



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

NOV 15 2019

ADMINISTRATIVE ORDER
No. 2019- 0054

SUBJECT: Guidelines on the Implementation of the Philippine Approach to Sustainable Sanitation (PhATSS)

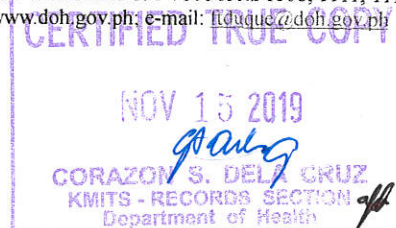
I. RATIONALE

Safe water, improved sanitation, and proper hygiene practices are essential for the country to achieve its health, social, and economic goals. To this end, the Department of Health (DOH) has issued Administrative Order 2010-0021, entitled "Sustainable Sanitation as a National Policy and a National Priority Program of the DOH". It aims to achieve Zero Open Defecation (ZOD) status and attain universal access to safe and adequate sanitary facilities by 2028 which are also the goals of the Philippine Health Agenda (2016-2022) and aligned with the health targets of the *FOUR*mula One (F1) Plus and the Sustainable Development Goals (SDG) of safely managed sanitation services by 2030.

However, nine (9) years after the sustainable sanitation policy has been issued, sanitation remains a public health problem. According to the 2017 Annual Poverty Indicators Survey, 6 percent of Filipinos still do not have toilets and are most likely practicing open defecation, while another 19 percent use unimproved sanitation facilities. This translates to an estimated 25 million Filipinos whose practices pose a serious threat to the population in terms of health, nutrition, protection, education, environment, and productivity.

Considering the variety of sanitation conditions at the local level, the Local Government Units (LGUs) require a practical and progressive program strategy to attain these policy targets and gradually achieve sustainable sanitation. By virtue of Presidential Decree 856 or the Sanitation Code of the Philippines, DOH is tasked to assist local health offices in developing public health programs. A monitoring and evaluation system shall also be put into place to be able to guide DOH and Local Government Units (LGUs) in planning a comprehensive and sustainable sanitation program to be able to meet national policy targets on sanitation.

Through the implementation of the Philippine Approach to Sustainable Sanitation (PhATSS), local governments shall be able to convert the national sanitation goals into doable steps. PhATSS allows LGUs to determine the best combination of programmatic approaches, technologies and services that need to be put in place based on the specific context of each geographical unit. Through the PhATSS verification and certification mechanism that tracks the situation of each community, it would be easier to assess LGU performance, take supportive action and mobilize resources towards the improvement of their sanitation conditions.



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II. OBJECTIVES

This Order aims to:

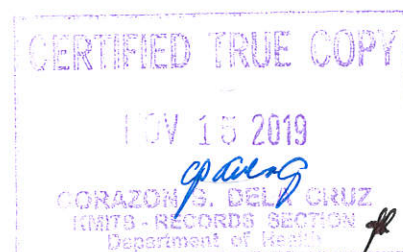
1. Provide the implementing guidelines to operationalize the national policy on sustainable sanitation (DOH A.O. 2010-0021) and achieve the SDG on sanitation;
2. Guide local health offices in assisting local sanitation planners and stakeholders in the formulation of local plans and interventions and assist LGUs to help them respond to the challenge of increasing access, especially of the poor, to sustainable sanitation, in a guided and progressive manner;
3. Provide LGUs a practical sanitation program strategy to gradually achieve sustainable sanitation; and
4. Contribute to the reduction of risks and diseases related to environmental sanitation as well as progressively achieve the SDG targets on sanitation in the Philippines.

III. SCOPE

This Administrative Order shall apply to all units of DOH, other concerned national government agencies (NGAs), Bangsamoro Autonomous Region of Muslim Mindanao (BARMM), Local Government Units (LGUs), and development partners engaged in the planning, implementation, and monitoring of environmental sanitation programs.

