in the 5 years preceding the survey. (Unless otherwise noted, the data source is the 2003 Demographic and Health Survey.)</p>	