

CHAPTER ONE

General Introduction

Background of the Study

The Philippines has been largely successful in preventing the massive spread of HIV/AIDS in the country. HIV/AIDS is not as prevalent in the Philippines as it is in other Asia-Pacific states such as India, China, Australia, and Thailand. A few years back, the World Health Organization, along with the United Nations Program on HIV/AIDS, hailed the country for its admirable prevention number of HIV cases (Philippine Star, 1999) below 200 cases in the epidemic. The total official number of HIV/AIDS cases in the Philippines is 2,176 HIV infections have been reported in the country (September 2004).

However, government authorities at the Department of Health admit that the spread of the virus is steadily rising (Philippine Star, 1999). A meteoric rise remains imminent (First Visayas Convention on HIV/AIDS, 2002). Even if the rates of HIV prevalence and incidence are low, the number of HIV infections in the Philippines is slowly increasing (Philippine Star, 1999).

The HIV Registry indicates some alarming scenarios. Every year, the number of new HIV cases increases by at least 60 per cent. By June 2002 HIV/AIDS cases in the Philippines is 200 persons or 75 persons greater than the June 2001 total of 125 persons. (HIV/AIDS Registry) Emerging cases each month average 15 persons. Today, the Philippines is at a higher level of transmission and a great pool of potentially infectious persons are capable of transmitting the virus (Today, 1999).

As of December 2005, HIV/AIDS mother-to-child transmission (MTCT) in the Philippines is recorded at 33 cases, and the documented number of HIV cases for the age groups below 10 years is about 13 cases for males and 14 cases for females. Serious concerns exist over the continued vulnerability of Filipino children and youth to HIV/AIDS. Along with poor maternal health and nutrition, inadequate primary health services, malnutrition, and physical or mental disability, the Council for the Welfare of Children recognized HIV/AIDS as a major threat to young people throughout their life cycle. However, few young Filipinos perceive themselves to be at such risk. Instead, they see HIV risk as a problem exclusive to sex workers and promiscuous individuals (Philippine Information Agency-Human Resource Development Division, 1999).

Despite the vigorous information campaigns initiated by various government and non-governmental organizations (NGOs), Filipino youth's knowledge of AIDS remains still low. Some in fact, were found to believe that bathing after sex or taking antibiotics could protect one from getting HIV (Today, 1999). In Bontoc, only half of the young male adult respondents expressed knowledge that antibiotics do not prevent AIDS. In Tacloban, only 42 per cent of young adult respondents gave correct answers about the absence of a cure for AIDS. Only 46 per cent of young adults in Iloilo are aware that a person with HIV could look healthy (Manila Bulletin, 1999).

These trends are further validated by the 2002 Young and Adult Fertility and Sexuality Survey (YAFS 3). Results of YAFS 3 reveal that youth knowledge about sexually-transmitted infections, especially AIDS, is inadequate to ensure prevention and protection. While almost everyone (94 per cent) has heard of HIV/AIDS, still many young people (23 per cent) think that AIDS is curable. Sixty per cent believe that there is no chance for them to contract HIV/AIDS – a perception shared almost equally by males and females.

Such situation is not helped by the fact that the Filipino family plays only a minimal role in providing information on sex and sexuality. Besides, few tri-media materials are intended for children and youth. And even if health services are available, many adolescents are often reluctant to avail themselves of these (Guidebook on Adolescent and Youth Health and Development Program, Department of Health and United Nations Population Fund, 2002).

Children and youth, who comprise more than half of the country's population, appear to be the most vulnerable to HIV/AIDS. The sheer number of potential persons living with HIV/AIDS amongst the youth is enough to make the disease flourish. The emerging trend is likely to continue unless efforts to arrest the spread of the disease through information dissemination are made.

A signatory to various international covenants on children, gender rights, and reproductive health, the Philippine is duty-bound to address this problem and minimize the risk of young Filipinos to AIDS and HIV. Being a signatory to the Convention on the Rights of the Child demands that the country must recognize the child's right to enjoy the highest attainable standard of health by taking appropriate measures to develop preventive health care (Article 24, 1 and 2, Convention on the Rights of the Child). It is duty-bound, as the Beijing Platform for Action enjoins, to address the specific needs of adolescents and implement appropriate education and information measures on sexual and reproductive health issues and diseases including including HIV/AIDS (Strategic Objective C.2, Beijing Platform for Action). Based on the International Conference on Population and Development, the country should mobilize all segments of society to ensure effective information, educational, and counseling programs on responsible sexual behavior and effective prevention of sexually-transmitted diseases, including HIV among adolescents (International Conference on Population and Development, 7.32; 8.32).

Republic Act 8504: The Philippine AIDS Prevention and Control Act of 1998

Over the years, the Philippines has been urging local government units (LGUs) to help fulfill such international commitments. The Philippines' AIDS Prevention Act (Republic Act 8504), authorizes all LGUs to conduct an educational and informational campaign on HIV/AIDS in which all local government officials shall coordinate with "concerned government agencies, non-government organizations, and church-based groups" (Section 9, RA 8504 Implementing Rules and Regulations). Through their health, social welfare and population officers, local government units shall undertake an HIV/AIDS education and information program in the community. Moreover, local government units are mandated to coordinate and cooperate with concerned agencies, non-government organizations, persons living with HIV/AIDS, and groups most at-risk for HIV infection, in providing community-based prevention and care services (Section 23, RA 8504 IRR).

National stakeholders admit that responses from local government units have been inadequate (Philippine National AIDS Council, 2003). RA 8504 prescribes the creation of local AIDS councils and enjoins LGUs to formulate their respective HIV-related policies. But few LGUs have done so. Making matters worse is the inability of most localities to sustain their early initiatives to address HIV/AIDS. Many local AIDS councils are hardly functioning. Likewise, a huge number of localities do not implement the policies they created.

Against this backdrop, institutionalized and sustained HIV/AIDS programs at the local level are conspicuously absent. The modest efforts being undertaken by selected communities are mostly initiated by NGOs. It could take a while before the local AIDS councils could spearhead effective responses to HIV/AIDS in communities. In the meantime, the task at hand is to seek other structures or mechanisms that could assist LGUs in developing sustainable and long-term prevention programs for children and youth.

Other potential structures or mechanisms may be explored to deliver information, education, and support packages to young Filipinos. These include organizing the Barangay Councils for the Protection of children (BCPCs) in every locality. Toward this end, the Remedios AIDS Foundation has conducted a study that will determine the best possible advocacy framework for BCPCs to carry out HIV/AIDS prevention programs.

Statement of the Problem

This study explored the possibility of mainstreaming HIV/AIDS issues and concerns in BCPCs. It also attempted to answer this general question: How can BCPCs play a major role in institutionalizing HIV/AIDS education initiatives for children and youth at the local level? It also tried to answer the following specific questions:

1. To what extent have BCPCs addressed the issue of HIV/AIDS? How far have their efforts gone?
2. What are the facilitating/hindering factors that influence the success/failure of HIV/AIDS advocacy programs designed for BCPCs?
3. How do AIDS service organizations overcome the hurdles they encounter in running advocacy campaigns within BCPCs?

Objectives of the Study

Designed to provide answers to the foregoing research questions, the study's immediate goal was to highlight two cases of organizing and running HIV/AIDS-related advocacy efforts for children and youth within BCPC. In the process, it sought to meet several complementary objectives, namely:

1. To perform an inventory of BCPCs with existing HIV/AIDS education and information programs;
2. To determine what other strategies need be undertaken by an HIV/AIDS advocacy group to ensure its success in running child-focused initiatives inside BCPCs;
3. To augment existing information about similar efforts;

4. To heighten understanding of factors that have to be considered in advocating for HIV programs for children among BCPC members;
5. To document best practices;
6. To identify issues and gaps in doing HIV advocacy work inside BCPCs; and,
7. To develop guidelines or tips on how to run successful advocacy programs on HIV/AIDS.

Significance of the Study

This study emerged out of the UNICEF's need for guidance on how to mainstream HIV/AIDS issues and concerns in existing structures of local government structures. This is in light of UNICEF's effort to intensify its support responses to the Philippine HIV/AIDS epidemic. Soon, it will embark on information, education and communication (IEC) programs that aim to raise awareness among young people, promote care and compassion to people living with HIV/AIDS (PLWHAs), and mobilize partnerships for multi-sectoral prevention initiatives.

The results of this study will thus be used by UNICEF to develop models for initiating and implementing effective advocacy programs on HIV/ AIDS for children and youth. The analysis of two cases will facilitate the design of more exemplary strategies for doing HIV/AIDS prevention work among the youth.

Scope of the Study

As part of UNICEF's efforts to strengthen its earlier local programs for children and youth, the upcoming HIV prevention initiative will be piloted in areas where it has already established strong partnerships through appropriate programs. One of these is the Fifth Country Program for Children (CPC 5), which resulted in the development of four local policy packages protecting the rights of Filipino children and youth. Building on this achievement, UNICEF aims to limit this study to local government areas that have already adopted such policies. These measures have already been institutionalized in 18 local government areas across the country. This research project focused only on BCPCs located in these LGUs.

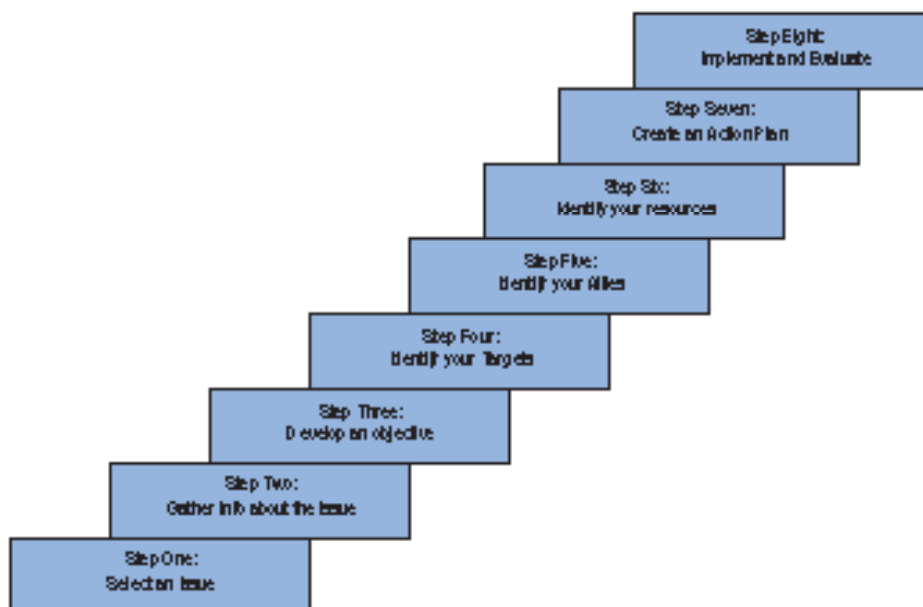
CHAPTER TWO

Literature Review and Analytical Framework

Review of Related Literature

A toolkit developed by the International Council of AIDS Service Organizations (ICASO) adopts a framework for planning and doing effective advocacy work on HIV/AIDS (ICASO, 2004). More than just a guide for initiating advocacy actions, the framework is also a checklist that provides pointers and reminders on how to organize programs in systematic fashions.

HIV/AIDS Advocacy Planning Framework Developed by ICASO



Successful advocacy campaigns are borne out of careful planning. Good advocacy programs are by-products of well-crafted action plans. Efforts exerted without an action plan tend to lose track of relevant visions and goals. Action plans choose and specify the appropriate activities for the advocacy initiative, sorting out in detail what and how actions or activities must be carried out.

The challenge for every advocacy effort is to come up with a carefully thought out action plan. A helpful tool for meeting this challenge is the ICASO framework. Based on this framework, organizations must work on six things before actually drafting an action plan.