IV. DEFINITION OF TERMS

1. **Community-Led Total Sanitation (CLTS)** refers to an approach to achieve and sustain Zero Open Defecation (ZOD) status, utilizing Participatory Rural Appraisal methods for communities to assess their sanitation profile, analyze their defecation practices and its consequences, and plan actions to address the problem.
2. **Grade 0 (G0) or Open Defecation Status** is the status of the community wherein open defecation is being practiced, members of the community are not using sanitary toilet facilities, and human feces are openly visible or exposed to the environment.
3. **Grade 1 (G1) or Zero Open Defecation (ZOD) Status** is the status of the community wherein households have stopped practicing open defecation and are using sanitary toilet facilities, and no human feces are openly visible or exposed to the environment.
4. **Grade 2 (G2) or Basic Sanitation Status** is the status of the community wherein households, schools, child development centers, and public institutional facilities have their own sanitary toilets that are functional; and communities properly manage animal excreta and properly dispose their solid waste, in addition to maintaining the norm that open defecation is unacceptable.

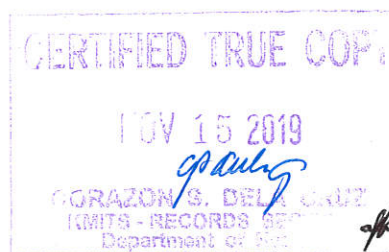


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5. **Grade 3 (G3) or Sustainable Sanitation Status** is the status of the community wherein households, private establishments and public institutional facilities have access to safely managed sanitation services; water service providers pro-actively ensure the safety of drinking water; and, the community can maintain its G2 status and the norm that open defecation is unacceptable.
6. **Household** refers to a social unit consisting of a person living alone or a group of persons who sleep in the same housing unit and have a common arrangement in the preparation and consumption of food.
7. **Open Defecation (OD)** is the presence of human excreta in open spaces, drains and bodies of water.
8. **Public Institutional Facilities** refer to government-operated and maintained facilities such as schools, child development centers, rural health units, barangay health stations, barangay halls, provincial, city or municipal halls, public markets, slaughter houses, hospitals, plazas, transportation terminals and ports, and evacuation centers.
9. **Philippine Approach to Sustainable Sanitation (PhATSS)** refers to a sanitation program strategy and monitoring framework that local governments use to move communities from open defecation status to sustainable sanitation status.
10. **Safely managed sanitation services** refer to where excreta are safely disposed on site or transported and treated and disposed in situ; stored temporarily and then emptied and transported to treatment off-site; or transported through a sewer with wastewater and then treated off-site.
11. **Sanitary or improved toilet** refers to an approved type of toilet facility used for receiving, safely containing (i.e., ensures hygienic separation of human excreta from human contact) and disposing human waste. The type of sanitary toilet includes the following as per NEDA Board Resolution No. 12, series of 1995: 1) Sanitary Pit Privy; 2) Ventilated Improved Pit; 3) Pour Flush Toilet to a receiving sewer, septic tank or leaching pit; and 4) Flush Toilet to a receiving sewer or septic tank.
12. **Unsanitary or unimproved toilet** refers to a toilet facility that does not safely contain nor dispose human waste (i.e., does not ensure hygienic separation of excreta from human contact).

V. GENERAL GUIDELINES

1. The DOH Central Office shall facilitate agreements with NGAs and other entities in carrying out the objectives of this Order.
2. The DOH Central Office through the Environmental-Related Diseases Division of the Disease Prevention and Control Bureau shall provide technical support in the implementation of PhATSS guidelines. The DOH Center for Health Development (CHD) Offices shall cascade the implementation of the same to LGUs.

