Executive Summary

The achievement of the MDG6 seems to be bleak for the Philippines as it nears its 2015 deadline. The rapid increase in new HIV infections has put pressure in the country’s commitment to halt and reverse the spread of HIV and AIDS per MDG target. The Philippine National AIDS Registry has consistently shown a rising trend of new HIV infections from one in three days in 2000 to one in three hours in 2011.1 The 2010 UNAIDS Report on Global AIDS Epidemic supported this observation by pointing out that the Philippines is one of seven countries with more than 25 percent increase in HIV incidence in the last ten years.2 contrary to the global aim of controlling, if not reversing, this trend.

Given these challenges, UNDP anchored its HIV Programme 2009-2011 on the 4th AIDS Medium-Term Plan 2006-2011 by adopting key guiding principles on multi-sectoral involvement, particularly by persons infected and affected by HIV and AIDS. The UNDP HIV and AIDS Programme, Promoting Leadership and Mitigating the Negative Impacts of HIV and AIDS on Human Development, had identified five key components: (1) Leadership for Effective and Sustained Responses to HIV and AIDS; (2) Strengthening Institutional Capacities and Partnerships on HIV and Migration; (3) Mitigating the Economic and Psychosocial Impacts of HIV and AIDS; (4) Strategic Information and Community Leadership among Men Who Have Sex with Men (MSM) and Transgender (TG) Populations; and (5) Knowledge, Communication, and Advocacy to Promote Deeper Understanding of HIV and AIDS.

The HIV Programme has reinforced UNDP’s partnership with the Government of the Philippines (GPH) in the struggle against HIV and AIDS in the country. This outcome evaluation considers how UNDP has contributed to progress against the epidemic by its support in the form of leadership training, capacity development, policy dialogue and advocacy, research and the enhancement of the national response through improved coordination. The evaluation concludes that the HIV programme activities, such as the identification of local champions, leadership skills enhancement, manual development for better service delivery, evidence-based policy advocacy, the empowerment of the Regional AIDS Assistance Teams (RAATs) and the promotion of harmonized monitoring of interventions through the Philippine National AIDS Council (PNAC) and the Local AIDS Councils (LACs), have played a significant role in strengthening the GPH’s response to the epidemic. UNDP’s programme design conformed to international best practice in terms of empowering the national government by supporting its national and local responses to HIV and AIDS and by ensuring a sense of ownership by the stakeholders. Therefore, UNDP interventions in the national response to HIV and AIDS were effective in strengthening the political leadership and were reasonably efficient and sustainable because of the active involvement of partners.
However, certain constraints remain to be unresolved even after the programme implementation. An effective national coordination mechanism has yet to be institutionalized. This would entail an increase in the budget allocation for HIV and AIDS prevention, treatment, care and support services at both national and sub-national levels. Monitoring planned activities also needs to be practiced at all levels in order to inform policy enhancements for effective programming.

Because of the persistence of political and bureaucratic constraints, programmatic challenges, such as changes in the terms of implementation (implementing partner, deliverables, etc.) also surfaced. Nevertheless, the Consultant expresses the view that at the time of the programme development, UNDP might have taken better account of these challenges that add to the low priority of HIV and AIDS in the Philippines and that exacerbate the weak national response to HIV and AIDS.

In order to align itself with the priorities of the 5th AIDS Medium-Term Plan 2012-2016 and the UNDAF 2012-2018, UNDP needs to employ an integrated, multi-sector approach in its new HIV Programme. The report makes the following recommendations:

There is an urgent need to focus the next UNDP HIV Programme on policy advocacy to identify gaps in legislative actions that are needed to completely remove stigma and discrimination, and to reconcile conflicting provisions within key laws and policies at various levels. Evidence-based information is seen as a critical element in policy advocacy; UNDP thus need to focus on its comparative advantage to link different stakeholders in conducting multi-sector studies and in disseminating results of these studies for enhanced awareness of issues surrounding HIV and AIDS. Emphasis should be made on issue-specific interventions to enhance national and local responses that adequately address gaps in prevention services and programmes among identified most-at-risk populations, including men having sex with men (MSM), young and female key populations at high risk, and other vulnerable groups. Other critical issues include: harm reduction; people living with HIV (PLHIV) needs for treatment, care and support; rights-based approach; and stigma and discrimination.

It is recommended that UNDP capacitate both PNAC and LAC to facilitate a harmonized, government-led coordination in formulating policies, implementing them and monitoring their impact on the beneficiaries. Monitoring and evaluation are also strategic directions that UNDP can provide technical assistance to. UNDP should build not only the capacities of its national partners but also its own personnel in order to better address national and local contexts, particularly because the MDG deadline draws near and because UNDP has a crucial role to play in the Post-2015 Agenda.

Finally, UNDP should consider HIV and AIDS a top priority by keeping it as a full and separate portfolio. The AMTP5 and the current UNDAF call for a multi-sector response to the alarming increase of HIV infections in the country. UNDP needs to align itself to this thrust by mobilizing more resources to implement a Programme that supports national response to HIV and AIDS in the Philippines.