Before anything else, an advocacy group must first carefully select an issue that it wishes to address. As much as possible, no major activity must take precedence over this. This is vital to ensuring a systematic approach to the whole issue. Until this is achieved, the corresponding efforts will be unclear. Ideally, the issue to be chosen must be realistically manageable.

Having chosen a specific concern or problem, an advocacy group must spend time gaining knowledge and information about it. Empirical knowledge of the issue is important. Failure to understand the context of the issue often prevents the development of realistic, doable, appropriate, sensitive, and responsive interventions.

These important preconditions facilitate the achievement of another crucial requisite – that of the group having clear goals and visions. Without these, it would be difficult to pursue the advocacy initiatives of a group. The objectives should be specific, measurable, appropriate, realistic, and time-bound.

Advocacy initiatives target a specific personality, group, or institution. Target audiences must be carefully chosen and prioritized to ensure the cost-effectiveness of activities to be launched. Thus, upon clarifying their aims and objectives, HIV/AIDS advocacy groups must spend ample time determining who are the key personalities or the principal decision-makers given a specific issue.

With a target sector in mind, the group must then identify its allies. Multi-sectoral responses are important in addressing HIV/AIDS (Philippine National AIDS Council, 2000). It is always helpful to develop a huge network working for one advocacy campaign. This helps ensure extensive public knowledge for the campaign and efficient use of resources. Often, the ones with wider networks are the ones with stronger, more viable, and sustainable programs.

Accomplishing this step could facilitate the identification of resources for the advocacy initiative. Goals are achieved not just through partnerships with other organizations, but also through resource sharing. Resources, including manpower, must be used efficiently. Actions to be taken must be commensurate to the material and financial resources available at the group's disposal.

These are the building blocks for a well-crafted action plan. Furthermore, as the ICASO framework suggests, advocacy groups that go through such processes are more likely to develop carefully mapped out roadmaps that will help them attain their goals.

However, these alone cannot guarantee success in pursuing advocacy campaigns on HIV/AIDS. Good programs are measured by carefully crafted and well executed action plans. The ability of the advocacy group to harness or sustain enabling factors, and to balance constraints or difficulties is essential.

Constraints

Challenges and constraints are common in the implementation phase of any program. Aware of this reality, Lunduyan, a local NGO that works for the rights and welfare of children, views failures in organizing BCPCs as opportunities for growth and development (Philippines HIV/AIDS Proposal – Global Fund to fight AIDS, Tuberculosis and Malaria, Round 4, 2004).

One major challenge encountered by advocacy groups was the limited budgetary support allocated by LGUs to HIV/AIDS prevention programs (www.path.org/files/CP_phil_policy_advocacy.pdf). For instance, NGOs involved in the AIDS Surveillance and Education Project (ASEP) noted that in some instances, the amount of money allocated was less than that provided for in the ordinances. In cases where sufficient money is allocated, only a small portion of it is allotted for education activities.

Another hurdle experienced by previous programs was the reluctance of target personalities to address the issue of HIV/AIDS. Raising political interest and will in a low-prevalence setting can be a challenge. In an effort to subvert the situation, some advocacy groups decided to initially focus on the general issues and concerns affecting children. This may not be good approach, as it could unnecessarily spawn some constraints. The strategy backfires and the advocacy initiative loses focus on HIV/AIDS issues. For instance: “Once the BCPCs were reactivated, the original goal of protecting minors from sexual exploitation was lost. Most councils focused on activities such as supplemental feeding and nutrition, vaccinations, general health care, and day care” (www.path.org/files/CP_phil_policy_advocacy.pdf).

Enabling Factors

Drawing from the experiences of two partner organizations Bidlisiw and FreeLAVA, ASEP came up with some guidelines on how to ensure success in undertaking advocacy efforts on HIV/AIDS at the local level. Bidlisiw is an NGO in Cebu City that used to provide services on sexually-transmitted infections to gay men and prostituted youth at its Health Resource Center. FreeLAVA, also an NGO in Cebu City, is a legal aid organization tapped to do advocacy work on HIV/AIDS and children’s rights.

These NGOs have shown that the ability of the advocacy group to identify and enlist local HIV/AIDS champions within the community is crucial to a successful advocacy campaign. This can be developed by spending time developing relationships with local leaders and influential individuals. One way of nurturing such relationships is by allowing the champion, such as the local chief executive, to serve as the main actor in policy and advocacy efforts. Advocacy groups should be ready to stay in the background, acting as a facilitator in this process.

Another crucial factor is the ability of the advocacy group to overcome constraints in creative ways. Whenever opposition arises, such groups must try to include the adversaries in resolving their concerns. If the target individuals or groups are still reluctant to address the issue of HIV/AIDS, ASEP said it would be better to first lobby for the general welfare of children. Through this entails the risk of losing focus on HIV/AIDS

awareness and prevention, it is still an effective approach to establishing BCPCs. To prevent the relegation of HIV/AIDS concerns into the background, advocacy groups may push for the establishment of structural mechanisms that will promote HIV prevention among minors. FreeLAVA advocated for the enactment of resolutions within BCPCs for setting up HIV/AIDS/STD (sexually-transmitted diseases) committees.

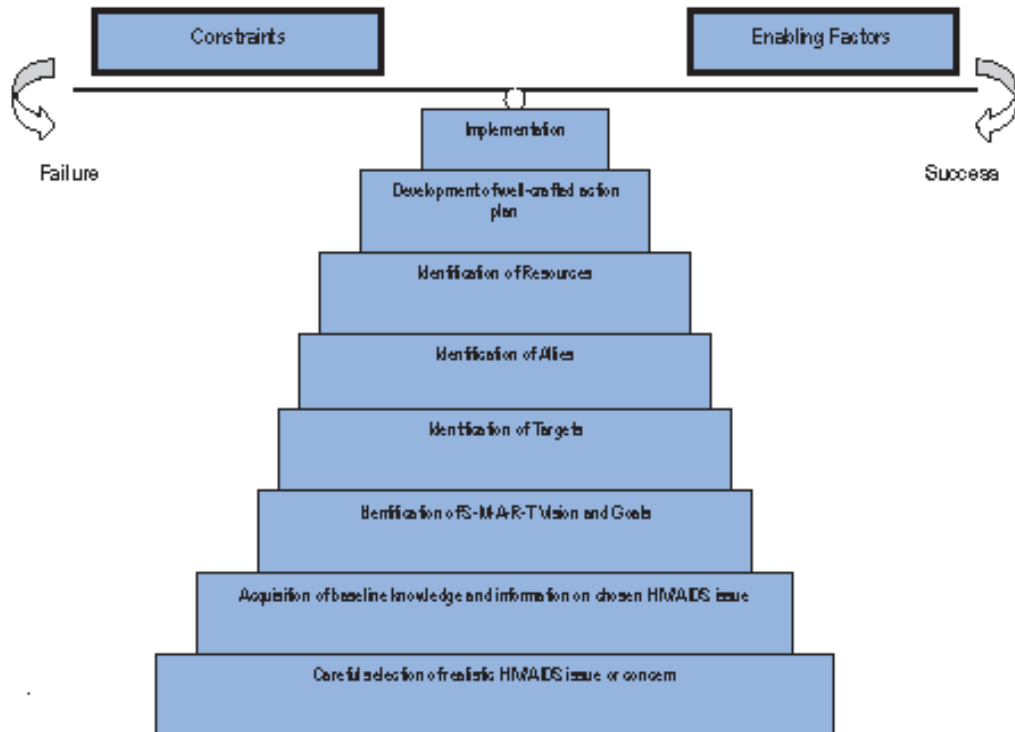
The support of local government officials is extremely important in implementing advocacy initiatives. However, getting the support of the local chief executives' staff members is also very important. Often, they play a considerable role in the decision-making activities of local government officials. It also helps if the advocacy groups include local government staff members as targets for education programs.

Another facilitating factor in doing advocacy work is the ability to comprehend the political power structures working within the locality. In each site, advocates need to know who wield power in key areas, and who are indebted to whom.

Conceptual Framework

As the related literature suggests, the success of every HIV/AIDS advocacy effort is hinged on the ability of interest groups to balance the constraints and enabling factors they encounter in running programs or initiatives.

The following is a working model for the successful implementation of an HIV/AIDS advocacy campaigns.



The diagram is a working model on how successful HIV/AIDS advocacy programs are implemented. The first step is to select carefully an HIV/AIDS issue or concern that you want to address. Following this step is the need to conduct baseline knowledge and information on this issue through various modalities such as surveys, reports, focus group discussions, key interview with key individuals, agencies at the locality. Having the problem in mind, set your goals/objectives, which should be SMART (specific, measurable, attainable, realistic and time bound), so that targets are kept feasible and realistic. Alongside advocacy work, environmental scanning is needed to identify first potential allies and available resources before the advocacy program is implemented. It is but natural that along these pathways there will be constraints and there will be enabling factors that could be seen as opportunities to further meet the goals.

The general intent of this research project is to further explore the experiences of various organizations in undertaking HIV/AIDS advocacy programs within BCPCs. This working model serves as a roadmap for a more detailed documentation and description of efforts to raise awareness and support of BCPC members to AIDS-related initiatives for children and youth. It outlines all major areas that need to be checked while exploring the realities of mainstreaming HIV/AIDS in BCPCs.

In effect, the working model should serve as a guide in examining project cycles and program components – from conceptualization to implementation.

CHAPTER THREE

Methodology

Sampling Technique

The immediate objective of the study was to analyze two cases of mainstreaming HIV/AIDS issues in Barangay Councils for the Protection of Children (BCPCs). From a through analysis of two case studies, the study attempted to generate data for future advocacy campaigns in BCPCs throughout the country.

A qualitative sampling technique, commonly called “extreme” sampling technique, was used in choosing these cases for analysis. The use of extreme sampling technique suggests the selection of cases with outstanding traits or characteristics. It indicates the study of best or worst practices in doing things, such as in implementing development initiatives. The rationale is that the study of extreme cases will highlight all the glaring factors that either make or break a particular social endeavor.

Following the suggestions of extreme sampling technique, the local areas to be chosen for the case analyses were barangays with exemplary experiences in running BCPCs and HIV/AIDS advocacy program for children and youth.

Data-Gathering Activities

All relevant information needed for this study were gathered through the following data collection activities.

Review of Related Literature on BCPCs. The review of literature initially conducted sought to identify the HIV/AIDS advocacy frameworks available. This was consistent with one of the objectives of the study, which was to analyze and to interweave both theories and practices undertaken by other agencies that could be useful in developing a model HIV/AIDS advocacy framework for this study. This conceptual model will serve as a guide or roadmap in studying AIDS-related initiatives for children and youth.

Understanding the current state and context of BCPCs in the Philippines was deemed vital in providing the proponents of this study with a clear picture of how HIV/AIDS concerns and other health issues can be integrated in such local structures. A backgrounder on BCPCs was developed using data generated from a review of related materials.

Key Informant Interviews with Frontline Advocates. Detailed descriptions about ongoing initiatives by frontline advocates in the chosen localities helped in gaining deeper understanding of their advocacy programs. Key personalities in initiating and running the programs – such as program managers and other

stakeholders – were asked to share whatever information they had during the open-ended semi-structured personal interviews.

Review of Program Documents. The information to be gathered through key informant interviews was complemented and supplemented by data from a review of relevant documents, such as project proposals, program evaluation reports, citations, write-ups, and most importantly, actual IEC materials used in the advocacy campaigns.

Focus Group Discussions. Interviews with target audiences of the advocacy programs helped generate vital information. A total of three focus group discussions were conducted among the young residents of Barangays Ermita and Zone 4. Their comments about the advocacy campaigns were used in evaluating both the impact of the programs and the effectiveness of strategies adopted by the implementers.

