

ANNUAL GENDER AND DEVELOPMENT (GAD) PLAN AND BUDGET
Fiscal Year 2015

Region VII
Province of Bohol
Municipality of JAGNA
Total LGU Budget : PhP 79,131,760.00
Total 5% GAD Budget : PhP 3,956,588.00



| Gender Issue and/or GAD Mandate (1) | Cause of the Gender Issue (2) | GAD Objective (3) | Relevant LGU PPA (4) | GAD Activity (5) | Performance Indicators (6) | Performance Target (7) | Source of Budget (8) | | | Responsible Unit/Office (9) |
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| MSWD Office | | | | | | | | | | |
| <i>Client-focused</i> | | | | | | | | | | |
| No Philhealth Insurance (laborer, WMEs, indigents, women group, etc.) | indigent family mostly not Philhealth member | To enroll indigents to Philhealth Program of the LGU | Philhealth Program for Indigents | Philhealth care for indigent & Update annual masterlist of philhealth beneficiaries | No of beneficiaries : WME'S, Porter, identified indigent family | 1000 beneficiaries for CY 2015 | 100,000.00 | | | DSWD Office/MGAD-C |
| *unemployment of out-of-school youths | *unskilled for employment * no educational attainment | To promote total development to the needy youth & undergo income producing project & skills training necessary for productive employment. | Strengthening the association | Reorganized & Strengthening Pag-asa Youth Association of the Philippines, Assist Program & Activities, Served scholarship grant for the deserving/ indigent student | Number of Youth finished/graduated their short term course and employed | 52 OSY will graduate to various short-term skills trainings | 30,000.00 | | | DSWD office |
| *standby out of school youth | no guidance counsellor | To motivate OSY to involve voluntary works in the community | Strengthening the OSY association | Conduct voluntary work system for OSY like canal clean-up, coastal clean up provided with food and grocery items | no. of OSY participated | 25 OSY on the 2nd quarter | 20,000.00 | | | DSWD office |
| * gender-related issues seeking assistance | * low income capacity | To provide immediate assistance/amount as a contribution or aid to needs | Donation/Cash Assistance Program | Monetary Assistance to any gender related issues Assessment (evaluation of the situation of the needy client) | No. of Client extended the assistance | only 5 person in 2015 | 10,000.00 | | | DSWD office |
| presence of street children | can deprive the image of our town | Zero street children in our town | close monitoring | Approach them and guide them to their proper location and guardians | no. of street children extended assistance | zero street children | 10,000.00 | | | DSWD office |
| significant numbers of unskilled, unemployed womens | No. of womens unemployed and unskilled | To identify training needs and provide short-term course/ trainings | Capacity Development Program for Women | To send womens to TESDA for Commercial cooking/baking, cosmetology, dressmaking, therapeutic massage | No. of womens groups and individuals send to trainings | 50-100 womens by 2015 | 20,000.00 | | | DSWD office |
| SVR disabled person | Practice their rights & privileges | identify the needs, training & Opportunities of differently abled person | Strengthening rights as PWD | Trainings/Seminars for livelihood programs, Annual Celebration, Continue issuance of ID system of privilege as stated RA 9442 magna carta for PWD | 25 PWD | Full implementation of programs throughout the year | 10,000.00 | | | DSWD office |
| presence of irresponsible parents | lack of knowledge on responsible parenthood | To conduct general concept on responsible parenthood | Responsible parenthood | *Responsible Parenthood *Parents Effective Services * Family Development Services | aware the duties & responsibilities as a parent | 33 brgys conducted responsible parenthood program | 5,000.00 | | | DSWD office |
| Gender victims in all forms of violence | consentization (old practices) | To conduct psycho-social intervention in managing trauma | Gender-based violence | * Conduct GST++ | immediate positive response to walk-in in client victims | no. of cases attended with proper attention | 20,000.00 | | | MSWD Office; MGAD-C; PNP women's desk |
| presence of anti-photo/video voyeurism act (RA 9995) /pornography (RA 9775)/bullying (RA 10627) in schools | too much exposure to internet/cybernet cafes | To lessen the no. of cases | Children Protection Program | * Conduct IEC drive in barangay and monitor internet establishments | In barangays | for 33 barangays | 10,000.00 | | | MSWD Office; MGAD-C; PNP women's desk |

