PHILIPPINE NATIONAL ENVIRONMENTAL
HEALTH ACTION PLAN
(NEHAP)
2010-2013

Final Draft
July 7, 2010
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EXECUTIVE SUMMARY

The threat of environmental hazards to man has not been more emphasized than at present times. Despite the notable achievements in its health indicators (increasing life expectancy at birth, decreasing infant death rates, etc.), these are being threatened by changing environmental scenarios as industrialization and rapid urbanization. With the emergence of modern environmental hazards (e.g. improperly disposed hazardous substances from industries and households; vehicular and industrial emissions) and the persistence of traditional hazards (e.g. lack of access to fundamental resources such as safe water, sanitation, housing, among others), the Filipinos are now faced with the burden of both communicable diseases closely linked with traditional hazards and non-communicable diseases associated with modern hazards.

In terms of urbanization and population growth, the country ranks among the highest in Southeast Asian countries. An expanding population can have serious environmental and health implications and is a threat to the remaining resources of the country since our limited resources may not be able to cope with the growing needs of the population. This may render greater difficulty especially to the impoverished sector in acquiring basic needs essential for healthy living – water, food, shelter, and sanitation.

The development of a comprehensive and integrated approach to address environmental health issues warrant the participation and commitment of all stakeholders, from the national agencies, non-government organizations, the academe, the business group, the local government units and the communities. The National Environmental Health Action Plan will direct the provision of environmental health services in the Philippines for the next three years through strategic approaches by various partnerships in the following key areas:

- Sanitation
- Water
- Air
- Toxic Chemicals and Hazardous Waste
- Occupational Health
- Food Safety
- Solid Waste
- Climate Change
I. INTRODUCTION

The WHO Commission on Health and Environment has concluded that "if the future of the human race is to be safeguarded, its manner of dealing with the environment must change drastically and if the human race continues to ignore this fact, its improved health and well-being will not be an attainable goal." The inherent link between the environment, health and development cannot be overemphasized. Recognition of the need to preserve the environment in order to prevent threats to human health while at the same time ensuring that development goals are met is paramount.

One need not look at the health profile of our country to see that the top leading causes of illnesses continue to be communicable diseases like Diarrhea, Malaria, Typhoid Fever, etc. which are wrought by traditional environmental key risks like inadequacy of safe water, poor waste management, non-practice of food safety, etc. Furthermore, the country is now experiencing growing environmental challenges that impact not only in health but also in terms of livelihood and well being of the citizens. This would include population growing in exponential terms and the impacts of climate change that has caused several cases of extreme emergency.

Environmental Health, being defined here as referring to the practice of assessing, correcting, controlling and preventing factors in the environment that can potentially adversely affect the health of present and future generations (WHO, 1993), needs to be given more emphasis in governance. If the priority of this government is poverty alleviation then, environmental health should be recognized as a tool to achieve this. Any intervention that will reduce the environmental health risks to the poor is a must to reduce poverty. A mechanism to give purpose and direction to Environmental Health activities is the collective formulation of a National Environmental Health Action Plan or NEHAP.

The Philippine National Environmental Health Action Plan

Environmental Health concerns itself with the prevention of illness, either through management of the environment or through changing behaviors. The approach to prevention consists of interventions that prevent the generation of agents, vectors or risk factors; interrupt the transmission of the disease agents and reduce the contact between man and these agents.

The National Environmental Health Action Plan or NEHAP is seen as an inter-agency plan to achieve long-term policy objectives. It is the framework for actions on priority Environmental Health issues. It recognizes the need to coordinate the Environmental Health activities of all stakeholders to give it direction, support its implementation and avoid duplication of efforts. The list of actions identified to address these issues will form a checklist to assess the country’s progress in its efforts.
The formulation of the NEHAP adhered to the interdependence of health, development and the environment. Efforts to protect health should always include efforts to preserve the environment and all activities wrought by development should be aligned along the line of preservation and restoration of both. Thus, the need to require that health and environment protection be integrated in the policies and plans of the other sectors.

The NEHAP set the following objectives:

A. To foster better collaboration at all levels between those responsible for health and those responsible for the environment and between these two and the other players;

B. To foster better collaboration between the national, regional and local authorities to ensure that efforts are coordinated and synergistic;

C. To allow the participation of the public in the decision-making process whenever possible and at all appropriate levels.

II. PRINCIPLES IN THE FORMULATION OF THE NEHAP

1. The NEHAP will subscribe to the definition of Sustainable Development, which is development that meets the needs of the present without compromising the ability of future generations to meet their own needs.

2. Environmental Health issues will be seen from the health and environment perspective taking into account all relevant national and local interests and priorities using an integrated and multidimensional approach.

3. The tenet of “Prevention is better than cure” shall be the best approach.

4. There shall be recognition of the importance of economic valuation of health and environment impact for more optimal use of scarce resources. Trade and economic policies affecting Environmental Health policy shall also be considered.

5. Environmental Health initiatives shall take into consideration the use of economic instruments to finance its activities by way of taxes, user fees, etc. There shall likewise be subscription to the “Polluter Pays” principle.

6. The plan shall recognize the value of having a more effective and systematic impact assessment procedure to bridge evidence-based data with sound decision-making.

7. There should be recognition of the need to develop the capabilities at the local level for identifying and assessing environmental health problems, planning for interventions and implementing and monitoring these. Appropriate institutional support structures should likewise be provided.
8. There shall be awareness raising on health and environment issues through communication strategies for effective health and environment decision-making and effective social action.

9. There shall be recognition of the important role of the community in managing their environment and health. In health, the Primary Health Care approach should be utilized.

10. Environmental Health being an intersectoral concern, initiatives such as the Inter-Local Health Zones (ILHZ) shall be utilized as avenues to mobilize the communities to act in concerted fashion.

III. PARTNERSHIPS IN ENVIRONMENTAL HEALTH

As per Executive Order No. 489, the Inter-Agency Committee on Environmental Health (IACEH) was created with the Secretary of the Department of Health (DOH) as the Chair, the Secretary of the Department of Environment and Natural Resources (DENR) as the Vice-Chair with other concerned government agencies acting as members. Under the initial IACEH, five (5) sectoral task forces were created. A technical staff from the member agencies of the IACEH heads each sectoral task force. These task forces are Solid Waste, Water, Air, Toxic and Hazardous Wastes, Occupational Health, Food Safety, and Sanitation (SWATOFS). As recommended in the 2009 regional action plan, the SWATOFS has now expanded to include climate change.

The members of the IACEH Committee include the Departments of Public Works and Highways (DPWH), Interior and Local Government (DILG), Agriculture (DA), Trade and Industry (DTI), Transportation and Communication (DOTC), Science and Technology (DOST), Labor and Employment (DOLE), National Economic Development Authority (NEDA) and the Philippine Information Agency (PIA). Additional members are mobilized at the Sectoral Task Force level. The IACEH exists to perform the following functions: a) Formulate policies and guidelines and develop programs for environmental health protection; b) Coordinate, monitor, and evaluate EH programs and development projects; c) Undertake information dissemination and education campaigns on EH programs; d) Coordinate, assist and/or support the conduct of research and relevant activities for environmental maintenance and protection.

The DENR is the primary agency responsible for the conservation, management and development and proper use of the country's environment and natural resources, as well as the licensing and regulation of all natural resources utilization to ensure the welfare of the present and future generations of Filipinos.

The DA is the primary agency responsible for the promotion of agricultural development and growth. Under it are various offices like the Fertilizer and Pesticide Authority (FPA), which regulates the fertilizer and pesticides industries; the Bureau of Plant Industry (BPI) which is responsible for the preparation of program for the selection, certification and production of improved planting materials; the Bureau of Animal Industry (BAI), which is responsible for ensuring the production of clean, healthy and sound meat for food; and the Bureau of Fisheries
and Aquatic Resources (BFAR) which is responsible for the preparation and implementation of a Comprehensive National Fisheries Industry Development Plan.

The DPWH is the agency responsible for the planning of infrastructure, such as roads and bridges, flood control, water resources projects and other public works, and the design, construction, and maintenance of national roads and bridges and major flood control systems.

