

2020



**ZUELLIG FAMILY  
FOUNDATION**

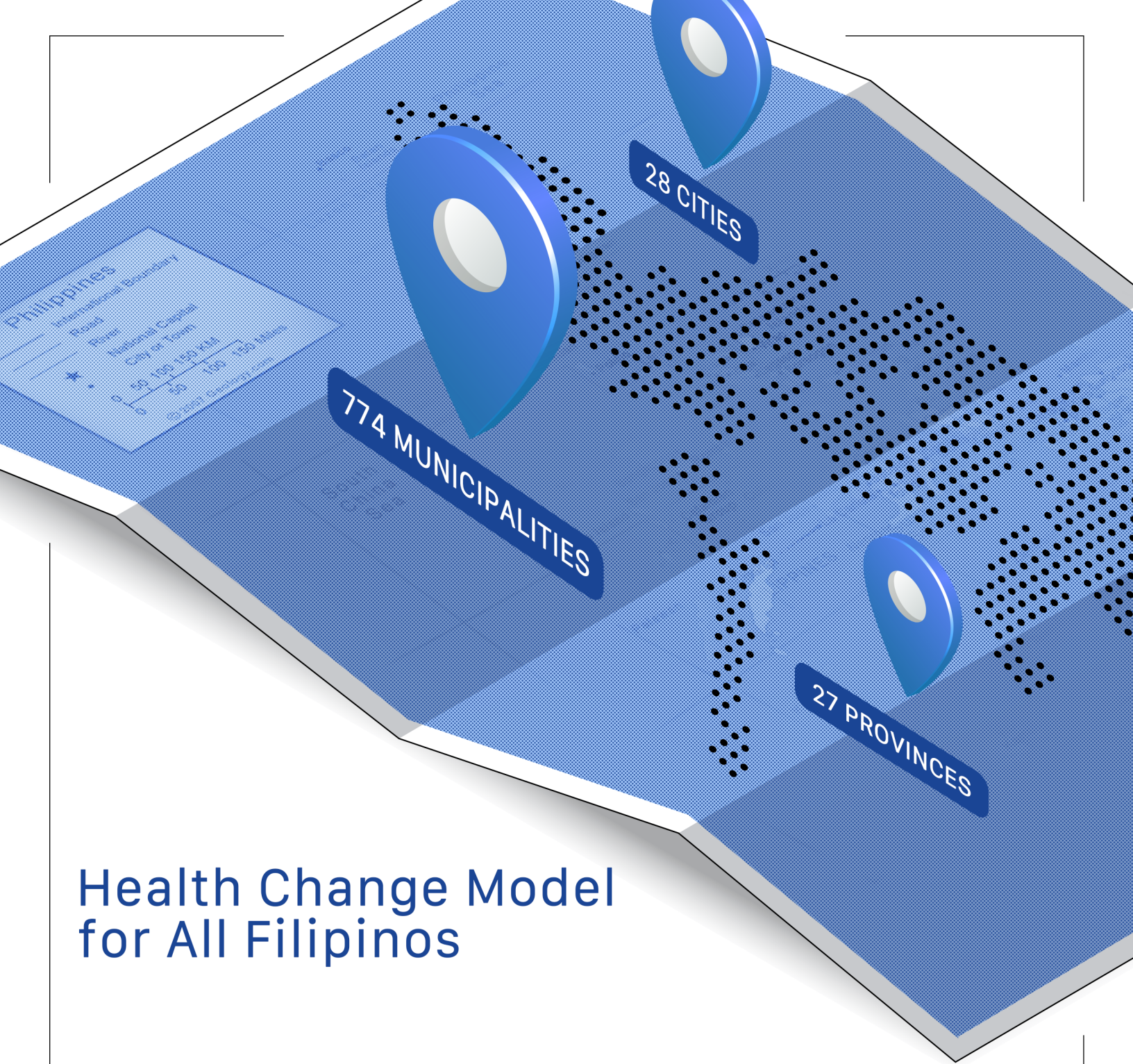
# Annual and Sustainability Report

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## About the Cover

Amid the pressure of the pandemic challenges, the triangular components of the ZFF Health Change Model—training, practicum, and coaching—are deployed to bring stability and security to local health systems.