Non-participatory Observation. For validation purposes, and for understanding better the context in which the programs are run, non-participatory observation was conducted during the field visits. Such systematic observation allowed a better understanding of the different cultural factors that play a role in running successful programs. Observation also allowed the collection of non-verbalized information that was no less important in analyzing advocacy programs.

CHAPTER FOUR

Barangay Council for the Protection of Children: Some Case Studies

BCPC of Barangay Ermita, Cebu City

Barangay Ermita is a densely populated settlement in the midst of Cebu City's highly urbanized downtown commercial district. It is home to hundreds of vendors and odd-job seekers plying their trade and services in two popular public markets located within its boundaries - Carbon Market and Warwick Barracks Market. In 2004, Ermita's total land area of 17 hectares was shared by at least 16,000 residents, 60 per cent of whom depended on market vending for their income.

The poverty incidence in Barangay Ermita is high. Almost one-third of its working population does not have a regular source of income. Those who manage to find employment in the market earn an average of 70 pesos (US\$1.32) a day. The majority of the residents live in small, makeshift wooden houses.

Such an unfavorable socio-economic condition is compounded by a state of lawlessness that has engendered a high level of criminality, giving it the dubious distinction of being Cebu's equivalent of Tondo in Manila. The crowded streets of the barangay, especially those adjacent to the markets, are perennial sites for petty crimes like snatching and hold-ups. Peddling and use of illegal drugs are common in its narrow alleys. Shabu is known to have started here before it spread throughout the entire province.

General Situation of Children in the Barangay

Children comprise about 40 per cent of Barangay Ermita's population. Growing up healthy, strong and enjoying adequate opportunities for optimum growth and development is a major challenge for them, given the obstacles they face, which are manifold and complex. *"Bago ka makarating, dumadaan ka muna dito sa napakaraming pagsubok. Pag totoong lumaki ka sa Carbon, labat ng bagay matututunan mo."* (Before reaching your destination, you have to overcome challenges. If you grew up in Carbon, then you have seen and learned everything) At their young age, they are already confronted with a wide range of issues including drug addiction, teenage pregnancy, and sexually-transmitted disease such as HIV/ AIDS.

Illegal Drugs

No issue is more pronounced in Barangay Ermita than the illegal drug trade and use. Though local leaders believe that the number of drug abuse cases has declined dramatically over the years, a considerable number of residents still fall prey to drug abuse. This is evidenced by the numerous apprehensions that have been made and cases filed by the barangay officials against erring individuals. At least 100 cases are pending in court.

In the fourth annual congress of children in Barangay Ermita held in 2004, illegal drug use was identified as the number one issue affecting the youth in the community. The preponderance of drug trade in the area has resulted in not a few children coming into conflict with the law by working as runners or carriers for some dealers. Their customers or clients are very diverse: some are fellow youth, both in school and out of school; some are sex workers; some are men having sex with men (MSM). Usually though, they are not from the barangay. As could be expected, a number of minors have fallen prey to drug addiction. Many of them were initially hooked on rugby and, later, shabu. Other children have not been spared by the ill effects of drug addiction. They have either been left unattended, neglected, or abandoned by parents addicted to drugs.

Garbage

While the public markets and nearby establishments provide a source of livelihood for the residents of Ermita, they leave behind huge piles of garbage that affect the residents' health in no small measure. The pile of trash accumulates so fast that it turns into a mountain of waste in just two days. Two trucks are dispatched daily to collect the garbage. Even then, residents, notably the young, are not spared the adverse effects of living in a polluted environment. The children, who are considered most vulnerable in this kind of situation, thus become susceptible to respiratory, digestive, and dermatological diseases.

Malnutrition

Making life more difficult for children in Barangay Ermita is the inadequate nourishment they get from their parents, who can ill afford to meet their children's nutritional requirements. In January 2005, Barangay Ermita was found to have the second highest incidence of malnutrition in Cebu City.

Lack of Access to Comprehensive Health Care Services

Prone to illnesses endemic in the type of environment they live in, the children of Ermita can only hope for greater access to free or affordable comprehensive medical services. The clinic, located within the premises of the barangay hall, is open daily. Barangay health workers attend to the needs of the residents, including children. But more often than not, the clinic has no medicines to provide for its clients; stocks quickly run out. Owing to budgetary constraints, the local government cannot afford to have sufficient

supply of even the most common medicines, like antibiotics and paracetamols. Health care services are still very limited in the barangay.

Lack of Access to Education

Education remains a privilege to the majority of children residing in the community. Since almost a third of Ermita's working population does not have a stable income, many residents cannot send their children to private schools. Worst, the barangay does not have even a single public primary or secondary school. The nearest public school is between 1.5 to 2 kilometers away from the area. Commuting to school could be a drain in the pocket of most Ermita children. Walking is not an option either, because it is considered too risky to walk the whole 2-kilometer stretch, which crosses very busy, vehicle-occupied downtown streets. Given this situation, only a few children manage to go to school.

To date, at least two-thirds of Ermita children ages 12 years old and below are out of school – even if many of them see education as their ticket to a better future and their most effective tool against abuses of all kinds.

Making matters worse is that very few of the children in Barangay Ermita can go beyond high school. The number of those who go to college is even smaller. All this is attributed to poverty.

Street Children

Some out-of-school children, especially those who have been neglected or abandoned by their parents, end up on the streets, where they are exposed to all kinds of vices and illegal activities, including petty crimes. Eventually, they acquire these vices themselves and run afoul with the law by engaging in petty crimes such as pickpocketing.

Child Labor

Those who fail to enroll and attend school seek employment instead. Like their parents, they take on whatever odd jobs the public markets and business establishments offer. Their work ranges from scavenging and collecting tin cans that they sell at meager rates. Once in a while, some of those who opt to live in the streets would do similar work. They would roam the streets and pick up whatever trash they think can be sold later to nearby junk shops.

Illegal Gambling

A good number of out-of-school children in Ermita who manage to earn a living end up wasting their earnings, not only on non-essentials, but also on vices like taking drugs and gambling. Many kids, including those in school, have become addicted to *video kareras*, a form of illegal gambling that allows players, including children, to place bets ranging from a few to hundreds of pesos for any two-number combination of computerized horses for every race called forecast.

Early Marriage

Aggravating the pitiable state of the children and youth in Ermita residents is the high incidence of live-in relationships. Most are forced into such arrangements because of unwanted pregnancy. At least 20 per cent of female minors have experienced pregnancies — a strong indication that they did not have the necessary information on family planning and protected sex before engaging in sexual activity. Some, as young as 14, become mothers, without receiving proper prenatal care, since they do not have the resources to undergo medical check-ups. The barangay health clinic in Ermita has neither medicines nor family planning programs to offer to the residents.

Teenage pregnancy poses risks to young women because of the immaturity of their reproductive organs. Yet, even if they are aware of these risks, some of the youth, especially those unable to study and find better-paying jobs, have gone into early marriage or live-in arrangements, and seem to think of it as the solution to their problems. They think they can share in their partner's resources, however meager.

Congestion

Teenage pregnancies and early marriages result in one irreversible fact: the rapid and steady burgeoning of the barangay's population size. The personnel of Ermita's health center reported that it is not uncommon for them to deliver six babies a week. The average number of children per family is three.

The increasing birth rate goes hand in hand with the steady influx of migrants to Ermita, hoping to work as small traders or odd-job workers in its markets or any of its commercial establishments. This has resulted in increasing congestion of the barangay that in turn spawns a host of other problems: lost privacy; lost space for breathing fresh air; and, increased difficulty of availing themselves of sorely limited local government services that do not increase correspondingly with the population.

Parental Neglect and Abuse

All these issues confronting the children of Ermita are rooted in a much bigger problem: parents who are neglectful or abusive. Ironically, children often experience the major setbacks in their development and existence right in their own homes.

Many children are left unattended during their early years since their parents are busy trying to earn a living. The worse off among them do not get decent meals or clothing, much less the education that they need, because their parents are hooked on vices or engaged in crime.

Countless as well are the children who suffer psychological, verbal, and physical abuse from their parents. Lacking the skills and maturity to raise their children, many parents, most of them young, resort to violent ways to discipline their children.

And so the cycle goes: many end up in criminal activities, drugs, or teenage pregnancies because they are not given the chance to acquire any form of education. They could not study in school because in the first place, their parents could not even afford to provide them their basic food requirements. Their parents could not afford to buy food and the necessities in life because of two things: they are either too hooked on drugs and vices, or they could not earn much for the entire family, because in the first place, their parents in turn did not give them the chance to study as well.

Sexual risks among children intensify as they are set against a socio-economic backdrop that is riddled with problems and beset with hardships. The absence of caring parents and a nurturing community takes a direct toll on the opportunity of children and adolescents to have a safe and secure sexual existence. Where poverty incidence is high and parental neglect is prevalent, early engagement in sexual activities is almost always observed among minors. Sex often becomes an outlet of frustration and expression of helplessness. And where poverty rate is intense and access to public education is limited, chances are that many minors are engaging in sex ill-informed on sexual risks like pregnancy, sexually-transmitted infections, HIV/AIDS, and sexual violence. The high poverty incidence indicates that access to formal education is limited – thus limiting the potential source of accurate information about sex and sexuality and sexual risks. That many decide to stay on the streets indicate that few parents present themselves as role models. Children are often left to depend on their peers who are as oblivious as well to the risks involved in engaging in sex at a young age. That teenage pregnancy is high suggests that many are initiated into sex at a very young age. Furthermore, incest and child molestation have been attributed to urban congestion.

BCPC of Barangay Ermita

Over the years, the local leaders of Ermita have come up with measures to improve the plight of children in the community. Admittedly, the social conditions prevailing in the area remain far from ideal. Yet the situation has improved, thanks to Ermita's Barangay Council for the Protection of Children.

History

Barangay Ermita's BCPC was established in 2000 shortly after the city ordinance implementing Presidential Decree 603 was promulgated at the barangay level. By virtue of this executive fiat, the BCPC replaced the heretofore existing multi-sectoral groups like the committee on children's welfare created in 1997.

Envisioning a community that would promote a child-friendly barangay, the BCPC sought to uphold the rights and welfare of children, helping them become responsible and productive citizens of society. In this regard, the BCPC in Ermita aims to assist the indigent and less fortunate children in the community, including minors who are in conflict with the law, and to develop a peaceful, orderly, and environment-friendly barangay, where children can grow up attaining their full potentials.

Realizing the need for a much stronger multi-sectoral body to meet these objectives, the barangay captain, along with the original members of the BCPC – such as the Barangay councilors, Sangguniang Kabataan (Youth Council) Chairperson, and the representatives of government agencies like the Department of Social Welfare and Development, decided in 2002 to invite all existing non-government workers undertaking child-focused programs in Ermita to join the reinvigorated BCPC. The response of the NGOs was very positive. In no time, the membership of the BCPC grew to 62. Since then, the Ermita BCPC has been a strong active force in carrying out concerted actions for children.

The current BCPC members in Ermita include: Barangay Captain; all barangay councilors who head the different committees within the BCPC; SK Chairman; barangay secretary; barangay treasurer; representative from the Police Station; Barangay Self-Defense Unit Chief; project coordinator of a local NGO for Children (Nazareth); social workers; one child advocate; six barangay health workers; Gender and Development Project Administrator; representatives from a multipurpose cooperative and vendors association; and, representatives from homeowners' associations.

Organization and Structure

Ermita's BCPC is headed by the barangay chairperson. The vice-chairperson is a representative of an NGO for children called Nazareth. An action officer, who also serves as the barangay council's secretary, aids the barangay captain. The former takes over in the absence of the chairperson while and the latter acts as the general secretary of the BCPC. The position is usually chaired by LGU representatives.

