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Governance and HIV - Government-Civil Society Interface: An Aspect of Governance Critical to an Effective Response

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Governance and HIV

Government /Civil Society Interface
An Aspect of Governance Critical to an Effective Response

A Case Study from the Philippines

Interim Results

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Executive Summary

There exists a dynamic interrelationship between good governance, a successful government organisation (GO) - civil society organisation (CSO) interface and an appropriate response to the HIV-AIDS epidemic. Good governance creates an environment that promotes collaboration among various sectors of society. Appropriate responses to the epidemic, on the other hand, are engendered by positive interfaces and cooperation between key sectors of a community. The case study will specifically examine three examples of interface: the **Philippine National AIDS Council (PNAC)** at the national level; and for the local implementation, **Olongapo City,** and the province of **Palawan.**

Characteristics of good governance that promote GO-CSO interface include **transparency** or mutual sharing of information among the parties to the interface especially government. Another is **accountability and responsibility** to the community. These are important because they recognise the right of the community or society to **participate** in governance activities. **Openness and toleration** of diverse perspectives sustain dialogue and partnership between government and civil society. A government that formulates policies creating an enabling environment for people to participate, and a dynamic active civil society which recognises the need to participate, are important ingredients for a successful interface.

The Philippine National AIDS Council (PNAC): GO-CSO Interface for Policy Formulation

The Philippine National AIDS Council was created by Executive Order # 39 issued by President Fidel V. Ramos in 1992. It is a multi-sectoral body comprised government and CSO representatives, tasked to advise the President on policy development for the prevention and control of HIV/AIDS and to coordinate and collaborate with other organizations in the implementation of a National AIDS Prevention Strategy.

The enabling environment in the Philippine setting includes the Constitution which spells out the importance of NGO and people's participation in at least three provisions. The Local Government Code of 1991 also provides for the participation of civil society sectors, particularly non-government organisations (NGOs), in the various councils like the Local Development Councils and the Local Health Board.

A dynamic NGO community (including those dealing with HIV-AIDS) also exists in the Philippines, especially after the popular EDSA revolution of 1986. For three consecutive terms (1986 to 1992, 1992 to 1995, and 1995 to the present), the Health Secretary has been NGO friendly. Initial support (financial and technical) from international donors like the WHO and other UN agencies for the establishment of an AIDS Council, also played a crucial role in the establishment of PNAC.

The positive results of the interface include:

- The participatory formulation of the National AIDS Strategy;
- The formulation of agreed guidelines and checklists for GOs and NGOs for developing information, education and communication materials on HIV/AIDS;
- A comprehensive data information set on the response at the country level regularly published in coordination with UNAIDS;
- The mainstreaming of AIDS education information among key government personnel in some line agencies. The Council has recently initiated the establishment of the "AIDS in the Workplace Program" of the Department of Labor and Employment (DOLE);
- A recently established health rights desk to promote and protect the health rights of individuals; and,
- **PNAC becoming the main venue to coordinate, advocate and monitor various issues and programs by NGOs and GOs related to HIV/AIDS.**

Olongapo City AIDS Foundation Inc. (OCAFI) : A Venue for Local GO-CSO Interface

The origins of the Foundation can be traced to the City Health Office's AIDS Prevention and Control Program in 1989, the thrust of which was to create a community based model of HIV/AIDS education and prevention focusing on Commercial Sex Workers (CSWs). The OCAFI was established in 1992 as a non-stock and non-profit organization. OCAFI blossomed mainly because of a very supportive local government from the chief executive to the barangay officials. A positive milieu was possible because of the presence of a dynamic civil society and NGO community led by distinguished people from various sectors of the

city who were willing to work with government despite differences in political beliefs or affiliation. The city was also confronted by an emergency situation, learning that there were 58 reported cases of HIV infection, the most in the Philippines. The city was also fortunate to have a core of committed civil servants (in health, justice, local government) who involved themselves not only out of a sense of public duty, but also out of personal conviction and commitment to the cause.

A very successful massive information campaign utilizing a community based approach was implemented. OCAFI has forged partnerships with organised groups in government and civil society sectors, in the implementation of IEC campaigns and other HIV/AIDS related programs. It was able to gather and train fifty volunteers to assist in the Foundation's activities. A concrete indicator of success is the increased use of condoms in the City. The Foundation has also been able to implement a committed care and support program for people living with HIV/AIDS (PLWHA). In addition to this, a no nonsense implementation of anti-discriminatory practices and confidentiality principles was led by the City government. Successful celebration of World AIDS Day each year highlights the results of OCAFI's work. The AIDS program of OCAFI has now expanded into the other municipalities of Zambales and in Balanga, Bataan

The Inter-agency HIV-AIDS Network (IHAIN): The Importance of Networking

The Inter-Agency HIV/AIDS Network (IHAIN) was born out of the need of various sectors to co-ordinate and intensify their efforts in addressing the problem of HIV/AIDS in Palawan. The formation of IHAIN was facilitated by the presence of a credible and apolitical international NGO called Community and Family Services International (CFSI). Palawan's provincial and city governments are not novices with regard to participation of NGOs and people's organisations (POs). In fact, there are existing programs that showcase partnerships between government and civil society, some of which were highlighted in the prestigious Galing Pook awards for Local Government Units (LGUs). Various GOs, NGOs, and POs in Palawan are also implementing community-based health projects. This experience is also an important contributory factor in the formation of IHAIN as a network for a community based HIV/AIDS response.