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| no. of <i>Human Trafficking</i> cases in previous years | presence of port/gateway to Mindanao | To minimize/lessen no. of cases | Anti-Human Trafficking | *IEC drive * strengthening proper authorities in implementation of national laws | Schools & Barangays | All elementary and secondary schools of the 33 brgys | 20,000.00 | | | MSWD Office; MGAD-C; PNP women's desk |
| PNP-JAGNA | | | | | | | | | | |
| Can't provide immediate assistance to Women and Children Protection Desk walk-in clients | no appropriation for travel /mobilizaion ,food and medical examinaion of WCPD clients | Provide immediate assistance to victims of violence | Emergency Cash Assistance Program (victims of violence) | Provide assistance on transportation,food,medical examination | Percentage of client assisted | 100% WCPD client assisted | 20,000.00 | | | PNP women's desk |
| Increasing reported incidents of students & pupils who were victims of violence (No appropriation of mobilization) | Lack of information/awareness on Laws pertinent to childrens | Intensive awareness on Laws such as R.A. 9165, R.A. 7610,R.A 8353,R.A. 9775,R.A. 9262,R.A. 9208 & others | IEC Program | * IEC at elementary/students and parents * Revisiting Childrens Code | Decreasing incidents involving pupils & Students * no. of schools conducted | 32 Schools(3 Schools / mo.) conducted IEC | 20,000.00 | | | PNP women's desk |
| Significant cases of incest (with documented records at PNP Womens Desk) | influence of drugs and alcohol | To decrease number of cases of incest | VAWC | * IEC at elementary/students and parents * Revisiting Childrens Code | * no. of student conducted IEC * no. of schools | minimized cases of incest at the end of the year | 10,000.00 | | | PNP women's desk |
| Presence of Children in Conflict with Law (juvenile delinquency & gangsterism) | parental irresponsibility, neglect & rebellion | Participation of parents, gender advocates and educators in the | strengthened mother class program, community awareness | *conduct barangay and school-based responsible parenthood seminar and symposiums; parent's class, | * decreased cases of juvenile delinquency and eradicate gansterism in the municipality | eliminate juvenile delinquency and gansterism | 50,000.00 | | | PNP women's desk |
| Not conducive area/No privacy on investigating clients due to absence of WCPD Office/building (can be enclosed to womens crisis center (BuB 2015) | confidentiality of WCPD incidents | To have conducive WCPD Office | conductive atmosphere to WCPD victims ,preservation of confidentiality | Construction of WCPD Office | Permanent and separate WCPD office | Year 2 of GPB (2015) | | | 100,000.00 | PNP women's desk |
| DepED | | | | | | | | | | |
| Client-focused | | | | | | | | | | |
| Children's Performance: *Drop-out rate of school children is high *Mean Percentage Score in NAT is low *Obesity is High. | *Less access to modern instructional material/media (NAT is low) | increased performance of children through access of modern instructional materials/gadgets. | Provision of Modern Technology facilities/ materials | Procure/Purchase modern facilities/materials for teaching learning process | Number of classes availed modern instructional materials | Two classes availed modern instructional materials annually | 100,000.00 | | | SH, Teacher |
| | *Elliterate and Neoliterate mothers can't follow-up their children | Increased the capability of mothers to follow-up their Children | capability Building | Conduct capability meetings and orientation | Number of mothers capacitated to make follow-up to their children | 80% of mothers can make follow-ups to their children | 5,000.00 | | | SH, Teacher |
| | *Lack of knowledge of proper nutrition | Enhanced knowledge of mothers on proper nutrition | capability Building | Conduct seminar on proper Nutrition | Number of mothers availed the seminar | 100% of the mother availed the seminar | | | | MNAO |
| *Deterioration of children's values. | *Poor training/modeling at home *Media and presence of modern technology influence their behavior | *Increased students awareness on the importance of living proper values *Awareness on the important of living with proper values. | capability Building | Conduct seminar on values to students. | Number of classes availed the seminar | 5 classes availed the seminar per year | 25,000.00 | | | SH, Teacher,PTCA |
| * Absence of social protection and welfare of children | Less awareness on the importance of health and accident insurances. | Increased awareness on social Protection and welfare of children | Provision of health and accident's insurance for children (athletes) | Provide health and accident insurance to children | Number of student/children provided with health and accident insurance. | 50% of the students/pupils provided with the health and accident insurance | 50,000.00 | | | SH, Teacher,PTCA |
