Program Briefer
STI HIV/ AIDS Program

A. Overview and Objectives of the Program:
According to the World Health Organization (WHO), nearly a million people currently acquire STIs which includes the Human Immunodeficiency Virus (HIV) globally. The presence in a person of other STIs greatly increases the risk of acquiring or transmitting HIV. It is initially seen among what we call key populations which include Males who have Sex with Males (MSM), Transgender (TG), People Who Inject Drugs (PWID) and Freelance Sex Workers (FSW).

The Philippines is one of the countries with rapidly increasing HIV/ AIDS cases. Here in the Cordillera, a total of 385 cases have been diagnosed from 1984 to October 2017. Our prevalence rate is 2.06% which is above the National Health Target of maintaining a 1% and below prevalence rate. Seventy percent (70%) of the diagnosed cases are from Baguio City affecting mostly Men having Sex with Men (MSM). Looking further, the city has an 8% HIV/ AIDS prevalence rate from 1984 to present. For the other provinces and city, prevalence rate is below 1% in 2017.

a.1. New Program Thrusts:
   Goal: By 2020, the country will have maintained a prevalence of less than 66 HIV cases per 100,000 population by preventing the further spread of HIV infection and providing treatment care and support to reduce the impact of the disease on individuals, families, sectors and communities.
   Purpose (Outcome): To contain and prevent the further spread of HIV among key populations with four (4) strategies that enabled strengthened delivery of essential services (prevention, treatment and care interventions).

a.2 Objectives
   National Targets to Achieve from 2015-2020:
   1. Maintain a prevalence rate of less than 1% HIV prevalence.
   2. Reduction of HIV incidence among MSM to <50%.
   3. Reduction to < 1.5% of syphilis among the key population.

a.3 Program Strategies
   1. Continuum of HIV/ STI prevention, diagnosis, treatment and care services to key populations.
   2. Health promotion and Communication on HIV and STI Prevention and Care Services.
   3. Enhanced strategic information systems.
   4. Strengthened health system platform for broader health outcomes.

B. 2017 Activities:
   • Capacitated LGU health workers on HIV Counselling to Testing (HCT) Training
   • Capacitated hospitals regionwide on the establishment and/ or functionalization of their HIV AIDS Core Team (HACT)
   • Conducted quarterly Regional AIDS Assistance Team (RAAT) meetings. Expanded membership to the academe and other government agencies.
   • Partnered with Community Based Organizations (CBOs) in the conduct of HIV testing.
   • Functionalized the First Regional HIV/ AIDS Support Group (Ohana Cordillera) in CAR.
   • Established the first Regional HIV/ AIDS mobile hotline.
   • Support to HIV advocacies regionwide during the AIDS Candlelight Celebration in May and World AIDS Day Celebration in December.
   • Actively expanding HIV awareness lectures in call centers, workplaces and schools.
   • Augmentation of drugs, medicines and testing kits to the BGHMC Treatment Hub and Social Hygiene Clinics (SHC) in CAR.
   • Conducted the STI HIV/ AIDS Program Consultative Meeting.
• Conducted the 1st HIV/ AIDS Film Festival producing short films and infomercials.
• Developed culturally sensitive advocacy materials which are as follows:
  ➢ Customized the HIV Counselling Flipchart by having it translated to vernacular
  ➢ Customized Red Ribbon Pin for the Cordillera Region
• Distributed an HIV Advocacy Flipchart to every City/ Provincial Health Office and Rural Health Office in CAR.
• Established an HIV/ AIDS Support Group Social Media Account to address HIV concerns online.
• Piloted the first HIV/ AIDS Radio Show.

C. 2018 Activities:
• Procurement and distribution of condom dispensers and logistics (condoms, lubricants etc) to workplaces (target: bars, call centers)
• Promotion and conduct of HIV Screening
• Capability Building Activities:
  ✓ Conduct of HIV Counselling to Testing Training
  ✓ Funding for registration fee of LGU pax to capacitate them on HIV Proficiency
• Integration of HIV awareness and testing in various program activities such as TB, MCH and NCD
• Support to Operational Costs of Ohana Cordillera (HIV/ AIDS Support Group)
• Health Promotion:
  ✓ Expansion of radio plugging regionwide (emphasis on testing sites per province/ city)
  ✓ HIV/ AIDS Radio Program- inviting other resource speakers as well to add variety to topics covered
  ✓ Conduct of HIV Testing Advocacy during festivals, local events, etc such as the Baguio Flower Festival every February.
  ✓ Conduct/ support to the commemoration of the AIDS Candlelight every May and the World AIDS Day every December in all provinces/ city in CAR. Support to HIV Summit provincial initiatives.
  ✓ Sustain HIV/ AIDS Mobile Hotline
  ✓ Expand number of community mobilizers to conduct HIV awareness and HIV screening.
  ✓ Maintain social media account on HIV/ AIDS Support Group
  ✓ Development of culturally sensitive localized HIV Counselling and Testing brochure emphasizing on STI HIV/ AIDS prevention, testing sites and treatment hub in CAR.
  ✓ Promotion of STI HIV/ AIDS testing facilities through the reproduction and distribution of the following:
    a. HIV testing signages
    b. HIV/ AIDS Testing Site and mobile hotline advertisement via stickers for public areas or PUJs
  ✓ Distribution of newly developed AVP materials and infomercials to provinces/ city.
• Enhanced strategic information systems:
  ✓ Mapping out facilities (manpower, ST HIV/ AIDS services provided) capable of providing related services
• Conduct of monitoring visits, coaching and mentoring
• Disseminate results of research studies conducted by external entities
• Conduct of Local Dissemination Forum to Local Chief Executives with the goal of establishing HIV/ AIDS Councils in municipalities with increasing HIV cases
• Conduct of STI HIV/ AIDS Consultative Meeting cum Program Implementation Review
• Awarding for organized reporting and presence of good practices/ initiatives in LGUs.
• Strengthened health system platform for broader health outcomes
  ✓ Promotion of Services Delivery Network (SDN)
✔ Conduct of Regional AIDS Assistance Team (RAAT) quarterly meetings
✔ Sustain timely submission of monthly logistics requisition report from treatment hub.
✔ Promotion of the establishment/sustenance of functionality of Local AIDS Councils in coordination with DILG. To be promoted during the Local Dissemination Forum for LCEs
✔ Lobby to LGU the implementation of HIV Screening in health facilities.