Because of the Network, many of the strategies and responses formulated and implemented are acceptable to key sectors and network members. There was also a change in the biased perception and attitude of individuals/community about commercial sex workers (CSWs), who themselves have been encouraged to

avail of services offered by IHAIN and other agencies (i.e., pre-and post-test counseling and anti-body testing).

The Network prides itself on the mobilization of the community in response to HIV/AIDS, particularly with regard to its participation in HIV/AIDS activities (e.g., World AIDS Day celebration and education sessions on HIV/AIDS) and an increased awareness of the dangers of unsafe sex manifesting itself in an increased demand for condoms.

Another important accomplishment is the integration of HIV/AIDS projects into the various programs of the different member-organizations of IHAIN, which did not have any HIV/AIDS projects prior to their membership of the Network. All member-organizations conduct IEC sessions with their respective clients and communities. The Network also established linkages and promoted sharing of expertise, and rendering of assistance among member-organizations, which did not exist prior to IHAIN (i.e., patients needing counseling are referred to CFSI while those needing medical attention are referred to PSU reproductive clinic or City or Provincial Health Office).

Initial Conclusions from the Three Examples of Interface

The HIV-AIDS epidemic requires a multi-sectoral response. Collaboration is essential in information, education and advocacy; care and support for PLWHA; and resource mobilization. A state imbued with principles and practices of good governance is crucial in the establishment of an enabling environment for successful GO-civil society interfaces. The existence of a dynamic civil society especially the non-government organizations is also important. A successful interface, initiated either by government or a civil society sector eventually results in appropriate responses. The donor community can also play a strategic role in catalyzing partnerships and collaboration between government and civil society. A successful interface is able to strengthen and energize the active participants to the interface. Good governance is eventually strengthened by increasing examples and models of collaborative efforts between government and civil society by expanding such responses to issues other than HIV-AIDS.

1 Introduction

1.1 The Framework of the Study

There exists a dynamic interrelationship between good governance, a successful GO-civil society interface and an appropriate response to the HIV-AIDS epidemic. Good governance creates an environment that promotes collaboration among various sectors of society. Appropriate responses to the epidemic, on the other hand, are engendered by positive interfaces and cooperation among key sectors of a community.

1.2 Focus and Methodology of the Study

The focus of the case study was two-fold: to examine **national policy formulation** and **local policy formulation and implementation.** At the same time, the study explored **interfaces within the sectors** and **"horizontal" interfaces**. In particular, the study examined the **link (or missing link)** between national policy formulation and local implementation.

The study specifically examined three examples of interface: the **Philippine National AIDS Council (PNAC)** as an interface at the policy formulation level, and **Olongapo City** and **Palawan** at the local implementation level.

Several research methods were used. In particular, *secondary data gathering, key informant interviews, focus group discussions, workshops, participant observations, and forward-looking discussions.*

2 The Philippine National AIDS Council (PNAC)

2.1 Enabling Environment and Aspects of Good Governance in the Philippine Setting

The importance of NGOs/CSOs are clearly spelled out in at least three provisions of the 1987 Constitution, the fundamental law of the land. In these provisions, the state recognizes the role of NGOs and people's organizations (POs) in development. The provisions also highlight the right of civil society sectors to establish their own organisations for developmental purposes.

The Local Government Code of 1991 also provides for the participation of civil society sectors particularly NGOs in the various councils like the Local Development Councils and the Local Health Board. The Code, which is entering its sixth year of implementation, has become a catalyst for increasing local government and civil society collaboration in various types of activities. The

Code has also helped in bridging a big gap between GOs and NGOs that originated from the time of the Marcos dictatorship.

For three consecutive terms (1986 to 1992, 1992 to 1995 and 1995 to the present), the Health Secretary has been NGO friendly and has tapped the cooperation and partnership with NGOs in the various programs of the Department. Secretary Alfredo Bengzon ('86-'92) worked with NGOs in the Department's drive towards the use of generic drugs and mass immunization campaigns. Secretary Juan Flavier ('92-'95) came from the NGO sector, implementing rural development and community health programs. The current head of the Department, Secretary Carmencita Reodica, a career executive, has continued the policy of cooperation and collaboration with NGOs and POs.

A dynamic NGO community exists in the Philippines especially after the popular EDSA revolution of 1986 which toppled the Marcos regime. Several NGOs are active in the health sector, with some like Kabalikat ng Pamilyang Pilipino, Health Action Information Network (HAIN), and Women's Health Care Foundation specifically focusing on HIV/AIDS issues. Leaders of such NGOs are credible not only in the NGO community, but also in the health sector because of their experience and expertise in HIV/AIDS issues. Partnerships have also been forged between NGOs and Government in other health areas too, such as Family Planning, Immunization, and Generic Drugs Advocacy Programs.

