

# the Philippines Country Report<sup>1</sup>

## Introduction

Under Philippine law, the term children refers to persons below 18 years of age or persons who are older than 18 but, because of a physical or mental disability or condition, are unable to fully take care of themselves or protect themselves from abuse, neglect, cruelty, exploitation or discrimination. They are the country's future and during their growth they need a network of support at four levels: 1) a *society* providing structures and an environment in which it is possible for children to grow up healthy, happy and in harmony; 2) a *community* where members are aware of the needs of children and are supportive of one another; 3) a *family* that is strong and capable of providing love, understanding, guidance, moral and material security; and 4) *individuals* truly committed to children's care and safety (Lindsay, M.).

If any of these systems fail for some reason, the assistance provided takes into consideration the children's best interest. Alternative family care is provided for children who cannot be cared for by their birth families: through adoption, foster care, legal guardianship or, as a last resort, residential care.

In an attempt to describe the current situation of residential care in the Philippines, a survey was conducted to gather data on children in residential care, their characteristics and the profiles of the agencies providing such service. Secondary data were compiled by the 2002 'State of the Filipino Children', the National Statistics Office, the Department of Social Welfare and Development and other reports/publications.

## General situation of the child population

The National Statistics Office (NSO) reports that as of 2000, the population of the Philippines is 76,498,735 with a population growth rate of 2.36%, a noted increase of 11.5% or 7.88 million persons over the last five years. Children comprise 32 million or 43% of the total population, and 36% of them are aged 0-5 years.

A significant number of children are in need of special protection as indicated by statistics showing their various vulnerable situations. Of the 22.53 million school aged children (aged 5-17 years), 77% were enrolled during the school-year 1999-2000 and about 5 million were not attending school. There are an estimated 3.7 million working children, 2.2 million of whom are engaged in hazardous work; the number of street children is estimated at 44,435 (De la Salle University, 2000); the number of abused and exploited children served by DSWD in 2002 was 10,045. There are 158,297 children with disabilities (1995 NSO Population Census). The DSWD served 10,222 children in conflict with the law in 2002, most of whom are boys between 14 and 17 years old who have attained at least an elementary education and who are middle children in a family with 4 to 6 members. There are approximately 10,589 children in residential care.

These conditions may be attributed to several factors. Poverty continues to affect at least 30.8 million families in both rural and urban areas. The incidence of poverty in rural areas is estimated to be 2.5 times higher than that in the urban areas. However, rapid urbanisation and weakening of the family's support system have contributed to the

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increasing number of family separations, abandonment, crime and delinquency and other family problems. The unemployment rate hovers around 10.2%.

Many families are enticed to migrate to urban or foreign countries to seek greener pastures to improve their living conditions. In 1999 there were some 7.2 million overseas Filipino workers (OFW) comprising 13.4% of the population. There is a noted increase in the number of OFWs, particularly in the age group 20-34 years and among women. The social costs of such phenomena have affected the family especially the children, as indicated by the increasing cases of family violence, family separations, abandonment, juvenile delinquency, and other problems.

Another factor is the displacement of families due to both natural and man-made disasters, the Philippines being a disaster-prone country. Other than the armed conflict, the occurrence of typhoons, earthquakes and other natural disasters have resulted in the disruption of people's livelihoods and access to education and basic social services, thus further worsening the condition of families.

The above scenario presents great challenges for the Philippines to intensify efforts to address the socio-economic problems besetting the Filipino family and children.

## **Policy, legislative and programme initiatives**

Responding to the needs of children is everybody's responsibility. Participation of the families, the NGOs and the children themselves is essential to ensure the survival, protection, development and participatory rights of children. The 1987 Philippine Constitution is a reflection of the government's genuine concern to protect the sanctity of the family and provide protection for its members. This is further strengthened by the 1988 Family Code, which among its provisions includes specific provisions on marriage and family relations. The Solo Parents Welfare Act of 2000 is another law that provides special privileges and benefits to solo parents to enable them to perform their parental roles.