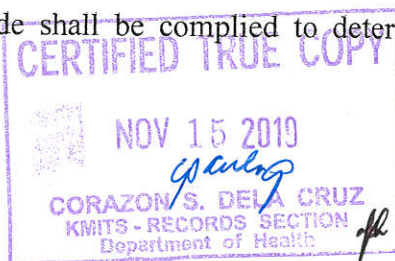


3. The national and regional Inter-Agency Committee on Environmental Health (IACEH/RIACEH) through its Water Supply, Sanitation and Health Technical Working Group (TWG), shall serve as the coordination body and the main technical assistance provider to LGUs, pursuant to Executive Order 489, series of 1991. This is to ensure alignment of contributions of other government agencies in partnership with other existing inter-agency technical groups (e.g. Inter-Agency TWG on Septage and Sewerage Management) in the implementation of this Order.
4. PhATSS implementation shall be guided by the principles of equity, participation, responsiveness, accountability and transparency. Implementation shall be anchored on a community-based participatory process that leads to positive behavior change among households and communities and that encourages progressively increasing demand for sustainable sanitation.
5. The selection of sanitation technologies and services shall be guided by existing national standards and take into consideration operational feasibility in terms of environmental and geographical conditions; affordability; and cultural and gender acceptability.
6. LGUs shall establish an enabling environment towards a sustainable sanitation program. Sanitation improvement shall be prioritized in barangays which have elevated levels of open defecation, those that are under-served, and those which have the lowest levels of sanitation conditions, as determined by their respective LGUs. LGUs that are in a position to achieve G3 or sustainable sanitation status can do so.
7. Budget shall be made available by all concerned units and offices of DOH, other relevant government agencies, LGUs to support the implementation of this Order. Funding purposes shall include, but not limited to: inter-agency coordination, capacity development, monitoring, provision of incentives and rewards, communication campaigns, and materials augmentation.
8. Funding for roll-out of communication campaigns and packages shall be provided at the national, regional, provincial, and municipal levels. Where relevant, LGUs shall engage in sanitation financing to support disadvantaged persons or groups or to bridge the viability of sanitation services.

VI. SPECIFIC GUIDELINES

1. PhATSS levels as basis for LGU sanitation programming

- a. LGUs shall endeavor to progressively advance towards the highest level of PhATSS following the targets set forth in Annex 1.
- b. The four sanitation levels of PhATSS shall serve as the basis for LGUs to determine their baseline status and to identify priority program components suited to their target level (see Annex 2).
- c. All of the following criteria per grade shall be complied to determine the sanitation level of the LGUs:



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Sanitation Level	Criteria
Grade 0 (G0) Open Defecation	<ul style="list-style-type: none"> i. Open defecation is being practiced ii. There are members of the community who are not using sanitary toilet facilities iii. Human feces are openly visible or exposed to the environment
Grade 1 (G1) Zero Open Defecation (ZOD)	<ul style="list-style-type: none"> i. Open defecation is not practiced; ii. 100% of households have access to sanitary toilets, either through individual household facilities, shared toilets (provided a maximum of 3 households and not more than 15 individuals share one facility), or communal toilets (provided there is no space for household toilets); iii. Availability of water and soap at or near the toilet in all household toilets; iv. Proper disposal¹ of excreta and/or diapers of children, elderly and persons with disabilities; v. Existence of a functional coordinating body in the LGU that addresses water, sanitation, and hygiene (WASH) issues; vi. Existence of a local ordinance and a functional ZOD monitoring team to sustain ZOD status; vii. Presence of an approved action plan/operational plan and funding allocation to reach G2 status.
Grade 2 (G2) Basic Sanitation	<ul style="list-style-type: none"> i. Open defecation is not practiced and all households are properly disposing sanitary napkins and diapers; ii. 100% of households have their own sanitary toilet, and have available water and soap at or near their toilets; iii. All schools have safe, functional, and gender segregated toilets, with overall pupil to toilet seat ratio not exceeding 101:1; iv. All Child Development Centers (CDCs) have at least one age-appropriate sanitary toilet that is safe and functional; v. All other public institutional facilities have, at least, one functional sanitary toilet; vi. All households and public institutional facilities are practicing segregation and/or composting of solid waste at source; vii. Presence of functional materials recovery facility in the barangay; viii. Availability of a mechanism to sustain the local ordinance on ZOD, in addition to creating a local ordinance on having toilets in all households, schools, CDCs, and other public institutions, animal excreta management, solid waste management and a monitoring mechanism to sustain G2 status; and ix. Sanitation financing to reach G3 status allocated through localized sectoral master plans and local development plans.
Grade 3 (G3): Sustainable Sanitation	<ul style="list-style-type: none"> i. Verified and certified G2 status ii. All schools, CDCs, and other public institutional facilities, including healthcare facilities, have met the applicable national

¹ Proper disposal means any of the following ways: (1) disposing feces in the toilet then throwing the soiled diaper in a pit, if available, or (2) disposing used napkins and diapers in a separate garbage bag and disposed as solid waste through local solid waste collection facility, as per DENR.