2.2 The Nature of the HIV-AIDS Issue: Why the Interface is Important

The nature of the epidemic demands a multi-sectoral response and thus, an interface between government and civil society is inevitable. The sense of urgency of the situation requires the cooperation of various sectors of society. A quick response is possible only if various groups are able to divide and take responsibility for implementing the necessary tasks and activities. Government can contribute its medical and technical expertise; NGOs, their grassroots and community based experiences; the academic community their education programs; and the media, their advocacy campaigns.

The requirement for a massive information campaign for a successful prevention and control program can only be met with multi-sectoral collaboration. Given the scope of the response, human and financial resources must also be optimized for more effective services. The need to mobilize financial resources within and outside the bureaucracy also necessitates cooperation among the various stakeholders.

2.3 The Composition of PNAC

The Philippine National AIDS Council was created by Executive Order # 39 issued by President Fidel V. Ramos in 1992. It is a multisectoral body tasked to advise the President on policy development for the prevention and control of HIV/AIDS and to coordinate and collaborate with other organizations in the implementation of a National AIDS Prevention Strategy. The implementing guidelines for PNAC were issued in 1995.

PNAC's vision is a fully empowered nation of well informed individuals and sectors working in partnership to reduce HIV transmission and to lessen its impact on individuals in particular, and society, in general. Its main goal is to take a proactive stance in creating and sustaining through coordination, cooperation and collaboration, an enabling environment truly supportive of policies and strategies that effectively and expeditiously address the multi-dimensional aspects of HIV/AIDS.

The PNAC is chaired by the Secretary of Health and the Director-General of the National Economic and Development Authority is vice-chairperson. It comprises thirteen representatives from government agencies (executive and legislative branches) and seven non-government organizations (NGOs) representing the different vulnerable and affected groups.

The PNAC also has a technical working group (TWG), providing technical support to PNAC which has the same composition as the Council in terms of government and non-government organizations. Working committees established under the TWG include Policy Development; Law and Ethics, and Information; and Education and Advocacy. Secretariat and administrative support are provided by the AIDS Unit of the Department of Health.

Initial support (financial and technical) for the establishment of an AIDS Council from international donors like the WHO and other UN agencies, also played a crucial role. These agencies continue to give assistance to PNAC in carrying out its various activities. The national government also contributes, annually allotting a specific budget for the AIDS program.

2.4 Characteristics and Dynamics of the Interface

In the beginning, there were a lot of *debates* between the NGOs and the government sector. Atty. Vener Pimentel, a secretariat coordinator from the Health Department acknowledges that the NGOs were relatively more advanced regarding the needs of PLWHA including the need for a principled response. At the same time, NGO representatives like Drs. Florence Tadiar and Michael Tan and Teresita Bagasao *were very credible and experienced and thus, were able*

to influence significantly the formulation of the National AIDS Strategy, one of the Council's most important policy papers.

Currently, the relationship between the GO and the NGOs in the Council is highly collaborative. In fact, the elected Chairperson of the Technical Working Group, Ms. Mercedes Apilado comes from the NGO sector (HAIN). Tasks in the implementation of programs are divided according to the "niche" or *comparative advantage* of the organization (e.g. since a condom campaign is controversial for government, this was tasked to some NGOs).

The inclusion of a representative from the PLWHA in the Council is very noteworthy. The PLWHA should be at the core of a response. At present, Pinoy Plus, the PLWHA organization is able to articulate the needs of their constituents and also is able to air specific grievances to both government agencies and NGOs. In a recent PNAC meeting, the council immediately responded to the complaints lodged by Pinoy Plus. It has also been an *implicit policy* to include Pinoy Plus in all relevant activities of the Council.

Trust and friendships have developed in both the Council and the TWG, making collaboration and cooperation relatively easier. *The personal side of the relationship* among the sectors has brought about a more synergistic working environment with the delineation between government and non-government, almost non-existent.

Pinoy Plus and the PNAC

Pinoy Plus is the sole organization of PLWHA in the Philippines. With a membership of around fifty but still increasing, Pinoy Plus aims to articulate the interests and issues of people infected with the HIV-AIDS virus. It has also embarked on a variety of programs like peer counseling, livelihood projects, skills training and capability building and care and support for members.

Pinoy Plus is represented in the Philippine National AIDS Council (PNAC) by its President, Jeremy Diaz. An NGO worker himself in Olongapo City, Jeremy appreciates the fact that PLWHA have a seat in the Council. In a recent meeting of the Council, Jeremy frankly aired current grievances of PLWHA regarding hospital policies, media attention, and NGO initiatives with the press. The Council took action immediately on most of the concerns.

Jeremy, on reflecting about their membership in the Council notes that: "At first, we were at a loss in the meetings (PNAC and other AIDS related groups and committees) we attended. The language used was English, and thus it was difficult to participate in the discussion. However, with more meetings, we started to gain confidence and became ready to relay our important messages...." In PNAC, the mere representation of the PLWHA through Pinoy Plus is slowly but surely making a difference.

2.5 Effects of the Interface on the Appropriate Response: Achievements of PNAC

The National AIDS Strategy formulated by the Council was appropriate and very acceptable to key stakeholders. Comparing it to international standards, the principles espoused are very much adequate. These principles include confidentiality and a prohibition on mandatory testing.

