

ANNUAL GENDER AND DEVELOPMENT (GAD) ACCOMPLISHMENT REPORT
1st QUARTER of 2022

Name of Bureau/Service/Office/CMD/Health Facility:				Organization Category: National Government, Line Agency						
Total Budget of Bureau/Service/Office/CMD/Health Facility										
Total GAD Budget	P 81,215,825.20									
% of GAD Utilization:										
Gender Issue/GAD Mandate	Cause of Gender Issue	GAD Result Statement/ GAD Objective	Relevant Organization MFO/PAP or PPA	GAD Activity	Performance Indicators /Targets	GAD Budget	Actual Result	Budget Breakdown	Expense Class (MOOE/PS/Capital Outlay)	Responsible Unit /Office
1	2	3	4	5	6	7	8	9	10	11
CLIENT-FOCUSED ACTIVITIES										
Women, children and adolescents still face numerous interrelated health challenges (The Global Strategy for Women's, Children's and Adolescents Health (2015-2030))	Health outcomes among women, children and adolescents are worse when people are marginalized or excluded from society, affected by discrimination, or live in underserved communities especially among the poorest and least educated and in the most remote areas (The Global Strategy for Women's, Children's and Adolescents Health (2016-2030))	Over-all GAD Result Statement: Create an enabling environment for health, to transform communities so that women, children and adolescents everywhere can realize their rights to the highest attainable standards of health and well-being. Objective: Thrive (Achieve universal health coverage, including financial risk protection and access to quality essential healthcare services, medicines and vaccines)	MFO: Access to curative and rehabilitative health care services improved	Provision of gender-responsive and good quality curative and rehabilitative healthcare services to women, men, girls and boys in DCH managed health facilities	Sex disaggregated no. of clients served	13,213,887.99	Antenatal Care: 1439, with client satisfaction rating of 100% Intrapartal Care (CS-70, NSD-119, and RT-PCR testing- 37 to pregnant Women with client satisfaction rating of 100% Family Planning (BTL-19, IUD- 33, DMPA- 66, OCP- 9, PSI- 80): with client satisfaction rating of 100% Post Abortion Care: 33 families, with client rating satisfaction of 100% Ultrasound Services: 302, with client satisfaction rating of 100% Gynecologic oncology consult- 1593, papsmear- 82, VIA- 51, Endometrial Biopsy- 34, Endometrial Curettage- 0, Cervical Punch Biopsy- 27, Loop- 0, Hysterectomy- 22, Hysteroscopy- 9, Laparoscopy- 1, Chemotherapy- 263 with client satisfaction rating of 100% Newborn Screening and Immunization- Male: 101 ; Female: 77 , with client satisfaction rating of 100%	295,477.65 1,541,127.65 632,077.65 581,077.65 554,890.93 2,810,407.24 Pediatrics 820,577.65	PS and MOOE	JRRMMC- Ob-Gyne, Pediatrics, Urology, Surgery, Medical Oncology, Radiotherapy, Behavioral Medicine, HIV & AIDS Core Team, Women and Children Protection Unit

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							Maintenance of the Lactation Room at the QPD: 19 Females, with client satisfaction rating of 100%	159,489.94		
							Management of Premature Babies -Male: 10; Female:5, with client satisfaction rating of 100%	548,977.65		
							Services to children with cancer-Male:37 ; Female:37 , with client satisfaction rating of 100%	593,477.65		
							Adolescent Care-HIV Awareness and Pregnancy Prevention for the Youth-Male: 27; Female: 22	67,915.92		
							Health services to men- Circumcision: 9; TURP:12; Prostate Biopsy: 26. With client satisfaction rating of 100%	Urology 718,366.84		
							Major Breast Surgeries: 32 females, Minor Breast Surgery: 1, with client satisfaction rating of 100%	Surgery 968,371.46		
					Client Satisfaction Survey		Breast Chemotherapy- 56 women with client satisfaction rating of 100%	Medical Oncology 1,415,477.65		
							Radiotherapy Services to Female with cancer- Cobalt:53; Linac:	Radiotherapy		

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							24.Other cancer: 104, with client satisfaction rating of 100%	1,298,310.60		
							Psychological Consultations and Counselling-Male: 119; Female: 118, with client satisfaction rating of 100%	Behavioral Medicine 105,679.14		
							HIV Counselling and Testing- Male: 42; Female: 33	HACT 102,184.72		
RA 6949 National Women's Day, Proclamation No. 227 Observance of the month of March as "Women's Role in History Month" and Proclamation No. 224 Declaring first week of March of every year as Women's week and March 8 as "Women's Rights and International Peace Day"	There is a need to observe the stated celebration to promote women's empowerment	Promote women's empowerment among clients and health workers	MFO: Access to curative and rehabilitative health care services improved	Celebrate the women's month through promotional/advocacy activities for women and men	No. of activities done during women's month	273,879.87	Use of PCW All-Women Cast Lupang Hinirang video during the flag ceremony held on February 28, 2022	MOOE = 129,141.20	MOOE	JRRMMC - GPPS
							Displaying of NWWMC Banner (online and print)			
							Wearing of anything purple on all the tuesdays of March			
							Light up the JRRMMC facade in purple			
							Playing of a video presentation showcasing the women of JRRMMC and their contribution to the agency			
							Free breast mammogram for female employees ages 40 and older- 20 women	PS = 144,738.67		
RA 10398 National Consciousness Day for the Elimination of VAWC	Violence against women and children is still prevalent in the country. In order	Increase public awareness on GBV and VAWC	MFO: Access to curative and rehabilitative health care	Observance of the 18-day campaign to end VAW through	No. of activities done in observance to the 18-day		*November to December Activity		MOOE	JRRMMC - WCPU