| *Bullying committed by male students against female or the strong against the weak and less opportune children. | Lack of awareness on the possible consequences of their acts. | Increased children's awareness on the consequences of their acts and knowledge of anti-bullying law. | capability Building | Conduct seminar on Bullying | No. of children who attended the seminar per school | 100% of the children attended the seminar per school | 10,000.00 | | | |
| Organization-focused | | | | | | | | | | |
| Some mothers who are considered as the guiding light to their children are not seriously concerned, involved, program-oriented and literate. | Lack of training to engage in descent livelihood to earn a living | Increased number of mothers trained on different livelihood | ALS Program | Conduct livelihood trainings for mothers | Number of mothers availed the training | at least 15 mothers availed the training per school | 50,000.00 | | | ALS Coordinator & SH |
| | Lack of knowledge on responsible parenthood | Increased number of mothers oriented on responsible Parenthood | capability Building | Conduct seminar on Responsible Parenthood | Number of mothers availed the seminars | 80% of the total number of mothers availed the seminar per school | 10,000.00 | | | SH |
| Rural Health Unit 1 and 2 | | | | | | | | | | |

| <i>Client-focused</i> | | | | | | | | | |
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| >Increased infant and under 5 morbidity & mortality rate (15.79% of under 1 age group) | > Poor health-seeking behavior of parents on common illnesses of children; > Lack of curative and preventive medical provision for children less than 5 years old | >Provide information, education campaign among parents on common illnesses of children; >Adequate curative & preventive medical provision for children less than 5 years old; >Increased access to quality health care service delivery | Strengthening the Under 5 Clinic Program services | > Purchase of Medicines for the Under 5 Clinic >IEC through Parents' Class on Integrated Management of Common Illnesses & Radio program; | >% of Acute Respiratory Infection, Diarrheal Cases, Dengue Cases treated and controlled; >% of constituents informed on the access of the Under 5 Clinic Services >enhance provision of quality health service | > 100% Acute Respiratory Infection, Diarrheal Cases, Dengue Cases treated and controlled; >100% of constituents informed on how to access the Under 5 Clinic Services; >Enhanced provision of quality health consultative service | 150,000.00 | | Municipal Health Office (RHU 1 & 2) |
| >Presence of traditional birth attendants (hilot) (no. of deliveries thru hilot c/o RHU) >Low facility-based deliveries compared to the national target (>85%); >Increased number of unscreened newborns for congenital metabolic disorders; >Low percentage of fully-immunized children (60%-70%) to the national target (100%) | >lack of awareness of the existing ordinance on Safe Motherhood and provision of 24/7 access to birthing facility; >Lack of at least 4 prenatal check-ups, as well as post-partum visits; >Pregnant women are not aware of the existing ordinance on Safe Motherhood and lack of access to birthing facility; >Lack of financial capability of mothers to avail newborn screening (mandated, RA 9288); >Lack of logistical support, such as syringes, cotton, etc. from the Provincial Health Office | >Complete prenatal and postnatal visits; >Provision of 50% subsidy of filter cards for newborn screening; >Provision of logistics for the implementation of Expanded Program on Immunization (EPI) | Strengthening the Maternal & Child Health Care Program services | IEC on Safe Motherhood >IEC on Prenatal & postnatal care (reproduction of mother & child book/birth plan) >Purchase of medicines/medical supplies for birthing; >Giving of FeSO4 to all pregnant & lactating mothers(Philos); >50% subsidy on purchasing Newborn Screening filter cards; > Expanded Program on Immunization (purchase of logistical support such as needles, cotton, syringes) | >% of quality prenatal check-up; >% of quality post-partum visit; >% of pregnant/lactating mothers given with FeSO4 >% of newborns are screened for congenital metabolic disorders; >% of Fully-immunized child | >0% Maternal Mortality rate; >reach national target of 85% of facility-based deliveries >100% of newborns are screened for congenital metabolic disorders; >100% of Fully-immunized child | 200,000.00 | | Municipal Health Office (RHU 1 & 2) |