All NGO and people's organization members of the BCPC are grouped into six committees: 1) the committee on family life, enrichment, and counseling; 2) committee on peace and order; 3) children's justice committee; 4) committee on sports and entertainment; 5) committee on education; and, 6) committee on health and special categories on children. Membership in a committee is based on the type of child-focused program that each NGO and PO offers. All six committees meet separately at least once a month to monitor the progress of their programs and address various issues that emerge in the course of implementing projects.

The entire BCPC meets regularly every first Thursday of the month.

The budget of the BCPC comes from four major sources: the barangay's Gender and Development (GAD) budget; the SK budget, which is, as mandated by law, covers 10% of the barangay's annual budget; subsidies provided by the barangay's economic enterprise department; and regular donations made by member NGOs. For CY 2005, an allocation of P80,000 came from SK funds, and an additional P20,000 from the GAD budget.

Every five years, the BCPC drafts and implements a medium-term development plan. Its goals are concretized through annual action plans prepared by each standing committee. The major activities of every BCPC member organization are not just guided by the annual action plans. These plans are also used to monitor their performance. During committee meetings, the NGOs report on their accomplishments based on the goals set in their respective action plans.

Membership

From 62 in 2002, the total number of BCPC members dropped to just about 42 this year. The actual size of the BCPC fluctuates depending on the number of NGOs with existing funded programs in the community.

Though the heads of the BCPC are predominantly male (from the chairperson to the committee leaders), its general membership is made up mostly of women. The children's justice committee appears to be the only male-headed, male-dominated committee in the entire organization.

Even if women do not occupy the BCPC's top posts, they still manage to play significant roles in promoting children's welfare. Women are generally acknowledged to have the ability to push for their respective ideas or programs to ensure that they are successfully carried out. In general, BCPC leadership is very supportive of the efforts of the female members – something they attributed to the gender sensitivity training they received in the past.

Likewise, the participation of SK members, and that of children representatives of different NGOs like Nazareth, is very much substantive and prominent. The Sangguniang Kabataan is a council of youth leaders elected by the youth of Barangay Ermita. They are mandated to play a crucial role in spearheading development programs for the youth in the community. The chairperson of the Sangguniang Kabataan is mandated by law to hold a permanent regular seat in the Barangay Council for the Protection of Children. On the other end, the children representatives of NGOs like Nazareth are young leaders chosen among the program beneficiaries of the organizations. Nazareth, for example, is more than an NGO that provides educational assistance to children in the barangay. Part of their program is to develop the leadership skills of the children they assist. The children are encouraged to run their own organization and implement their own set of activities that would safeguard the rights of their fellow children.

Moreover, the BCPC of Ermita is very much supportive of the SK leaders and the children representatives

of NGOs. The BCPC members always give them the chance to speak and air their views, concerns, and suggestions during meetings. They also incorporate the insights expressed by the young residents during their annual children's summit into the BCPC plan of action and the barangay development plan.

Expectations

Three years following its revitalization, the BCPC in Ermita has been recognized as a major partner of the Barangay Council, not only in addressing the issues affecting children but also in working for the community's genuine growth and development. Far from being mere implementers of child-focused programs and ordinances in Ermita, the BCPC has become the Barangay Council's strongest partner in formulating local policies and laws for the welfare of children.

Members of the BCPC serve as the Barangay Council's constant source of valuable information. Their involvement in grassroots activities enables them to identify the problems confronting the community, which they then share with the barangay council. Their insights, views, and suggestions then form the basis of formulating ordinances and development plans that are beneficial to the community.

BCPC Accomplishments

As Cebu City's most outstanding BCPC for 2004, Ermita's Barangay Council for the Protection of Children has gone a long way in uplifting the conditions of children in the community. Since its revitalization in 2002, it has done much to remove the barriers to the full development of minors as productive individuals.

Expanding Access to Education. The BCPC and the Barangay Council have yet to realize their dream of establishing a primary school in the community, as they are still trying to find a suitable yet affordable space for the school. One potential site for the school is deemed to too expensive, since acquiring it will require around P30 million.

Amid this situation, the BCPC and the Barangay Council have not given up on their dream of building a school within their community. The BCPC, in partnership with the Barangay Council, is currently raising funds to buy land and build the planned school. In the absence of a school in the barangay, the BCPC has taken measures to facilitate the children's access to education. It sought the help of a bus company to provide scheduled shuttle services to those who study in schools located 1.5 kilometers away from the community. This has lessened the risk of accidents and eased the economic pressure felt by parents, who no longer have the added burden of providing for their children's jeepney fare. Most importantly, the BCPC's education committee has been running an educational assistance program that provides scholarships and foster care to hundreds of disadvantaged children. To date, at least 400 indigent minors living in the barangay enjoy free education. On top of all this, a day care center has been set up in the barangay that provides early education for children.

Improving Protocols for Handling Children in Conflict with the Law

Juvenile delinquency has not been totally eradicated in the barangay, but the BCPC's Children's Justice Committee (CJC) has helped make the protocols for handling juvenile cases more child-friendly. Among others, children found violating the law are no longer handcuffed when they are apprehended. This came about as a result of the efforts of the BCPC to provide training for the arresting officers on how to deal with the erring children.

Likewise, criminal cases are no longer immediately filed against first-time child offenders. Barangay *tanod*, or civilian volunteers armed with sticks while guarding their areas of jurisdiction, are instructed to turn the children over to CJC for counseling. The parents of apprehended children are also summoned for counseling. The first-time offenders are then freed and given another chance to mend their ways, under an agreement that the parents will give greater attention to their children.

Those who renege on their promises and are caught again are entered into a rehabilitation program run by a member NGO. The extensive program includes scholarship for deserving minors who are in conflict with the law. Records show that at least 216 children have already benefited from the program.

Building a Child-friendly Barangay

Ensuring a Safe and Healthy Environment. The BCPC addresses the environmental and health issues affecting children through its Committee on Health. NGOs, people's organizations, and government units that form part of the Health Committee have implemented a number of programs intended to make the barangay a healthier place for children. These include feeding programs that target at least 150 malnourished children. Another health program is for the eradication of tuberculosis among minors. At least 30 minors have been treated through this program.

Ermita's widespread garbage and pollution problem is addressed in several ways. The BCPC and the Barangay Council have obtained two garbage trucks that make the rounds regularly. Staff and children volunteers of the BCPC's member organizations conduct bi-monthly Operation *linis*, or clean-up drive, which includes declogging of drainage ways and tree planting in vacant areas.

Medical services are provided as well through the barangay health center, although access to medicines remains problematic.

Restoring the Rule of Law in the Barangay. Working hand-in-hand with the Barangay Council, the BCPC has been implementing a number of measures that aim to restore law and order in the community. Spearheaded by its Peace and Order Committee, the BCPC regularly conducts information drive and seminars on prohibited drugs, educating the parents and minors regarding the dangers of drug addiction. To prevent gang wars and involvement of children in criminal activities, the Committee has also imposed a curfew for minors, lasting from 10:00 pm to 4:00 am. Minors who violate the laws are referred to the Children's Justice Committee for either counseling or filing of appropriate charges.

These campaigns complement the checkpoints set-up by the Barangay Council in various strategic spots to stop the steady influx of drugs into the community. Anyone who does not have official business in the barangay is not allowed to enter the area – a campaign that started in 1997, intensified in 2000 and continues up to present. This strategy has helped reduce drug-related activities in Ermita. The regular presence of police and barangay *tanod* on the major streets of the barangay has proved to be a deterrent for the commission of petty crimes.

These efforts have resulted in a much improved peace and order situation in the barangay.

Promoting Responsible Parenthood. Having identified parental neglect and abuse as the primary cause of major problems confronting the children of Ermita, the BCPC has undertaken a number of programs that aims to promote responsible parenting in the community. For the past years, the Committee on Family Life Enrichment and Counseling has conducted Early Childhood Care and Development training for at least 100 parents with children under 5 years old. Orientation sessions on the Conventions on the Rights of the Child have also been provided, not just for parents, but for children as well. These activities are complemented by projects that seek to strengthen the family. The GAD officers are always at hand to provide counseling for families and couples, especially those in high-risk situations.

To further prevent abusive relationships inside the home, the committee conducts seminars and counseling sessions to increase the awareness of different forms of child abuse. Parents, for example, are advised to avoid uttering abusive or foul language when dealing with their children. Children, on the other hand, are enjoined to attend meetings with their parents, where children's rights and the dangers of child abuse are discussed. They are given opportunity to voice out what they feel concerning issues affecting them, and are allowed to share inputs when resolutions are deliberated. [It is most likely that they are around throughout because they are encouraged to provide recommendations or solutions to issues. The children's summit empowers the children to bring up whatever sensitive issues might confront them – they themselves are the ones who identify the major issues affecting them and they themselves discuss matters that may be deemed by adults as too sensitive for the young ones.]

The resulting increased awareness of child-related issues has heightened vigilance among the community members. An elaborate networking process has already been set in motion to facilitate reporting of parental maltreatment against minors. Child volunteers have been trained to report cases of abuse promptly to proper networks. Physical abuse inside the home, for example, has decreased significantly because of the vigilance of child volunteers and community residents who have been emboldened to report immediately such cases to GAD officers and BCPC members.

Empowering Children in the Community. Seeking to promote the right of children to participate in matters that concern them, the BCPC has been exerting efforts to equip the minors of Ermita with the tools needed to facilitate their involvement in local governance. Leadership seminars and training are conducted for potential child and youth leaders. Whenever the children are around, they are encouraged to share their views and suggestions during the BCPC meetings. Above all, the BCPC supports and facilitates the annual

conduct of the children's summit – a venue for at least 200 children from the barangay, where they identify and discuss issues that are important to them. The results of these discussions are formally reported to the barangay captain on the last day of the summit, who in turn endorses them to the members of the BCPC for appropriate actions. These same results are duly reflected in Ermita's Barangay Development Plan.

Lessons

The BCPC defines success in terms of the levels of commitment pledged by the members and different committees to address the various issues confronting the community, and the ensuing action taken collectively to translate their commitments to action. They pride themselves on their accomplishments so far, which have resulted in meaningful and positive outcomes for the children in their community. Yet, in the same breath, they admit that their work is far from over, given the problems they still need to address. Suffice it to say that their initial efforts have borne fruit, and these inspire them to continue what they have begun until they achieve their goal of ultimately eradicating all barriers to children's full growth and development.

Keys to Success

Winning the Most Outstanding BCPC Award has reinforced the BCPC's belief that it is on the right track in its efforts to improve the condition of children in Ermita. Behind its success are a number of factors:

Effective Networking. The BCPC of Ermita boasts extensive membership, having gained the support of all NGOs, people's organizations, and government agencies working in the area. Every organization that might have a significant role to play in improving the plight of the children in the community was enjoined to lend its support, not only to the BCPC, but the entire Barangay Council as well. The BCPC was able to achieve its broad membership by inviting every NGO, government agency, and people's organization to undergo a simple accreditation process, which in turn helped in developing good rapport with the different organizations.

The BCPC's ability to network effectively has countless benefits. Among others, it allows the BCPC to be aware of even the minutest problems in the community. It also has the advantage of seeing various options to resolve the problem, because many minds think of a solution for it. Furthermore, implementation is not really a problem, because the NGOs act expeditiously. With such a huge network, BCPC is like a government, except that it is focused on minors. It is better than the Barangay Council, because the latter does not include NGOs. In the BCPC, NGOs participate in every issue, and many interact and deliberate during decision-making.

Unity among Members

NGOs are widely acknowledged to have played a major role in the success of Ermita's BCPC. They are the lifeblood of the BCPC, since they run various programs on a daily basis. They help make the BCPC responsive

to the needs of children. Thus, the Ermita BCPC now enjoys a good reputation, which is even better than that of the Barangay Council.

With the help of NGOs, the BCPC is able to address problems immediately. This is in contrast to the Barangay Council, which must contend with bureaucratic demands that could undermine efficiency when responding to problems in the community.