# Health Change Model for All Filipinos

(GRI 102-16)

## Vision

The Zuellig Family Foundation (ZFF) is a catalyst for the achievement of better health outcomes for all Filipinos.

## Mission

ZFF enables local health systems to achieve better health outcomes for all Filipinos through effective leadership and governance in partnership and cooperation with key stakeholders.



Ernesto D. Garilao  
Chairman

(GRI 102-14)

# Certainty of Purpose in Uncertain Times

The year 2020 was like no other for public health. The COVID-19 pandemic highlighted the imperatives of clarity of purpose, the definition of mission-critical programs, and persistence in effective actions.

Amid the havoc wreaked by the pandemic on global and local economies and health systems, the Foundation kept its momentum to address systemic issues and public health emergencies in partnership with local government unit (LGUs).

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## COVID-19 Response

ZFF had to adjust quickly. When COVID-19 was declared a pandemic, we knew the local health systems were unprepared. We initiated pandemic preparedness and response interventions to help partner provinces respond when lockdowns ensued.

As a result, our three partner provinces kept their R-naught or “spreadability” of COVID-19 near or at 1 for most of the time.

In addition to our programs and interventions, the Foundation made a pandemic-specific donation of ₱100 million, with ₱40 million going to ZFF-assisted LGUs for their immediate requirements for testing centers, ventilators, and personal protective equipment.

## Malnutrition

In cities under our nutrition partnership program with Nutrition International, local governments that did not divert their nutrition workforce to COVID-19 duties showed encouraging results, especially in reducing nutritionally at-risk pregnant women.

## Teenage pregnancies

The pandemic exacerbates the problem of teenage pregnancies. With impeded delivery of family planning services in 2020, the Commission on Population and Development (PopCom) projected the unmet need for family planning among women of reproductive age to affect 3.7 million, of which 178,000 are teenagers.

Unfortunately, we observed the same pattern in six of the 10 municipalities in Mindanao where we have partnerships with the United Nations Population Fund.

During the year, we signed with the Bill and Melinda Gates Institute for Population and Reproductive Health a 5-year \$2 million co-funded and co-managed program, The Challenge Initiative (TCI), which aims to reduce teenage pregnancies in cities. The program will maximize the synergy between our expertise in health leadership and governance and TCI’s global best practices. The Philippine initiative joins TCI’s regional hubs in East Africa, Francophone West Africa, India, and Nigeria.

### 2021 to 2030

Public health will remain at center stage in the coming years, with COVID-19 being a major factor. The goal is a resilient health system that reduces inequalities, improves health indicators faster, and is responsive to natural and man-made disasters and biohazards accelerated by climate change.

#### Our response to health challenges

Given the magnitude of the country's health challenges and our limited resources, we maximize our contributions by building on the gains made in health leadership and governance, knowing that political leaders transformed into health champions generate benefits far greater than the cost of training and coaching.

Likewise, we will remain in areas where we have gained traction – operationalizing Universal Health Care (UHC) in local health systems and reducing stunting and teenage pregnancies, which are the three health challenges with great social, health, and economic consequences.

#### Our project life cycle approach

We are shifting to a project life cycle approach in addressing health challenges. Based on our theory of change, we establish proof of concept. Our learning agenda generates new knowledge for the improvement of program design, implementation, and capacity-building, and scale-up of interventions to other LGUs.

#### Universal Health Care

The UHC law of 2019 is a game-changer for the Philippine health system, giving the disadvantaged and marginalized Filipinos guaranteed access to health services at no cost.

We have operationalized UHC in three provinces – making local health systems UHC-responsive while strengthening primary health care. We will share our approach and learnings with other provinces in the coming months.

#### Stunting

While malnutrition and stunting rates are expected to worsen, our intervention for the first 1,000 days will prevent the drastic increase in wasting and stunting for the next two years. Our nutrition models will be ready for scale-up in 2022 in provinces identified in the Philippine Plan of Action for Nutrition.

#### Adolescent pregnancies

The reduction of teenage pregnancies will be a priority in the next decade. Our five-year partnership with Gates Institute and PopCom will bring the approach to 12 cities by 2021.

#### New competencies for local chief executives

The application and effectiveness of our health interventions will depend on the ability of our local government partners and their health leadership teams to build resilient health systems while adapting to changing and uncertain environments. We have been redesigning our training interventions to develop agile leadership competencies.