| >Increasing prevalence rate of undernourished among children; >Increased cases of intestinal parasitism among children; >Inadequate growth and development monitoring of 0-5 yo | > Lack of awareness of caregivers of providing adequate nutrition; >Inadequate provision of deworming services; >Lack of logistical support such as ECCD forms for growth and monitoring of 0-5 yo | > 100% of caregivers are aware of providing adequate nutrition; >Adequate provision of deworming services; >ECCD forms for growth and monitoring of 0-5 yo purchased | Strengthening the Nutrition Program services | >Supplemental feeding (Nutrition Month) & Deworming (GP every 6 mos) >Vitamin A supplementation >Growth & Development Monitoring of 0-5 yo | >% of undernourished children given supplemental feeding, Vitamin supplementation & deworming; >% of 0-5 monitored on growth & development | >0% Malnutrition | 100,000.00 | | Municipal Health Office (RHU 1 & 2) |
| >Influence of the Church on the use of modern family planning methods; > Women of reproductive age lack information on family planning services & programs | > Lack of well-informed mothers on family planning; >Lack of supply of oral contraceptive pills, condoms, IUD & DMPA | > Mothers are well-informed on the use of modern family planning methods as one of their choices; > Sufficient supply of oral contraceptive pills, condoms, IUD & DMPA | Strengthening the Reproductive Health Program services | >Purchase of oral contraceptive pills, condoms, DMPA >Conduct Information, Education Campaign on Family Planning Program through Mother's Class, Radio program on FP services, Pre-Marriage Counselling | >% of married women of reproductive age (MWRA) acceptors of modern family planning methods >% of MWRA attended Mother's Class, % of couples attended the pre-marriage counselling | >Increase % of contraceptive prevalence rate up to 80% | 60,000.00 | | Municipal Health Office (RHU 1 & 2) |
| >Increased morbidity & mortality rate of Tuberculosis cases (PTB ranked one of the top ten leading causes of mortality/morbidity) | >Constituents are not aware of the common symptoms of Tuberculosis and the significance of the Directly-Observed Treatment Shortcourse (DOTS); >Insufficient supply of anti-TB drugs | > Increased awareness of constituents on the common symptoms of Tuberculosis and the significance of the Directly-Observed Treatment Shortcourse (DOTS); >Sufficient supply of anti-TB drugs | Strengthening the TB DOTS Program services | >purchase of anti-TB drugs >Conduct Information, Education Campaign on National Tuberculosis Program | >% of TB cases treated and cured >% of TB cases detected | >Reach national target of at least 85% success rate | 150,000.00 | | Municipal Health Office (RHU 1 & 2) |
| >High morbidity and mortality rate of cardiovascular diseases (Hypertension ranked 2nd as a leading cause of morbidity/ranked 5th as a leading cause of mortality) | >Increasing prevalence rate of lifestyle diseases such as hypertension and diabetes; >Lack of awareness on the indispensable role of healthy lifestyle such as regular aerobic exercises | >Reduced cardiovascular complications/risks of lifestyle diseases; >Increased awareness and involvement to healthy lifestyle activities such as regular Hataw | >Strengthening the Healthy Lifestyle Promotion Program; > IEC on Hataw activity >Partnership with Philos health | >Regular Hataw involving LGU employees, NGOs, other private agencies >Hypertensive/Diabetic Screening & Monitoring | >% of LGU employees/RHU staff participated; >% of hypertensive/diabetic patients monitored & given maintenance meds | >Decreased cases not less than 50% morbidity and mortality rate of lifestyle diseases > 100% LGU participation to Hataw activities | 200,000.00 | | Municipal Health Office (RHU 1 & 2)/Philos |
| >Poor dental health (currently no dentist assigned in the RHUs) | >Lack of dental supplies; > No dentist | >Adequate supply of dental supplies >Dentist hired | Strengthen the Dental Health Program | >Purchase of dental meds/supplies; >Hire a dentist | >dental meds/supplies purchased; >dentist hired | >100% dental meds/supplies purchased; >dentist hired | 100,000.00 | | Municipal Health Office (RHU 1 & 2) |

| Municipal Agriculture's Office | | | | | | | | | | |
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| Client-focused | | | | | | | | | | |
| Limited access to resources, information and technologies | Some micro-enterprises have limited capital in running the business | Increase number of WMEs who have access to resources, information and technologies | *Provision of additional capital to the established WMEs * Provision of assistance to WMEs in accessing financial assistance from different agencies | * Propose budget for additional financial assistance to WMEs * Submit proposal to prospected funders for financial assistance | * Amount allocated for financial assistance for capitalization to WMEs * No. of proposals submitted to funders for financial assistance | * 100,000.00 allocation * 10 proposals submitted | 100,000.00 | | | JaSMED/MAO |