The DILG, among other things, is the agency responsible for ensuring public safety and further strengthen local government capability aimed towards the effective delivery of basic services to the citizenry.

The DTI acts as the primary coordinative, promotive, and facilitative arm for trade, industry and investment activities. It acts as the catalyst for intensified private sector activity to accelerate and sustain economic growth through a comprehensive industrial growth strategy; a progressive and socially responsible liberalization and deregulation program and policies designed for the expansion of both domestic and foreign trade.

The DOTC is responsible for the creation of an environment for the establishment of an integrated transportation and communications system that will foster the attainment of national development goals.

The DOST is the premiere science and technology body charged with the twin mandate of providing central direction, leadership and coordination of all scientific and technological activities, and of formulating policies, programs and projects to support national development.

The DOLE which is responsible for the promotion of gainful employment opportunities and the optimization of the development and utilization of the country's manpower resources; and maintenance of industrial peace by promoting harmonious, equitable, and stable employment relations that assure equal protection for the rights of all concerned parties is also responsible for the advancement of worker's welfare by providing for just and humane working conditions and terms of employment.

The NEDA is the premier social and economic development planning and policy coordinating body and is responsible for ensuring that plan implementation achieves the goals of national development.

The PIA is the agency responsible for ensuring that the citizenry is provided with adequate information regarding Environmental Health that will help them make better decisions to improve their quality of life.

Working hand in hand with the national government agencies are various non-government organizations, academic institutions, business groups, professional organizations, local government units and communities. Partnerships need to be formed for sustainable planning and implementation of Environmental Health initiatives.
IV. SECTOR SITUATION, ACCOMPLISHMENT REPORT AND 2010-2013 PLANS

A. TOXIC AND HAZARDOUS SUBSTANCES

1) Sector Situationer and Accomplishments

The Philippine Inventory of Chemicals and Chemical substances (PICCS) count 44,600 chemicals that it needs to monitor. Out of these, there is a priority list of 48 regulated chemicals. (called PCL or Priority Chemical List). There are also 5 controlled chemicals under the Chemical Control Order (CCO). This includes asbestos, cyanide, mercury, PCBs and Ozone depleting Substances.

The country has only 7 poison control centers nationwide. This is already an improvement from 2005 when there was only one poison control center. The centers report a total of 1286 poisoning cases in 2009. Top causes of poisons are the following

- Jewelry cleaners
- Mixed pesticides
- Button batteries
- Watusi firecracker
- Jatropha seeds
- Multi-vitamins
- Malathion and xylene
- Camphor with Methyl ASA and turpentine

In terms of hazardous waste, the DENR has recognized 108 privately owned hazardous waste treatment facilities. It has also accredited a total of 265 hazardous waste transporters. They cater to about 11,162 hazardous waste generators.

Current issues that the sector are concerned with are as follows:

a. The need to harmonize approaches on risk management methodologies;

b. Insufficient technical experts on toxicology at different levels (national, regional and local)

c. Lack of proper labeling for household chemicals except for pesticides;

d. Weak/inappropriate legislation on penal provisions and prohibited acts

e. Overlapping of legislation on chemical safety;
f. Lack of infrastructure support for laboratory/disposal facilities

g. Inadequate capacity to detect hazardous waste and transboundary smuggling

h. Inadequate capacity and insufficient technology in the treatment and disposal of hazardous HCW.

2) Reorganization of the Sectoral Task Force

Composition of the Sector Working Group:

Chairperson: Environmental Management Bureau (EMB), DENR

Vice Chairperson: Department of Agriculture

Members:

<table>
<thead>
<tr>
<th>Bureau of Plant Industry (BPI)</th>
<th>Fertilizers and Pesticides Authority (FDA)</th>
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</thead>
<tbody>
<tr>
<td>Industrial Technology Development Institute (ITDI-DOST)</td>
<td>Occupational Safety and Health Center (OSCH-DOLE)</td>
</tr>
<tr>
<td>Bureau of Local Government Supervision (BLGS_DILG)</td>
<td>Bureau of Worker’s Conditions (BWC-DOLE)</td>
</tr>
<tr>
<td>Laguna Lake Development Authority (LLDA)</td>
<td>Philippine Nuclear Research Institute-DOST</td>
</tr>
<tr>
<td>Environmental and Occupational Health Office-DOH</td>
<td>Bureau of Health Devices and Technology (BHDT-DOH)</td>
</tr>
<tr>
<td>Food and Drug Authority (FDA)-DOH</td>
<td>Bureau of Investments (BOI)-DTI</td>
</tr>
<tr>
<td>League of Municipalities (LMP)</td>
<td>Bureau of Customs</td>
</tr>
<tr>
<td>UP National Poison Management Control Centre</td>
<td>Non-government Organizations</td>
</tr>
</tbody>
</table>

c) Developing the Action Plan

The Toxic and hazardous Waste Sector have developed their action plan based on six 6 programme areas:

a. Expanding and accelerating assessment of chemical risks
b. Harmonization of Chemicals and Labelling of Chemicals
c. Strengthening national capabilities and capacities for management of chemicals
d. Prevention of illegal international traffic in toxic and dangerous products
e. Information Exchange
f. Technology Update
3) Action Plans for 2010-2013

**Toxic and Hazardous Wastes**

<table>
<thead>
<tr>
<th>PROGRAM FOR ACTION / ISSUES</th>
<th>GOAL</th>
<th>STRATEGIES/ACTIVITIES</th>
<th>Output</th>
<th>Lead Agency</th>
<th>Partner Agencies</th>
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Programme Area A: Expanding and accelerating assessment of chemical risks

1. Inadequate harmonized approach for risk management methodologies

   To develop harmonized approaches on risk management;


   Guidelines on harmonized approaches
   Technical guidelines on aerial spraying

   DENR/DA/DOH
   DTI/DOLE/DOST/UP

2. Insufficient technical experts on toxicology at different levels

   To develop/strengthen training programs for capacity building (regulatory/clinical toxicology, preparedness, risk mapping-GIS, etc)
   - national, regional, local, etc.

   Strengthen poison control centers

   Inventory of existing technical experts
   Create a pool of experts
   Conduct relevant training programmes

   Establish/upgrade PCCs
   Submit SAICM proposal to UNEP

   List of technical experts
   Curriculum/training program
   Functional Poison control and information centers
   Approved SAICM proposal for the strengthening of PCCs

   DOH/Academe
   DENR/DA/DOST/UP
## Programme Area B: Harmonization of Chemicals and Labelling of Chemicals

1. No proper labelling for household chemicals except for pesticides
   - To adopt the harmonized standards for labelling of household chemicals
   - Adopt GHS/international harmonized standards for labeling, symbols and markings/MSDS
   - Legislation/guidelines adopting GHS
   - FDA-DOH/DTI
   - DTI, DA

## Programme Area C: Strengthening national capabilities and capacities for management of chemicals

1. Inappropriate action plans/legislation on penal provisions and prohibited acts
   - To provide/propose to Congress proposed legislation on amendments and revisions on penal provisions and prohibited acts.
   - Provide amendments/revisions to Congress
   - Issuance of Department Circulars from DILG
   - Formulate counterpart local ordinance for implementation
   - Revised/amended legislation
   - Circular issued and disseminated
   - Local ordinance developed
   - Collaborate with other organizations e.g. LMP
   - DA/ DENR
   - DILG/DA/ DENR
   - DOH/DOLE

2. Overlapping of legislation on chemical safety
   - To harmonize legislation on chemical safety
   - Inventory of existing legislation on chemical safety
   - Propose comprehensive/integrated legislation on chemical safety
   - Legislation on chemical safety
   - DENR/DA
   - DENR/DA/DOH/DTI/DOLE

3. Lack of infrastructure support
   - To improve chemical safety management programmes
   - Provide funding for the establishment of laboratory/disposal facilities (obsolete agricultural, health care waste and industrial chemicals)
   - Technical proposals submitted to SAICM-UNEP
   - DENR/DA/DOH
   - DOLE, DTI, Bureau of Customs
### Program Area D: Prevention of illegal international traffic in toxic and dangerous products

