PROTECTING THE CHILD FROM THE MANY FACES OF ABUSE

ANNUAL REPORT 2011
DISCLAIMER: Children in the cover, inside pages, and back cover are not victims of child abuse.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Message from the Executive Director</td>
<td>2</td>
</tr>
<tr>
<td>Timeline Across 15 Years</td>
<td>3</td>
</tr>
<tr>
<td>Five Pillars of the Foundation’s Work</td>
<td>4</td>
</tr>
<tr>
<td>2011 CPU Statistics</td>
<td>6</td>
</tr>
<tr>
<td>Locating the 50 CPUs</td>
<td>8</td>
</tr>
<tr>
<td>Women and Children Protection Unit (WCPU) Directory</td>
<td>10</td>
</tr>
<tr>
<td>Asian Resource Center</td>
<td>12</td>
</tr>
<tr>
<td>Certificate on Child Protection Specialty Training</td>
<td>14</td>
</tr>
<tr>
<td>Multidisciplinary Team Training</td>
<td>16</td>
</tr>
<tr>
<td>Training on the 4Rs of Child Abuse for Pediatrics Residents</td>
<td>17</td>
</tr>
<tr>
<td>Child Protection Specialist Training for Ambulatory Pediatrics Fellows</td>
<td>18</td>
</tr>
<tr>
<td>Basics of Investigating Crimes Involving Women and Children</td>
<td>20</td>
</tr>
<tr>
<td>Competency Enhancement Training For Family Court and Single Sala Court Personnel</td>
<td>22</td>
</tr>
<tr>
<td>Grounding Future Lawyers on Child Protection Work</td>
<td>24</td>
</tr>
<tr>
<td>Psychology Students Practicum at PGH-CPU</td>
<td>24</td>
</tr>
<tr>
<td>Social Work Practicum at PGH-CPU</td>
<td>25</td>
</tr>
<tr>
<td>Barangay Orientation</td>
<td>25</td>
</tr>
<tr>
<td>Child Protection Awareness Training</td>
<td>25</td>
</tr>
<tr>
<td>Ako Para sa Bata 2011 The Manila Conference</td>
<td>26</td>
</tr>
<tr>
<td>Event: CPN Fundraiser</td>
<td>28</td>
</tr>
<tr>
<td>The Board of Trustees</td>
<td>29</td>
</tr>
<tr>
<td>2011 Financial Report</td>
<td>30</td>
</tr>
<tr>
<td>List of Donors</td>
<td>31</td>
</tr>
<tr>
<td>Children’s Messages</td>
<td>32</td>
</tr>
<tr>
<td>Major Partners in Training</td>
<td>33</td>
</tr>
</tbody>
</table>
Dear members, colleagues, partners and friends,

2011 was a big step towards the institutionalization of the child protection units (CPUs). The picture is clear that the model that the country is adopting as the main delivery system of child protection is a public health model. The CPUs are housed in public hospitals or rural health units where trained physicians and social workers partner with trained police of the PNP Women and Children Protection Desks (WCPD) to deliver medical, social, counseling, and legal services. It is the mission of the Child Protection Network Foundation (CPN) that every abused child in the country will have access to a CPU within two (2) hours.

There is a great emphasis on training. For a child protection system to be effective, professionals need to be competent; respond with confidence; and understand their roles in the care continuum of services for abused children and their families. The needs of abused children and their families are complex and cannot be provided by just one discipline or one agency. Collaboration and coordination of efforts does not only ensure efficiency but also prevents the child from falling through the cracks and being traumatized by the very system which is supposed to protect them. There are different kinds of training for the different professions involved in child protection. CPN is involved in the training of physicians, social workers, police, prosecutors, judges and family court personnel, and other stakeholders in the community. CPN’s involvement ensures that everyone is on the same page. From the beginning, CPN partnered with the Philippine Judicial Academy of the Supreme Court of the Philippines, the Department of Health, and the Interagency Committee for the Special Protection of Children in multi-sectoral trainings. The Philippine National Police is CPN’s Most Valuable Partner for 2011. Together with UNICEF Manila, CPN and PNP put together the curriculum, faculty and trainors that set in motion the training of all WCPD officers nationwide on responding to women and children victims of violence and children in conflict with the law.

Child abuse intervention and prevention should be integrated in the undergraduate curricula of frontline professions like medicine, law, social work, psychology, criminology, etc. This will fill the human resource need as well as develop the field of child protection. Pioneering work on this has already started in key universities such as the University of the Philippines, Ateneo de Manila and De La Salle Universities. The UP-PGH Child Protection Unit is in the forefront of this movement.

Child protection professionals need continuing education opportunities to help raise the level of discussion and expertise. We are happy to note that the annual Manila Conference has adequately served this purpose. Registration is free to members of the network and Ako Para sa Bata 2011 had 758 participants from all key professions.

2012 will see child protection units covering more than half of the children population in the country!

Sincerely yours,

Bernadette J. Madrid, MD
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>The creation of the Child Protection Unit at the Philippine General Hospital – a dedicated emergency room &amp; clinic for abused children.</td>
</tr>
<tr>
<td>2002</td>
<td>Child Protection Network begins work of establishing child protection clinics at leading hospitals throughout the Philippines. Six (6) child protection units launched in year one. Education program formalized for training professionals in child abuse diagnosis, treatment, and prosecution. Multidisciplinary modules written for training of medical students, physicians, mental health professionals, social workers, court-appointed guardians, police officers, prosecutors, judges, and municipal health officers.</td>
</tr>
<tr>
<td>2008</td>
<td>Ten (10) prominent Philippine leaders recruited to national governing board of Child Protection Network.</td>
</tr>
<tr>
<td>2009</td>
<td>With its National Center, network of provincial child protection units, education curriculum for ten-related professions, and a national professional society, Philippines is now the leading nation in Asia and in developing world for the care of abused children.</td>
</tr>
<tr>
<td>2010</td>
<td>Child Protection Network reaches 38 child protection units in 25 provinces.</td>
</tr>
<tr>
<td>2011</td>
<td>The Department of Health recognizes the six-week Child Protection Specialist Training for Physicians and Social Workers of the Child Protection Network Foundation as the required training of a WCPU physician and social worker. <a href="http://www.doh.gov.ph/content/women-and-children-protection-program">www.doh.gov.ph/content/women-and-children-protection-program</a></td>
</tr>
</tbody>
</table>
FIVE PILLARS OF THE FOUNDATION’S WORK