However, the ability to forge partnerships with various organizations and to bring them together for one cause is just half of the needed formula for successful networking. Bringing about a culture of unity and cooperation to ensure efficient working relationships among the different groups comprising an entity such as the BCPC is the other half of the formula. Otherwise, it could be dragged down by competing beliefs or perceptions of issues as well as diverse approaches to achieving collective goals. The BCPC has effectively avoided such a scenario by institutionalizing standing committees within its structure. If the NGOs and people's organizations are the lifeblood of the BCPC, the standing committees are its backbone.

Once selected NGOs and people's organizations become members of the BCPC, they are readily assigned to committees. This helps ensure that they will immediately buckle down to work in concert with other organizations comprising the committees. The BCPC leadership organizes the committees in such a way that the members have an inherent affinity with one another on the basis of their organizational thrust and mission. This scheme effectively facilitates cooperation rather than rivalry, which is vital to achieving the goals of each committee.

Good Attendance in Committee and General Meetings

The BCPC sees to it that its members regularly attend the committee meetings and the general meetings. This is a basic requirement that the BCPC enforces strictly, since it believes that regular attendance in meetings allows synergy, better coordination and cooperation among the member organizations. It is a crucial element, for instance, in enabling the sub-committees to meet and prepare the respective reports, derive consensus on important decisions and take action on specific concerns that need to be addressed.

The BCPC ensures regular and consistent attendance by taking all necessary measures toward this end. The BCPC secretary, for instance, personally calls members who failed to attend meetings. If one member is persistently absent, no less than the chairperson will speak with him or her to determine and address the concerns underlying the absences. These approaches have proved effective in helping the committees deliver on their respective commitments and achieving their targets.

Challenges

For all its accomplishments, the Ermita BCPC is not without its share of difficulties. It still has to work on a few remaining areas to increase its efficiency.

Impasse in Addressing the Issue of Parental Neglect. Despite their recognized gains in curbing forms of abuse inflicted by parents on their children, the BCPC is still at a loss on how best to address parental neglect. Some say that parents must be given access to livelihood so that they can at least afford the basic needs of their children. Others, however, claim that children are neglected because the parents are too busy earning a living. Others still are proposing that tougher measures be taken against irresponsible or negligent parents. These, they add, should include holding parents criminally liable for their acts. Some people have brought up the idea of creating a child-minding center. A child-minding center is similar to the concept of day care center where parents can leave their children so that they could focus on plying their trades in the market, while their children receive appropriate care.

Lack of Holistic Rehabilitation Program for Children in Conflict with the Law. Another gap observed in BCPC's programs is the need for efficient ways of dealing with children convicted of crimes. At the same time, no clear policy nor program exists for dealing with children serving time. Such a policy or program should afford this children the chance to continue their studies, either formally or informally.

Propensity to be NGO-dependent

Backed up by a huge network of non-government organizations, the BCPC is showing some signs of over-dependence on NGOs. This may lead to complacency on the part of the member government agencies, since committed NGOs can be relied on to provide services for children in the community. What appears to be unity might actually be a lack of motivation on the part of the other members who would rather wait for NGOs to make things happen.

Another danger is that so much dependence on NGOs could lead to a state in which the BCPC becomes just like them – fund-driven. These are the stark realities and much insight can be gained from these concerns. Making NGOs the backbone of the BCPC structure has its attendant benefits. Yet it must be admitted that most NGOs depend on donor funds for their survival and the continuity of their programs. Perhaps it would not be farfetched to think that only a handful of NGOs are likely to remain working in Ermita because of limited funding support for many NGOs. For instance, the initial 62-strong membership of the BCPC in 2002 has been reduced by almost half. Many former NGO members have already dropped out of the BCPC, since they no longer have funds to continue running their programs in the barangay.

Absence of STI and HIV/AIDS Programs

The biggest gap in the BCPC's programs is the lack of substantial programs on how to address major health concerns such as sexually-transmitted infections (STI) and HIV/AIDS. This gap comes alongside the failure of the BCPC to implement programs that would address teenage pregnancy in the area.

Unprotected teenage sex is rampant in the community, given the high incidence of teenage pregnancy in the barangay, as evidenced by the fact that it has been identified as one of six major children's issues in the area. This notwithstanding, BCPC members still deny the high prevalence of risky behaviors in their community that could propel the spread of sexually transmitted infections at an alarming rate.

The fact that teenage pregnancy is high strongly indicates that children are not just involved in sexual activities at a very young age. It also indicates that: children and minors engage in sexual activities without any form of protection; they do not practice safer sex methods; and, they expose themselves to risks like STIs and HIV/AIDS. Teenage pregnancy, is in fact an offshoot of risky sexual practices. The prevalence of unprotected teenage sex indicates a high level of risky activities taking place in the area. This alone should be enough for the officials to address the issue with dispatch.

Now is the best time to initiate preventive measures against STI and HIV/AIDS, instead of waiting for an epidemic. Such efforts do not seem forthcoming, however, given the prevailing notion among BCPC members that only those who engage in sex with prostitutes are at risk of contracting HIV.

The BCPC may well take advantage of the community's readiness for the introduction of STI and HIV/AIDS prevention campaigns. Even those who will undertake this kind of campaign appear ready to do so but are just waiting to be given the opportunity. Two years ago, an NGO member of the BCPC launched a series of seminars for their fellow members on the basics of HIV/AIDS. Today, it can be assumed that they are very much open to the idea of instituting HIV/AIDS awareness and prevention programs in the BCPC. Even the people may just waiting to be given more information on how to avoid the disease, more so now that a city ordinance has been passed calling for stronger measures to address HIV/AIDS issues.

Despite the perceived readiness of both the community and select BCPC members to undertake an HIV/AIDS awareness and prevention campaign, no concrete action has been taken in this regard. In fact, even the issue of unprotected teenage sex, which has led to numerous cases of teenage pregnancies in Ermita, has not been addressed.

The NGO member that organized the HIV/AIDS seminars earlier did not implement with any follow-up program, unable to find funding support for such undertaking. It is currently focused on the issue of children in conflict with the law. The other BCPC members who were able to attend the HIV/AIDS seminars admitted that they are not confident to share their knowledge and skills on HIV/AIDS with others, especially young people.

Thus, it is not surprising that unprotected teenage sex persists alongside teen pregnancy and the incidence of HIV/AIDS.

The BCPC of Barangay Zone 4

No local government unit is closer to the center of political and commercial life in Zamboanga City than Barangay Zone 4. All the vital government offices of the local government are located within its periphery. The city capitol, along with the different offices like those of the city health office, local tourism and social welfare departments, is located nearby. So is Zamboanga's famous port. Half of the city's commercial centers, including major banks, stand in its grounds. It is also home to the famous shrine of Fort Pilar, a tourist and a pilgrimage site for Filipino Catholics. Every day, hundreds of people, including traders, tourists, students, and ordinary folk, are seen in the barangay to pursue their respective endeavors.

As the epicenter of Zamboanga City's trade and industry, Barangay Zone 4 constantly attracts migrants, from nearby provinces and neighboring countries. The total population of Zamboanga City, as of May 1, 2000 is 601,794 persons. No precise data, however, exists indicating the size of population living in the Barangay Zone 4. Based on the latest data from the National Statistics Office Census (2000), the total households of the barangay is 4,745. Given that the average household size in the entire city is 5 persons, it can only be roughly estimated that the population size of the Barangay Zone 4 is 23,000. Of this, 56 per cent are children 17 years old and younger. Its population comprises most of Muslims, while the rest are either Catholics or Protestants. It is home not just to many Tausugs — one of the biggest indigenous groups in Muslim Mindanao — but to Cebuanos, Illongos, and a considerable number of Chinese-Filipinos as well. The socio-economic make-up of the barangay also follows the same trend.

Over the years, the barangay has become the hub of varying religious, cultural and socio-economic activities. Almost one-third earn their living as laborers or salesclerks, while at least half are civil service personnel, private sector employees, and self-employed individuals.

Situation of Children in Barangay Zone 4

Given the strategic location of Barangay Zone 4, living there has its obvious advantages. Yet, it has its drawbacks as well, especially for the children from the poorer sections of the community.

High Rate of Drug Addiction among Children

The community attracts not only the legitimate investors, traders and tourists but also drug traffickers, including shabu suppliers. These illegal drug dealers target the youth and children alike, such as students in schools within or outside the vicinity of the barangay, including Ateneo de Zamboanga and the Western Mindanao State University. Based on estimates by some of the respondents to this survey, at least 75 per cent of the minors in the barangay use illegal drugs. In-school and out-of-school children and youth are equally hooked on various types of illegal drugs. Shabu is used children as young as 11 years old.

The respondents offered various explanations for the widespread use of drugs in Barangay Zone 4. Many of those who use rugby for example, are street children, who want to forget that they are hungry. Among shabu users are pedicab drivers, who say they need to stay awake as they work way past midnight.

Gambling

Another vice that has become very popular among the young residents of Zone 4 is gambling. It is estimated that at least two-thirds of the children and youth in the area are into various forms of illegal gambling activities such as *cara y crus*, which is normally played on street corners by tossing three coins into the air. The object is to toss coins in the air and get heads or tails as basis for winning the bets. Bets are normally one peso per person per game. Others play card games like *tong-its* in undisclosed gambling spots. *Tong-its* is a card game very similar to the popular Chinese game of mahjong. Bets range from a few pesos to hundreds of pesos per player. Students and out-of-school youth alike have been lured into various types of gambling activities.

Petty Crimes

Due to their involvement in drugs and gambling, not a few of the minors in Barangay Zone have been forced to engage in petty crimes. This happens when they run out of money to sustain their vices, and therefore resort to snatching and other crimes. Some respondents have estimated that about about 5 per cent or less of the total number of minors in the barangay are involved in snatching. Some have been lured into organized criminal activities like hold-ups. Such crimes are normally undertaken by minors in the busy streets of the area during the day, or in dark vacant lots near the port.

Street Children

While many residents of Zone 4 enjoy a certain level of economic comfort, many more live below the poverty line. The estimated work force of Barangay Zone 4 is 4,745, of whom almost a third are minimum wage earners or laborers. These are mostly made up of young people whose parents cannot send them to high school and college. Even if the area has several public schools many parents do not have enough money to pay for their children's daily expenses. Other parents are simply too neglectful of their children's educational needs.

Children under such circumstances are left with no choice but to forego studying altogether. Those who live with abusive parents opt to live in the streets. Here they learn vices and all kinds of unproductive and illegal activities. To date, we do not know the exact number of street children below 18 years old in Barangay Zone 4.

Sometimes, the parents themselves force their children to go to the streets to beg or to earn money. When the children go home with no money to give, they incur the ire of their parents, who beat them up.

Child Labor

Not all out-of-school youth end up living on the streets. Others decide to take on menial jobs by working as porters in the nearby pier or as pedicab drivers. Pedicab driving is especially popular not only among

out-of-school youth but even among high school and college students, After school, some students would work late into the night shuttling passengers in their pedicabs. Some own the pedicabs they drive, while most rent it from someone else. Based on interviews, many of the young pedicab drivers waste their earnings on vices like gambling or drugs.

Children in Prostitution

One alarming concern among the children of barangay Zone 4 is the sustained attraction of some minors to freelance sex work. The city plaza, shopping centers, and downtown streets of Zone 4 are frequented by men who are willing to pay for sex. The prospects of easy money never fail to lure young men and women into prostitution.

Countless young migrants and stowaways from nearby towns, provinces, and countries reside in Zone 4 and engage in sex work. Some of them are as young as 14. Being very young, they are extremely vulnerable to the health, physical, and psychological risks associated with prostitution. Add to these the threats of police harassments on freelance sex workers, who have no IDs from the city health office. Many sex workers rent a room in a boarding house, or share a small apartment unit with fellow sex workers. Others eventually enter into live-in relationships with their partners.