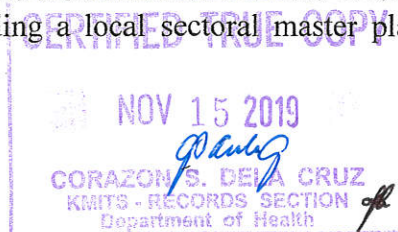
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	<p>standards for sanitation facilities, including PWD-accessibility and gender-segregation</p> <ul style="list-style-type: none"> iii. All households, schools, CDCs, and other public institutional facilities, including healthcare facilities, have access to safely managed sanitation services appropriate to their toilet type; iv. All households, schools, CDCs, and other public institutional facilities are practicing segregation and/or composting of solid waste at source and have access to solid waste management services; v. Presence of functional drainage system, where it is needed; vi. All water service providers have water safety plans that are monitored and audited by the Municipal Local Drinking Water Quality Committee; vii. Sustain enforcement of all local ordinances on sanitation, and ensure existence of local ordinances on water safety plans, on safely managed sanitation services, and on functional drainage systems; and viii. Localized sector masterplan and monitoring mechanism integrated in relevant local development plans and budgeting documents to sustain G3 status.
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2. PhATSS Implementing Mechanisms

a. Creating an enabling environment towards a sustainable sanitation program

- 1) **Institutional Mechanisms at the Local Levels.** LGUs shall organize a local coordination body to implement this Order, either through an existing local inter-sectoral body or by establishing a local coordination body to oversee water and sanitation concerns. The local coordination body organized at the provincial, municipal/city, and barangay levels, shall be responsible for planning, budgeting, and monitoring, assessing, and verifying of water and sanitation programs and services, including PhATSS sanitation levels.
- 2) **Policies.** LGUs shall formulate and promulgate local ordinances, executive orders, and/or resolutions to implement the different program components of this Order based on the recommendation of the local coordination body.
- 3) **Sectoral Analysis, Planning and Funding.** On a regular basis, LGUs shall conduct or use available sectoral analysis to identify practices, resources, needs and gaps in implementing a sustainable sanitation program. LGUs shall include in the sectoral analysis the results of various WASH assessments from different entities such as, but not limited to, schools, day care centers, and healthcare facilities. Such sectoral analysis, including the assessment of PhATSS level, shall be the basis for planning and funding a local sectoral master plan following



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national SDG targets. These plans shall be integrated into the local development plans and local investment programs, including the Local Investment Plan for Health (LIPH).

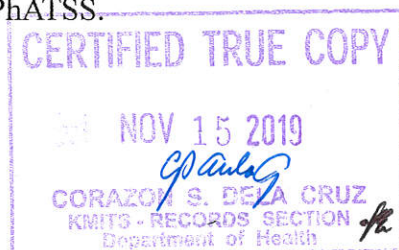
- 4) **Capacity Building.** With support from relevant government agencies at the regional and provincial levels, LGUs shall invest in enhancing the capacity of staff and persons involved in PhATSS implementation.
- 5) **Monitoring.** LGUs, through their respective local coordination bodies, shall regularly monitor and submit reports. Progress reports are expected from the barangay and consolidated at each level – by the Sanitary Inspector (municipality or city), and Sanitary Engineer (province); and shall be shared every six months to local chief executives and the WASH inter-sectoral coordination bodies for planning and budgeting purposes. The list of indicators are provided in Annex 3.

Consolidated monitoring reports and results of PhATSS service level certification shall feed into relevant national monitoring systems, such as the DOH's Field Health Services Information System (FHSIS), among others.