#### Strategic partnerships for scale-up

To implement our scale-up strategy, we will collaborate with academic partners in developing training programs relevant to the UHC implementation, nutrition, and adolescent sexual and reproductive health.



Bataan uses a reverse transcription polymerase chain reaction (RT-PCR) machine (photo, right) from ZFF's COVID-19 response assistance to partner local government units. Part of the ₱100-million donation also went to Project Kaagapay and was used to buy ventilators and personal protective equipment for the Philippine General Hospital (photo, left) and other COVID referral hospitals.

Likewise, we will support our government partners in acquiring the internal expertise to train and coach local government officials in leadership and governance.

As we solidify our strategic partnerships with the government, development agencies, and foundations, we will engage the private sector in collective action for faster improvement of health outcomes.

I wish to thank our government and development partners for their support. I thank our dedicated staff whose engagement with the local government partners made the work of attaining better health outcomes possible. Finally, I thank our board of trustees for their continued guidance, time commitment, and support. ■



Austere A. Panadero  
Executive Director



Anthony Rosendo G. Faraon, M.D.  
Deputy Executive Director



Ramon R. Derige  
Deputy Executive Director

## Pivoting in the Pandemic

At the start of 2020, our teams were preparing for the effects of COVID-19 on the Foundation's operations and programs. Soon after the lockdown in March 2020, we aligned the health leadership and governance framework for the COVID-19 pandemic with the government's PDITR (prevention, detection, isolation, treatment, and reintegration) strategy. This was incorporated into our ongoing Provincial Leadership and Governance Program in the provinces of Agusan del Sur, Aklan, and Bataan. Its modifications and lessons were shared immediately with other ZFF programs for provinces, cities, and municipalities.

Our staff's adeptness in the use of IT and our online learning platform enabled us to continue providing training, coaching, and mentoring sessions, interrupted only by poor internet connectivity in the rural municipalities. When restrictions eased, we selectively allowed the onsite deployment of staff to provincial cities and municipalities for limited face-to-face interactions.

In the provinces and cities of our Institutionalization of Health Leadership and Governance Program (IHLGP), we could not implement our comprehensive COVID-19 interventions since the program completion was set for September 2020. During the three-year run of the IHLGP, local chief executives developed competencies to quickly mobilize local leaders, community members, and private stakeholders to act collaboratively in containing the spread and effects of COVID-19.



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In cities where we work on malnutrition, the improved information system identified the most nutritionally at-risk mothers, infants, and children up to two years. Frontloading the food security and barangay (village)-level nutrition activities helped the cities prevent the drastic deterioration of nutrition indicators during the pandemic.

Our trained youth leaders took advantage of their municipalities' COVID-19 assistance activities to disseminate information on adolescent sexual and reproductive health facts and services.