<table>
<thead>
<tr>
<th>Issue</th>
<th>Solution</th>
<th>Responsible Parties</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Inadequate capacity to detect hazardous waste/transboundary smuggling</td>
<td>To improve enforcement of laws on the prevention of illegal international traffic of toxic chemicals and hazardous waste</td>
<td>Bureau of Customs/DENR, DA/NBI/Interpol</td>
</tr>
<tr>
<td></td>
<td>Upgrade capability of the Bureau of Customs to detect/monitor toxic chemicals and hazardous wastes</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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<td></td>
<td>Trained and equipped manpower</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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### Programme Area E: Information Exchange

<table>
<thead>
<tr>
<th>Issue</th>
<th>Solution</th>
<th>Responsible Parties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited awareness and concern on chemicals and HCW.</td>
<td>To improve dissemination of information on chemicals and HCW at the local level</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
</tr>
<tr>
<td></td>
<td>Increase awareness among LGUs thru dialogues/meetings/collaboration IEC campaign on chemicals and HCW</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
</tr>
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<td></td>
<td>Information on chemicals and HCW disseminated to LGUs Tri-media/information materials developed/distributed</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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</table>

### Program Area F: Technology Update

<table>
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<tr>
<th>Issue</th>
<th>Solution</th>
<th>Responsible Parties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Waste Management Insufficient technology in the treatment and disposal of hazardous HCW</td>
<td>To ensure proper treatment and disposal of HCW</td>
<td>DOH/DENR/PHD/Priv. service provider</td>
</tr>
<tr>
<td></td>
<td>Provide appropriate and acceptable technology</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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<td></td>
<td>Submit technical proposal for funding support</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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<td></td>
<td>Environment-friendly technology</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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<td></td>
<td>Approved proposal for HCWM alternatives using non-burn technology (UNDP-GEF)</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
</tr>
<tr>
<td>Limitation set forth under CAA</td>
<td>To clarify pertinent provision on the use of incinerator</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
</tr>
<tr>
<td></td>
<td>Review provision under CAA regarding treatment and disposal of HCW</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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<tr>
<td></td>
<td>Policy statement on the disposal of HCW</td>
<td>DENR/DILG, DOH, DA/NBI/Interpol</td>
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</table>
B. Air

1) Sector Situationer and Accomplishments

The Air Quality Management Section Environmental Management Bureau of the DENR is monitoring ambient air through 42 monitoring stations nationwide. However, these monitoring equipment only monitors the TSPs (Total Suspended Particulates) which should not exceed 90 micrograms/cu.meter.

Air pollution in the country is currently being caused primarily by mobile sources, followed by area sources then stationary sources. The increasing number of motor vehicles are the main culprits accounting for 65% of air pollution.

It is important that monitoring stations be established in highly urbanizing cities and that the country should build its technical capacity to monitor PM 10 and PM 2.5 (Particulate matter with 10 diamicrons and 2.5 diamicrons affect the lungs and is a concern of the DOH and the DENR.)

The DENR has designated airsheds to better monitor the compliance to the National Air Quality Guideline Values.
DESIGNATION OF AIRSHEDS

It has also initiated several programs to address air pollution:

A. BANTAY TSIMENEYA PROGRAM

Under this program, total monitored industries is 6,643 (2009). Out of these, 334 were found to be non-compliant and have been issued notices of violation.

B. BANTAY TAMIBUTSO PROGRAM

A total of 4,867 vehicles were flagged down. 46% found passing the emission standards. Those who failed were penalized.

C. IMPROVED FUEL QUALITY PROGRAM

**Industrial Fuel:**
- 0.3% sulfur content for Industrial diesel
- Regulated sulfur content of bunker fuel: Regular BFO, 3%; Special BFO, 1% & 2% or upon industry order

**Automotive Fuel:**
- Phased-out leaded gasoline nationwide in December 2000
- Regulated the 2% benzene and 35% aromatics content in gasoline
• Implemented the limit of .05% sulfur content in auto-diesel “Biofuels Act of 2006” (RA 9367)
• Promoted the use of 2% bio-diesel blend; and ethanol-gasoline blend (E10)

D. STANDARD SETTINGS

- Adoption of Euro II Emission Standards for Motor Vehicles per DENR Administrative Order No. 2007-27 (Emission Limits for CO,H,C+NOx & PM per category and type of Engine)
- Adoption of Euro 4 (In progress)

E. PUBLIC AWARENESS BUILDING

• Through the regular reporting of the National Air Quality Status Report that is disseminated to the public

• Mass media have also assisted in raising public awareness on the need to keep motored vehicles in good condition and should always pass the vehicle emission test which is now mandatory for the renewal of motor vehicle registration.
2) **Reorganization of the Sectoral Task Force for Air**

Composition of the Sector Working Group:

Chairperson: EMB- DENR

Vice Chairperson: Department of Transportation and Communication (DOTC)

Members:

<table>
<thead>
<tr>
<th>Department</th>
<th>Role</th>
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<tbody>
<tr>
<td>Department of Energy</td>
<td>(for fuel quality)</td>
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<td>DILG-BLGS</td>
<td>(for airsheds)</td>
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<td>Department of Education</td>
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<td>Department of Health</td>
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<tr>
<td>Department of Science and Technology</td>
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### 3) Action Plan for Air

<table>
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<tr>
<th>Issues</th>
<th>Goal</th>
<th>Strategies/Activities</th>
<th>Output</th>
<th>Lead</th>
<th>Partner</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Mobile / Transport Emission of gaseous pollutants</td>
<td>To achieve quality of air that will protect the public health, safety and welfare</td>
<td>• Adaptation of Individual Standards. emission standards for air/sea if available.</td>
<td>• Establish emission standards for air/sea</td>
<td>ATO DOTC/DENR</td>
<td>DOTC PPA, DENR, MMDA etc.</td>
<td>For LTO Comments. Enforceability of emission licensing Long-term</td>
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<tr>
<td>1. LACK OF LOCAL EMISSION standards</td>
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<td>• Formulate Rules &amp; Regulations guidelines</td>
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<td>»Airlines</td>
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<td>• Strengthening and enhancement of monitoring through creation of an independent body to monitor activities of concerned enforcement agencies</td>
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<td>»Sea Going Vessel</td>
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<td>• Establish emission standards for air/sea</td>
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<td>2. POOR COMPLIANCE TO Emission STANDARDS</td>
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<td>• Improved emission standards for air/sea</td>
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<td>DOTC/LTO</td>
<td>DENR/LGU/MMDA/ etc.</td>
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<td>»Land Transport</td>
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<td>• Adjusted number of vehicles using of alternative fuels</td>
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<td>• Increased number of people using bikes/mass transport</td>
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<td>• Fuel efficiency standards for public transport</td>
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<td>• Independent body created</td>
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<td>• Strengthened system for deputation</td>
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<td>• Increased the # of vehicles using of alternative fuels</td>
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<td>• Increased no. of people using bikes/mass transport</td>
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<td>• Fuel efficiency standards for public transport</td>
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- Deputation of enforcers
- Impose higher penalties (Ceiling within the Clean Air Act
- Encourage and promotion of alternative fuels/additives
- Promotion of non-motorized mode of transport/mass transport system
- Strengthen roadside apprehension on polluting & non-roadworthy vehicles (intensify organization of Anti Smoke Belching Units under CENRO office
| 3. Excessive Noise Emission  
- Airlines  
- Land Transport | To achieve quality of air that will protect the public health, safety and welfare | Enhancement of LGU capability/enact local ordinances on ASBU (including ambient and source. Establish motor vehicles standards on operational LGU Anti Smoke Belching Units | No. of LGU with local Ordinance | LGUs, MMDA |
|---|---|---|---|---|
| 4. Enforcement of Noise Ambient Standards | To achieve quality of air that will protect the public health, safety and welfare | - Strengthen LGU capability through:  
  - zoning  
  - traffic management  
  - non-motorized vehicle | - LGU capability relative to zoning, traffic management strengthened  
- LGU advocating/providing support to non-motorized modes of transport | LGUs, MMDA |
| 5. Inadequate capability to monitor fuel quality | To achieve quality of air that will protect the public health, safety and welfare | - Capacity building through:  
  - Deputization of additional inspectors  
  - Strengthening/enhancing the capacity of DOE | - DOE | LGUs, MMDA |
| 6. Lack of National Inspection and Maintenance program for | To achieve quality of air that will protect the | - Intensify information campaign by all CONCERNED agencies:  
  - maintenance of vehicles | - Development of a comprehensive IEC program addressing such | LGU/MMDA DOTC & DENR |

**Note:** The table above outlines various issues related to air quality and the measures proposed to address them. Each issue is listed with specific actions and stakeholders involved.
### MOTOR VEHICLE

**Public Health, Safety and Welfare**

- Driving habits
- Quality of fuels used/appropriate fuels
- Penalties for violation of applied rules
- Health effects of air pollution
- Licensing/permitting/registration procedures
- Establish MVIM program pursuant to Sec 21

**Issues and Concerns**

- MVIM program establish/formulated

---

### II. Stationary Sources

1. **Inefficient operation of facilities**
   - Promotion on the use of cleaner product technology.
   - Increase no. of industries with cleaner production technology implemented.