It was also able to formulate **guidelines and a checklist for GOs and NGOs in developing information, education and communication materials** on HIV/AIDS. With such guidelines, it has become easier and faster for NGOs and line agencies to conduct IEC campaigns. In coordination with UNAIDS, PNAC regularly publishes a comprehensive data information set on the country level response to the HIV/AIDS epidemic. This has been considered a "best practice" format for data presentation by the UN system.

A **health rights desk** to promote and protect the health rights of individuals was recently established. This greatly enhances the implementation of a principle based response to the epidemic. The interface has also enabled the Council to elicit a quick response from concerned GOs or NGOs on urgent issues such as immigration rules regarding PLWHA which are related to the implementation of the response.

One of the key achievements of the Council is the **mainstreaming of AIDS education and information among key government personnel** in agencies such as the Department of the Interior and Local Government (DILG) and the Department of Education, Culture and Sports (DECS). This is crucial for the development and implementation of further programs in such agencies.

The Council is now poised to expand its reach among the **workers of the industrial sector** through the establishment of the AIDS in the Workplace Program of the Department of Labor and Employment (DOLE). This may also be seen as a stepping stone towards greater involvement of the private sector and the trade unions in the AIDS response.

Finally, PNAC has become the **main venue to coordinate, advocate and monitor the various issues, responses and programs by NGOs and GOs** related to HIV-AIDS. With the existence of such a body, policies creating a myriad of collaborative responses may be formulated and implemented.

2.6 Limitations of PNAC

PNAC does not have a full time secretariat. In fact, secretariat work is piggy-backed on the National AIDS-STD Prevention and Control Program of the Health department. It also has obvious budget limitations from the government coffers, though international donors provide funding for some of its activities and programs.

PNAC does not have strong linkages with the devolved Local Government Units (LGUs). While the DILG assists in creating such links, this is still insufficient given the relatively recent implementation of laws on decentralisation and devolution. While LGUs are now trying to exercise autonomy from national governments, several adjustments are being made especially with regard to functions formerly centralised. Given the fact that the response to the AIDS epidemic has been led by the Health Department, the process of localising the response has become complicated.

While the National AIDS Strategy clearly analyses the problem as multi-sectoral and multi-dimensional, mechanisms related to the response are still "health and DOH focused" (e.g. budget goes through DOH, most NGO members are health NGOs, National response identified with activities of DOH alone, etc.). According to Dr. Enrique Hernandez, former head of the National AIDS Control Program, there is still a need to implement responsive programs outside the purview of the Health department and the health sector. This is crucial for a more widespread response. However, improvements are occurring with the recent introduction of programs by the Education and Labor Department on AIDS Prevention and Control.

Occasional information gaps between the Council and TWG cause some delay in decision-making and action on programs. The recent strategic planning workshop held by the Council specifically traced this to the failure of representatives in line agencies in both PNAC and TWG, to coordinate. In addition, because participant organisations regularly change representatives attending Council meetings, "institutional memory" has been problematic.

There seems to be a relatively weak linkage with the Office of the President given the fact that two important executive orders are still unsigned. Given the load of information and work in such office, key persons must be tapped to assist in the follow up of such an initiative. In addition, several sectors are still not represented though they are considered key stakeholders - LGUs, media, business, and the Church, the latter because of its opposition to condom use.

Finally, there is still no overall program response. This national program should be able to tie together the various initiatives of GOs and NGOs for a more strategic response at all levels from policy formulation to local implementation.

2.7 Forward Looking Points

There is a need to formulate an overall response that could direct a coordinated and more strategic national program. In the absence of a more powerful Commission (as proposed in the AIDS Bill), PNAC remains the only feasible body to do this. As Assistant Secretary Austere Panadero of DILG suggests, PNAC may draft the parameters of a national response and then assign one agency or an NGO to work on the specifics. Alternatively a task force may also be established to formulate the details of the national response.

There is also a great need to formulate specific strategies towards localizing the response. The following are possible options for localisation:

- tap the regional development councils (or regional mechanisms of line agencies) to initiate programs that would catalyze local responses (European Community Project on the regionalisation of PNAC);
- tap LGUs which have expertise and experience in an effective local response (e.g. OCAFI, as the second part of this case study will show, is now helping municipalities in Zambales and Bataan);
- tap NGOs and line agencies like the DILG to initiate interfaces at the local level (e.g. a DILG project catalyzing interfaces and the European Community Project in Naga and Iloilo or CFSI-PHANSUP in Palawan as will be discussed in the third part of the case study);
- tap the Leagues (i.e. League of Municipalities, League of Provinces, League of Leagues) in disseminating IEC campaigns and programs.

The Secretariat must be strengthened by full time persons, in particular, a secretary general or an executive director. Policy formulation and advocacy needs much networking and organizing and a full time person is needed to effect positive results. Council and TWG members should come from the same unit of a given line agency to avoid the gaps already mentioned.

The Council must also review its organizational structure and should decide whether to include representatives from other key sectors like LGUs, media, business, youth, and the Church.