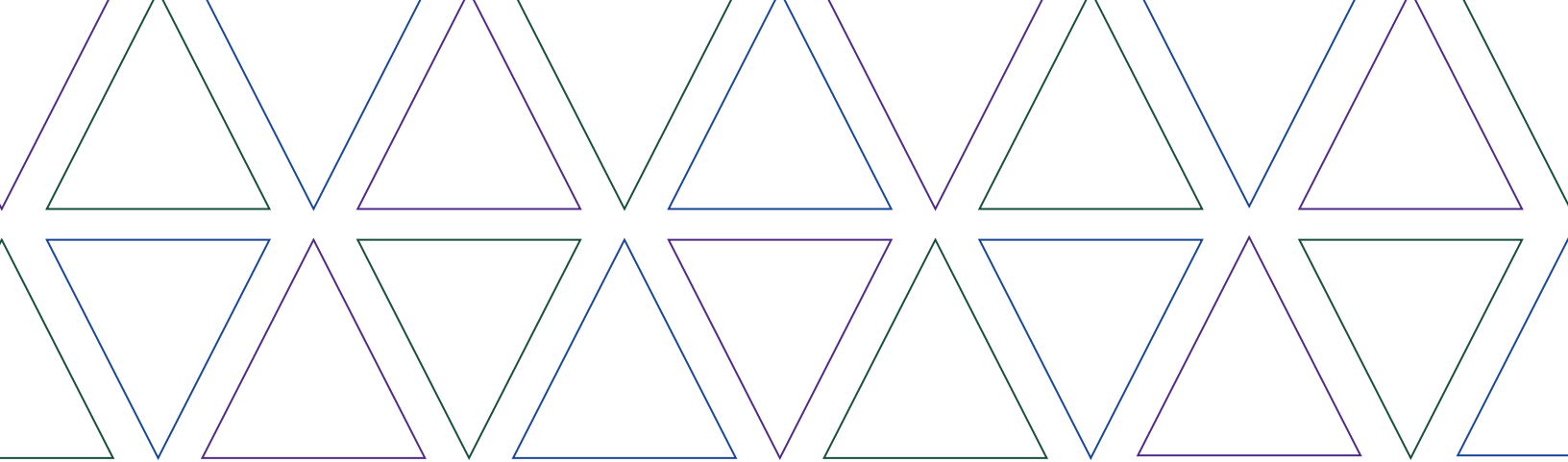
### **Help from experts and partners**

Our pandemic response intervention benefitted from the expertise of individuals and organizations. Public health experts led by former Health Secretary and ZFF trustee Dr. Manuel Dayrit coached governors and their health teams to address health system gaps. Others helped the local government units (LGUs) prepare for projected COVID-19 scenarios, organize community-based pandemic response programs, and deliver effective risk communications.

ZFF's partner non-government organizations (NGOs) and agencies supported our endeavors with on-the-ground programs like food pack distribution and dissemination of critical knowledge on the impact of COVID-19 on nutrition and teenage pregnancies.

### **Uninterrupted interventions**

We experienced both the Foundation's strengths and limitations amid a work environment that was severely disrupted by the pandemic. Against a backdrop of increased uncertainties, we are encouraged by the accomplishments of our partner-LGUs. We are confident that our programs have helped sharpen the leadership skills and governance capacities of local leaders to provide effective health care services and realize better health outcomes. ■



(GRI 102-2)

# Our Three Focus Areas

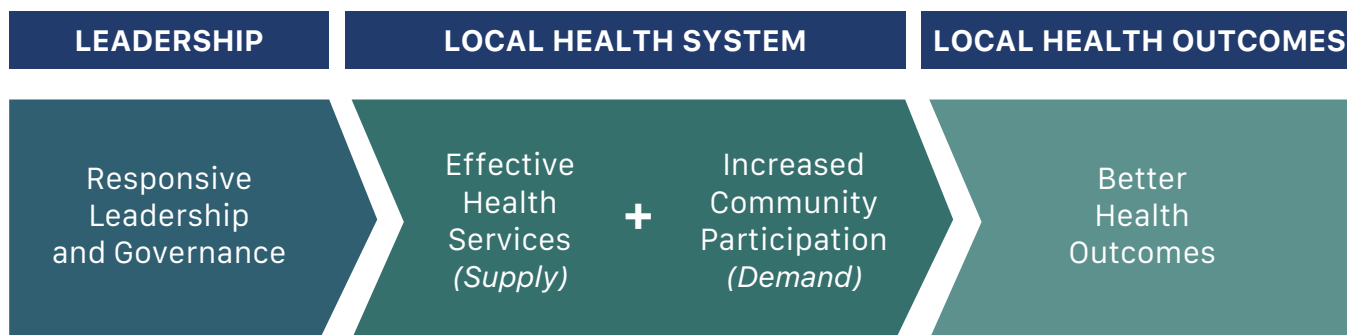
## Local Health Systems

### Nutrition (First 1,000 Days)

### Adolescent Sexual and Reproductive Health

Since 2008, the Foundation has deployed the ZFF Health Change Model to help local governments create local health systems that are responsive to the needs of their constituents. The primary measure of success has been and continues to be the improvements of maternal health outcomes. Simultaneously, we now pivot to nutrition and adolescent sexual and reproductive health. By focusing on nutrition, specifically the first 1,000 days, the well-being of mother and child is protected during the critical period from conception until two years. High-risk pregnancies are avoided through the Foundation's leadership and governance interventions that help prevent problematic pregnancies among adolescent girls.