Even prior to the ratification of the UN Convention on the Rights of the Child, the Philippines undertook various initiatives to protect the rights of Filipino children. The enactment of the Child and Youth Welfare Code in 1974 is a milestone in child welfare that spells out the rights and responsibilities of children and parents, as well as roles of the home, church, community and the state. It protects the special categories of children – dependent, neglected and abandoned, the physically and mentally disabled, and youth offenders below 18 years under the doctrine of *parens patriae*.

In 1992, the Special Protection of Children Against Child Abuse, Exploitation and Discrimination Act was enacted to strengthen the provisions on the abuse, exploitation and discrimination of children. It empowers children to report violations committed against them and provides a comprehensive program to address child abuse and exploitation.

The Philippine National Strategic Framework for Children for 2000-2025 or ***Child 21*** provides an integrated and holistic plan of action to promote and safeguard the rights of children. It is a roadmap for national government agencies, NGOs and private organisations in planning, setting priorities and allocating resources to promote the rights of children by year 2025. (For other relevant policies and legislation see separate publication.)

Children's rights are further protected with the restoration of the ***Family Courts in 1997*** to ensure speedy disposition of cases involving children and families. The Supreme Court has issued Resolutions revising the Rules of Court regarding the examination of child witnesses, commitment of children, adoption, legal guardianship and children in conflict with the law in compliance with the CRC. There are also laws on domestic and inter-country adoption, as the Philippines is a State Party to the Hague Convention on the Protection of Children and Co-operation in Respect of Inter-Country Adoption.

Local Councils for the Protection of Children are organised from village to national level and are composed of government, NGOs and other stakeholders. The Councils also monitor the implementation of the Day Care Law and the Early Childhood Care and Development Act of 2000, which provides a comprehensive, integrative and sustainable program for children aged 0-6 years.

Children's participation is promoted through their representation in the National Anti-Poverty Commission, the National Council for the Welfare of Children and the organisation of various children's groups such as street children and child labourers. They also advocate for their rights among policy-makers, programme managers and service providers.

These policies/legislations have been translated through various programmes and services implemented by both the government and NGOs in residential and community-based settings.

A comprehensive program on child protection is in place to respond to the issues of child abuse and exploitation, including child labour and trafficking. This involves the rescue of children, placing them in protective custody, providing therapeutic interventions for their healing and recovery and facilitating their reunion with their families. Health, education, livelihood, work opportunities and other services are also available. For programme implementation the Philippines receives support from international agencies such as the United Nations Children's Fund (UNICEF). (See separate publication.)

Children and Women's Desks in police stations were established to attend to cases of children and women victims of abuse in an expedient manner, protecting their rights to confidentiality. Police officers are trained specifically on the dynamics of the victims and protocols in handling reported cases. Similar special units have likewise been established in hospitals.

The Local Government Code paves the way for the devolution of basic services to the local government units where basic services are made accessible to the family and community whenever needed, which include among others, providing family counseling, parent education programmes and livelihood assistance.

## **Children in residential care**

Of 915 private social welfare agencies licensed by the DSWD, 177 agencies operate a total of 197 residential care facilities for children, the majority of which institutions cater to abandoned, neglected and abused children with an average capacity of 30-40 beds. Funds are generated mostly from international funding agencies and the private sector. These institutions are not subsidised by the government. (See separate publication.)

On the other hand, the DSWD operates 46 residential facilities for children nationwide. Eleven of these serve abandoned or neglected children aged 0-7 years, 11 are for children in conflict with the law, 15 are for girl victims of sexual/physical abuse, and the rest are for street children and other victims of various forms of child abuse. These facilities have an average capacity of 50 beds, except for the National Centre for the Mentally Challenged (Elsie Gaches Village) with 400-490 beds, and another two for abandoned and sexually abused children that have 125 beds each. However, current admissions exceed the capacity of these centres. (See separate publication.)