There is a need to strengthen linkages with the Office of the President. PNAC may tap a "presidential personality" (e.g. First Lady) as advisor or honorary chair. This should be done at the beginning of the term of the new President.

This person may be able to facilitate the signing of important documents like the Executive Orders or may be able to assist in fund raising campaigns.

Finally, there is a need to tap more resources within and outside government (e.g. especially the private sector). More resources will lead to greater reach especially at the local and grassroots levels.

3 Olongapo City AIDS Foundation Inc. (OCAFI) : A Venue for Local GO-CSO Interface in the HIV-AIDS Response

3.1 Background of the Organization

The origins of the Foundation can be traced to the City Health Office's AIDS Prevention and Control Program in 1989, the thrust of which was to create a community based model of HIV/AIDS education and prevention focusing on Commercial Sex Workers (CSWs) of Olongapo and Angeles City. This program was being steered and guided by a multisectoral group called the Olongapo City AIDS Task Force whose members came from both government and civil society (i.e. GOs, academe, media, church, community and sectoral organizations).

The OCAFI was established in 1992 as a non-stock and non-profit organization. It took over the Programs of the City Health Office and expanded these to include all sectors of society as partners in HIV/AIDS control and prevention starting in Olongapo City and expanding to the nearby provinces of Zambales and Bataan.

OCAFI presently has a board of five people elected by a general assembly of around thirty members of the multi-sectoral group. It is currently chaired by Dr. Edgardo Geniza, an academician and media practitioner. OCAFI presently has a staff of six persons and is supported by fifty community and sectoral volunteers.

3.2 The Enabling Environment: Aspects of Good Governance

OCAFI blossomed mainly because of a *very supportive local government* from the chief executive to the barangay officials. Ms. Kate Gordon, chief executive of the LGU in Olongapo believes in the "constructive" role of NGOs and civil society in the community. The current mayor emphasizes responsibility and accountability of such organizations to the community. In fact she is committed and very much willing to cooperate and collaborate with such organizations.

A positive milieu was possible because of the *presence of a dynamic civil society* and NGO community led by a variety of distinguished people who were willing to work with government, despite differences in political beliefs or affiliation. (Olongapo had been divided in the past by the debate over the existence of the U.S. bases in their city.) The LGU, led by then Mayor, Richard Gordon, was also very much involved. Ironically, OCAFI was able to harness the energy of the debate by getting representatives of both sides to work together on the AIDS issue, an urgent problem at that time.

> In the early 1990s, the city was confronted by an *emergency situation*, learning that there were 58 reported cases, the most number in the whole Philippines. The response needed was understood by all sectors to be multi-sectoral with a high degree of cooperation in order for it to be successful.

The city was also fortunate to have *a core of committed civil servants* (in health, justice, local government) who involved themselves in the AIDS program and campaign, not only out of public duty but also because of *personal conviction and commitment* to the cause.

The spirit of *teamwork, trust, and friendship* among key leaders and stakeholders even at the start of OCAFI *played a great role in the success* of the interface. This group of individuals also helped each other in creating and implementing social projects, including one on street children. The parties to the interface also had respect for differences in opinion and were able to *transcend "politics" for the sake of public interest.* As Dr. Geniza, Chair of the Foundation puts it, *"Credit grabbing was never an issue".*

3.3 Accomplishments of OCAFI Since its Establishment

As a result of the successful interface, OCAFI has been able to implement a very **successful massive information campaign** utilizing a community based approach. In fact, the Foundation has been able to sustain this information campaign and has already reached the following key sectors: women (a group called BUKLOD), gays, youth, seamen, drivers, R&R workers, schools and colleges, media, NGOs (The United NGOs in Olongapo), and the Subic Bay Metropolitan Authority (SBMA), the former naval base.

It has forged **partnerships with organised groups** in the above sectors in the implementation of IEC campaigns and other AIDS related programs. One important achievement has been its ability to gather and train fifty volunteers to assist in the Foundation's activities. According to Benjie Dominguez, Program Manager of OCAFI, the success of the Foundation in its various programs can be attributed to the active participation of the various sectors in Olongapo.

Another concrete indicator of success is the **increased use of condoms** in the City. According to the head of the records section of the City Health Office (also the secretary of OCAFI), after the first successful IEC campaign among key sectors, available data showed a marked increase in the number of condoms distributed in the City.

The Foundation has also been able to implement a committed **care and support program for PLWHA**. The city government has been exemplary in its support. Former Mayor Richard Gordon employed many affected people in the LGU and gave them training in various fields to help them in their new jobs. This was very successful and has been replicated at the national level. Current Mayor Kate Gordon is now pushing for the employment in the City government of at least one family member of people who have died from AIDS.

In addition, a no nonsense implementation of **principles of confidentiality and anti-discriminatory practices** against PLWHA, was led by the City government.

Successful celebration of World AIDS Day in each year highlights the results of OCAFI's work. As Dr. Geniza said, the celebration is considered one of the biggest parades each year and even now without the US bases, celebrations have been very well attended. This has only been possible because of a coordinated response from various community sectors.