Despite the perceived high incidence of child and teenage prostitution in Zone 4, no estimates exist on the number of children involved in sex work. The BCPC members said that it is very hard to get an estimate because most of the children in sex work are not originally from Zone 4. This is compounded by the daily influx of transient sex workers in the barangay, making it difficult to make a reliable headcount.

Most of the children involved in sex work in Zone 4 are unregistered sex workers. Being freelance sex workers, they hang out in the main plaza of Zamboanga city, which lies on the boundary of zone 4. Others are found in shopping malls waiting for customers.

Freelance sex workers charge an average of P300 (US\$6) to a high of P1,500 (\$28) per customer, depending on what types of sexual acts are being demanded from them. Others, however, are willing to settle for an amount as low as P150 (\$3). They always get at least one customer a night.

Transactions with customers are normally done through their pimps. Most sex workers work as a group managed by a pimp who gets at least 20 per cent of whatever is paid to his or her wards

STI/HIV/AIDS

A well-known cruising point for freelance sexual encounters, Zone 4, has long been identified as a high-risk area for STI and HIV/AIDS. While no cases of HIV/AIDS has been recorded, cases of sexually-transmitted infections like gonorrhoea are quite rampant in the area. Freelance sex workers, unlike their establishment-based counterparts, are not bound by any house rule requiring them to undergo regular medical check-ups. Those that do, including the respondents to this study, said they visit the city health office irregularly,

avoiding it as much as they can lest they be suspected of being sick.

Most of them find it difficult to negotiate for protected sex. Worst, they are easy prey to sexual violence — a well-known predisposing factor for acquiring sexually-transmitted infections. The city health officer frequently encounters young women who suffer from both sexual violence and STIs.

Stories abound among freelance sex workers of customers who would beat them up for no reason at all, or worse, kidnap and salvage them.

The BCPC of Zone 4

To strengthen the city government response to HIV/AIDS, a local NGO called Human Development and Empowerment Services (HDES) launched in 1998 the Barangay Legislative Advocacy against Child Prostitution (BLAaCP) as part of the USAID-funded AIDS Surveillance and Education Project (ASEP). The BLAaCP program envisioned to work with barangay leaders and concerned parents to promote the welfare of children in 10 local government units in the city. On one hand, it aimed at creating awareness of issues concerning the rights of children, especially their right against sexual exploitation and prostitution. Then, it pushed for the creation of technical working groups in each of the 10 pilot barangays covered by the program.

Composed of local officials, leaders, and concerned residents who were collectively pushing for a risk-free environment for children, the Barangay Technical Working Group (BTWG) was the precursor of Barangay Zone 4's existing BCPC. The BTWG was one of the major project components of the ASEP Project. As the partner of PATH in implementing ASEP in Zamboanga City, HDES assumed the task of establishing the BTWGs and used them as institutional tools in launching IEC campaigns on STI/HIV/AIDS. Apparently, HDES did not have a hard time achieving ASEP goals. The barangay officials at that time were very much open to the idea of establishing local structures for the creation of program. The initial steps taken by HDES included raising the level of awareness of the barangay officials and stakeholders of Zone 4, and every seminar organized was warmly received by all.

After increasing the awareness of the community of the issues of child rights, HIV/AIDS, and sexual exploitation of children, the BTWG drafted a resolution calling for the establishment of a BCPC in Barangay Zone 4. Thus, it effectively laid the legal ground for the creation of a BCPC in the area.

In August 2002, this resolution was transmitted to the City Council for approval. It took three years before the creation of BCPC was approved. The resolution, among other things, called for specific budget sources for the BCPC in its Internal Revenue Allotment or IRA. A Department of Interior and local government (DILG) officer, however, raised objections to the proposal to pass an ordinance creating a BCPC, saying it had already been mandated by law. Instead, the DILG officer suggested that the City Council pass a resolution directing all barangay chairpersons to organize and strengthen their BCPCs and allocate the needed funds. Yet, for unknown reasons, it took the city council a long time to do so. The resolution by the BTWG was submitted for approval in 2002, and it was only in mid-2005 that a strengthened BCPC was

finally established in Zone 4.

The Zone 4 BCPC began functioning only in July of 2005. It is now still in the process of building its structures. A strategic planning session that would help identify its priority projects and activities for the coming years is just about to take place any time soon. Its list of members has just been recently completed. Even the schedule for the monthly regular meeting has not yet been determined.

At the helm of Zone 4's BCPC is the incumbent chairperson. Helping him with the initial tasks of building the organizational structure of the BCPC is his vice-chairperson – a post concurrently held by Sangunian Kabataan chairperson. Apart from the officers of the Barangay Council, the other members of the BCPC include representatives from different government organizations, people's organizations, and NGOs in the area including HDES, the City Health office, Commission on Human Rights, and the Department of Labor and Employment. Another member of the BCPC is the barangay's designated child advocate, who has the same status and organizational rights as the rest of the BCPC members, now numbering 20.

Women make up at least two-thirds of the BCPC members. The children of Zone 4 are represented by at least two personalities – the SK chairperson and the child advocate. Women and children are poised to play major roles in the upcoming programs of the BCPC. The SK chairperson is the automatic vice-chair of the BCPC, while the child advocate is accorded the same status and organizational rights given to the other members of the BCPC.

The initial funds of the BCPC will be appropriated through the barangay's SK budget. The amount in excess of the SK fund for sports activities will be channeled straight to the BCPC. Other fund sources have yet to be identified.

Achievements

Though the Zone 4 BCPC is in its incipient stage, its precursor – the Barangay Technical Working Group – has done much on its behalf. Effectively the *de facto* Zone 4 BCPC from 1998 to 2002, the BTWG has already been at hand to protect the rights of children in the community.

Along with HDES, the BTWG initiated the "*Pulong-pulong na Barangay*" – a series of seminars and information drive on issues affecting children, such as child rights, laws protecting children, prostitution, street children, drug abuse, sexually-transmitted infections, HIV/AIDS, child labor, responsible parenting, and parental abuse. Targeting not just the youth, but also the barangay officials and parents in the area, the seminars were informal community meetings that emphasized the need for heightened awareness at the local level on issues affecting children. They underscored the urgency of promoting effective implementation of existing laws that would ensure children's protection against abuses, STI, and HIV/AIDS.

The informal community meetings were very much supported by the barangay officers who promptly

responded to HDES' proposals for barangay or community meetings. The Barangay Council provided the venue and enlisted the participation of the residents. These meetings were well attended.

Special focus was given then to addressing the incidence of STIs. During seminars, the BTWG conducted counseling sessions with minors on sex, sexuality, and safer sex practices, teaching them, for instance the correct way of using condoms. It also distributed IEC materials on STI and HIV/AIDS throughout the barangay. Unfortunately, no impact studies on these IEC materials were carried out to determine their outcomes.

These informal community meetings were beefed up by parenting and life-skills trainings provided by the BTWG to the parents and young residents of Zone 4. One of the seminars was about drug abuse. Another was on issues relevant to out-of-school youth, such like livelihood. On the other hand, the mothers were given seminars on sanitation and sewerage systems. Again, no follow-up studies were conducted to monitor the impact of these activities.

An integral part of the information campaign was the quick interventions taken by the BTWG, together with HDES and the Barangay Council, on cases of abuse, neglect, sexual exploitation, and STI involving children. Young residents in difficult circumstances would receive counseling services from DSWD social workers before they were referred to partner government and non-government agencies for proper care. Some of the children saved by DSWD from prostitution or taken off the streets turned out to have sexually-transmitted infections. In such cases, the social workers immediately informed the City Health Office for appropriate action.

Aware of the high rate of sexual activity among teens, HDES and the BTWG also trained pharmacists in assessing teenagers wanting to take contraceptives. A tool was thus developed that would aid pharmacy staff in validating the capacity of teenagers to responsibly use such pills. The whole effort to train the pharmacists came after educating teenagers about sexuality, sex, and the risks involved in engaging in sexual practices at an early age. Since some of the girls concerned are expected to use pills as a result of the seminars run by the BTWG, they need to be assisted by the trained pharmacists in deciding if they indeed needed pills.

At certain points, the BTWG went as far as recommending and implementing peace and order measures to decrease the incidence of children in conflict with the law. For instance, the dark vacant lot that became notorious for sexual and illicit acts was lit up. The BTWG also lobbied for the implementation of a curfew for minors in the said area. Aside from these activities, the BTWG members – acting as part of the quick response team – also participated in raids to rescue children from gambling and human trafficking. Most of the BTWG members are elected barangay officials, part of whose duty is to rescue children from trafficking and vices. The regular spot inspections they conduct every night have been augmented by other activities like raids or rescue operations depending on the information they receive.

Results

Despite its accomplishments, the BTWG has not always been successful in achieving the desired impact on

the children of Zone 4. One of its alternative livelihood activities for children, shoe-shining, which sought to curb the incidence of child labor in the area, did not generate much interest among the target beneficiaries because it did not afford them the same income as working in the port area. Likewise, some of the street children who were referred to DSWD for proper care and support opted to go back to the streets. Some DSWD personnel admitted that they could not blame the children, who viewed staying in the designated centers as restrictive of their freedom.

Most of the BTWG initiatives had made an impact on many young people. The seminars on STI and HIV/AIDS taught many minors how to avoid contracting STIs. HDES, based on the reports submitted to PATH at the end of the ASEP project, observed that many young males think twice before engaging in any paid sexual activities. Also, many young adults who contract STIs have learned to take the initiative to go to the city health office for medical check up, without prodding from NGOs or need for the BCPC's referrals. In fact, the increase in the reported cases of STIs is attributed to this factor. Many have become aware of their potential risk to STIs that they now voluntarily seek professional help for either cure or care. HDES and BCPC members themselves attest to a decline in self-medication practices among sexually-active minors as they have become empowered to seek treatment.

As a result of seminars on children's rights, barangay tanods and officials have learned to practice restraint in handling children in conflict with the law whereas previously it was not uncommon to hear of apprehending officers beating or hitting erring children.

The informal meetings on parental abuse and neglect have brought dramatic changes to many parents in the community. Many children now are reportedly spared from the indiscriminate beatings they used to endure in the hands of their abusive parents. Counseling sessions with parents continue to be conducted to ensure that parents inculcate the value of disciplining their children properly without resorting to physical punishments. More parents appear more caring towards their children. If before they hardly cared for their children whether they come home late or not, now they express concern if they are not home at a certain time. The BTWG attributes this show of concern to the parents' awareness that children caught loitering at night would be picked up and sent to the social development center of DSWD. All this gradually transpired as parents in the community become more aware of children's rights, and as they became more aware of their responsibilities to safeguard the welfare of their children.

Winning Strategies for Implementing Successful BTWG Initiatives

The BTWG attributes their initial gains in promoting the welfare of children in Zone 4 to several factors:

Bearing in mind that the whole concept of BTWG was an NGO initiative, the key to the success of the BTWG in Zone 4 was the good rapport established early on between the initiating NGO and the Barangay Council officers. Such harmonious relationship was so evident to many that they perceive the whole BTWG concept as a government-NGO initiative.

In the case of Zone 4, this rapport was sealed through a strategy used by HDES, which initiated the whole BTWG concept. That strategy was the identification and detailing of a go-between for the Barangay Council officials and HDES. At the outset, a community volunteer was trained to work as project coordinator for the

BTWG program. The presence of the community volunteer was extremely helpful in creating the impression that the BTWG and HDES were working as one team. Although BTWG and HDES had the same vision for children, it cannot be denied that they are still two separate entities with distinct mandates, commitments, and priorities. The community volunteer succeeded in removing the perceived barriers between the two organizations. More than that, it became easier for the BTWG and HDES to share vital information regarding the progress of every project they were pursuing. Linking both organizations, the community volunteer facilitated faster feedbacking on matters that needed immediate action.