- 6) **Recognition, Rewards, and Incentives System.** DOH, through CHDs, shall introduce a recognition, rewards, and incentives systems for municipalities, cities and provinces that have achieved LGU-wide PhATSS certification. The LGUs, on the other hand, shall recognize barangays, communities, and households. The sanitation levels of PhATSS shall be used as basis for giving recognition/ rewards/ incentives to LGUs, which have been certified as fully compliant by the LGU PhATSS Verification Team.
- 7) **Knowledge Management and Accountability.** Each DOH CHD and its catchment provinces shall review progress and effectiveness of PhATSS implementation on a regular basis, and share the learnings, including any innovations and best practices. LGUs shall document and publicly share best practices and lessons learned in its implementation, with support from DOH and other NGAs. Learning visits to other communities implementing PhATSS are encouraged.

b. Stimulating Participatory Demand Creation

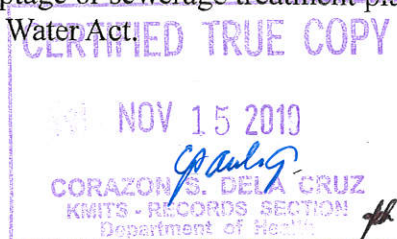
- 1) **Advocacy with Local Chief Executives and Other Local Officials.** The DOH Central Office, DOH CHD, through the Provincial Department of Health Office (PDOHO)'s Development Management Officer (DMO) or the DOH CHD Regional Sanitary Engineer or the Regional Coordinator – Environmental Health Program and Regional DILG, shall lead the conduct and/or support advocacy activities to gain the political commitment and support of the local chief executives and other officials in implementing PhATSS.



- 2) **Participatory Planning.** LGUs, through the local coordination bodies, shall involve community members, particularly the disadvantaged persons/groups, people's organizations, NGOs, and private sector representatives in problem identification, analysis, objectives and priority setting, action planning and program monitoring.
- 3) **Community-Led Total Sanitation (CLTS) Approach.** In areas where open defecation is predominantly practiced, LGUs shall be guided by the CLTS approach to trigger communities in changing their sanitation behavior. The LGUs may form and train a CLTS Triggering Team.
- 4) **WASH Communication Campaigns.** LGUs shall utilize WASH communication campaigns, such as that of *Goodbye, Dumi! Hello, Healthy!* and other related communication packages, to encourage barangays to eliminate open defecation practices, improve their sanitation level, and reinforce proper sanitation and hygiene practices. These behaviors change communication activities shall engage different population segments of the community using audience-specific communication tools.

c. Increasing access to affordable and appropriate sanitation supplies and services

- 1) **Targeted Assistance to Disadvantaged Persons/Groups.** LGUs shall define and identify disadvantaged persons/groups that shall be supported to improve their sanitation facilities. Preferably, the assistance shall prioritize those disadvantaged persons/groups living in barangays that have achieved G1 status. LGUs shall decide on the form and value of the assistance to be provided by the local government.
- 2) **Strengthening Access to Credit for Business Development and Households.** LGUs shall facilitate linkages between microfinance institutions (MFIs) and local business or providers of sanitation supplies and services. LGUs shall also facilitate households' access to information on financial or credit services for sanitation facility improvement.
- 3) **Sanitation Marketing.** LGUs shall promote various sanitation options that are affordable and appropriate and shall motivate households to adopt options that best fit their situation. LGUs may partner with the private sector to strengthen local supplier capacity and/or expand the variety of sanitation supplies and services.
- 4) **Septage and Sewerage Management.** LGUs shall work with relevant stakeholders to develop and implement a septage / sewerage plan including the construction, operation, and maintenance of related facilities with support from other resource partners through the National Sewerage and Septage Management Program (NSSMP). LGUs shall also provide land where the septage or sewerage treatment plant shall be built, as specified in the Clean Water Act.



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- 5) **Solid Waste Management.** LGUs shall develop and implement an approved 10-year solid waste management plan in accordance with the Solid Waste Management Act (R.A. 9003), including the construction, operation, and maintenance of related facilities.
- 6) **Drinking-Water Quality Management.** Based on DOH AO 2017-0010 (Philippine National Standards for Drinking Water), LGUs shall establish and operationalize a Local Drinking Water Quality Monitoring Committee (LDWQMC) that shall monitor the quality of safe drinking water. In addition, LGUs shall ensure that all drinking-water service providers formulate and implement their Water Safety Plans (WSPs).

d. Mainstreaming Climate Change Action (CCA) and Disaster Risk Reduction and Management (DRRM)

In support of RA 10121 (Philippine Disaster Risk Reduction and Management Act of 2010), DOH, LGUs, NGAs and other development partners shall ensure that local CCA and DRRM plans include WASH in their climate change adaptation, disaster prevention, mitigation, response and recovery actions. The DRRM plans shall ensure that evacuation centers have safe water supply and safe, functioning and gender-segregated toilets. Similarly, PhATSS implementation shall contribute to reducing vulnerability of households and communities through improved WASH behaviors, climate and disaster risk-informed sanitation facility construction and other resilience-building strategies.