The AIDS program of OCAFI has now expanded into the other municipalities of Zambales and in Balanga, Bataan. (After the closure of the US bases, the CSWs transferred to neighboring towns and cities.) Also the increased economic growth and development have also trickled down to such areas. OCAFI has now found a new role in helping the LGUs in such areas to implement an appropriate response.

3.4 Good Governance, GO-CSO Interface and the Response to HIV-AIDS

Characteristics of Good Governance that stand out in the Case

- Ability to convene a multi-sectoral group; the LGU has shown this in other areas - street children, waste management, SBMA volunteers, etc.
- Experience in responding to similar situation (responses to STD problem since 1974)
- The "wider public interest" orientation of the NGOs and civil society sectors
- Ability to cooperate despite political differences

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- The emphasis of all groups on teamwork, friendship, and trust and accountability and responsibility to the general public
- Political will (sharing of time and resources e.g. city government-office space) of the sectors to effect concrete results

Characteristics of the Interface

Although at first, there were some suspicions with regard to motives particularly related to politics, openness and cooperation was established later after some successful activities. The relationships became inclusive rather than exclusive and given that AIDS could affect anyone in the community, tried to include all sectors. There were also well defined roles with GOs providing finances and office space; NGOs, community based information and training; the media, advocacy materials; and academe, information in schools. Through working together, organisations learned to respect each other's differences.

Effects on the Response

The overall effects on the response to the HIV/AIDS epidemic in Olangapo were a community where:

- almost all sectors are active and are actually involved in the education campaign;
- individuals and groups are responsive to the situation of PLWHA;
- there is massive awareness of the issue (e.g. even condom use);
- there is a committed team of volunteers to sustain the effort and the response;
- key leaders and stakeholders are able to maximize use of available resources within and outside government; and a
- the national response was borrowed from the local response.

Feedback Loop: Effects on the Participants to the Interface:

- **Increased credibility among participating organisations;**
- **A sense of "pride" among participating organisations;**
- **Reinforced idea of the need for a coordinated multi-sectoral response for an urgent issue like HIV-AIDS;**
- **Mutual respect, constructive cooperation and accountability have become the norms for other multi-sectoral responses and interfaces;**
- **An LGU now able to confront other pressing problems**

3.5 Summary of Lessons Learned

The case of OCAFI as an example of a successful interface illustrates the need for an open, supportive and committed local government. At the same time, dynamic and independent NGO and civil society sectors which are "public interest oriented" are also required. There is no place for partisan politics in public interest issues like HIV/AIDS. Trust, friendship, and camaraderie among key leaders are essential and can be brought to other initiatives.

> **Transcending Politics for a More Appropriate and Effective Response**
>
> Dr. Edgar Geniza is an academician and President of a College in Olongapo. He is also a veteran media and NGO personality in Olongapo City. Certainly he is high profile due to his achievements and various social activities. In fact his anti-bases position during the time the American Naval facilities were still in Olongapo, has also made him popular or notorious depending on to whom you speak. He can be easily tagged as a future politician in Olongapo City.
>
> Dr. Geniza says that a day after a mayoralty election in Olongapo, he was pleasantly surprised to get a call from the recent winner, Ms. Kate Gordon who asked him to help out in the AIDS campaign. Some political pundits in Olongapo see Dr. Geniza as a possible contender for mayor. The phone call has symbolized the start of more sustained partnerships in the response of the people of Olongapo to the HIV-AIDS epidemic. The Olongapo City AIDS Foundation Inc., the concrete manifestation of the GO-Civil society interface, is now chaired by Dr. Geniza. Mayor Kate Gordon has given more than a 100% commitment and actual support to OCAFI.
>
> It is not surprising therefore that to date, OCAFI has accomplished so much in the fight against the HIV-AIDS virus.

4 The Inter-agency HIV-AIDS Network (IHAIN): A Venue for Local Interface at the Province and City Level

4.1 Background of IHAIN[1]

The Inter-Agency HIV/AIDS Network (IHAIN) was born out of the need of various sectors to co-ordinate and intensify their efforts in addressing the problem of HIV/AIDS in Palawan.   The formation of IHAIN culminated the 1995 inter-agency staff training on HIV/AIDS counselling conducted by the Community and Family Services International (CFSI) under the auspices of the Philippine HIV/AIDS NGO Support Program (PHANSUP). CFSI is an NGO providing community-based psychosocial services for uprooted groups. The workshop was part of CFSI's continuing efforts to contribute to the prevention and mitigation of the impacts of HIV/AIDS in Puerto Princesa City, a prime tourist destination.

IHAIN is composed of five GOs, five NGOs, and four POs. Its active supporters include religious groups, local media, and private institutions and individuals. Prior to membership to IHAIN, most of the member-organisations did not have programs/projects specifically on HIV/AIDS prevention and control. At present, these organisations have been moved to initiate programs and projects related to AIDS prevention and control.

4.2 Enabling Environment

Palawan's provincial and city governments are not novices when it comes to NGO and PO participation. In fact, there are existing programs that showcase partnerships between government and civil society, some of which were highlighted in the prestigious Galing Pook awards for LGUs. Thus, the exposure, and support of city government to NGO/PO-initiated activities, should not be surprising but should be expected.