Another key to the success of the BTWG was the unity and cooperation observed among the various sectors comprising it. Without unity and cooperation, the networking linkages within the technical working group could have never grown strong. Consequently, the referral system in the area could have never been as efficient as it turned out to be. Such unity and cooperation were easily developed because the members of the BTWG respected each other. Since not all BTWG members had the same levels of experience and competence in performing their designated tasks, efforts were made to ensure that the less experienced and less knowledgeable among the members were accorded the same respect and recognition as the other members. Among others, this precluded professional jealousy or superiority among the BTWG members.

It also helped that the barangay officials had the political will to work for the welfare of children. The support they provided was helpful not just in giving permissions for the conduct of seminars but in setting up the venues for the informal meetings as well. Probably unique to the Zone 4 experience, the political will of the Barangay Council was strongly shaped by the fact that one or two of the barangay officials who were involved in the BTWG then were once volunteer workers of HDES. That HDES as the number one proponent of child rights in Zamboanga City was located right within Zone 4 was also a factor in the BTWG success. Even before BTWG started, HDES had conducted training programs on children rights for the barangay and its officials.

Lessons in Addressing STI and HIV/AIDS

At the core of the Barangay Technical Working Group's initiatives for the protection of children in Zone 4 is its STI/HIV/AIDS awareness program for minors and young adults in the community. While some positive changes have been observed in the children's sexual behaviors and practices, some issues and concerns involving minors, especially those engage in prostitution, remain unresolved.

The scope of the BTWG seminars was by all means limited. Although the informal meetings were generally well attended, a number of minors were unable to attend. Thus, despite increased awareness of STI and HIV/AIDS among the youth, many still hold on to traditional beliefs about protecting themselves from infections. For instance, many young male adults still believe that a woman is possibly infected with some

sexually-transmitted disease if she feels stomach pains after drinking coke. Still another perceived sign of infection among other young males is when a women feels pain when the tips of ones fingers are thrust into the lower part of her stomach. Worse, while many are aware that using condoms protects against STIs and HIV/AIDS, the rate of condom use remains low.

Based on behavioral monitoring at the end of the ASEP program, it was noted that the level of awareness and condom use among various high risk groups increased. However, after the ASEP program ended, condom use declined among Zamboanga City residents. One reason provided by HDES was the inaccessibility of condoms in the area. Condoms are no longer free, and stocks in the markets are limited.

It was also found that the freelance sex workers in Zone 4 still regularly encounter male customers who refuse to wear condoms. In such situations, many are forced to take the risk of engaging in unprotected sex rather than deprive themselves of potential income. In return for agreeing to unprotected sex, the sex worker would negotiate for a much higher fee.

Many young freelance sex workers still resort to folk beliefs in taking care of their bodies. For instance, they do not insist that a client use a condom if he looks clean. Whenever a condom is not used, they would normally wash their vagina with laundry soap immediately after the customer has left.

Apparently, the information campaigns were limited in terms of the need to review core messages that will make people change their behaviors. Information campaigns were also limited in terms of reach and scope of covered topics. Again no studies were conducted on their impact. Many male customers – especially those who only go to Zone 4 and the downtown area for paid sex – do not necessarily reside there and thus are still observed to be practicing risky sexual activities.

The limited scope of information drives was aggravated by the ensuing lull in IEC activities when the HDES program under ASEP ended. The culmination of the HDES program was supposed to coincide with the official start of the BCPC in Zone 4. The budgets for the seminars and other related activities would therefore be shouldered by the BCPC. However, it took almost three years before the BCPC was officially established in the area. That period was long enough to create setbacks in the BTWG's early gains. The City Council's failure to immediately approve the resolution passed by the BTWG for the creation of the BCPC in Zone 4 has been blamed for the discontinuance of the IEC activities.

The delay in setting up the BCPC in Zone 4 should not have happened in the first place. Each barangay has enough autonomy and every right to use its available resources on projects and activities that are within its mandate. Thus, even without a new ordinance calling for the creation of the BCPC, Sangguniang Kabataan and Gender and Adolescent Development budgets, could be used for some initial activities.

Underlying the failure of the BTWG to see this was the steady flow of resources it enjoyed throughout its lifespan. It must be noted that the BTWG was created under the BLAaCP program of HDES, which was fully funded by USAID. Early on, the BTWG had the advantage of getting financial support for its activities. This made it easy to organize various seminars complete with snacks and enticements to ensure community

attendance.

While this advantage facilitated the conduct of different activities, it also constricted the mindset of the BTWG, having failed to consider programs and activities that, though relatively inexpensive, would have been no less effective. This mindset made the BTWG dependent on NGOs and external funding agencies for undertaking quality programs. Such is very risky, given the uncertainties faced by NGOs in getting long-term financial assistance.

Admittedly the BLAaCP project was successful in developing a multisectoral body at the local level, which in turn paved the way for the establishment of a BCPC in Zone 4. But certain components of the project effectively restrained from exploring other modes of delivering effective services. [No alternative was suggested because the BCPC of Zone 4 would even worry about where to get the funds for their initial meetings. This is an indication that they have not sorted their way out of dependency on external funds. Their best idea thus far was to use some funds of the Sangguniang Kabataan.]

The BTWG also failed to develop programs aimed at eradicating prostitution, a potentially major cause of sexually-infectious diseases. By focusing on awareness and prevention campaigns without necessarily rescuing its target audience from prostitution, it limited the impact of its activities. Given the risks they face along with the other hazards of their work, including abuses of all kinds and threats of police harassments, no help is more meaningful to young freelance sex workers, such as those of Zone 4, than one that enables them to go back to school or to find decent and meaningful employment where they will not be subjected to the risks they currently face. Offering this kind of assistance never became part of the BTWG's agenda.

Challenges and Opportunities

There is no denying the enormous support extended by the barangay officials of Zone 4 to the BCPC. Their efforts, however, are not without their perceived inadequacies. One of these is their inability to develop programs and services aimed at eradicating the root causes of the sexually risky behaviours among the youth in the barangay. Widespread reversion to old unprotected sexual habits has been noted among the youth despite the early enthusiasm exhibited by them toward safe sex. Many traditional yet flawed notions about HIV/AIDS and STI still circulate in spite of the series of education campaigns undertaken several years back. The root causes of the spread of HIV in Zone 4 have not been determined.

Challenges to BCPCs

Protecting children and youth against HIV/AIDS can never be fully achieved in communities such as Barangay Ermita and Zone 4 until their BCPCs have succeeded in meeting several challenges.

First, the local stakeholder's notion of HIV/AIDS risk and prevention needs to be enhanced. Second, children's and young people's knowledge of and attitudes towards HIV/AIDS need to be elevated. Third,

extra care must be observed in ensuring that the youth's and children's knowledge and attitudes towards HIV/AIDS translate into actual protective practices.

These goals may seem daunting, yet they are attainable. After all, the groundwork has been laid to ensure that the challenges mentioned could be hurdled. HIV/AIDS advocates for children and youth in Ermita and Zone 4 can take advantage of a much more favorable condition, thanks to the initiatives of the existing BCPCs in the two areas. The concept of child rights protection at the local level has already been mainstreamed in the mindsets of local stakeholders. Barangay Councils and the NGOs in the two localities now have a synergy — a product of mutual respect for each other's commitment to safeguard the rights of children. Likewise, the policy environment is now conducive to the implementation of more programs for HIV/AIDS prevention among children and youth. The needed mandates that would support and rationalize these programs have been set in place. It is time for local officials and everyone concerned to seize these opportunities so they can keep their children safe from HIV/AIDS and ensure their optimum growth and development.

Conclusion

The primary objective of this study was to prepare a set of guidelines for mainstreaming HIV/AIDS prevention projects within the Barangay Councils for the Protection of Children. These guidelines reflect the lessons learned from the experiences of the two BCPCs included in this study. The same guidelines have already been applied to emerging local initiatives that aim to prevent the spread of HIV/AIDS among children and youth.

Mainstreaming HIV/AIDS Prevention Programs in BCPCs

It has been decades since the concept of the BCPC formed part of our statutes. Yet many local government units have yet to establish functional BCPCs. These local structures have a big role to play in arresting the

spread of HIV/AIDS among children. The challenge, however, for those who wish to mainstream HIV/AIDS in BCPCs is to ensure they have functional BCPCs. Only then can they successfully undertake programs intended to prevent the spread of the disease among children and youth. As such, this makes imperative the need formulate not just one, but two sets of guidelines that can be used by HIV/AIDS advocates, depending on the status of BCPCs in their target areas.

How to Create a Functional BCPC

Where a functional BCPC has yet to be created or activated, NGOS, people's organizations, government agencies, Barangay Council Members, or any resident who wishes to initiate HIV/AIDS prevention programs for children in the community, must first lobby for the establishment or reactivation of the Barangay Council for the Protection of Children. The end-goal is not just to gain the commitment or support of the different local stakeholders to the idea but to set-up a BCPC that would eventually possess the following traits or features:

- It is equipped with a charter that specifically defines its mission, vision, goals, structure, rules, and by laws;
- It has an action plan;
- The majority, if not all of its members, meet regularly to monitor progress of the action plans;
- It has a budget plan to back up its actions; and,
- It is capable of launching sustained projects and programs for children and youth.

The initiative to set up a BCPC may spring from two possible sources: from any of the incumbent barangay officials and representatives of government institutions detailed in the area; or, from any NGO that runs programs targeted at children and youth. Either way, the following pointers will help facilitate the creation of a strong BCPC geared toward responding to the problems affecting children at the local level:

Support the Initiative to Set up a BCPC with Clear Mandates

As in any development initiative launched in the country, having a clear mandate as the basis for the establishment of a structure such as the BCPC is always a major consideration. This helps ensure the cooperation of the officials concerned, knowing full well they are mandated by law to do what they are expected to do. The conduct of any organized activity, especially that of the proposed creation of a BCPC, for example, will run smoothly depending on the cooperation of the local officials in the target area. This cooperation is gained depending on the mandate underlying such an activity.

Local leaders are duty bound to grant, support, or approve the conduct of activities and programs that are mandated by law. Every proposal for the creation of BCPCs must therefore be armed with the most relevant law, statutes, and policy statements that enjoined the local officials to extend the needed support. Right from the beginning, the need to implement the said mandates must be emphasized. In the case of Barangay Ermita, it was the awareness of the existence of new directives that prompted the barangay officials to set up a revitalized BCPC.

Scan the Policy Environment to Avoid Re-inventing the Wheel

The good news is that countless policies and laws authorize all local officials to set up a BCPC. Anyone of these can be invoked to justify organizing a BCPC. Thus, it would just be a waste of time and resources to come up with barangay ordinances that require the establishment of a BCPC. All that is needed is a simple resolution, similar to what the BCPC of Ermita did, to implement the law or directive. In this regard, the delay encountered by the BCPC of Zone 4 could have been avoided.

Admittedly, the provisions creating BCPC are not without its weaknesses. But again, a scanning of the policy environment could lead to creative ways of circumventing these flaws, such as the budget constraints. Some funds can be drawn from other sources, such as the Sangguniang Kabataan budget and Gender and Development budget. Certainly, funding sources can be tapped other than these two.

Set up a BCPC that is as All-inclusive as Possible

Other barangays that have yet to organize their own BCPCs may well follow the example of Barangay Ermita, which has an extensive membership, comprising all relevant organizations in the area – government, NGOs, people’s organizations, and community-based organizations – under one leadership. Establish good relations with all organizations by inviting them to become members of and be actively involved in the BCPC. Recommend the distribution of major posts within the BCPC to sectoral partners. For instance, the vice-chairperson of Ermita’s BCPC is the representative of Nazareth, an NGO for children.