#### ZFF Health Change Model Training + Practicum + Coaching



The ZFF Health Change Model promotes greater accountability among local health leaders in creating health care systems that are responsive to the needs of the vulnerable and disadvantaged. Interventions include transformative training, coaching, mentoring and practicum.

(GRI 102-4, 102-6)

### LOCAL HEALTH SYSTEMS

#### Provincial Leadership and Governance Program

Agusan del Sur  
Aklan  
Bataan

#### Institutionalization of Health Leadership and Governance Program

#### Regional Department of Health Offices

Region VI - Western Visayas  
Region IX - Zamboanga Peninsula  
Region X - Northern Mindanao  
Region XII - SOCCSKSARGEN  
Bangsamoro Autonomous Region in Muslim Mindanao

#### Provinces

Antique  
Basilan  
Guimaras  
Misamis Oriental  
Sarangani  
South Cotabato  
Sultan Kudarat  
Tawi Tawi  
Zamboanga del Norte  
Zamboanga del Sur

#### Cities

Cagayan de Oro  
Dipolog  
General Santos  
Iligan  
Zamboanga  
Koronadal

### NUTRITION

#### City Nutrition and Governance Program

Tacurong  
Tagum  
Puerto Princesa

#### Provincial Nutrition and Governance Program

Northern Samar  
Samar  
Zamboanga del Norte  
Basilan  
Sarangani

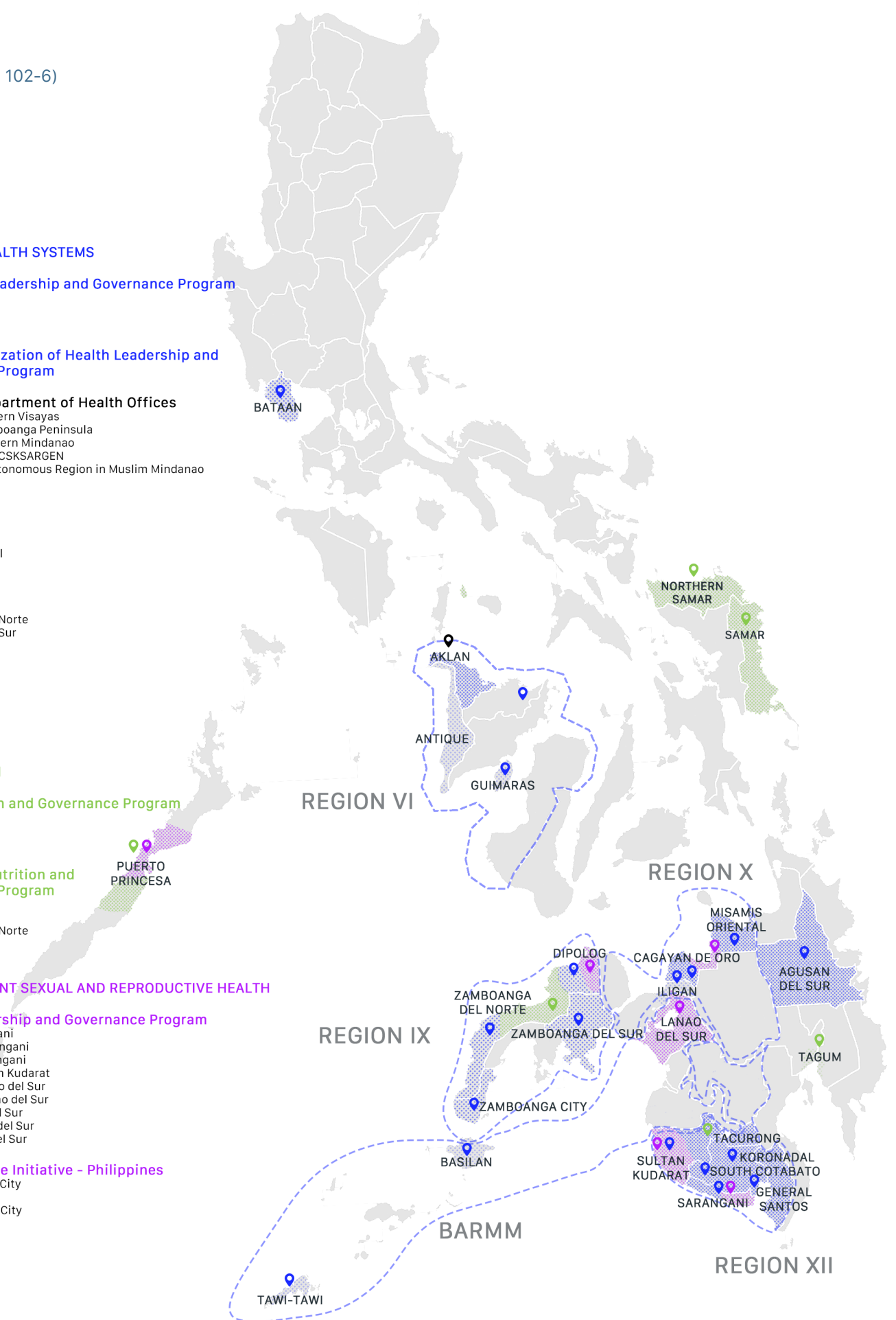
### ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