The presence of a credible and apolitical international NGO called Community and Family Services International (CFSI) facilitated the interface. The CFSI, realising that the tourism industry will eventually expand in Palawan and recognising the urgency of the HIV/AIDS problem in the Philippines, forged partnerships with a donor (PHANSUP) and local NGOs and government agencies to establish a network which was eventually called IHAIN. The Philippine HIV/AIDS NGO Support Program (PHANSUP) is committed to provide financial assistance for

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[1]IHAIN, the first ever network in the city primarily established to address the HIV/AIDS problem, is an offshoot of the HIV/AIDS initiative of CFSI, thus making it an NGO-initiated network.

innovative efforts toward a more effective response. PHANSUP contributed the initial financial requirements in the formation of IHAIN.

Various GOs, NGOs, and POs in Palawan are also implementing community-based health projects. This experience is also an important contributing factor in the formation of IHAIN as a network for a more community based response.

4.3 Characteristics of Good Governance and the Interface

Several characteristics of good governance may be gleaned in the workings of IHAIN. These include:

- participatory and transparent management approach;
- sense of accountability and ownership among network members;
- openness to, and acceptance of, diverse orientations and perspectives of members; effective and efficient mobilisation and utilisation of human and material resources;
- respect and trust among members; and,
- service-orientation.

The interface has resulted in multisectoral participation among the various sectors. A concrete output is the successful IEC campaigns conducted by the network among the various groups in Palawan. IHAIN is known for its well-organised projects/activities which include planning workshops, information and dissemination campaigns, and policy advocacy.

The interface is also characterised by smooth functional and interpersonal relationships. This has led to greater teamwork in the implementation of projects by IHAIN. An important facet also is the sharing of human and material resources by the members of the network. Even with meagre funds, both personal and institutional, members contribute either financial or human resources to the activities of IHAIN.

IHAIN is well known for its committed and well-motivated members and participants. This commitment has provided the backbone of the successful promotion and implementation of the HIV/AIDS strategies and response in Palawan. Note that most of these responses are proactive given the fact that until the present time, there is still no reported case of HIV/AIDS in Palawan, city or province.

4.4 Effects of Interface on Appropriate Response

Due to the network, many of the strategies and responses formulated and implemented are acceptable to key sectors and network members. The network does not formulate and implement plans of action without the approval/consent as well as participation of all its member-organizations. As several

representatives of organizations in the network unanimously say, "Consensus-building has been ingrained in the process of decision-making of the network".

An important effect of the work of IHAIN is the change in the biased perception and attitude of individuals/community against commercial sex workers, who themselves have been encouraged to avail of services offered by IHAIN and other agencies (i.e., pre-and post-test counseling and anti-body testing). This in turn has elicited more positive responses from otherwise apathetic sectors of the community.

The network prides itself on the mobilization of community in the response to HIV/AIDS, particularly with regard to its participation in HIV/AIDS activities (e.g., World AIDS Day celebration and education sessions on HIV/AIDS) and with regard to increased awareness on dangers of unsafe sex manifested in their increased demand for condoms.

IHAIN is also at the forefront in the promotion of rights of commercial sex workers and those at risk of HIV/AIDS. Reproductive clinics, which used to refuse services to CSWs, now deliver services. Another important accomplishment is the integration of HIV/AIDS projects into the various programs of the different member-organizations of IHAIN, which did not have any HIV/AIDS project prior to their membership to the network. All member-organizations conduct IEC sessions with their respective clients and communities.

The Network also regards as an important achievement, the establishment of linkages, sharing of expertise, and rendering of assistance among member-organizations, which did not exist prior to IHAIN (e.g., patients needing counseling are referred to CFSI while those needing medical attention are referred to Palawan State University reproductive clinic or City or Provincial Health Office).

Finally, Network members realizing the important role of the network in Palawan, are now moving to institutionalize IHAIN with a proposal to affiliate with PNAC provided IHAIN's identity and Vision-Mission-Goal will not be compromised. It has also been recommended that a memorandum of agreement between IHAIN and provincial and city governments on HIV/AIDS response be forged. This would certainly create more positive responses among a wider spectrum of organizations in Palawan's community.

4.5 Lessons Learned

The IHAIN case highlights the crucial role of a *credible and apolitical/neutral external agent* with a considerable track record in community service to facilitate the interface. IHAIN as well as CFSI recognized the important role the latter played in the formation of the network. Without CFSI, the coming together of various GOs and NGOs toward HIV/AIDS response and forming themselves into a network would not have been possible. For one, it was not in the development agenda of the province. For another, no existing GO and NGO in the province had the knowledge and capability to prevent and manage HIV/AIDS.

Defining nature, vision, mission, and goals, and roles and responsibilities of member-organizations, and fine-tuning structure and mechanisms *are necessary to sustain the network*. IHAIN was able to do this through various meetings and planning workshops.

For three years, IHAIN had followed a loose structure of governance. As the first network established primarily to address the HIV/AIDS problem in the province, it was at an experimental stage -- exploring appropriate approaches, strategies and mechanisms for the different member-organizations from varied backgrounds to come and work together toward a common goal. Having seen and experienced themselves, the feasibility of coming and working together to address a very serious and urgent problem such as HIV/AIDS, member-organizations with the assistance of CFSI started to define and clarify their nature, vision, mission and goals and to fine-tune their structure and mechanisms toward sustainability.