The Local Government Units from the 13 regions registered a total of 63 residential facilities, of which three are for drug dependents; five are for children in conflict with the law; six are for abandoned/neglected; 19 are for victims of sexual/physical abuse, prostitution, trafficking and other forms of abuse; 23 are for street children; and seven cater to all other categories of children. The biggest facility can accommodate up to 200 children while the smallest only four. (See separate publication.)

Case management is handled by professional (licensed) social workers in all centres, with an average of 30 cases of children in government centres, while the caseload is less than 30 in private agencies. Teams composed of psychologists, medical doctors, nurses and house-parents provide support services to facilitate the children's healing and recovery. Depending on the circumstances, other professionals are also involved, such as lawyers, psychiatrists and physical or occupational therapists.

Funding for residential facilities managed by the DSWD and local government units come from their respective budgets supplemented by donations from the private sector.

Admissions in residential facilities are mainly male children comprising 57% and between the ages 6-12 years. The reasons for admission include economic difficulties and family problems such as separation, neglect and abuse, abandonment and death of parents.

The length of stay of children ranges from six months to three years. The rate of discharge for male children is higher than for female children, especially those aged 6-12 years. However, older male children tend to stay longer. Among the factors hindering discharges are uncooperative parents, inadequate support for parents, slow judicial process particularly for court-related cases, limited manpower and unskilled staff.

Forty-two percent of the 8,338 children admitted in the last five years have been reunited with their families, 9% were transferred to other residential facilities for long-term care, 5% were placed for adoption, and 2% for an independent living programme. The remaining 42% were discharged for a variety of reasons, such as death and leaving the centre without permission/runaway. (Attachment F)

## **Family care**

The community-based alternative family care takes the form of foster family care, adoption and legal guardianship. Foster care is temporary in nature and provides a safe and nurturing family environment to children who are unable to live with their birth families. Foster families are assessed, licensed and supervised by social workers implementing specific treatment plans for each child.

Adoption involves a socio-legal process establishing a parent-child relationship where a child is given equal rights, status and privileges as those of a biological child. Social workers assess the child's and family's circumstances as well as the capability of prospective adoptive parents to ensure that adoption is in the child's best interest.

Legal guardianship places a child under the custody of a responsible individual or family until the child reaches the age of majority. The guardian is responsible for the person and property of the child who is usually an orphan.

During the period 1998-2002, the DSWD placed 9,446 children in alternative family care; 7,329 (78%) for adoption, 1,533 (16%) for foster care and 584 (6%) for legal guardianship. The placement rate for girls is higher than for boys.

In all matters concerning the care and placement of a child, his/her best interest is the paramount consideration.

## **Good practices**

Residential care has been the major response to child abandonment, neglect and abuse. Over the years, good practices have evolved from experiences in the care of children that have been found effective in meeting their physical, social and psycho-emotional needs.

Therapy centres were established in areas with a high incidence of child abuse. Art and theatre therapy workshops, peer counseling and other psycho-social interventions are among the services available for the recovery of children from traumatic experiences. Caring for children with disabilities in a happy and therapeutic environment enhances their

self-esteem and capabilities, leading to a more meaningful, productive and satisfying way of life. On the other hand, the **Growing Great Kids Programme** (GGK) provides training to caregivers to enhance their knowledge of the dynamics and behaviour of children and to develop their competencies in behaviour management and offers stimulating and developmentally appropriate activities for children.

Community-based services prevent the institutionalisation of children as well as provide support for the reintegration of children after discharge from residential care. **Healthy Start** is a comprehensive, early prevention and intervention programme that addresses the challenges of raising infants and young children living under conditions of severe poverty. It is designed to improve family coping skills and functioning, promote positive nurturing parenting skills and parent child relationships and promote optimal child development. Community services emphasise inclusion/integration wherein children with disabilities, particularly from the rural areas, are trained in their own environment with the support and training of their parents in the rehabilitation process.