1 Medical & Psychosocial Care
- diagnosis
- medical care
- STI treatment
- mental health treatment
- social work services
- location of safe circumstance
- long-term monitoring

2 Child Safety & Legal Protection
- referrals from PNP & DSWD
- forensic examination & interview
- mental health treatment for offending parents and children in conflict with the law
- legal counseling
- expert testimony
- social work services
- family education & consultation
- kids court

3 National Center for Education
- 3,685 professionals trained
  - Multi-disciplinary team training
  - physicians training
  - social workers training
  - police training
  - legal training
  - judges’ training
  - advocacy in legislature and media

4 National Network of Child Protection Units
- 50 CPUs established
- 33,588 children and adolescents served
  - 91 physicians
  - 50 centers covering 31 cities and provinces
  - seed funding
  - staff training
  - best practices sharing
  - 24/7 consultation
  - roundtable discussions
  - annual conference
  - visiting professor program
  - safety net
  - medical alert
  - peer review
VISION

All children in the Philippines and throughout Asia are protected from abuse and neglect.

MISSION

The Asian Center for Child Protection in collaboration with all child protection units shall serve every abused child with compassion and competence ensuring that all abused children and children at risk are safe, healthy, and developing to the best of their potential within a nurturing family environment.

Research & National Database on Child Abuse

Child Protection Management Information Database
- design & installation of case-tracking system
- standard system installed in CPUs
- cases tracked for research & policy development
- shared national database
- cutting-edge research for developing countries
- CPMIS installed in 26 CPUs
Sexual abuse comprised the majority of cases seen in all CPUs nationwide in contrast to DSWD where the majority of reported cases were child neglect. Child neglect requires social and safety net interventions with DSWD playing a key role e.g. access to programs such as the conditional cash transfer, low-cost housing, early childhood care and education. Physical abuse cases remain underreported reflecting the cultural acceptance of corporal punishment. Cross cultural studies involving the Philippines consistently show that at least 75% of parents interviewed had used moderate to harsh physical discipline. The most underreported form of abuse is psychological or emotional abuse.

For both physical and sexual abuse, the most number of cases are in the 13 to 15-year age group. This also the most common age group referred for children coming in conflict with the law. Research on adolescence show that 13 to 15 years is the peak age for risk taking, sensation-seeking, and susceptibility to peer pressure.
Gender makes a difference with regards child sexual abuse reports. Girls were sexually abused more than boys. This disproportionately high report of sexual abuse of girls (97%) has been stable over time.

Majority of the cases seen at the CPUs are either direct referral from the police or walk-in clients. Walk-ins are either informal referrals from the different agencies or because somebody in the community or a relative know about the CPU in the area.

Male neighbors remain the number 1 perpetrator for both physical and sexual abuse. Over all, the majority of perpetrators are males whether the victims are males or females. Sexual abuse by strangers is rare. Majority of perpetrators are known to the victims and “betrayal of trust” is the main mechanism of abuse.
PHILIPPINES
LOCATING THE 50 CPUs
Refer to WCPU Directory
WOMEN AND CHILDREN PROTECTION UNIT (WCPU) DIRECTORY

AKLAN
Dr. Rafael S. Tumbokon Memorial Hospital – CPU
Dr. Glenmar R. Martinez
Marichu R. Dantes, RSW
PO2 Marilyn M. Rello
Mabinil St., Kalibo, Aklan

ALBAY
LGU Oas, Albay
Dr. Marie Jane Reverenza
Purita Redito, RSW
Municipal Health Office, Oas, Albay 4504
052-8244454 / 0926-7633433

BAHAYO
Baguio General Hospital and Medical Center – WCPU
Dr. Asuncion Ogues
April Lippi Sudango, RSW
Gov. Pack Road, Baguio City
074-4424216 loc. 427 / 074-4438342
0939-1240051

BUKIDNON
Bukidnon Provincial Medical Center – CPU
Dr. Colette S. Gaive
Dr. Dina Hernandez
Dahlia Jabeñar, RSW
PO1 Junelyn Flores
Casisang, Malaybalay City, Bukidnon 8700
088-2212190

CAMARINES SUR
Bicol Medical Center
Dr. Michelle Taup-Tolentino
Dr. Aileen Bilumburo
Mrs. Corazon Aguilar, RSW
Conception Requena, Naga City 4400

CEBU
LGU Pilar – WCPU
Dr. Eufemia P. Maratas
Dolita N. Daies, RSW
PO1 Caren P. Arcelo
Municipal Health Office, Pilar, Cebu
032-400-4023

LGU San Francisco – WCPU
Dr. Emmanuel L. Almadin
Mariter P. Galindo, RSW
PO2 Caren Arcelo
San Francisco, Camotes Is. 6050 Cebu
wcpusanfran@yahoo.com
032-2676779 / 032-4970334

COTABATO
Cotabato Regional Medical Center - WCPU
Dr. Teresita Mansilla
Dr. Nurinda Arumpac
Shirly Sallik, RSW
Sinsuat Avenue, Cotabato City
064-4212192

DAVAO CITY
Southern Philippines Medical Center - WCPU
Dr. Maria Aimee Hyacinth Bretaña
Dr. Regina P. Ingente
Louella S. Young, RSW
Janice G. Pamplona, RSW
Imelda M. Mallorca
J.P. Laurel St., Bajada, Davao City
wcpu_dmc@yahoo.com
082-2272731 loc. 4205 / 082-2221347
0932-3278857

DAVAO DEL NORTE
Davao del Norte
Davao Regional Hospital
Dr. Emilie Debil-Ugdang
Felipa Banate, RSW
APOKON, Tagum City, Davao del Norte
drh_ob@yahoo.com
084-4003144

EASTERN SAMAR
Eastern Samar Provincial Hospital - WCPU
Dr. Ma. Teresa E. Tabungar
Julia C. Dulfo
PO2 Catherine Poro
Provincial Bldg., Abrigo St., Balangkayan, Eastern Samar
055-5609310