   **DTI**
   **DENR**
   **DOST**
   **DTI**

2. **Outdated technology for the control of emission**
   - Provide incentives for new technologies
   - Strengthened system for incentives

   **DTI**
   **DOF**
   **All agencies**

3. **INSUFFICIENT MONITORING STATION LOCATED AT STRATEGIC PLACE**
   - Expand monitoring station of PM 10/2.5
   - Formulation of 2.5 guidelines values
   - Increase no. of monitoring station in place
   - Emission standardss for P.M. 2.5

   **DENR**
   **LGU**
   **PB**
   **NGO**
   **OTHER AGENCIES**

---

### III. AREA SOURCES

1. **LAW ENFORCEMENT ON THE BAN OF OPEN BURNING**
   - Strict enforcement on the: Prohibition of open burning
   - Strict implementation of strict prohibition of open burning
   - Massive info campaign on health impact

   **LGU/Pos PIA/DOH/DEN R/MMDA**
   **All agencies**
<p>| C. AREA SOURCES | -do- | related regulations by the LGUs | tech assistance to LGU provided to enforce regulations | LGU/DILG/PIA | All agencies |
| Agricultural and forest fires (uncontrolled) | -do- | Strict monitoring of forest for uncontrolled fires/slash and burn farmers (kaingin) | Regular/strict monitoring of forest | All agencies |
| Non compliance to policies prohibiting Smoking in Public Places and Indoor air pollution | -do- | strict implementation of the policies relative to smoking in public places | public places strictly monitored | DOH/PIA/LGUs/MMDA | All agencies |
| C. AREA SOURCES | -do- | strict enforcement of VOC emission standards | Standards strictly enforced Increase in the number of in adopting self regulations Increase in awareness relative to | DENR/LGUs | DENR DOE All agencies |</p>
<table>
<thead>
<tr>
<th>increase? road dust</th>
<th>-do-</th>
<th>VOC and it's effect</th>
<th>-do-</th>
<th>DPWH/LGUs/ MMDA</th>
<th>All agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>road and drainage</td>
<td>road and drainage</td>
<td>Road system /traffic flow improved</td>
<td>DPWH/LGUs/ MMDA</td>
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<tr>
<td></td>
<td></td>
<td>improvement</td>
<td>improvement</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>D. SYSTEMS DEVELOPMENT</td>
<td>-do-</td>
<td>harmonize health information generated for air pollution</td>
<td>strengthen existing health information system for air pollution</td>
<td>Relevant health information generated</td>
<td>DOH/LGUsMM DA</td>
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<td></td>
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<td></td>
<td>enhance capability of LGUs to monitor health information for air pollution related illnesses</td>
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<td></td>
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<td></td>
<td>enhance capability of LGUs to monitor health information for air pollution related illnesses</td>
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<tr>
<td>research? gaps on the health impact/evaluation of mitigating measures in terms of health costs</td>
<td>-do-</td>
<td>establishment of health research agenda focusing on health impact/valuation of mitigating measures as to health costs (health economics)</td>
<td>establishment of health research agenda focusing on health impact/valuation of mitigating measures as to health costs (health economics)</td>
<td>Health research agenda formulated</td>
<td>DOH/DOST/DENR</td>
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<tr>
<td></td>
<td></td>
<td>encourage research individuals/organization to conduct related research activities through funding and technical support</td>
<td>encourage research individuals/organization to conduct related research activities through funding and technical support</td>
<td>Systems developed/streamline d to facilitate access to financial, technical and relevant support</td>
<td></td>
</tr>
</tbody>
</table>
C. WATER SECTOR

1) Sector Situationer and Accomplishments

The Office of the President allocated PHP 500 Million per year from 2005 to 2008 for the President's Priority Program on Water (P3W). In late 2009, the fund was even increased to Php1.5 Billion. The fund was primarily for grants to serve “waterless municipalities” defined as those whose households have less than 50% access coverage. 331 municipalities have been served out of the target of 432 waterless municipalities. As of December 2009 it is reported that 118 of these municipalities have now graduated—meaning they now have more than 50% access coverage or total households with access to potable water.

In August 2007, the Philippine Water Supply Sector Roadmap (PWSSR) was completed and approved by the National Economic and Development Authority Infrastructure Committee and this has now become the basis for coordination of the country’s projects and programs on water supply. The second edition is now undergoing discussion for approval. Task Forces on the three key result areas of the PWSSR are regularly meeting to monitor plan implementation. These are in the areas of institution building, strategic alliances and capacity development.

Five major projects are now on-going nationwide that is aligned with the PWSSR targets:

a. Enhancing Access to and Provision of Water Services with the Active participation of the Poor (MDG 1919 Funded by the Spanish Achievement Fund, Project duration: 2009-2012) targeting 36 "waterless municipalities" in 5 regions all over the country.

b. Philippine Water Supply and Sanitation Sector Assessment and Monitoring Project

c. Development of the Capacity Building Framework for Water and Sanitation

d. Ring-Fencing of Water Utility accounts of Local Government Units and water cooperatives

e. The Philippine Portal for the Water Supply & Sanitation Sector (http://philwatsan.org.ph) was created in 2008 containing the policies, projects/programs, research/publications and statistics on WATSAN. It is run and operated by the National Water Resources Board.

Increased access to safe drinking water increased through these projects. These definitely contributed to the improvement of water quality in priority areas and reduced the incidence of water borne diseases.
2) **Reorganization of the Sector Working Group for Water Supply:**

Chairperson: Department of Interior and Local Government

Vice Chairperson: Department of Agriculture

Members:

<table>
<thead>
<tr>
<th>Bureau of Local Government Supervision (BLGS_DILG)</th>
<th>Environmental and Occupational Health Office-DOH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laguna Lake Development Authority (LLDA)</td>
<td>League of Municipalities (LMP)</td>
</tr>
<tr>
<td>Metro Manila Water and Sewerage System (MWSS)</td>
<td>Non-government Organizations</td>
</tr>
<tr>
<td>National Economic and Development Authority (NEDA)</td>
<td>National Water Resources Board (NWRB)</td>
</tr>
<tr>
<td>Bureau of Fisheries and Aquatic Resources (BFAR)</td>
<td>EMB-DENR</td>
</tr>
<tr>
<td>National Irrigation Authority (NIA)</td>
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</tr>
</tbody>
</table>

*Proposed Additional Members:*

<table>
<thead>
<tr>
<th>Philippine Association of Water Districts (PWAD)</th>
<th>Leagues of Province, League of Municipalities League of Cities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Philippine Water Works Association (PWWA)</td>
<td>National Water and Sanitation Association of the Philippines</td>
</tr>
<tr>
<td>Philippine Water Partnership (PWP)</td>
<td></td>
</tr>
</tbody>
</table>
### 3) Action Plan for 2010-2013