VII. ROLES AND RESPONSIBILITIES

1. DOH Central Office – Disease Prevention and Control Bureau

- a. Lead the coordination and monitoring of PhATSS implementation through the Water Supply, Sanitation and Health TWG of the national IACEH or any other relevant sector coordination body.
- b. Develop, review, and update policies, plans, technical guidelines, manual of operations, and training manuals that shall be the reference of LGUs.
- c. Hold advocacy and knowledge management activities with the NGAs and DOH CHDs.
- d. Undertake capacity development and technical assistance to CHDs and other DOH's partner agencies.
- e. Utilize resources, in accordance with existing budgets of programs, such as funds, human resources and materials for inter-agency consultations, capacity building activities, sanitation materials, incentives and rewards, and real-time monitoring and evaluation system.
- f. Consolidate reports from the CHDs and DOH-deputized agencies and use the data for policy development, planning, and advocacy.
- g. Develop communication campaigns in collaboration with other national government agencies and development partners.



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2. DOH Center for Health Development (CHDs)

- a. Utilize the regional IACEH or any other relevant sector coordination body for coordinating and monitoring PhATSS implementation.
- b. Hold advocacy activities with the LGUs and other partners to support PhATSS implementation.
- c. Ensure that regional health plans are supportive of the technical assistance requirements of LGUs as indicated in their local WASH sectoral plans.
- d. Roll-out PhATSS by providing technical support, augmentation of sanitation materials or subsidies, and provision of incentives / rewards.
- e. Allocate funds to augment LGU resources in the implementation of these guidelines.
- f. Monitor the progress of PhATSS implementation through the monitoring system established (see Annex 3 and 4) and share reports to the DOH Environmental Related Diseases Division (ERDD) for policy development, planning, and investment purposes.
- g. Consolidate and analyze reports submitted by all PHOs and chartered cities and use the data for policy development, planning, recognition and advocacy.

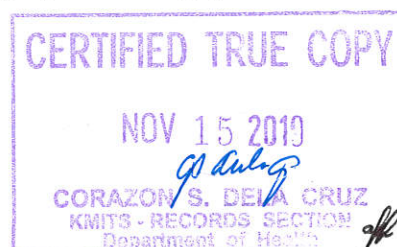
3. Province, Municipality, City, and Barangay LGUs

Following their respective mandates and jurisdiction:

- a. Enact and enforce local policies and ordinances to implement PhATSS guidelines.
- b. Form or designate a local coordination body that shall be responsible for program implementation, monitoring and evaluation.
- c. Mobilize the participation of key stakeholders in program planning, implementation and monitoring.
- d. Consolidate, verify, and analyze monitoring reports and submit every quarter to their respective DOH Center for Health Development office.
- e. Coordinate with other LGUs, national agencies and other stakeholders to support PhATSS implementation and capacity development, and to share reports and lessons learned.
- f. Advocate sustainable sanitation to their respective constituents using communication materials produced by DOH, other NGAs, or development partners.

4. Department of the Interior and Local Government (DILG)

- a. Support the conduct of advocacy activities at the LGU level towards effective delivery of basic WASH services.
- b. Participate in local WASH sectoral planning and budgeting at the provincial and city/municipal levels and ensure that sectoral targets and programs are integrated in the LGU's development plans.
- c. Include sanitation facilities in the Assistance to Municipalities (AM) Program and SALINTUBIG menu of services, and in other relevant programs.
- d. Participate in the national and regional IACEH, and inter-sectoral coordinating bodies at the provincial, city/municipal, and barangay level on WASH.



5. Department of Public Works and Highways (DPWH)

- a. Provide guidance on achieving specific criteria under the PhATSS G3 status related to the NSSMP, through their participation in the national and regional IACEH, or other relevant program coordination meetings.
- b. Provide technical and financial assistance to qualified LGUs on the feasibility study preparation; and on the implementation of the septage or sewerage management plan.
- c. Promote PhATSS within relevant units of DPWH.
- d. Coordinate with DepEd and DSWD to ensure that all schools and evacuation centers have appropriate WASH facilities, following DOH approved sanitation facility designs.