Group homes for former residents of institutions who could not be adopted nor reunited with their families provide opportunities for independent living and self-reliance through educational assistance, counseling and job placement.

Appendix G presents a detailed description of these programmes and other innovative strategies and projects.

## **Financing, internal and external donor involvement**

In 1998 private welfare agencies reported a capita cost per child of USD 440, a figure that doubled in 2002 to about USD 700-800. In government-managed residential facilities the capita cost ranges from USD 200 to 326.

Total expenditures of the DSWD for residential facilities comprise at least 13% of its budget for maintenance and other operating expenses (MOOE) during the last four years.

UNICEF has country programme for children's protection that includes training, advocacy and the promotion of alternative family care with funding assistance amounting to between USD 700,000 and one million.

## **Conclusion**

The Philippines has made significant efforts to improve the situation of children and their families. It has initiated a solid policy framework, but its implementation needs to be better, primarily because resources have been inadequate. To further advance the fulfilment of the rights of children, the following steps are will be given priority:

- Strengthening of policies and community-based programs and services such as the passage of a law on Foster Care to further encourage foster care of children and provide benefits for foster families
- Strengthening of partnership and collaboration with organisations at the local, regional and international levels for the development and implementation of programs and services for children, human resource development and information exchange, among others.
- Intensifying provision of quality care to children through licensing, accreditation of social welfare and development agencies and monitoring compliance to standards.

### **Topics for discussion at the May 2003 conference in Stockholm**

- What strategies and programmes can be developed and intensified to prevent the institutionalisation of children, support alternative family care and strengthen community-based interventions?
- How can standards of quality care in residential and community-based programmes be promoted, enforced and monitored?
- How can inter-agency/inter-country collaboration be strengthened to facilitate the deinstitutionalisation of children in residential care?
- In what ways can government can assist private welfare agencies to enable them provide quality care to children and move towards deinstitutionalisation?
- How can data and information exchange be best facilitated among stakeholders?
- How can local, regional and international co-operation along technical assistance, human resource development and research be generated to promote quality services for children in both residential and community-based settings?

## **Appendix**

### **Good practices and other innovative strategies, programmes and projects**

1. *Growing Great Kids* (GGK) provides comprehensive training to foster carers and caregivers to develop their competencies in understanding the dynamics and behaviour of children, behaviour management, respecting the child's rights, demonstrating developmentally appropriate activities for children, understanding one's own needs as caregiver and in working with other member of the case management team. It uses a strengths based methods of learning where it acknowledges the strengths and knowledge of the caregiver. It builds relationships among the trainees and the trainers because it avoids criticism and develops in addition to building skills.
2. *Healthy Start* is a comprehensive, community-based, early prevention and intervention programme that addresses the challenges of raising infants and young children under conditions of severe poverty. It is designed to improve family coping skills and functioning, promote positive nurturing parenting skills and parent-child relationships, promote optimal child development. It supports the child's development by supporting his/her family and community. As a result, it prevents child abuse and neglect among impoverished families with 0-3 year-old children. It is voluntary programmes offered to parents or shortly after the birth of a child. For three years, parents are visited in their homes and grouped with their neighbours who have children within a three-month age difference. During regular group meetings, parents learn new information about early brain development, nurturing childcare practices and simple learning activities to enjoy with their children. Parallel to the family strengthening efforts and programmes, there are referral, advocacy and networking activities focused on communities, local government agencies and other non-government organisation, not only to increase the families' access to basic services, but also to sustain the continuity of the programme.
3. *Group Home* is intended for abandoned, neglected, orphaned and surrendered children in residential care who were not adopted or reunited with their biological families. It assists these grown-up children, called 'Scholars' become independent, self-reliant, productive and God-fearing citizens through the following: **provision of educational assistance**; **Homelife** where they themselves manage and learn the basic home life skills such as budgeting, planning the menu, marketing, cooking, cleaning; **casework** providing individual counseling to "heal" and regain self-worth; **groupwork** as a

method to strengthen interpersonal relationship and ensuring meaningful and therapeutic interaction among their colleagues; **job placement** where they are enabled through referral, job accessing and job application to obtain employment; and **follow-up and aftercare** which involve monitoring the progress of the scholars after graduation and while looking for employment.