The benefits of having a huge network of members within BCPC are countless. Among others, it allows the BCPC to be aware of the problems confronting the community through the information provided by its members who are constantly in touch with the people. It also enables it to explore various options to resolve the problems that need to be addressed, given the diversity of membership. Implementation of specific programs or projects is also better facilitated with the presence of various members, especially NGOs. With such a huge network, BCPC functions like a government, except that it is focused solely on minors. Due to the presence of NGOs and people’s organizations, it is perceived as more efficient and responsive to the needs of the community than the Barangay Council, which does not have the benefit of NGO participation. As has it has been the experience of the BCPCs included in this study, they have benefited much from the NGOs’ participation, be it in planning or implementing projects.

Initiating efforts that would promote unity and cooperation among the members never fails. The experience of Barangay Ermita is a case in point. The sheer number and diversity of its membership did not hinder it from achieving a culture of unity, which helped ensure the success of many of its programs. Without such an environment within the BCPC, it was bound to be dragged down by opposing views and perspectives. The BCPC of Ermita has effectively avoided this kind of situation by creating standing committees. If the web of NGOs and people’s organizations is the lifeblood of the BCPC. The standing committees are its backbone.

Under this kind a set up, NGOs and people’s organizations are assigned to their respective committees.

This prompts them to get down to work immediately in unison with member organizations. The choice of committees to which they are assigned is guided by their organizational thrusts and missions. Thus members with similar organizations are grouped together. This readily opens the door to cooperation rather than rivalry.

Avoid Becoming too Dependent on the Sectoral Members

The invaluable services provided by NGOs and people's organizations as members of BCPCs cannot be emphasized enough. Yet, barangay officials who form part of the BCPC cannot be too dependent on them for the conceptualization and execution of specific programs targeted at children. These officials must not merely act as titular heads of the different committees. They must initiate and spearhead their own programs, depending on their capacities and authorities as heads of their respective committees. As concurrent heads of different standing committees within the Barangay Council, such as those on health and children and youth affairs, these officials would do well to have their own programs and projects completely independent of those of the NGO, government, and people's organizations members of the BCPC.

Too much dependence on NGO members could easily lead to complacency on the part of the government organizations making up the BCPC. What appears as unity may in reality be a lack of motivation on the part of the other members.

Too much dependence on NGOs could also lead to a state where the BCPC is as fund-driven as NGOs. It must be noted that the existence and survival of non-government organizations could be very unstable, given their dependence on funds received from various donors. Without funds to sustain their activities, NGOs will find it hard to exist and could fold up anytime. Should this happen to any of the NGOs comprising, say, the BCPC of Barangay Ermita, imagine the potential impact on the BCPC. Consider, for instance, the initial 62-strong membership of the BCPC in 2002 has been reduced to just over half its original size. Many former NGO members have already dropped out of the BCPC because they no longer have funds to run programs in the barangay. Such a situation could be avoided if the Barangay Councils would devise their own programs for the protection of children.

Ensure the Utmost Participation of the Members in all BCPC Meetings

As with any organization, meetings are an occasion for discussing issues and concerns that need to be addressed, and potential measures to pursue. They are also important venues to monitor the progress of different commitments comprising the BCPC before appropriate action can be taken.

Barangay Ermita's BCPC experience shows that it pays off to strictly monitor the participation of the members in the meetings. Regular attendance in meetings allow synergy, better coordination and cooperation among the member organizations. It is a crucial element, for instance, in allowing sub-committees to meet and prepare their respective reports. It is also vital to forming consensus on specific issues.

Secure the Full Support of the Barangay Officials for the BCPC

The experience of Zone 4 shows that the unqualified support of the brangay officials for the BCPC has helped ensure the success of many of its undertakings for children. Such support could be seen in big and small ways such as providing venues for the seminars on children.

Enlisting the support of local officials can be achieved by allowing some of the major officials in the community, such as the mayor or vice-mayor, to serve as the champion of certain advocacy efforts. With officials on the forefront of these activities, it would be relatively easy to get the entire community to support specific projects for children, as the experience of Bidlisiw and FreeLAVA has shown.

Whenever opposition to any undertaking for children arises, efforts must be made to include the adversaries in resolving the issues. One NGO has done just that by inviting the councilors opposed to the passage of a certain ordinance for children to a dialogue. The ensuing dialogue and measures proved helpful.

Mainstreaming HIV/AIDS Prevention Programs in BCPCs

Undertaking HIV/AIDS prevention and awareness programs for children and youth becomes relatively easier in an environment where there is already a fully functioning BCPC. This is assuming, of course, that the BCPC fully supports the relevant activities.

Every proposed initiative must also be backed up by related legal mandates. Mainstreaming HIV/AIDS-related campaigns for minors also requires an assessment of the policy environment to ensure no efforts are duplicated or wasted.

Having noted the foregoing pointers, HIV/AIDS prevention campaigners would also do well to consider the following:

In IEC activities, emphasize high-risk behaviors, rather high-risk groups. At the core of every HIV/AIDS prevention program is a wide array of IEC activities that aim to accomplish two things: first, to motivate local stakeholders to act to protect minors against STI/HIV/AIDS; and, second, to provide children and youth with information to keep them free from STI and HIV/AIDS. These IEC activities must be introduced and promoted as strong measures that would curb high-risk behaviors in the community rather than simply measures addressed to those engaged in high-risk behaviors.

A common mistake in the past was to conduct HIV/AIDS prevention program in areas known for having heavy concentrations of individuals in high-risk groups, like persons in prostitution, free lance sex workers, intravenous drug users, and men having sex with men. Even the ASEP proponents acknowledged this misconception while admitting that one issue they had to contend with was lack or lukewarm reception of their target individuals in low-prevalence settings to their HIV/AIDS campaigns.

Barangay Ermita's experience illustrates the folly of using this strategy of aiming HIV/AIDS campaigns only at high-risk groups instead of focusing on high-risk behaviors. Its BCPC's failure to come up with HIV/AIDS

awareness and prevention programs geared towards children and youth was based on the notion that there was no need for such programs, since Ermita was HIV-free. Besides, the area was not known as a cruising point for sexual activities nor was it considered a home or base of persons belonging to high-risk groups. They ignored the fact that adolescents in Barangay Ermita engaged in unprotected sex, giving rise to rampant teenage pregnancies. Thus, there was no reason to believe that cases of STI or HIV/AIDS infection would not soon emerge. To this day, little has been done by the BCPC members to implement HIV/AIDS prevention programs in their area.

Other barangays across the country may face a similar situation. They may not be cruising points for persons in high-risk groups, but that does not mean that the children and youth do not engage in high-risk behaviors.

Targeting high-risk behaviors in IEC campaigns for HIV/AIDS prevention would also correct the misconception that only those in high-risk groups could be infected with the virus. In the process, it would also protect the whole community, which may be at-risk, depending on the people's attitudes towards safer sex.

ASEP recommends an approach that revolves around the general issues and concerns involving children. It appears that this is unwarranted. There is no need for such an approach if the emphasis of IEC campaigns on the prevention of HIV/AIDS is on high-risk behaviors, and not on high-risk groups. This approach could only unduly lengthen an otherwise straightforward process of addressing HIV/AIDS. The chances of finding a barangay whose young population fully adheres to protected sex are very slim. Consequently, the rationale for HIV/AIDS prevention programs is always present. There is no need for tactics that could not just delay but also do harm to the entire HIV/AIDS prevention thrust of advocates. Besides, ASEP itself has admitted that its proposed approach is not without risks. It could result in the emergence of some constraints that would cause the strategy to backfire, should the advocacy initiative lose focus on HIV/AIDS issues. For instance, it was observed that some reactivated BCPCs lost their original goal of protecting children from sexual exploitation. Instead, they focused on health, nutrition, and young child development activities.

Focus on services that liberate children from prostitution rather than on those that empower young freelance sex workers as prostituted women. HIV/AIDS prevention programs do not just come in the form of IEC campaigns that aim to raise the HIV/AIDS quotient of target audiences. They also include direct services offered to those who are at greater risks of getting infected. Countless children involved in sex work are more vulnerable to STI/HIV/AIDS, most of whom are freelance sex workers who are at the mercy of their customers. Often, they are ill-equipped to negotiate for protected sex.

It has almost become customary to address these realities using an approach that is less likely to prevent the spread of HIV. The standard response to these issues is to first, increase the sex worker's awareness of the risk of acquiring HIV/AIDS through IEC activities; and, second, to provide sex workers with support services and facilities that will help protect them from sexually-transmitted infections while pursuing their work.

There is nothing wrong with providing such services to persons in prostitution, except that it relegates one

crucial point to the background: that the simplest and most effective way of preventing HIV/AIDS among children in prostitution is not to empower them as prostituted persons but to take them away from sex work. The creation of many support services and facilities for children in prostitution, like those that are pushed by the BCPC members of Zone 4, will only hamper the efforts to raise huge financial resources to come up with programs that will provide viable alternatives for minors involved in sex work, but also for those who are likely to engage in prostitution. These include scholarship programs for children and economic opportunities, including livelihood programs, technical-vocational training, career path counseling and job placement services. Adopting this and similar alternative and preventive programs should enable BCPCs to remove prostituted children from sex work while significantly reducing risks to STI/HIV/AIDS among children and youth.

Begin with the local stakeholders. Never take for granted the barangay officials and staff, along with the parents, community organizations, church and civic leaders, and school authorities when pursuing IEC campaigns for HIV/AIDS prevention. They can do much to disseminate the right information about HIV/AIDS and how it can be addressed locally. The readiness of Barangay Ermita to undertake any proposed HIV/AIDS prevention project for children and youth was a result of FreeLAVA's short-term program to educate the stakeholders on HIV/AIDS. Similarly, the openness of the parents and school authorities to their involvement in efforts to promote safer sex among minors resulted from the efforts of the BTWG right at the outset of their HIV/AIDS awareness project. Doing so, the stakeholders will not only be there to give permission, but also to offer help and assistance through partnerships in implementing HIV/AIDS prevention initiatives.

Turn the children and youth into partners, not mere audiences or beneficiaries of HIV/AIDS prevention projects. Teaching the children and youth basic information about HIV/AIDS is never enough. The experience in Zone 4 shows that once an IEC program has ceased to run, the children and youth tend to slip back their old ways. One way to arrest this problem is by integrating components of IEC campaigns into HIV/AIDS prevention services to facilitate the involvement of children and youth in future projects and initiatives. A mechanism that would allow the audiences of IEC activities to offer personal commitment is to share what they have learned to others, whether it be inside their own barangay or not. This is one way of sustaining the HIV/AIDS prevention campaign and ensuring that what the children and youth have learned in the course of the campaign will be put to good use. As partners, they are expected to practice what they advocate. The young residents of Ermita and Zone 4 have shown willingness in offering not just their ears to IEC projects that might be implemented in their communities. They are even more than willing to offer their time and energy as young advocates who would further spread information on HIV/AIDS to other children and young people.

Persuade the community to support local election candidates who are responsive to reproductive health and HIV/AIDS prevention programs. IEC campaigns for HIV/AIDS awareness would benefit from the participation of Barangay Council officers who are known advocates of HIV/AIDS prevention programs for children and youth.

Most of the Barangay Council officers are automatic members of BCPC. This should enable them as advocates of HIV/AIDS prevention programs to play a big role in mainstreaming their advocacy within the BCPC framework. Such was the experience of a former HDES volunteer who eventually became a member of Zone 4's Barangay Council. His involvement in both the Council and BCPC helped sustain the commitment of both entities to pursue programs that would prevent the spread of HIV among children and youth.

During IEC campaigns, it would not hurt to include efforts that will persuade the community to vote for a candidate based in part on his or her position toward reproductive health and HIV/AIDS prevention issues.

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