LGU Balangkayan – WCPU
Dr. Nelise Labro
Wilda Contada, RSW
PO1 Daisy E. Rosaldo
Municipal Bldg., Abrigo St., Balangkayan, Eastern Samar
055-5609310

LGU Salcedo – WCPU
Dr. Ma. Socorro S. Campo
Ma. Rieletta Macasa, RSW
PO3 Jean M. Sumook
Salcedo Local Government Unit, Brgy. 3, Salcedo, Eastern Samar
055-5650027

RHU Otras - WCPU
Dr. Marilyn Uy-Umil
Leah P. Ocaya, RSW
Christine G. Redona
Brig. Butang, Oras, Eastern Samar
055-5650027

ILOCOS NORTE
Mariano Marcos Memorial Hospital & Medical Center - WCPU
Dr. Mona Lisa Pastrana
Dr. Ermelina A. Agulay
Mrs. Marilyn Q. Ramirez
Mrs. Elma C. Solmerin
Brig. 6 San Julian, Batac City, Ilocos Norte
mmmmh_doh@yahoo.com
077-7923133
0917-5782149 / 0919-5169825

ISABELA
Gov. Faustino Dy Memorial Hospital - WCPU
Loren Batoon, RSW
Capitol Compound, Alibagu, Ilagan, Isabela
078-6223172
056-7152186

LAGUNA
Ospital ng Biñan – CPU
Dr. Leila C. Bondoc
Divino Andal, RSW
Canlalay, Biñan City, Laguna
049-5114119 / 049-5113872

LEYTE
Eastern Visayas Regional Medical Center - WCPU
Dr. Ma. Remegia A. Manalo
Dr. Rulina Lymar Barrot-Gler
Mrs. Janet Galang, RSW
Tacloban City, Leyte
053-3256497 / 053-5203137 / 053-3222200
053-3218724
0908-5036979 / 0922-8207349

MAGUINDANAO
Maguindanao Provincial Hospital - WCPU
Dr. Norben Gevieso
Shalimar Saribo, RSW
Shariff Aguak, Maguindanao

MASbate
Masbate Provincial Hospital
Dr. Cynthia V. Llacer
Ma. Carlota A. Dela Peña
PO2 Arlene T. Capsa
Hospital Road, Provincial Health Office, Masbate City
wcpumasbate@yahoo.com
056-3332244
0929-5436777 / 0921-2868968
NORTHERN SAMAR

LUG. Lope de Vega – WCPU
Dr. Jocelyn C. Galvez
Agnes B. Martino, RSW
PO1 Myla B. Escareal
Purok 7, Brgy. Poblacion, Lope de Vega, Northern Samar

LUG. Northern Samar - Palangga CPU
Dr. Myrna Trongcoso
Salvacion Mondigo, RSW
PO3 Regina Dente
Annunciation St., Brgy. Acacia, Cataraman, Northern Samar 6400
myrnatrongcoso@yahoo.com

LUG San Roque
Dr. Howell Deniega
Edna S. Meregildo
PO1 Ma. Edlyn O. Encina
Northern Samar

NUEVA ECJA

Dr. Paulino J. Garcia Memorial & Medical Center
Dr. Cynthia Daniel
571 Mabini St., Calabatan City, Nueva Ecija 3100
cdpdpedi@yahoo.com
044-4638888 / 044-600927

NUEVA VIZCAYA

Veterans Regional Hospital - WCPU
Dr. Evelyn G. Nacionales
Dr. Marietta Ann B. Balbas
Mrs. Glicerio B. Anawa
Magaysay, Bayombong, Nueva Vizcaya
veteransregionalhospital@yahoo.com.ph
078-8053561 to 64 / 078-8053560
0920-2266658 / 0917-580849

ORIENTAL MINDORO

Ospital ng Palawan
Dr. Alma Rivera
Tajmahal Goalcantara, RSW
PO1 Loryn M. Bolos
220 Malvar St., Puerto Princesa City, Palawan

Purple Hearts – CPU
Alicia M. Cajayon
PO3 Analyn P. Loja
Dr. Eleonor B. Fajardo
MSWDO Municipal Compound, San Jose, Occidental Mindoro
purpleheartscpu@yahoo.com
043-4912679 / 043-4911316

PANGASINAN

LGU Bani, Pangasinan - WCPU
Dr. Ivy S. Paragas
Grace A. Taganap
Alma C. Mabanglo
Haydee R. Insigne
Poblacion, Bani, Pangasinan 2407
ivnavarro05@yahoo.com
0926-8708798

PANGASINAN

LGU Bani, Pangasinan - WCPU
Dr. Ivy S. Paragas
Grace A. Taganap
Alma C. Mabanglo
Haydee R. Insigne
Poblacion, Bani, Pangasinan 2407
ivnavarro05@yahoo.com
0926-8708798

SOUTHERN LEYTE

Libagon - CPU
Dr. Dolorosa D. Branzuela
Elvira C. Arado, RSW
PO2 Olona O. Advolina
Municipal Health Office, Maharlika Highway, Libagon, Southern Leyte 053-5781085

Pintuyan CPU
Dr. Leslie Ann L. Lucas
Pob. Ubos, Pintuyan, Southern Leyte

Salvacion Oppus Yniques Memorial Provincial Hospital
Dr. Lea Catan
Glendora Jale, RSW
PO3 Teresita Malain
Mantahan, Maasin City, Liloan, Leyte
leiceb@yahoo.com
053-5709142

ZAMBOANGA DEL NORTE

Dr. Jose Rizal Memorial Hospital - WCPU
Dr. Maria Dinna Viray-Parfian
Me. Hazel G. Paler, RSW
Charlene D. Hamoy
Davao, Maasin City, Liloan, Leyte

ZAMBOANGA CITY

Zamboanga City Medical Center - WCPU
Dr. Lea Catan
Glendora Jale, RSW
PO3 Teresita Malain
Mantahan, Maasin City, Liloan, Leyte
leiceb@yahoo.com
053-5709142

ZAMBELES

James L. Gordon Memorial Hospital - WCPU
Dr. Ana Verilta R. Figueres
Genia R. Eclarin
Rowena Fabay, RSW
Rizal Ave., Ormoc City