**Sector Outcome Goal:** To provide adequate water supply and reduce/eradicate waterborne and water-related diseases

<table>
<thead>
<tr>
<th>Issues</th>
<th>Specific Goals</th>
<th>Strategies</th>
<th>Outputs</th>
<th>Lead Agency</th>
<th>Partners/Support Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source: -Fragmented water source development for water supply</td>
<td>- Develop an integrated framework for water source development</td>
<td>- Use IWRM framework -Amendments of the Water Code -Issuance of NEDA resolution/policy, etc.</td>
<td>National framework on water source development</td>
<td>-NWRB</td>
<td>-DENR -LWUA -MWSS -LLDA -DOH -NEDA</td>
</tr>
<tr>
<td>-Pollution of water sources from agricultural and industrial establishments</td>
<td>-Protect water resources from all types of pollutions</td>
<td>-Implementation of Clean Water Act -Implement water safety plan</td>
<td>All required permits complied (e.g. discharge permits) -Penalties for violators -Water safety plan per water utilities</td>
<td>DENR/LLDA/NWRB LWUA NAWASA</td>
<td>DA DOH LWUA</td>
</tr>
<tr>
<td>-Overextraction of groundwater leading to saltwater intrusion</td>
<td>-Protection of groundwater</td>
<td>Regulate groundwater extraction Preparation of vulnerability map</td>
<td>Vulnerability Map on the entire country</td>
<td>NWRB, MWSS, LWUA</td>
<td>DA, DILG</td>
</tr>
<tr>
<td>Supply: Disparity (urban/rural, rich and poor) in the provision of safe water supply</td>
<td>Ensure equitable water supply provision among population</td>
<td>-Prioritize provision of water supply to high risk population groups</td>
<td>-Map of high risk areas</td>
<td>-DILG -DOH</td>
<td>-LWUA -MWSS -NEDA -LLDA -DENR LGU WSPs</td>
</tr>
<tr>
<td>Significant population with no access to safe water supply</td>
<td>Increase access to safe water supply</td>
<td>-Sector assessment and monitoring -Formulation of water safety plans</td>
<td></td>
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<tr>
<td>Investment:</td>
<td>Increase investment</td>
<td>-Financing</td>
<td>-Investors</td>
<td>DOF</td>
<td>NEDA, MWSS</td>
</tr>
<tr>
<td>Low investment for Capex/Opex</td>
<td>mechanisms -Private sector participation</td>
<td>participating in water projects</td>
<td>DBM</td>
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<tr>
<td>Regulation: Weak enforcement of water related policies and laws</td>
<td>Strengthen policy enforcement at LGU levels</td>
<td>-Localizing the national policies to adopt to LGU conditions</td>
<td>DILG DOH NWRB</td>
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<td>-Amendment of outdated laws and IRRs (e.g. Water Code, Sanitation Code)</td>
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<td></td>
<td></td>
<td>-Local ordinances for water supply management</td>
<td>DOH EMB LLDA</td>
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<tr>
<td></td>
<td></td>
<td>-Amended water code and sanitation code</td>
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<td></td>
<td>Water supply during emergencies and climate change: Inadequate mechanism for preparedness and response (drought, floods, spills):</td>
<td>Minimize adverse impacts from water related emergencies</td>
<td>Development of tools and mechanisms for emergency preparedness and response addressing water concerns</td>
<td>NDCC – WASH CLUSTER</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>-Guidelines for preparedness on response mechanisms</td>
<td></td>
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<tr>
<td></td>
<td>Information system: - Uncoordinated/scattered, not updated sector data</td>
<td>-Consolidate and coordinate availability of sector data</td>
<td>-Scale up sector assessment and monitoring</td>
<td>DILG DOH EMB LWUA MWSS NAWASA</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>-Sector assessment and monitoring system</td>
<td></td>
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<td></td>
<td>Partial implementation of water supply roadmap</td>
<td>Full implementation of roadmap</td>
<td>Updating and wide Dissemination</td>
<td>NEDA, DILG</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>LGU adaptation</td>
<td>LGU, WSPs OTHER AGENCIES</td>
<td></td>
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</tr>
</tbody>
</table>
D. **SANITATION SECTOR**

1) Sector Situationer and Accomplishments

The latest data on Philippine Sanitation reveals that in 2008, about one quarter of the population is still not served with individual sanitary types of sanitation facilities. Open defecation is still practiced by 14% of the rural population and 4% of the urban population respectively. This means that every single day probably **10 million Philippine citizens defecate in the open**, with serious consequences to the health, dignity and human development of this equally important part of the national population.

While the country is said to be on track in meeting its MDGs on sanitation it still means 1 in every 5 people in the Philippines will be unserved and that achieving universal coverage figures (100% of households with sanitary toilets) is highly uncertain. The uncertainty is aggravated by the recent disasters that hit the country and probably damaged substantively existing sanitation facilities.

While sanitation has traditionally lagged behind water supply, it has recently been energized by the high priority accorded to it internationally. The Philippines supported the global community by organizing a number of milestone events to raise the profile of sanitation in the country and to recognize the best practices being done at local level. These special events include the following:

a) Sanitation Summit (1st) - July 2006
b) Sanitation Summit (2nd) - July 2008 in ADB
c) International Year of Sanitation (2008) launching in Mandaluyong City on February 18, 2008
d) In celebration of the IYS, the DOH launched the National Search for Barangay with Best Sanitation Practices (NSBBSP) in 2008.
e) Philippine Symposium on Sustainable Sanitation and Global Handwashing Day Celebration held in Mandarin Hotel, Makati City last October 15-16, 2009
f) Hosting of the 2nd East Asia Ministerial Conference on Sanitation and Hygiene (EASAN2) on January 26-28, 2010 at Sofitel Phil Plaza Hotel, Manila
g) The awarding of the 2nd NSBBSP was held at Sofitel Phil Plaza Hotel, Manila last January 29, 2010 with 3 Barangays as the Grand National Winners (1st, 2nd & 3rd)

The most important milestone for the sanitation sector is the preparation of the Philippine Sustainable Sanitation Roadmap (PSSR) led by the Department of Health. The PSSR is the basic framework document that will serve as the guide for the development of sustainable sanitation in the country. It has recently been approved by the NEDA inter-agency Sub-committee on Water Resources and is now being disseminated so that national and local agencies can develop their plans and programs aligned with the roadmap framework.

The recent preparation of the National Sewerage and Septage Management Plan (NSSMP) under the Department of Public Works...
and Highways is consistent with the Roadmap and has also been recently approved by the NEDA.

Furthermore, the Philippines is also one of the countries participating in the program for Sustainable Sanitation in East Asia where the following were developed:

a) National Sustainable Sanitation Plan of the Department of Health
b) National sustainable sanitation health promotion plan
c) Sanitation program packages for different types of sanitation challenges
d) Sustainable Sanitation Education Program

Many Local government units are now embarking on wastewater treatment projects for public markets, slaughterhouses and hospitals. A few have also piloted the Community led total sanitation approach (CLTS), the Decentralized Wastewater treatment (DEWATS) facilities and Ecological Sanitation approaches using urine diverting and composting toilets. But these are still in the pilot stage and there is still a need to scale up and replicate best practices.

2) Reorganization of the Sanitation Sector

CHAIR: DOH
VICE CHAIR: DILG
MEMBERS:

<table>
<thead>
<tr>
<th>MWSS</th>
<th>LLDA</th>
<th>Department of Tourism</th>
<th>DPWH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metro Manila Development Authority</td>
<td>Department of Agrarian Reform</td>
<td>DENR-EMB</td>
<td>Streams of Knowledge</td>
</tr>
<tr>
<td>Department of Education</td>
<td>NEDA</td>
<td>LWUA</td>
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</tbody>
</table>

3) Action Plan 2010-2013

Overall Goal: To accelerate the development and implementation of effectual programs of sustainable sanitation

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>GOALS</th>
<th>STRATEGIES</th>
<th>OUTPUT</th>
<th>LEAD</th>
<th>PARTNER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance, Regulation and Enforcement</td>
<td>To improve institutional and regulatory framework on sanitation</td>
<td>Review and updating of existing sanitation laws, rules and regulations. Strengthening of DOH as lead sector driver providing policy and technical assistance at national and local levels. Strengthening of LGUs’ awareness on sustainable sanitation</td>
<td>National Sustainable Sanitation Program of DoH NGAs with sanitation related mandates develop their own sanitation strategy, plans and programs A clear and sustainable implementation of sanitation policies. LGUs develop and implementing their policies, plans and programs on sustainable sanitation</td>
<td>DOH</td>
<td>DILG, DENR, DPWH, NEDA, LWUA, LLDA, MWSS, DepED, DOT, LGU, Congress, MMDA PIA LEAGUE OF CITIES AND MUNICIPALITIES, PROVINCES, BARANGAYS</td>
</tr>
<tr>
<td>Service Delivery</td>
<td>To improve capacity of sanitation service providers</td>
<td>Development of integrated and decentralized capacity development system for different service providers</td>
<td>Empowerment of different stakeholders towards active involvement for capacity development in sustainable</td>
<td>DOH, DILG</td>
<td>Academe, DPWH, NEDA, LWUA, LLDA, MWSS, DepED, DOT, DENR, LGU,</td>
</tr>
</tbody>
</table>
No guidelines to develop/strengthen LGU initiatives on policy formulation, planning and managing sanitation programs