4. *Children and Women's Desks in Police Stations* were established to attend to reported cases of children and women victims of abuse in a expedient manner protecting their rights to confidentiality. Police officers manning this unit are provided appropriate training specifically on understanding the dynamics of the victims and protocols in handling reported cases, among others.
5. *Community-based Rehabilitation Programme for Children and Youth with Disability.* The programmes emphasises the concept of inclusion/integration wherein disabled children and youth are trained to function in their own environment. It is good alternative for the delivery of services to children with disability especially in rural areas where they are usually deprived because of the expensive cost of rehabilitation services in the cities. Its primary feature is the provision of support and training to parents in coping with the demands of bringing up a family member with special needs and the involvement of the community in the rehabilitation process.
6. *Educational Intervention*
  - Establishment of Schools within the centre's compound
  - The School for Chosen Children established to help sustain the education of the chosen children in the long run. The kindergarten students are accountable to do a basic vocational training in which they work on assembly and packaging of products such as rice, powdered milk and sugar for the community.
  - Establish a Regationist College-system of education adopted is patterned after the preventive system whereby the priest, bothers, and collaborators exert a continuous influence replicating a healthy family atmosphere with the students especially with the interns. This intervention gives special attention to this Human and Christian Growth.
  - Multi-age inclusive school to meet the educational needs of all the children in the institution, no matter their special needs, physical or mental handicaps or behavioural problems.
  - Sponsorship Education Programmes – an after care service for the reintegrated children to help them in meeting their educational needs. There are instances that the financial support can also augment the needs of the family depending on the child's allocated monthly support.
  - Formal and Non-formal Education in preparation for children's community integration and independent living:
    - a. Formal Education – from kinder until finish courses in College
    - b. Non-formal Education – develop their potential and interest/skills such as seminars and trainings, skills trainings, community immersion/ community interaction and on the job training
    - c. Focus on tutorial services to keep children abreast with their lessons in school
8. *Therapeutic Interventions*
  - Physical Therapy, Occupational Therapy and Aquatherapy Services for the physically/mentally children.

- Hydrotherapy for developing further the developmental skills of the children.
- Art therapy workshop thru clay moulding they will discover their hidden talents and skills on creating something as a reflection themselves
- Theatre Art Workshop which girls are taught on how to make script, act, resolve conflict and control their emotions;
- Group therapy session to enable the girls overcome their fear of isolation, disclose and share their experiences and assist in rebuilding trust, self esteem and to resolve guilt feelings and shame and to improve their self image.

9. *Other Support Interventions*

- Vocational Shop for Carpentry and Welding to develop and/or enhance skills of the boys under the Phase-out Programmes.
- Game of Your Life: Used as a positive reinforcement to manage behaviour that focuses on the capability of children and empower them to do good alone and with the group as well.
- Power of Choice: Used to empower the children and teach them to be responsible with the actions and decisions
- Summer Programmes: Extended to children who want to learn/enhance their talents or skills in cooking, cross stitch, computer classes, and music lesson. These are also extended during school days but distribute according to the clubs they belong.
- Tuloy Kap: A venue where children from various centres are invited and have fun to play various sports and be able to promote their respective centres.
- Foster of pastors during weekends: This encouraged participation of church in the Mercy Ministry and allow the children to experience the love and care of a family and for spiritual enrichment;
- Mother and Aunts (caregivers) Training in National and Local that keep them equip in handling or caring for children;
- Parents Organisations: Organised parents to conduct programme/activity that will foster close relationship among the children; Conducted PES to prepare parents/guardians of their responsibilities for the eventual return of their children
- Job placement for children who finished High School
- Advocacy of children's rights
- Crime prevention and discussion and restorative justice in the community level