MISAMIS OCCIDENTAL

Mayor Hilario Ramirez Sr., Regional Training
& Teaching Hospital - WCPU
Dr. Loreta Tomada
Dr. Mercy Senado
Odetta L. Caguindangan
Charida G. Alunan, RSW
Phoebe G. Pangilinan, RN
Mindog-Mangingol, Ozamis City, Misamis Occidental 7200

NATIONAL CAPITAL REGION (NCR)

Ambulatory CPU Lingap Bata
Dr. Rosalisa Buzon
Medical Social Service Department, Clinical Division,
University of Sto. Tomas Hospital, Lacsion Ave., Sampaloc, Manila

Dr. Jose Fabela Memorial Hospital - WCPU
Dr. Mary Anne Iaco, Dr. Rhea de Guzman &
Dr. Teresita Beronila
Lope de Vega St., Sta. Cruz, Manila

Philippine Children’s Medical Center - CPU
Dr. Cecilia Gan
Quezon Avenue Extension, Quezon City 02-9246601 loc. 234

Philippine General Hospital - CPU
Dr. Bernadette J. Madrid
Philippine General Hospital, Taft Avenue, Manila

Quezon City General Hospital-Quezon City Protection Center
Dr. Elsie Callos
Dr. Marivic Bigornia
Nida Angayon, RSW
PO3 Ma. Leonora Eclipse
Seminary Road, EDSA, Quezon City 9297224 / 9207081

Rizal Medical Center - WCPU
Dr. Carmencita Solidum
Pasig Blvd., Pasig City

NEGROS OCCIDENTAL

Corazon Locsin Montelibano Memorial Regional Hospital - WCPU
Dr. Crisalito Incentado
Zenaida Valenzuela, RSW
Grace Mineses, RN
Lacsion St., Bacolod City 032-7070260 / 034-4332697
9117-3005760

Teresita L. Jalandoni Provincial Hospital - WCPU
Dr. Evelyn G. Geraldoy
Dr. Lanny Joy A. Paez
Teressa S. Cesarinas, RSW
Brgy. Lantad, Silay City, Negros Occidental
tljilhay@yahoo.com
034-4951705 / 034-7148485
0918-9419964

Arelano St., Dagupan City, Pangasinan
rimc_wcpu@yahoo.com
072-5185916 loc. 139 072-5234103

QUEZON PROVINCE

LGU Infanta CPU
Dr. Abelardo Jose
Melanie G. Virrey, RSW
PO3 Meldie C. Gatdula
Infanta, Quezon

Quezon Medical Center
Dr. Ramon Baldovino
Aireen Hernandez, RSW

CITY OF MANILA

Dr. Larny Joy A. Paez
PO3 Ma. Leonora Eclipse
Seminary Road, EDSA, Quezon City 9297224 / 9207081

Dr. Marivic Bigornia
Nida Angayon, RSW
PO3 Ma. Leonora Eclipse
Seminary Road, EDSA, Quezon City 9297224 / 9207081

Dr. Evelyn G. Geraldoy
Dr. Lanny Joy A. Paez
Teressa S. Cesarinas, RSW
Brgy. Lantad, Silay City, Negros Occidental
tljilhay@yahoo.com
034-4951705 / 034-7148485
0918-9419964
ASIAN RESOURCE CENTER

UNIVERSITY OF THE PHILIPPINES MANILA - PHILIPPINE GENERAL HOSPITAL
CHILD PROTECTION UNIT

CHILD PROTECTION UNIT
Philippine General Hospital
Taft Avenue, Ermita, Manila
Email pgh.cpu@gmail.com
Contact nos. (02) 5268418 / (02) 5241712
(02)5548400 Loc. 2535
Fax (02) 5241512
URL www.childprotectionnetwork.org
Mobile 0917-8874630

TEAM

Bernadette J. Madrid, MD, FPPS
Executive Director
Stella G. Manalo, MD, FPPS
Associate Director for Administration
Merle P. Tan, MD, FPPS, MHPed
Associate Director for Training
Norieta Calma-Balderama, MD, FPPA, FPCAPPi
Adult & Child Psychiatrist, Forensic Psychiatrist
Cynthia R. Leynes, MD, FPPA, FPCAPPi
Child Psychiatrist
Sandra S. Hernandez, MD, DPPS
Child Protection Specialist
Renee Joy Neri, MD, DPPS
Child Protection Specialist
Namnama Villarta-de Dios, MD, DPPS
Child Protection Specialist
Marie Celieza A. Antonio, RN
Nurse

Dolores B. Rubia, RSW, MSW
Social Work Supervisor
Annaliza R. Macababbad, RSW
Social Worker
Rubymay T. Bobila, RSW
Social Worker
Leizl R. Sombrio, RSW
Social Worker
Lhea Grace V. Gutual, RSW
Social Worker
May Ann C. Demetrio, RSW
Social Worker
Atty. Amy A. Avellano, LLB, LLM
Legal Consultant
SPO2 Evangeline R. Villano
Police Officer
SPO1 Marsha T. Agustin
Police Officer
Andromeda C. Legaspi
Triage Officer

Dr. Amelia R. Fernandez
Consultant Adviser
Medical Services
Medico-legal evaluation
Forensic interview
Expert testimony in court cases
Health care maintenance of survivors
Management of sexually-transmitted infections
Child development assessment
Others

Mental Health Services
Mental health evaluation
Forensic psychiatric evaluation
Medico-legal testimony in court cases
Individual therapy
Therapy for children with problematic sexual behavior
Stress debriefing

Social Services
Safety and risk assessment
Case management
Case conference
Parenting seminar
Family therapy
Group work for children and parents
Crisis counseling
Educational assistance
Livelihood assistance

Legal Services
Legal counseling
Family court awareness/Kids court

Police Services
Investigation
Taking of sworn statement
Videotaped forensic interview
On-site case filing

Others
Library services
Publication
Research
Community advocacy

AVAILABLE SERVICES

CPU through the years
(Number of new patients served per year)
The Certificate Course for Child Protection Specialty Training (CCPST) was designed to specifically address the need for a standardized curriculum for child protection specialists in the Philippines. This program offered by Child Protection Network Foundation (CPN) and University of the Philippines-Philippine General Hospital Child Protection Unit (PGH-CPU) was created in response to a clamor for an effective and specialized training program for child abuse diagnosis and intervention committed to the highest possible standards. The objective of the program was to train physicians, social workers, and police officers to become experts equipped with the proper knowledge, competence, and attitude in handling neglected, maltreated or at-risk children utilizing an interdisciplinary approach.