Frontliners such as sanitary inspectors and some sanitation service providers lack adequate sanitation education, knowledge and skills

Low level of knowledge and know-how on planning and implementing sustainable sanitation programs/projects

<table>
<thead>
<tr>
<th>Financing</th>
<th>To increase investments for sustainable sanitation programs and projects</th>
<th>Development of financing strategies and incentive schemes for sustainable infrastructure development.</th>
<th>Investment requirements to MDG and MTPDP targets identified and secured Established/Enhanced PPPs and sanitation entrepreneurship</th>
<th>DOH, DOF, NEDA, DBM, MWSS, Development Partners, DPWH, LLDA GFIs, LGUs, MMDA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Issues</td>
<td>To increase level of awareness and involvement of different stakeholders on sustainable sanitation</td>
<td>Establishment of broad based alliance of multi sectoral and multi-level stakeholders geared towards increased support for the promotion of sustainable sanitation and strengthening of the sanitation sector”</td>
<td>Inventory of champions and stakeholder groups in sanitation Rationalized/ strengthened sector coordination mechanism.</td>
<td>DOH, Academe, LGU, DILG, Civil society, MMDA</td>
</tr>
</tbody>
</table>

**Sanitation**
Training programs on sustainable sanitation Functional training/resource centers at all regions

MMDA
E. FOOD SAFETY

1) Sector Situationer and Accomplishments

Ensuring food safety is the assurance that food will not cause harm to the consumer when it is prepared and eaten according to its intended use. Assurance of food safety requires a concerted cooperation at all levels in the continuum in order to achieve maximum consumer protection. This would include government, food manufacturers/ producers academia, research institution and the consumers.

The Department of Health formed an inter-agency food safety committee led by the Food and Drug Administration (FDA) that is geared towards the guarantee of adequate, safe, quality and affordable food for public health protection as well trade development through the following:

- Provide directions to the TWGs in coordinating and communicating food safety issues
- Facilitate the coordination of all agencies involve in food safety and build strong linkage with other agencies especially in time of emergencies
- Takes the lead within the Department on food safety issues and recommends solution

Very recently, the Food and Drug Administration Act of 2009 (Republic Act 9711) was enacted that paved the way for strengthening the Food and Drug Administration in ensuring the safety efficacy, purity and quality of processed foods, drugs, diagnostic reagents, medical devices, cosmetics, household hazardous substances thru the state of the art technology as well as the scientific soundness and truthfulness of product information for the protection of public health.

The challenge of keeping the public informed to prevent and reduce the incidence of food-borne diseases and strengthening the integrated system for food safety and quality in the Philippines remain to be the priority of the food safety sector.

2) Sector reorganization

Chairperson: Department of Health
Vice Chairperson: Department of Agriculture

Members:

<table>
<thead>
<tr>
<th>Other DOH agencies such as EOHO, HEMS, BOQ, NCHP, NEC, NNC, RITM</th>
<th>All DA attached agencies such as BFAR, BPI, BAL, NIMS, PCA, SRA, NDA, BAFPS, NFA, FDC, BAR, FPA</th>
<th>DTI-Bureau of Product Standards</th>
<th>DOST-PCHRD, FNRI</th>
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<tr>
<td></td>
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<td>DILG-BLGS</td>
<td>DepEd</td>
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<td>LGUs through the Leagues</td>
<td>Bureau of Customs</td>
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<tr>
<td></td>
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<td>Academe</td>
</tr>
</tbody>
</table>
### 3) Action Plan 2010-2013

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>GOAL/S</th>
<th>STRATEGIES</th>
<th>OUTPUT/S</th>
<th>LEAD AGENCY</th>
<th>SUPPORT AGENCY</th>
</tr>
</thead>
</table>
| Lack of an integrated system for food safety. | **Goal No. 1**  
To establish an integrated system for food safety and quality in the Phils aligned with international standards | ■ Organize an inter-agency national Food Safety Body  
■ Upgrade, strengthen and establish support systems, infrastructure and logistics on food safety  
■ Collaborate and establish linkages with international organizations i.e. INFOSAN | National Food Safety Coordinating Council (NFSCC) established through Joint AO  
Effective food safety mechanism  
Closer coordination with international organization | DOH - FDA | DOH Agencies (NCDPC-EOHO, HEMS, BOQ, NCHP, NEC, RITM)  
DA Attached Agencies (BFAR,BPI, BAI, NMIS, PCA, SRA, NDA, BAFPS, NFA, FDC, FPA)  
DTI  
DILG - LGUs  
DOST  
DepEd  
BOC |
<table>
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<tr>
<th>Goal No. 2</th>
<th>Goal No. 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>To prevent and reduce the incidence of foodborne diseases</td>
<td>To update existing rules and regulations on food safety responsive to the current situation</td>
</tr>
</tbody>
</table>

- Participate actively in the CAC’s standard setting process and to adopt Codex standards, whenever appropriate
- Continue to develop and maintain sustainable preventive measures, including food safety education programs aimed at reducing the burden of foodborne diseases through a systems approach encompassing the complete food production chain from farm to consumption
- Strengthen and enhance the capability of food safety key players to properly address new and emerging issues
- Review and update all food safety standards and regulations including the proper disposal of “condemned” food products without affecting the human health and environment
- Collegial review of the food safety bill to harmonize all existing food safety rules and regulations
- Adoption of Codex standards
- Decreased incidence of foodborne diseases
- IEC materials developed
- Efficient response to food safety problems
- Food safety standards and regulations updated
- Passage of the Food Safety bill into a law

| BAFPS |
| NCHP |
| FDA and BAFPS |

NCDPC, NEC, HEMS, BFAR, BPI, BAI, NMIS, PCA, SRA, NDA, FPA, All DOH and DA Agencies, LGUs, Dep Ed, All DOH and DA Agencies, LGUs, Dep Ed, DOST, DTI, BOC, Academe, DENR - EMB
F. Occupational Health

1) Sector Situationer and Accomplishments

One of the biggest assets of the Philippines is its labor force. The Department of Labor and Employment estimates that there is about 35.95 million labor force. Total employed is 31.623 million. To gender disaggregate, there is an estimate of 19.551 million males and 12.072 million females in the labor force. This would include the 8.2 million Filipinos working overseas and 3.8 million contract workers.

The Occupational Health and Safety Office is the DOLE unit responsible in ensuring safety standards for Filipino workers. Based on the latest OHS data, highest distribution of work accidents by industry is topped by the manufacturing industry and followed closely by the agriculture industry.

The top three occupational illnesses include musculo-skeletal disorders infections and bronchial asthma. The top three work-related Employees Compensation Claim (EC Claim) are renal disorders eye disorders and cardio-vascular disease.