| | Low income because some women are on part-time work | | * Provision of alternative livelihood * Facilitate livestock and seed dispersal | * Conduct livelihood trainings * Facilitate livestock and seed dispersal | * No. of livelihood trainings conducted * No. of beneficiaries availed of livestock and seed dispersal | * 2 livelihood trainings conducted * 20 beneficiaries availed of livestock dispersal * 30 beneficiaries availed seed dispersal | 30,000.00 | | | |
| | Some farmers and women have no alternative livelihood | | * Provision of trainings | * Conduct technology and skills training | * No. of technology and skills training conducted | * 4 technology and skills training conducted | 50,000.00 | | | |
| | Some farmers and women members lack technology and skills training | | * Assistance in FDA accreditation | * Facilitate in FDA accreditation | * No. of FDA accredited CSF facilitated | * 2 FDA accredited CSF | 10,000.00 | | | |
| | Difficulty of WMEs to comply FDA accreditation | | * Provision of technical and financial assistance in the establishment of CSF | * Facilitate in the technical and sourcing out of funds in the establishment of CSF | * No. of WMEs availed of technical and financial assistance | * 4 WMEs availed of technical and and financial assistance | | | | |
| | Some WMEs have no CSF | | | | | | | | | |
| Limited access to market | Low quality of local products | Increase market outreach | * Research and Development support services | * Conduct R & D on potential products | * No. of products developed | * 2 products developed and enhanced | 90,000.00 | | | |
| | Limited production capacity | | * Provision of upgraded processing facilities | * Seek assistance from the convergence in the technical aspect of the project | * % increase in the production capacity of WMEs | * 10% increase in the production capacity of WMEs | | | | |
| | Limited supply of quality raw materials | | * Provision of high quality inputs * Seed Production | * Conduct varietal trial and seed production | * No. of varieties experimented *No. of kilos of seeds produced | * 3 rice varieties experimented * 200 kilos of rice seeds produced | 50,000.00 | | | |
| | * Absence of pasalubong center and food terminal for local products * Some farmer, fisherfolks and women are often exploited of bad marketing practices by middlemen * Have no control on the selling proce of their products | | * Provision of infra and technical support on marketing | * Facilitate in the establishment of Pasalubong Center and Food Terminal and oversee its operation and management | * No. of display center established | * 2 display center established (Pasalubong Center and Barangay Food Terminal) | | 300,000.00 | | |
| | | | * Participate in any trade fairs and exhibits Conduct Selling Mission | * No. of trade fairs and exhibits attended * No. market outlets established | * 4 trade fairs and exhibits participated/attended * 4 market outlets established | 80,000.00 80,000.00 | | | | |
| Lack participation of men and women in productive activities and governance | Women at their reproduction age have less participation to any productive activities, since their priority is caring for their children | Increase participation of women in any productive activities | * Provision of women-friendly livelihood * Assistance to Organizational development and strengthening | * Conduct women-friendly livelihood trainings * Facilitate in the implementation and conduct monitoring * Conduct organizational development training and mentoring | * No. of livelihood trainings conducted * No. of women-friendly livelihood implemented and monitored * No. of organized and strengthened women groups | * 2 livelihood trainings conducted * 2 women-friendly livelihood implemented and monitored * 3 women groups organized and strengthened | 20,000.00 20,000.00 | | | |
| | Women groups are not properly organized | | | | | | | | | |
| | No protection against iniquitous and excessive interest rates by lending institutions | Have access of women-friendly lending services | * Assistance to women-friendly lending institutions | * Facilitate linkage to women-friendly lending institutions | * No. of WMEs availed of women-friendly lending institutions | * 2 WMEs availed of women-friendly lending institutions | | | | |

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| No access to welfare programs (OSH) | Lack CSF that is OSH compliant | Upgrade CSF to become OSH compliant | * Provide assistance in the upgrading of OSH compliant CSF | * Conduct training on OSH * Seek assistance from convergence in the establishment of OSH compliant CSF | * No. of WMEs trained on OSH * No. of WMEs availed assistance in the establishment of OSH compliant CSF | * 3 WMEs trained on OSH * 2 WMEs availed assistance in the establishment of OSH compliant CSF | 30,000.00 | | | |