Since 1999, the PGH-CPU is involved in the training of identified doctors to become child protection specialists. It started as an on-site training program for six (6) weeks. In a study that reviewed and validated the training program after having been run for a number of years, Tan (2007) discovered that while the trainees appreciated the whole program, they experienced great difficulty with having to stay at PGH for six (6) straight weeks. These trainees came from various regions of the country and needed to leave their respective clinics and families for the entire duration of the course. Furthermore, most of the
doctors were connected to government institutions and local government units unwilling to release them from their responsibilities for this long period. To respond to this issue, a blended learning program evolved. Other physicians from different Asian countries signified interest to undertake this program through international partners of CPN, notably the International Society for the Prevention of Child Abuse and Neglect (ISPCAN). As a result of this pioneering effort, CPN was designated as the Asian Resource Center for child abuse specialty training.

CPN now has two (2) types of CCPS Training: on-site and blended learning. The on-site training is a six-week program for physicians and a four-week rotation for social workers and police officers. Teaching and learning activities include mini-lectures, case vignette discussions in small groups, case analyses, large group discussions, preceptorials, and teaching videos. Blended learning, on the other hand, is composed of 11 modules for physicians, 10 modules for social workers, and 4 modules for police officers. Modules are web-based while face-to-face practicum and summative assessment occur on-site at CPU-PGH for short specified periods through the whole program. Trainees are expected to go back to their respective communities and analyze their distinct needs and challenges as they create their own child protection units in their localities.
This is a three-day live-in, comprehensive, and interactive training program for multidisciplinary teams composed of municipal health officers, municipal social workers, and WCPD police officers who will become “CPU Satellites.” Using mini-lectures, individual and group practical exercises, case studies, role play, small group and plenary discussions, the participants are given basic inputs so they could properly assist VAWC victims using the 4Rs: recognition, recording, reporting, and referral of cases.
The pediatrician’s task in the treatment of child abuse involves detecting abuse, managing the health problems of victims, and reporting cases to authorities. As experts on child health and development, pediatricians are also in a unique position to participate in the long-term treatment and follow up of cases to prevent re-abuse and improve the overall health and well-being of patients. Given this critical role, pediatricians must be professionally trained in child protection in order to be competent in identifying, managing, and providing long-term intervention in child abuse cases.

The child abuse training program for residents builds on the 4Rs of child abuse, namely recognizing, recording, reporting, and referring. During a four-week rotation at the PGH-CPU, pediatric residents are trained to acquire competencies in recognizing the presenting signs, symptoms and objective findings of given cases; eliciting a comprehensive pediatric history and conducting a complete physical examination in suspected cases of child abuse; carrying out initial interventions including prompt medical triaging in the emergency room and referral of victims to an interdisciplinary team for management; reporting the abuse to proper authorities and agencies, if further intervention is needed; and identifying community resources for supporting the child/family. The training program also engages the residents in a self-reflection to continue to remain sensitive in handling abused and neglected children.
The Ambulatory Pediatrics Fellowship Program imparts to the trainee the knowledge, attitudes, and skills necessary in teaching, patient care, organization and management, and research. The fellows also fulfill requirements to become experts in the field of child abuse through the integrated Child Protection Specialty Training Program. The program is integrated into the two-year Ambulatory fellowship program. Trainers include pediatricians, child psychiatrists, and lawyers who are recognized authorities in child protection. The curriculum is designed to train physicians to become medical experts who are knowledgeable, competent, and having the appropriate attitude in handling cases of child abuse and neglect.

At the end of the training program, the fellow is expected to have an understanding of the legal framework of child abuse in the Philippines, the stages of child development, the dynamics of child abuse and its effects on the family, the interdisciplinary approach in handling child abuse cases, and ethical issues in child abuse and neglect. The fellow acquires skills in the complete management of child abuse cases, performing an expanded medical history and a complete forensic examination on male and female children, appropriate documentation of abuse cases, integrating safety and risk assessment in managing child abuse, providing post-assault care of an abused child, and practicing self-care. The fellow is also prepared for participation in medical peer reviews and child death reviews and competently testifying in court.
<table>
<thead>
<tr>
<th>Child Protection Specialist Graduates of UP-PGH Ambulatory Pediatrics Fellowship Training Program</th>
<th>Year</th>
<th>Place of Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Yvonne B. Redoble, M.D.</td>
<td>1998</td>
<td>Cebu City</td>
</tr>
<tr>
<td>2. Marie Aimee V. Bretana, M.D.</td>
<td>1998</td>
<td>Southern Philippines Medical Center- WCPU, Davao City</td>
</tr>
<tr>
<td>3. Edna Sarah C. Morada, M.D.</td>
<td>1999</td>
<td>NCR</td>
</tr>
<tr>
<td>5. Ruby L. Punongbayan, M.D.</td>
<td>2001</td>
<td>NCR</td>
</tr>
<tr>
<td>6. Michelle Taup-Tolentino, M.D.</td>
<td>2002</td>
<td>Bicol Medical Center-WCPU</td>
</tr>
<tr>
<td>8. Elynn L. Go, M.D.</td>
<td>2004</td>
<td>NCR</td>
</tr>
<tr>
<td>9. Ma. Lourdes Mendoza</td>
<td>2006</td>
<td>Cagayan de Oro City</td>
</tr>
<tr>
<td>10. Sandra S. Hernandez, M.D.</td>
<td>2011</td>
<td>Philippine General Hospital – Child Protection Unit</td>
</tr>
</tbody>
</table>