D. ROLES OF THE DEPARTMENT OF HEALTH:
- Policy dissemination
- Capacitate health facilities to promote the continuum of HIV/STI prevention, diagnostic, treatment and care services to key populations
- Provide information on HIV and STI services promotion
- Logistics augmentation to health facilities providing STI and HIV/ AIDS services
- Enhance strategic information campaign regionwide
- Conduct monitoring and evaluation activities to identify gaps and propose tangible plans.

E. ROLES OF LOCAL GOVERNMENT UNITS (LGUs):
- Implement policies/ issuances on STI HIV/ AIDS
- Conduct mapping of affected key populations
- Support establishment of Local AIDS Council
- Ensure adequate supply of logistics needed in providing quality STI and HIV services
- Strengthen advocacy strategies for STI and HIV awareness across key populations
- Advocate for STI and HIV testing especially among key populations
- Network with various agencies and NGOs for wider coverage of STI services and advocacy
- Capacitate frontline heath workers in providing STI HIV/ AIDS awareness, skills in counseling and testing etc.
- Support HIV awareness and counseling activities by strategically employing trained peer educators

F. FUTURE PLANS/ STRATEGIES (2018-2022)
1. Continuum of HIV/STI prevention, diagnostic, treatment and care services to key populations: (Training- e.g HIV counseling and testing, Reagents and Medicines)
   This was among the identified needs as part of STI health services to prevent the sudden increasing number of STI cases in their catchment areas. This also involves STI health service delivery from prevention to treatment, not only in the municipalities but in the hospitals as well. Examples are a) the Prevention of Maternal to Child Transmission (PMTCT) of syphilis and HIV and the use of the Syndromic Approach. This also involves supporting the Treatment hub.
2. Expand the platform for publicizing STI services
   The health services in our trained facilities has to be promoted to increase consultations, enrollment to support and care services, thereby decreasing the further spread of STIs and HIV; the key population will be informed through their peers, hence the training for Peer educators. Other avenues for information dissemination must also be explored such as local celebrations, strategically setting-up mobile service ports, hospital or school events, mobile testing at establishments (call centers, bars, jails, caravans etc).
3. Enhance strategic information
   For the LGU to continuously conduct the following:
   a. Monitor and prevent the spread of STI case in their areas, and to conduct mapping of key affected population
   b. Organize, analyze and use their own data to intensify and customize strategies
4. Strengthen health system platform for broader health outcomes
   This is to institutionalize and sustain local responses not only in the LGUs but also at the regional level. This includes the establishment, monitoring and maintenance of an RTI/ STI database for the program to be part of the system. Examples are the sustenance of the Regional AIDS Assistance Team (RAAT), celebration of calendar activities (AIDS Candle light Memorial Celebration and the World AIDS Day) and initiation of the local AIDS councils at the LGU level.
5. Expansion of STI HIV/ AIDS service delivery spots through the following:
a. Creation of an STI HIV/ AIDS hotline
b. Support establishment and operations of HIV/ AIDS support groups
c. Support to provincial/ city mobile testing initiatives
d. Increase collaboration with LGUs and NGOs in the conduct of community HIV screening (community or facility based) with emphasis to proper counseling and referral to prevent loss to care.
e. Promotion of the creation of sundown clinics.
f. Establishment of Rapid HIV Diagnostic (rHIVda sites) with prioritization per year as per guideline of the DOH-Central Office

6. Ensuring continuous supply of logistics to health facilities providing STI and HIV services. A logistics supply management system or mechanism will be placed in these facilities to ensure good flow of supply and demand.

7. Expand tri-media advocacy campaigns on STI HIV/ AIDS prevention and management (radio shows, newsprint, social media, videos, awarding of best practices)

8. Establishment of the Hepatitis B and C

G. THE PROGRAM’S OFFICIAL LOGO, IF ANY