| Absence of appropriate space/shelter for market day vendors (MARKET) | Mostly market day vendors are women used inappropriate shelter/space. | *To provide permanent & appropriate space/shelter for market day vendors. | * Provision of infra support | * Establishment of permanent space/shelter to market day vendors. | * % increase of market day vendors provided with permanent/ appropriate space/shelter | * 100% market day vendors provided with permanent/ appropriate space/shelter | | | 60,000.00 | |
| <i>Organization Focused</i> | | | | | | | | | | |
| JaSMED staff limited capacity to become functional unit to cater the needs of the WMES | Lacks skills training on JaSMED staff | Capacitated JaSMED staff | * Capacity Development | * Conduct and participate in any capdev activities * Conduct benchmarking | * No. of capdev activities and benchmarking attended/participated | * 4 capdev activities attended and 1 benchmarking activity participated | 50,000.00 | | | |
| | Limited operational budget | Increase operational budget | * Budget Allocation for JaSMED operation | * Propose budget allocation for JaSMED operation | * % increase in budget allocation for JaSMED operation | * 30% increase in budget allocation for JaSMED operation | 560,000.00 | | | |
| | No proper database system | Availability of enterprise database system/information | * Databanking system/information | * Updating on WMEs in Jagna * Establishment of a comprehensive database system on enterprises | * No. of updated profile on WMEs established * No. of comprehensive database system established | * 1 WMEs updated profile established * 1 comprehensive database system established | 100,000.00 | | | |
| Service road leading to MAO office not gender-responsive | Limited budget for the road improvement | Improved condition of MAO service road | * Improvement of MAO service road | * Concreting of MAO service road | * % completion of MAO service road concreting | * 100% of MAO service road completed | | | 100,000.00 | |
| Absence of information center/customer welfare's desk (MARKET) | Customers/ consumers have no venue where to raise issues/problems within the public market. | * To provide information dissemination * To accept clients comments/ suggestion | * Provision of infra and capacity development support | * Establishment of information center/customer welfares desk | * % of clients/customers satisfaction. | * 100% clients/customers satisfaction. | 50,000.00 | | 50,000.00 | |
| | | | | * Undergo capacity development trainings on customer welfare services | * No. of staffs train on capacity development on customer welfare services. | * 2 staffs trained on capacity development on customer welfare services. | 20,000.00 | | | |
| Lack of appropriate PPEs to 5 utility workers doing dirty jobs at the Market Office | PPEs used are not appropriate and substandard. | * To provide appropriate and standard PPEs to 5 utility workers doing dirty job. | * Appropriation of funds | * Purchase of appropriate and standard PPEs. | * No. of utility workers to be provided with appropriate and standard PPEs. | * 5 utility workers provided with appropriate and standard PPEs. | 20,000.00 | | 50,000.00 | |
| <i>Organization-focused</i> | | | | | | | | | | |
| No crisis center: failure to accommodate VAWC cases | Absence of Crisis /intervention center | Prioritization of the Establishment of CRISIS Intervention Center | Inclusion in the Grassroots Participatory Budgeting Process workshops | * Preparation of perspective * acquisition of lot/arrangement of location * Planning to Plan for the Operation | area for crisis center established | by end of CY 2015 | | | | MSWDO, LPRAP |
| <i>MNAO</i> | | | | | | | | | | |
| <i>Client-focused</i> | | | | | | | | | | |
| Malnutrition cases of underweight (cases of uw P5-58-1.55 SC-496-4.9 SC-496-49) | * no capacity to provide nutritious food * low income * large family size | To reduce no. of underweight cases | Supplemental Feeding * Manna Pack * Supplemental feeding of DSWD | * Operation timbang * daily supplemental feeding | *no. of pre-schooler and school children weigh * no. of children given mannpack feeding | 0 malnutrition for 2015 | 10,000.00 | | | MNAO,MNC |
| No Breastfeeding station at the LGU Working place and Market | * no designated area and budget for the establishment of the breast feeding area | Convenient and privacy of lactating mothers most specially to LGU employees & Women Clients | Compliance to GAD Code mandate | Construction of breastfeeding station at the LGU & Market | * installed breastfeeding at Market and LGU building | installed end of January 2015 | 20,000.00 | | | MEO,MNC,MARKET |