**CURRICULA FOR MEDICINE**

<table>
<thead>
<tr>
<th>Year Level</th>
<th>Objective</th>
<th>Content</th>
<th>Responsible Department</th>
</tr>
</thead>
</table>
| Year Level III | To be aware of family and domestic violence and to appreciate gender issues within and outside the medical profession | • Defining child abuse  
• Domestic/Family violence in different areas  
• Human behavior  
• Gender issues | • Psychiatry  
• Family Medicine |
| Year Level IV | To discuss the implementation of the Convention on the Rights of the Child (CRC) in the hospital setting | • Articles of CRC  
• Child Development  
• Interview of a child  
• Pertinent laws  
• Forensic issues | • Art of medicine  
• Medical jurisprudence  
• Legal medicine  
• Pathology |
| Year Level V | To recognize the signs and symptoms of child abuse and to know where to refer | Common presentation of physical abuse, sexual abuse, emotional abuse, and neglect | • Pediatrics  
• Surgery  
• Ob/Gyn  
• Psychiatry |
| Year Level VI | 2-week elective rotation at the PGH-CPU | | |
| Year Level VII | 4-week research elective at the PGH-CPU | | |
| Pediatric, Psychiatric and Family Medicine Residency | One month mandatory rotation at the PGH-CPU | | |
| Fellowship in Ambulatory Pediatrics, Adolescent Medicine and Child Psychiatry | Child Protection Specialty Training curriculum is integrated into post-residency fellowship | | |
**Short Description**

The *Specialized Training for Women and Children Protection Desks Officers* is a 10-day intensive program of instruction (POI) for WCPD police investigators. Using standardized training modules that were pilot-tested, critiqued, and enhanced by Philippine National Police (PNP) pilot participants. This POI is customized for all WCPD police officers who are usually the first responders in cases involving violence against women and children (VAWC) victims and children in conflict with the law (CICL). It combines experts’ lectures, small group discussions, case analyses, group and individual practicum, role play, and mock court. It tackles a wide array of issues such as child abuse and neglect, juvenile justice, trafficking in persons, and domestic violence. It capacitates participants’ skills on preparing sworn statements, interviewing victims, witnesses, and suspects, utilizing referral system, evidence gathering, and testifying in court.

**Objectives**

At the end of the training, participants should be able to:

1. Demonstrate awareness and sensitivity in handling VAWC victims and CICLs;
2. Apply relevant international conventions and local laws on VAWC and juvenile justice;
3. Identify and preserve various forms of evidence in VAWC cases that are admissible and have probative value in judicial proceedings;
4. Competently conduct investigative and forensic interviews;
5. Competently prepare a victim’s sworn statement and witnesses’ affidavits;
6. Apply existing standard operating procedures for the arrest of suspects and the conduct of proper search, seizure, and crime scene investigations;
7. Properly refer victims to appropriate disciplines for other interventions; and
8. Confidently testify in court.

**Number of Participants**

From June 13 to 20, 2011, 36 PNP-WCPD officers from 17 regions completed the training. On top of the 10-day training, they underwent five (5) days of training as trainors. These 36 pilot trainees now composed PNP’s pool of trainors tasked to train WCPD police investigators. Right after the training, they returned to their respective areas of responsibility to conduct roll-out of the POI. PNP is anticipating that by the end of October 2012 the current 2,964 investigators assigned in 1,826 WCPDs have all been trained.

**Impact**

The investigation of VAWC is not a built-in topic in the existing police training curricula. Hence, there are WCPD police officers who do not know even basic interviewing techniques when talking to victims of VAWC. These resulted to some victims getting re-traumatized while giving their statements at police stations. Some cases resulted to dismissal due to poor police investigation techniques. After the pilot test, PNP institutionalized the developed POI which is now used nationwide with trainers articulating the same core messages.
Objectives

At the end of the CET, participants should be able to:

1. Demonstrate awareness and sensitivity in tackling cases of child abuse, child commercial sexual exploitation, and CICL;
2. Communicate effectively and sensitively with the child witness during court proceeding;
3. Maintain proper decorum in courts such as preventing oppressive behaviour, badgering, and insensitive questions;
4. Competently identify various forms of evidence that are admissible and have probative value when the child is unavailable;
5. Exhibit better understanding of CICL, children at risk, their rights, and appropriate manner and process by which they are to be treated as they go through various stages of the justice and welfare system;
6. Understand discernment under Republic Act 9344;
7. Discuss diversion program at court level as an alternative and child-appropriate process of determining the responsibility and treatment of a CICL;
8. Competently formulate diversion programs; and
9. Demonstrate clear understanding of the elements of trafficking under Republic Acts 9208 and 7610.

From March 2006 to March 2010, there were a total of 19 CETs for family court salas. All designated family courts completed the CET, with a total of 964 trainees. In 2011, the CET training of single-sala court judges and personnel commenced.
The Competency Enhancement Training for Judges and Court Personnel Handling Cases Involving Children,” or popularly known as CET, is an intensive, three-day, live-in, and interdisciplinary judicial training program. It is designed to improve the competencies of judges and court personnel in handling cases involving children. Since its pilot test in March 2006 and upon the recommendations of participants and the training team, CET underwent several revisions. CET now covers trafficking in persons and children in conflict with the law (CICL). The CPN partners with the Supreme Court of the Philippines and the Philippine Judicial Academy on this judicial reform program. The UK Embassy-Manila, the United Children’s Fund, the Plan Philippines, and the International Justice Mission support the training.

Impact

Through CET, the handling of minor victims, CICL, and trafficked persons does not rest on the judge. The prosecutor, defense counsel, court personnel along with the police and other NGOs are now working together to make children feel safe in courtrooms.

A transformation of the physical set up and space of courts was noted. After attending CET, participants realized that they were not child-sensitive. The physical structure of their courts did not have the facilities to accommodate children waiting to testify. This factor did not prove to be an obstacle to the trained participants and the majority complied with the requirement for a child-sensitive waiting room. From their own personal collections of old toys and books, they allocated space and created their own waiting areas even without any funding from the local government units where their stations are located.

CET’s impact is not only on family court judges and personnel but also on the children appearing before them and on communities and organizations these people represent.

The late Deputy Court Administrator Nimfa Cuesta-Vilches said CET is “so intense and transformed itself from a mere training to a mentoring program.” Some of the former participants are now CET trainers and facilitators and are committed to child protection work in their personal and professional advocacies. PHILJA Academic Council Chair Justice Delilah D. Magtolis described “CET as a good and fitting example of a skills-based training program.” PHILJA has received many commendations on CET as it truly reflects a skills-based program.