While OSH standards have been established, there remains to be low compliance due to the limited scope of OSH, absence of strict penalties fragmented OSH administration and outdated OSH standards. There is still public apathy on OSH concerns compounded by inadequate number of OSH personnel and facilities to fully enforce occupational safety and health standards.
Relative to the maintenance of safety and health conditions at the workplace, the top 5 programs/services implemented in establishments were the following:

a. Availability of first aid kits
b. Regular conduct of inspection and maintenance of equipment
c. Regular monitoring of hazards such as fumes dust, noise and heat level in work areas
d. Accident prevention program
e. Drug-free workplace policy/program

2) Sector Re-organization

Chairperson: Department of Labor and Employment

Vice Chairperson: Department of Health

Members:

Members
- DPWH
- PIA
- DILG Regional offices
- PCOM
- OHNAP
- NEDA
- IHAP
- BWC
- CSC
- SOPI
- ECC
- SSS
- GSIS
- PhilHealth
- LGU’s
- ULAP
- ECOP
3) **Action Plan 2010-2013**

**Sector Goal:** To reduce incidence of occupational health-related diseases and injuries.

<table>
<thead>
<tr>
<th>Issues</th>
<th>Goals</th>
<th>Strategies</th>
<th>Outputs</th>
<th>Lead Agency</th>
<th>Partners/supp ort agencies</th>
</tr>
</thead>
</table>
| Small and medium scale Industries non-compliance to existing OH standards | Goal 1: To capacitate small and medium scale industries to comply with OH standards | a. Encourage self-regulation and voluntary compliance  
b. Advocacy, IEC and training  
c. Adopts small brother-big brother partnership  
d. Provide technical assistance for industry regulation  
e. Encourage LGU's to passed Ordinances regarding compliance with OH standards  
f. Provide incentives to compliant industries and prescribed penalties for non-compliance | a. Increased number of small and medium industries complying with OH standards (at least 10% increase annually based on data to be established) | DOLE including its regional offices, DOH and DILG | DPWH, PIA, NEDA, SSS, GSIS, PhilHealth, Industry Associations, Employers Group, Labor/Trade Unions, LGU’s, NGO’s ex. PATAMABA….. etc, developmental partners |
<p>| Limited government resources resulting in | Goal 2: To optimize the presence of existing resources/networks | a. Identify or map-out resources (i.e. funds, experts for research and infrastructures for technical | Forged Memorandum of Agreement/Understanding | DOLE, DOH, DILG | DPWH, PIA, NEDA, SSS, GSIS, PhilHealth, Industry |</p>
<table>
<thead>
<tr>
<th>Weak enforcement of OH services</th>
<th>Goal 3: To advocate OH service provision to informal sector/health workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>on OH services</td>
<td>a. Advocacy - IEC - BCC - universal health insurance coverage awareness</td>
</tr>
<tr>
<td></td>
<td>b. Identify and involve informal sector associations (ex. Representation anti-poverty program, BMBE etc...)</td>
</tr>
<tr>
<td></td>
<td>c. Work Improvement in Small Enterprises (WISE)</td>
</tr>
<tr>
<td></td>
<td>d. Establish OH services in Rural Health Units (RHU)</td>
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<tr>
<td></td>
<td>e. Lobby for the passage of OH bill for health workers</td>
</tr>
<tr>
<td></td>
<td>f. Ensure the implementation of the Magna Carta for health workers</td>
</tr>
<tr>
<td>(MOA/U) among network partners to support in the implementation of OH programs and Services</td>
<td></td>
</tr>
<tr>
<td>Associations, Employers Group, Labor/Trade Unions, LGU’s, NGO’s ex. PATAMABA….. etc, developmental partners</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lack of awareness among informal sectors of OH services and programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Number of IEC materials developed and distributed</td>
</tr>
<tr>
<td>b. Organize cooperatives /associations</td>
</tr>
<tr>
<td>c. RHU units with OH service package</td>
</tr>
<tr>
<td>d. Number of informal sector utilizing OH services of the RHUs</td>
</tr>
<tr>
<td>DOLE, DOH, DILG</td>
</tr>
<tr>
<td>DPWH, PIA, NEDA, SSS, GSIS, PhilHealth, Industry Associations, Employers Group, Labor/Trade Unions, LGU’s, NGO’s ex. PATAMABA….. etc, developmental partners</td>
</tr>
<tr>
<td>Lack of common OHS standards</td>
</tr>
<tr>
<td>-----------------------------</td>
</tr>
<tr>
<td>Lack of coordinated response on public health issue to be implemented in the workplace/ Limited response on emerging OHS issue e.g. AIDS, asbestos, A1H1....</td>
</tr>
</tbody>
</table>
G. **SOLID WASTE**

1) **Sector Situationer andAccomplishments**

The Solid Waste sector is one of the most active sectors that has managed to get the National policies on the following: a) guidelines on the closure and rehabilitation of Open and Controlled Dump Facilities (DAO 2006-09); b) guidelines on the categorized final disposal facility (DAO 2006-10); the National Government-Local Government Cost Sharing Framework and the National Framework Plan on the Informal Sector in Solid Waste Management.

Some of the accomplishments reported by the National Commission on Solid Waste are the following:

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Output</th>
<th>Lead Agency</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase awareness of LGUs on need to formulate the SWMP</td>
<td>Simplified annotated outline and technical assistance provided to LGU</td>
<td>NSWMCS</td>
<td>SWM Sector,</td>
</tr>
<tr>
<td>Training/training on the formulation, appreciation and replication of good practices</td>
<td></td>
<td></td>
<td>LGUs League</td>
</tr>
<tr>
<td>Dissemination of success stories on SWM</td>
<td>Good Practices were replicated (through REC)</td>
<td>NSWMC</td>
<td>SWM Sector,</td>
</tr>
<tr>
<td>Information exchange among LGUs</td>
<td></td>
<td></td>
<td>LGUs League</td>
</tr>
<tr>
<td>Technical training on the components of SWM</td>
<td>Documented and disseminated success stories on SWM</td>
<td>NSWMC</td>
<td>SWM Sector</td>
</tr>
</tbody>
</table>
The National Solid Waste Commission reports that 30,000 tons of waste are generated daily. 675 tons per day of methane is produced (which is more potent than carbon dioxide). While the Sector has campaigned for reduction of wastes, to date, there are only 6750 materials recovery facility serving 7,680 barangays or only 18.22% of the 42142 barangays in the country.

For residual waste there are only 30 sanitary landfills which is slowly replacing the open and controlled dumpsites that is considered unsanitary.

The country has a long way to go in the promotion of waste avoidance and in the promotion of the 3 Rs (Reduce Re-use and Recycle). There is still a need for raising public awareness, citizen's participation and behaviour change. Everybody must be involved and it is necessary to build partnerships through alliance building.

2) Reorganization of the Solid Waste Task Force

Chair Bureau of Local Government Services, DILG
Vice Chair Environmental Management Bureau – DENR

Members:
1. Industrial Technology Development Institute - Department of Science and Technology
2. Board of Investments - Department of Trade and Industry
3. Environment and Occupational Health Office - Department of Health
4. Department of Public Works and Highways
5. National Economic and Development Authority
6. Metro Manila Development Authority
7. Philippine Information Authority
8. ACADEME
9. NGOs
### Action Plan 2010-213

<table>
<thead>
<tr>
<th>PROGRAM FOR ACTION / ISSUES</th>
<th>GOAL</th>
<th>STRATEGIES/ ACTIVITIES</th>
<th>Output</th>
<th>Lead Agency</th>
<th>Partner Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Solid Waste Management</strong></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Low level of LGU compliance to RA 9003 particularly on waste disposal</td>
<td>LGUs complying with the provisions of the RA 9003. Maximum utilization of LGPMS results to solid waste planning and budgeting among LGUs.</td>
<td>Stronger advocacy to LGU to implement RA 9003 Resource mapping and needs assessment in the regions/LGUs Need to implement the revised NG-LGU Cost Sharing Framework Review gray area of RA 9003</td>
<td>RA 9003 integrated to LGU Comprehensive Development Plan /Physical Framework Plan Implementation of the NG-LGU Cost Sharing Framework in selected LGUs</td>
<td>DENR/ NSWMC</td>
<td>LGU</td>
</tr>
<tr>
<td>2. Lack of technical capability to develop and operate disposal facility</td>
<td>Enhanced capability of LGUs</td>
<td>Provide technical assistance to LGUs</td>
<td>LGU personnel trained</td>
<td>DENR/ NSWMC</td>
<td>DILG LGU</td>
</tr>
<tr>
<td>3. Lack of harmonized plans and programs for the informal sector in solid waste management</td>
<td><strong>Empowered informal waste sector that is recognized as a partner of the public and private institutions, organizations and corporations in the promotion and implementation of the 3Rs (reduce, reuse and recycle) of solid waste management in the Philippines with the end in view of alleviating poverty.</strong></td>
<td><strong>Implementation of the National Framework Plan for the Informal Waste Sector in Solid Waste Management</strong></td>
<td><strong>Mainstreaming of the informal waste sector in the National and local government plans and programs</strong></td>
<td><strong>NSWMC/PCUP/DOLE LGU</strong></td>
<td><strong>DSWD/PCUP/DOLE LGU</strong></td>
</tr>
</tbody>
</table>
H. CLIMATE CHANGE AND HEALTH

1) Sector Situationer and Accomplishments

The growing international concern over climate change and the country’s current experience on the impacts of extreme weather changes, heatwaves, changes in temperature and precipitation have caused serious health concerns such as the growing number of temperature-related illness and death, air pollution-related health effects, water and food borne diseases, vector-borne and rodent-borne diseases, food and water shortages and other mental, nutritional and infectious diseases.