6. Department of Environment and Natural Resources (DENR)

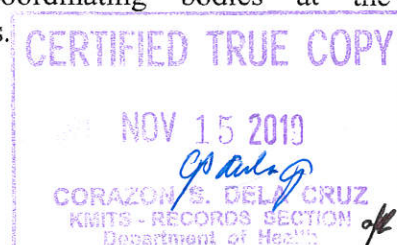
- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS, related to the Solid Waste Management Act, and the Clean Water Act, through their participation in the national and regional IACEH.
- b. Participate in PhATSS Verification and Certification processes to be done at the barangay/ municipal/ city/ provincial levels, specifically for G2 and G3 verification.
- c. Support the promotion of PhATSS within DENR Environmental Management Bureau.
- d. Support and provide capacity building for LGUs in operationalizing the designated Water Quality Management Area (WQMA) and implement the WQMA Action Plan.
- e. Provide funds for the preparation of the feasibility study for septage treatment plants in designated WQMA.

7. Department of Education (DepEd)

- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS in relation to the WASH in Schools Program, through their participation in the national and regional IACEH, or in other relevant inter-sectoral coordinating bodies at the provincial, municipal/city, and barangay levels.
- b. Participate in PhATSS Verification and Certification processes to be done in the barangay/municipal/city/provincial levels, specifically for G2 and G3.
- c. Share the report on the status of WASH in Schools program implementation to the Provincial / City/ Municipal WASH Council.
- d. Support the promotion of PhATSS within relevant units of DepEd and in schools.

8. Department of Social Welfare and Development (DSWD)

- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS related to WASH in Early Childhood Care Development (ECCD) program, through their participation in the national and regional IACEH, or in other relevant inter-sectoral coordinating bodies at the provincial, municipal/city, and barangay levels.



- b. Conduct capacity building activities for DSWD regional, provincial, and municipal counterparts on WASH in ECCD.
- c. Coordinate with the Provincial Health Office in rolling out sanitation related programs to ensure program coherence.
- d. Participate in PhATSS Verification and Certification processes at the barangay/ municipal/ city/ provincial levels, specifically for G2 and G3.
- e. Ensure that evacuation centers have appropriate WASH facilities, following the DOH approved sanitation facility designs.

9. National Economic and Development Authority (NEDA)

- a. Integrate and identify opportunities for financing of PhATSS under the Water Supply and Sanitation Masterplan.
- b. Monitor the achievement of overall sectoral targets under Water Supply and Sanitation Masterplan, particularly on sanitation.
- c. Monitor the integration of WASH in sectoral development plans at the regional level.
- d. Participate in the national and regional IACEH.

10. Other National Government Agencies (NGAs)

Other agencies that shall be involved in the implementation of PhATSS include, but not limited to: Early Childhood Care and Development (ECCD) Council, Local Water Utilities Administration (LWUA), National Council on Disability Affairs (NCDA), National Commission on Indigenous Peoples (NCIP), and Philippine Information Agency (PIA). Within each agency's mandate and jurisdiction, contribute to PhATSS strategy roll-out and achievement of national sustainable sanitation targets:

- a. Provide technical guidance to LGUs in ensuring that sanitation program meet the needs of persons with disabilities, indigenous people, and other disadvantaged sectors.
- b. Support the conduct of advocacy and communication activities.
- c. Coordinate with DOH and other relevant local authorities in implementing programs/ projects/ activities that are related to or may affect PhATSS implementation.

11. Development Partners

- a. Coordinate with DOH and the relevant local authorities in promoting and implementing PhATSS.
- b. Submit to the Municipal/Provincial/Regional Center for Health Development Office reports on the status of their respective program implementation.



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VIII. REPEALING CLAUSES

The provisions from previous issuances and other related orders that are inconsistent or contrary to this order are amended and modified accordingly.

IX. EFFECTIVITY

This order shall take effect immediately.


FRANCISCO T. DUQUE III, MD, MSc.
Secretary of Health