CET participants were unanimous in expressing their firm and enthusiastic commitment not to have any child witness re-traumatized during their days in court.
Short Description

In partnership with De La Salle University College of Law, CPN developed a summer legal internship program at the UP Manila Philippine General Hospital-Child Protection Unit (PGH-CPU). The participants admitted to this program must be at least incoming sophomore law students.

Under the supervision and mentoring of PGH-CPU’s lawyer and police investigators, the legal interns leave the four walls of law school and work with abused child victims and their families. They see the application of laws and court procedures in the lives of these minors with whom they are assigned to work with. They bring the courts closer to the victims by helping them understand their legal cases and the judicial procedure. In consultation with clients, they identify critical yet legally permissible ways by which they could protect and assert the victims’ rights.

Objectives:

At the end of the legal internship, the intern should be able to:

1. Demonstrate awareness and sensitivity towards abused children;
2. Given sample situations, apply relevant laws and identify pertinent evidence;
3. Competently interview child victims and witnesses;
4. Prepare affidavits and simple legal pleadings;
5. Assist a minor private complainant at an actual preliminary investigation; and
6. Act as guardian ad litem (GAL) for an abused child in an actual court case.

Number of Participants

Since 2011, five (5) interns have completed the internship program. In 2012, CPU-PGH is expecting six (6) interns and six (6) GALs to assist patients.
Public awareness is another way of realizing CPN’s mission in ensuring that all abused children and children-at-risk are safe, healthy, and developing to the best of their potential within a nurturing family environment. CPN makes this possible through the conduct of Orientation for Barangay Officials and BCPC Members in the prevention and management of abuse cases. The orientation aims that the participants be able to understand the basic issues on child abuse prevention and management; gain knowledge of the Barangay Response Protocol on Child Abuse Cases; discuss the legal framework on violence against women and children; and strengthen the Barangay Council for the Protection of Children (BCPC). The barangay officials and BCPC members are the immediate actors in the community. Their empowerment would greatly help in the realization of CPN’s vision that all children in the Philippines are protected from abuse and neglect. The areas of Valenzuela, Parañaque, Manila, Pasay, and Makati are already oriented, however, reorientation is always needed to update their knowledge and skills.

A group of social work students from the Asian Social Institute had their group work practicum at PGH-CPU. The Master’s Degree students facilitated parenting sessions to parents of minors who were accused of molesting other children. They also facilitated group work activities to children who were brought during the parenting seminar. The students from the Bachelor’s Degree conducted their group work sessions to parents residing at Barangay 905, Punta, Sta. Ana, Manila. The Parenting Seminar is composed of six (6) sessions that covers the Parents’ Roles, Developmental Stages from Childhood to Teenage Years, Parenting Strategies for Children and Teenagers and Parent-Child Relationship. Nineteen (19) parents graduated from the parenting seminar. Ms. Dolly B. Rubia, social work supervisor of PGH-CPU, monitored the conduct of the group work sessions of the practicum students.

Impact:
One of the important lessons that law interns brought back to law school is the realization that legal representation, to be empowering, must be client-oriented. They also learned that while lawyers are learned in law and legal strategies, they must not unilaterally decide their clients’ cases.

CPN developed this training module to teach organizations basic recognition of child abuse and what to do when they suspect that a child is being abused. It helps the organization’s staff how to respond to children who disclose abuse and enables them to undertake basic safety and risk assessment. For those organizations without a child protection policy, the training can help them develop one.
MANILA CONFERENCE

“Ako Para sa Bata”

DEC. 5-7, 2011 AT THE SMX CONVENTION CENTER

The Manila Conference organizing committee members and volunteers pledge to protect the child. Kami para sa bata!

Keynote Speaker DWSD Secretary Dinky Soliman (4th from left) with organizing committee members and conference delegates.
The 3rd Ako Para Sa Bata Manila Conference of the CPN was held in the SMX Convention Center on December 5-7, 2011. 758 delegates gathered to participate in tackling the conference theme “Creating Safe and Caring Environments for Children.” The goal of the conference was to present and adapt solutions and strategies to ensure safe and caring environments for children in various settings. Parents and professionals pledged to implement these various measures to prevent child neglect and endangerment.

Highlights of the conference included the presentation to the Philippine National Police (PNP), represented by Gen. Nicanor Bartolome, PNP Police Chief, of the Most Valuable Partner award. The keynote address was delivered by Department of Social Welfare and Development (DSWD), Secretary Corazon “Dinky” Soliman. The participation of key government agencies such as the PNP, DSWD and Department of Education emphasized the highly interdisciplinary nature of child protection work. The plenary lectures were delivered by acclaimed and powerful speakers: Dr. Bernadette Madrid (CPN), Dr. Raphael Consunji (Safe Kids, Phil), Grace Poe-Llamanzares (MTRCB), Dr. Susie Pineda-Mercado (WHO), Blen Fernando (Advertising Standard Council), and Prof. Lourdes “Honey” Carandang.

Partner organizations held intensive post-conference workshops to impart specific skills to participants: PSCAPI (Philippines Society for Child and Adolescent Psychiatry), SAMPI (Society of Adolescent Medicine of the Philippines, Inc), and PsychConsult.

**MVP AWARDEES**

- 2005 The British Embassy-Manila
- 2006 UNICEF-Manila
- 2007 Plan Philippines
- 2008 Philippine Judicial Academy
- 2010 Consuelo Foundation
- 2011 Philippine National Police

*A vision of a Super Multidisciplinary Team.*

PNP Police Chief Nicanor Bartolome (6th fr. left) receives the MVP award from DSWD Sec. Dinky Soliman (5th fr left) and CPN Board of Trustees (from left) Atty. Katrina Legarda, CPN Director for National Network; Lizzy Razon, CPN Board Member; Dr. Stella G. Manalo, Over-all Conference Chair and CPN Asso. Director; Karina Constantino-David, CPN Board Member; Jun Sy, CPN Board Member; and Dr. Bernadette J. Madrid, Conference President and CPN Executive Director.
On September 9, 2011, the Child Protection Network Foundation Board of Trustees, through the Events and Gala Committee, organized a CPN Fundraiser at the Manila Polo Club. The event was meticulously, painstakingly, and seamlessly staged through the supervision of Irene Martel-Francisco, CPN’s President and Philippine Tatler’s Managing Director. Movers and shakers in business and society attended the event.
THE BOARD OF TRUSTEES

Justice Ameurfina A. Melencio-Herrera
THE CO-CHAIR

Dr. Elizabeth Melchor

Mons Romulo

Dr. Alberto Romualdez

Dr. Amelia R. Fernandez

Dr. Mario Festin

Julio "Jun" Sy, Jr.