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	to prevent this, there is a need to raise the public's awareness.		services improved	promotional/advocacy activities	campaign to end VAW					
ORGANIZATIONAL-FOCUSED ACTIVITIES										
AO 2013-0011 "Revised Policy on the Establishment of Women and their Children Protection Units in All Government Hospitals"	Stress the disruption of social protective networks, and decreased access to services all can exacerbate the risk of violence for women	Ensure access of women and children to health services that addresses Gender based Violence and Violence against Women and their Children	MFO: Access to curative and rehabilitative health care services improved	Establishment/Maintenance of gender-responsive Women and Children Protection	No. of WCPU established/maintained Continuous conduct of training on the 4R's of WCPU for frontline health workers	24,436.68	VAWC Counselling: Male: 56; Female: 37	PS= 24,436.68	PS and MOOE	JRRMMC-WCPU
The DOH has an existing GFPS, however, its functionality is ambiguous. Source: Lazo, L. (2019), Gender Mainstreaming in the Philippines: are the institutional mechanisms in place and functional?	1. High leadership support could create functional GFPS while the lack of it could create otherwise. 2. Non-functionality of GFPS is linked with lack of institutional capacity. Source: Lazo, L. (2019), Gender Mainstreaming in the Philippines: Are the institutional	GFPS are fully equipped and committed on gender mainstreaming	MFO: Access to Promotive and Preventive healthcare services. Improved/Access to curative and rehabilitative health care services improved	Establish GAD Focal Point System and regular conduct of GFPS meetings	No. of GFPS established Sex-disaggregated no. of GFPS members No. of meetings conducted Sex-disaggregated no. of dedicated staffs for GAD	105,035.78	GFPS consists of Male: 6; Female: 14 GAD Meeting, January 28, 2022, attended by 6 males and 9 females Female: 1	MOOE = 227.50 PS = 104,808.28	PS and MOOE	JRRMMC-GFPS
Capacity building is a perennial task to drill GAD deeper into the organizational culture of the agencies and their respective sectors and constituencies. Source: Lazo, L. (2019). Gender Mainstreaming in the Philippines: Are the institutional mechanisms in place and functional?.	Personnel and Leadership turnovers. Source: Lazo, L. (2019). Gender Mainstreaming in the Philippines: Are the institutional mechanisms in place and functional?.	Health workforce is skilled in providing gender-sensitive and gender-responsive public health programs and healthcare services	MFO: Access to promotive and preventive health care services improved	Attendance or participate to GAD-related Learning and Development interventions	No. of LDI's conducted No. of LDI's attended/participated	122,247.15	3 LDIs Attended WCPU Specialty Training Course: 4 Females. PCW Webinar: Introduction to GAD Concepts and SOGIESC, February 24, 2022. Male:1; Female:2	MOOE = 11,920.00 PS =	PS and MOOE	JRRMMC-GFPS

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					Sex-disaggregated No. of staff who participate and attended GAD-related LDI's		Training on the Allocation, Utilization and Audit of GAD Budget, March 17, 2022, 1:30 pm- 4:45 pm. Attended by 4 GFPS female members	110,327.15		
CSC Resolution no. 01-0940 "Administrative Disciplinary Rules on Sexual Harassment Cases in the Civil Service", Rule VI, Section 7 states that " A Committee on Decorum and Investigation (CODI) in all national or local agencies of the government, state colleges and universities, including government-owned and/or controlled corporations with original charter."	CODI shall receive complaints of sexual harassment and investigate sexual harassment complaint in accordance with prescribed procedures and perform such other functions as it may deem proper in the course of its operations and in accordance with the CSC Resolution No. 01-0940, among others to ensure that health work force have a harmonious work environment through implementation of the said CSC Resolution.	Promote a safe and harmonious work environment for all employees	001: Access to promotive and Preventive health care services improved/ 002: Access to curative and Rehabilitative Health Care Services improved	Create/Maintain Committee on Decorum and Investigation	Personnel Order for CODI % of Sexual Harassment cases investigated (No. of actual cases investigated/ Total no. of cases for investigation ; % of men and women employee who were sexually harassed in the workplace % of men and women patients who were sexually harassed by a healthcare provider			PS=		JRRMMC- CDI
ATTRIBUTED PROGRAM										
								SUB-TOTAL	13,739,487.47	GAA
								SUB-TOTAL	-	Others (Not GAA)
									TOTAL GAD UTILIZATION	13,739,487.47

Submitted By:

EVELYN S. MORABE, MD

Chairperson, GAD-TWG

Jose R. Reyes Memorial Medical Center