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| Lack of knowledge of parents on Nutritious foods and Balanced diet | *lack of Counselling/IEC on proper diet/ nutrition | To increased knowledge on nutritious foods and balance diet | Pabasa sa Nutrisyon | *Provide Dietary Counselling to parent school children and the elderly * Conduct Pabasa Nutrisyon in 33 Barangays | no. of parents attended to Pabasa sa Nutrisyon | 33 barangays conducted Pabasa sa Nutrisyon | 10,000.00 | | | MNC |
| * BNS and BHWS not gender-sensitive/gender responsive frontliner personnel | * lack of understanding on gender gaps | To heighten awareness on GAD and Magna Carta for Womens and others | Capacity Development | GST++ to barangay officials and functionaries | no. of participants conducted GST++ | 3 batches at 11 barangays each on the 2nd quarter | 20,000.00 | | | |
| BPLO | | | | | | | | | | |
| *Incomplete data banking of the lists of business establishment (information sheet not yet gender sensitive) | *e-tracs system not yet fully operational | To have a gender-sensitive business permit application forms and user friendly e-tracs system | Strengthening Business Permit and Licensing System of the LGU (On-Stop-Shop) | * Modification of business permit application forms (sex-disaggregated) * Full installation and implementation of etracs | | *Modified to sex-disaggregated business permit application forms * System generated summary of reports * Operational and user-friendly e-tracs system * no. of business permit applications | 100,000.00 | | | BPLO Team |
| MPDC Office | | | | | | | | | | |
| PDMS/CBMS database not updated and sex-disaggregated * not all indicators sex-disaggregated * limited budget for the survey * additional DRRM survey indicators | *non-integration of CBMS questionnaires of the GAD indicators based on the JMC 2013-01 * limited budget allocation for CBMS Survey | * To coordinate CBMS administrator/in-charge for integration of GAD indicators in the CBMS questionnaire * To utilized sex-disaggregated data for various development planning | Updating Municipal Poverty Database/Socio-economic profiling | * Conduct of CBMS Survey * Encoding and utilization of database for planning | *no. of HHS interviewed and posted to CBMS database * gender-responsive CBMS questionnaires | CBMS data available at end of 2nd Qtr of 2015 | 151,588.00 | | | MPDC |
| Non-compliant to Magna Carta of Women particularly on GAD Focal Points provisions | gender concerns in the barangays are more of compliance | 33 Barangay Focal Points organized and functional/GAD mechanisms present in selected barangays | Conduct monitoring and evaluation thru a memorandum order | Organize/re-organize Barangay Focal Points | Gender Mainstreaming cascaded to the barangay level | Executive Order/Issuance of the Creation | 20,000.00 | | | MGAD-C |
| Poor Knowledge on Gender-Based Analysis and Gender-Responsive Planning and Budgeting and GAD Monitoring and Evaluation Tools | Limited knowledge of key players and service providers of other GAD concepts | MGAD-C and staff and other LGU key players | Conduct monitoring and evaluation thru a memorandum order | Conduct Gender-Based Analysis and Gender-Responsive Planning and Budgeting and GAD Monitoring and Evaluation | enhanced knowledge and skills to plan, implement and monitor gender responsive PPS | Application of GAD Monitoring and Evaluation Tools | 20,000.00 | | | MGAD-C |
| non-functional committees and related structures provided in the GAD IRR | need to implement the GAD code through its IRR | GAD Office/Committees in place (with organizational plan based on its mandate and the GAD plan for the period) | Conduct monitoring and evaluation thru a memorandum order | implementation of committees and structures in the GAD IRR | sectoral concerns addressed in a functional council and its functionaries | Functional organizational structures in the LGU | 20,000.00 | | | MGAD-C |
| JACAMACO | | | | | | | | | | |
| Women micro entrepreneurs lack access to social protection services and welfare program | Women micro entrepreneurs have no capacity to pay the monthly contributions | increased access of women micro entrepreneurs to social protection services and welfare program | Aide to social protection and welfare services to women micro entrepreneurs | Identify and assess women micro entrepreneurs in membership of social protection services and welfare program | No. of Women micro entrepreneurs who are member of social protection services and welfare program | Enrollment to SSS | | | | DSWD |
| TOTAL | | | | | | | 3,956,588.00 | 3,296,588.00 | - | 660,000.00 |
| Prepared by:  MS. MARCIONILA E. REYES Chairperson, GAD Focal Point System | | | Approved by:  ATTY. FORTUNATO R. ABRENILLA Municipal Mayor | | | Date: 26 August 2014 | | | | |