Johnny Velazquez

THE TRUSTEES

Ambassador Stephen Lillie

Lizzy Razon

Dr. Elizabeth Melchor

Mia Borromeo

Julio "Jun" Sy, Jr.

Karina Constantino-David

Renna Hechanova-Angeles

THE NEW CLINICAL ADVISORY BOARD

Dr. Alberto Romualdez

Dr. Amelia R. Fernandez

Dr. Mutya San Agustin

Dr. Vicky Herrera

Dr. Mario Festin
The complete audited financial report by R.S. Bernardo & Associates is available upon request.
As of December 31, 2011

Child Protection Network recognizes and appreciates the following institutions and individuals for their generosity. Thank you for helping us fulfill our mission.

Agerico Paras  
Al & Carla Tengco  
Alfredo Tumacder  
Alice Eduardo  
Allen Anderson  
Amb. Harry Thomas  
Amb. Isabel Wilson  
Amb. Luca Fornari  
Amelia Ablaza  
Amihan Abueva  
Amparito Lhuillier  
Angelique Quirora  
Anthony William Cripps  
Antonio Abad  
Arch. Isabel Garcia  
Aspinall Marketing  
Atty. Alberto & Justice Nena Valenzuela  
Atty. Carmela Castro  
Atty. Dong and Sylvia Asperilla  
Atty. Farah Marie G. Decano  
Atty. Gizela M. Gonzalez  
Aurelio Montinola  
Belinda Molina  
Ben & Ginger Yap  
Bien Tan  
Bob and Betsy Tenchavez  
Bobby Cuenca  
Boy and Annee Santayana  
BPI Foundation  
Carolyn Masibay  
Cavallino Inc.  
Cecilia Reynoso  
Cesar Virtusio  
Charlemagne Yu  
Children’s Hour Philippines Inc.  
Christanne C. Peña  
Christina Cuevas  
Christina Santos  
Citybridge Foundation  
CM Pancho Construction  
Concepcion Jimenez  
Consuelo Santiago Ynares  
CV Travel  
Cynthia Gonzalez  
Dean Sol and Deo Mawis  
Diana Jean Lopez  
Diane Ross  
DMCI Project Pevelopers, Inc.  
Domingo Ampil  
Dominic John Gemperle  
Edna Gloriana  
Eduardo Saguil/Red Peak Capital  
Eric Dechoux  
Ernest Escaler  
Ernesto / Joy Sta. Maria  
Estefania Francisco  
Fe Concepcion  
Federico Olbes  
Felipe & Concepcion Cruz  
Fernando & Julia Pena  
Fides Cordero-Tan  
Francisco Elizalde  
Francisco Pua  
Fred & Nena Borromeo  
George Yang  
Gilbert & Nikki Teodoro  
Ginah Ambangan  
Greg Yu (thru Karina David  
Heather Spader  
IPM  
Irene Martel Francisco  
Isabelita Mercado  
J. Makitalo  
J.E. Manalo & Co., Inc.  
James Du Vivier  
Jerry and Marilyn Teotico  
Joana Lhuillier  
Jocelyn and Thomas Keehn/  
Chevron Humankind Matching Gift Program  
Jonathan Matti  
Joseph & Stephanie Tay  
Joseph Calata  
Julio Sy Jr. & Pia Sy  
Landco Pacific  
Leah Marquez  
Leo / Anabel Alejandro  
Letty Tan  
Lily C. Lopez  
Linda Chan Ley  
Linda Coscolluela  
Linda Tan  
LM Restaurant Group, New York, NY  
Lorna Perez Laurel  
Luis R. Antonionthru Mia Borromeo  
Lula Tan Gan  
LPU-College of Law  
Lydia Sugue & Family  
Ma. Angela Padilla  
Ma. Carmen Soriano  
Ma. Estela Nievera  
Mahendra Gusahani  
Mandarin Oriental  
Manuel & Veronica Poblador  
Maribel Ongpin  
Maricris Luzurriaga  
Marietta Santos  
Marilen Clemente  
Mary Ann Hillman  
Mayor Guia G. Gomez  
Myla Villanueva  
Metrobank Foundation  
Migallos and Luna Law Offices  
Monique Villonco  
Nancy Tanjuatco  
Nanette K. Escalona  
Nenita Liaros  
Nina Nguyen Lagac  
Noel Onate  
Olympic Engineering  
ONL Consultants  
Peping and Dulce Tecson  
Peter Tay  
Philip Hagedorn  
Philip Laude  
Philippine Development Foundation  
Pia Angela Boncan  
Pilipina Shell Petroleum Corp.  
Ramon Cojuangco Jr.  
Ramon Francisco  
Ramon Sy  
Regina Geraldez  
Renna Angeles  
Reyza Paz Santos  
Ricardo Sison  
Rodel Cruz  
Sarah Lopez  
Sec. Jesli Lapuz  
Sen. Juan Edgardo Angara  
Sonny / Tootsie Angara  
Sevrine Mialhle  
Susan Villanueva  
Teresa Tan & Remigio Tan  
Teresita Sy-Coson  
Theodore de Jonghe  
Theresa Velasquez  
Total Info Mgt. Corp.  
UST Architecture Batch ’86 and SYAMRA  
Vehicare Trading Corp. / Fe Rodriguez  
Vic & Jo Yap  
Vicente Panlilio  
Victor Gisbert  
Victor Michael Munoz  
Victoria Lopez  
Victoria Zubiri  
Visions and Expressions

Our heartfelt gratitude to those who helped us but would like to remain anonymous. May the universe abundantly reward and keep you all protected at all times.
CHILDREN’S MESSAGES


drawing of a family:

MY FAMILY

"Paagbilay Pasa salamat" by a child. The text translates as:

"Gratitude and appreciation for you and your help. Thank you for your kindness and support."

drawing of a flower:

FULL OF LOVE!!

"My life is totally changed!"

Happy birthday to a family friend!"