Previous health plans such as the National Objectives for Health (2005-2010) do not specifically mention climate change as the NOH tend to look at diseases more from the perspective of an infectious nature and does not consider the climate sensitivity of the disease. However, each year, the unabated number of under-nutrition, diarrhea and malaria related morbidity reflect the silent but growing impacts of climate on health. On the other hand, when deaths and illnesses are caused by flooding heat waves and other calamities, then the direct impact of climate change is realized.

The health sector have identified a number of efforts to facilitate adaptation to climate change. This would include disease surveillance and early warning systems, integrated vector management, healthy policy development, environmental health capacity building, increasing access to safe drinking water and sanitation and the health action in emergencies.

However, it must be noted that climate change adaptation strategies are not yet developed and integrated in the DOH strategy framework and to date, there is still no climate change plans in health. The country have not yet fully appreciated the strategies to mitigate climate change related health impacts. Roles and responsibilities need to be further defined and resources have to be allocated to support climate change related initiatives. More studies have to be made specially on emerging diseases and to provide evidence based policy advocacy on the burden of health impacts of climate change. The disease surveillance mechanisms and data collection systems need to be enhanced to factor in the correlation between climate change and health.

Capacity building for disease surveillance training, vulnerability assessments (personnel and infrastructure) and project management have to be in place.

However, the climate change sector have recently developed the National Framework of Action to support the Health Sector Reform Agenda. It has aligned the framework to DOH’s Formula 1 strategy: Service Delivery, Governance Financing and Regulation. It has formed strategy clusters to coordinate efforts to raise the profile of climate change and health linkages. It is developing partnerships among private sector, academe, NGOs and LGUs. A current project funded under the Spanish-Philippines MDG project is underway and through this project pilot initiatives such as the Early Warning and Surveillance Systems for Climate Change diseases in Metro Manila and Albay, hospital preparedness and response, awareness building and advocacy work, and capacity building are supported.
2) Sector organization

Since this will be the first time that the Climate Change Sector is formed, the following is recommended to comprise the Climate Change and Health Sector:

**Chairperson:** Climate Change Commission

**Vice Chair:** Department of Health

**Members:**
- Department of Environment and Natural Resources
- Department of Agriculture
- Department of Local Interior and Local Government
- Department of Energy
- Department of Labor and Employment
- Department of Science and Technology
- Department of National Defense – Office of Civil Defense
- National Economic Development Authority
- Metropolitan Manila Development Authority
- League of Provinces
- Other Government Agencies
- Non-Government Organizations
- Academe
### 3) Action Plan 2010-2013

**SECTOR GOAL:** To adapt to the possible health consequences brought about by climate change

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>GOALS</th>
<th>STRATEGY</th>
<th>OUTPUTS</th>
<th>LEAD AGENCY</th>
<th>PARTNERS</th>
</tr>
</thead>
</table>
| • Health is not a priority | • To integrate health issues in all mitigation and adaptation measures and policies of government offices and concerned sectors. | • Develop IRR for Health (CCA 2009)  
• Develop Strategic Plan for CC and Health  
• Forging of alliance/linkages to government offices and concerned sectors | • IRR (CCA) for health developed  
• Strategic Plan for CC and Health developed and implemented  
• Health issues integrated to all Climate change program/projects of government offices and other concerned sectors | CCC and DOH | DA, DOST, DENR, DILG, DOLE, DND-OCD, DOE, NEDA, MMDA, Other government agencies/offices, LPP, NGOs and Academe |
| • Inadequate internal and external coordination and clarity on CC Adaptation functional roles | • To strengthen internal and external coordination and clarity on CC adaptation functional roles. | • Roles ID and clarification  
• Forging of alliance/linkages to government offices and concerned sectors  
• Competency assessment for health developed | • System developed  
• Competency Development Plan | CCC and DOH | DA, DOST, DENR, DILG, DOLE, DND-OCD, DOE, NEDA, MMDA, Other government agencies/offices, LPP, NGOs and Academe |
| Disease Surveillance Mechanism and Data Collection System related to CC still to be enhanced (NEISS and FHSIS) | To develop and strengthen early surveillance and preparedness system for extreme weather events and disease outbreaks | Systems Development | Health Surveillance Mechanism and Data Collection System of DOH enhanced and integrated with other sectors | CCC and DOH
NEDA/UP-NIH |
<p>| Inadequate preparedness and vulnerability of health facilities on the effects of CC. e.g., hospital infrastructure, emerging diseases | To establish safe hospital to address the health needs and medical care of possible victims brought about by climate change | Conduct of vulnerability assessment of DOH hospitals in Metro Manila | Safe hospitals capable of providing quality health services | CCC and DOH |
| Limited IEC materials and advocacy on CC | To develop IEC materials on CC and conduct of advocacy activities on the health consequences of CC | Provision of capital outlay for building infrastructure and procurement of equipment and other medical supplies and training of qualified hospital staff | Advocacy tools/IEC materials developed and integrated with other sectors | CCC and DOH |
| Absence of private-public partnerships for climate change and health activities | To encourage private-public partnerships for climate change and health activities | IEC development | Web portal (MDGF project) | CCC and DOH |
| | | Conduct advocacy activities CC | Technical Assistance | DENR |
| | | Forge alliance and Partnerships to private entities | Capability Building | CCC and DOH |
| | | | Funding Support | CCC and DOH |
| | | | | |</p>
<table>
<thead>
<tr>
<th>Issue</th>
<th>Action</th>
<th>Responsible Parties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of local studies on climate change and health, its impacts to</td>
<td>To encourage research and development on CC and Health</td>
<td>CCC, DOH, and DOST</td>
</tr>
<tr>
<td>human pop. and other sectors i.e. agriculture, environment, energy,</td>
<td>Conduct of Integrated Research</td>
<td></td>
</tr>
<tr>
<td>housing, etc.</td>
<td>Compendium of Researches and Best Practices</td>
<td>DA, DOST, DENR, DILG, DOLE, DND-OCD, DOE,</td>
</tr>
<tr>
<td></td>
<td>Established Baseline Data</td>
<td>Other government agencies/offices, NGOs</td>
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<tr>
<td></td>
<td></td>
<td>and Academe</td>
</tr>
</tbody>
</table>
V. CONCLUSIONS, CROSS CUTTING ISSUES AND RECOMMENDATIONS

The health and environment linkages in the Philippines have successfully implemented a number of noteworthy projects and programs and have instituted recently milestone policy and framework documents to guide some of the sectors.

The challenge remains on how to strengthen policy implementation at the local level and how best to engage local governments and the general public in the process. The proposal is for local governments to legislate local policies and appropriate ordinances relating to the safeguarding of public health through the environmental health concerns and for them to incorporate the plans and budgets in their investment plans for health. The public has to be involved through awareness building and empowerment strategies so that they themselves can be active participants in promoting public health.

The Inter-agency committee on Environmental Health (IACEH) is an underutilized platform for coordination and stronger collaboration. The Department Personnel Order of the DOH identifying the members of the Sectoral Working Groups have to be updated based on the recommended re-organization from each of the sectors.

The IACEH’s mandate of providing oversight over the plans and programs should be supported further by a regular secretariat. However, with the increasing demands on the limited staff of the DOH in its EOHO team, it might be necessary to add to their capacity competent personnel who will support the IACEH in its oversight function.

The Philippines continue to support the Regional Thematic Groups in Environmental Health and is willing to finalize its plans to support and contribute to the identified regional priorities and action plans.