Institutionalization of the Network is essential for accessing resources. IHAIN missed a chance of receiving financial assistance from a funding agency because it was not SEC registered, a pre-requisite for accessing resources. Mandates from the local governments to give "teeth" to the network is essential. *Policy advocacy would be more effective if formal tie-ups with local governments are made*.

Despite support from agency heads, members lament that their hands are tied when it comes to fully participating in network activities. They are constrained by protocol (e.g., asking permission and justifying their attendance to network meetings/ participation in activities during office hours otherwise they would be listed as absent). Mandate from local governments can also solve their problems on finances to a certain extent. The local government can include IHAIN projects/activities in budget allocation.

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Affiliation with national and international organizations concerned with HIV/AIDS is crucial for a more effective and efficient response to HIV/AIDS problem. Given the magnitude of HIV/AIDS problem, the wide coverage of Palawan in terms of jurisdiction and population vis-à-vis the human and material resources needed, IHAIN cannot do it alone. It needs support from international and national organizations, thus the proposal to affiliate itself with PNAC and explore membership to international organizations.

Multi-sectoral Networking is Key to An Appropriate Response

Members of the Inter-agency HIV-AIDS Network (IHAIN) in Palawan unanimously agree that networking has been crucial in effecting a more appropriate response in Palawan. Dr. Milagros Bocareza of CFSI notes that with the establishment of IHAIN, members started to tap the expertise of co-members in their respective activities. Other IHAIN members, for instance, tap the CFSI in pre-testing counseling. Cross referrals are now a possibility among members of the network. Sharing of information and resources has also been the practice of most network members.

Ms. Violeta Yadao of the Palawan State University, and IHAIN President, on the other hand, says that their membership of IHAIN has changed the way they operate their reproductive clinics especially with regard to their treatment of commercial sex workers. IHAIN has also been able to get even the military (e.g. Station Hospital of the Western Command and the CTW dispensary of the Philippine Air Force) in the province to be active in the HIV/AIDS issue having a representative sitting in the network. Media (both television-RTV 2 and radio-Radyo ng Bayan) also participate actively in the activities of IHAIN. Finally, even the Catholic Church has recently expressed interest in joining the network, a clear indication that IHAIN is surely gaining more ground.

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5   Initial Conclusions from the Three Examples of Interface

5.1 The HIV/AIDS epidemic requires a multi-sectoral, collaborative response. There should be openness and humility, tolerance of other's ideas, and parties must be frank and comfortable enough to make and receive criticism. Finally the interface must exact commitment from members (i.e. time and resources) and must be inspirational, motivating others to emulate the successful partnership.

A state (national or local government) imbued with principles and practices related to good governance is a major factor in the establishment of an enabling environment for successful GO-CSO interfaces. The existence of a dynamic civil society especially the non-government organizations also contributes to an environment that fosters collaboration among the various sectors.

Through a **successful interface, a more appropriate response to HIV/AIDS epidemic is implemented.**   An appropriate response involves a variety of sectors especially key stakeholders: government, PLWHA, NGOs, academe, media, and the private sector. This type of response maximizes the availability of human and financial resources, thereby increasing efficiency. Because the response is multi-sectoral, it also has the ability to raise additional resources if needed. The end result is the provision of better services and programs by GO and CSO sectors. In addition, the institutionalization of appropriate policies and programs is facilitated, and thus the value of the response to the main stakeholders, PLWHA, is enhanced.

At the same time, through such a coordinated response, the GO-CSO interface becomes sustainable and strengthened. In addition, other types of more effective responses are born out of the partnership. The relationship becomes more dynamic and proactive because of initial success and the ripple effects which create the possibility of successful interfaces on other issues apart from HIV/AIDS.

Inversely, the **successful   interface** also **promotes   good governance** by increasing the credibility of GOs and civil society participants, strengthening participatory and democratic practices as a whole, strengthening individual organizations and sectors involved in the interface and the refinement of relevant policies encouraging GO-civil society relations.

A successful interface results in responses which include:

- those that promote and respect the rights of PLWHA;
- those that motivate various sectors and stakeholders, mobilize and maximize existing human and financial resources;
- those that are able to broaden HIV/AIDS from a purely health to a societal issue; and
- those that encourage innovation.

A successful interface can be initiated by either the government or by a civil society sector. The donor community can also play a strategic role in catalyzing partnerships and collaboration between government and civil society.

A successful interface is characterized by :

- mutual recognition and respect for the parties involved in the interface;
- transcending differences and political persuasions of parties to the interface;
- a division of roles and responsibilities;
- sharing of available resources; and,
- openness to a variety of views and strategies.

Interfaces should also be enhanced within the government and civil society sectors at the national and local levels (horizontal interfaces). The national and local responses should also be organically linked (vertical interfaces).

A successful interface is able to strengthen and energize those involved in the response to the HIV/AIDS epidemic. In turn, good governance is strengthened by the increasing examples and models of collaborative efforts between government and civil society, leading to multi-sectoral responses in areas other than HIV/AIDS.

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