#### Youth Leadership and Governance Program

Maitum, Sarangani  
Malapatan, Sarangani  
Malungon, Sarangani  
Columbio, Sultan Kudarat  
Balindong, Lanao del Sur  
Kapatagan, Lanao del Sur  
Masiu, Lanao del Sur  
Piagapo, Lanao del Sur  
Taraka, Lanao del Sur

#### The Challenge Initiative - Philippines

Cagayan de Oro City  
Dipolog City  
Puerto Princesa City



## IHLGP for Systems Improvement and Crisis Response

The Institutionalization of Health Leadership and Governance Program (IHLGP), a partnership with the United States Agency for International Development (USAID), began in 2017 and ended in 2020. It was a second-cycle partnership that covered five Department of Health (DOH) regional offices, 10 provinces, and six cities.

### Improved relationships

Designed for DOH regional directors to be actively involved in the health planning and programming of LGUs, the IHLGP improved working relations between the DOH regional offices and the local government units (LGUs), resulting in faster implementation of provincial and city health reforms and better regional health outcomes (see page 12).

Relationship-building was identified as a promising intervention in USAID's "Good Practices & Promising Interventions (GPPI): Engaging Local Chief Executives to Build Local Capacity and Strengthen Health Systems." The good practices were coaching, use of roadmaps and deep dives to immerse in on-the-ground health conditions. Accordingly, these GPPIs "helped lay the foundation for introducing Universal Health Care (UHC) reform efforts and for timely, quick and coordinated COVID-19 response."

### Health crises

The end-line study of Makabuhay<sup>1</sup> cited the DOH regional directors', governors', and city mayors' improved capacities to mobilize people, promote teamwork, and innovate as among the notable contributors to reforming local health system and establishing functional service delivery network, a contributing factor

in building the health care provider network required under the 2019 UHC Act (see page 13 for the leadership acts that helped improve health systems and prepare for UHC).

The competencies and relationships built under the IHLGP were especially valuable given the disruptions that strained the delivery of health services.

Before COVID-19, there was a polio outbreak. The DOH regional offices and LGUs immediately launched an immunization campaign that achieved 99% immunization coverage. They also worked together to address the measles and dengue outbreaks with the DOH providing logistics support and the LGUs disseminating information.

### Replication

While the program's contributions to better leadership and health are undeniable, many challenges remain: unfinished training of stakeholders, lingering political conflicts, changes in leadership both in local governments and the DOH, and inadequate monitoring of program alumni. These issues can be addressed by improved leadership across all levels of the government and better working relationships between local governments and the regional DOH offices.

<sup>1</sup> Makabuhay or Maka-Agham na Kawanggawa para sa Kalinangan ng Buhay Inc. is a group focused on conducting research that contributes to capacity development initiatives and community-based projects.

As a result of health system improvements, a USAID implementing partner asked ZFF to participate in its health program in the Bangsamoro Autonomous Region in Muslim Mindanao. Another USAID partner working on tuberculosis will use the IHLGP roadmap for its program.

A USAID partner focused on teenage pregnancies wants ZFF's involvement in the leadership program in its priority areas. Learnings from the IHLGP's city adolescent reproductive health program component have been incorporated in The Challenge Initiative (TCI), the joint program of ZFF and the Bill and Melinda Gates Institute.

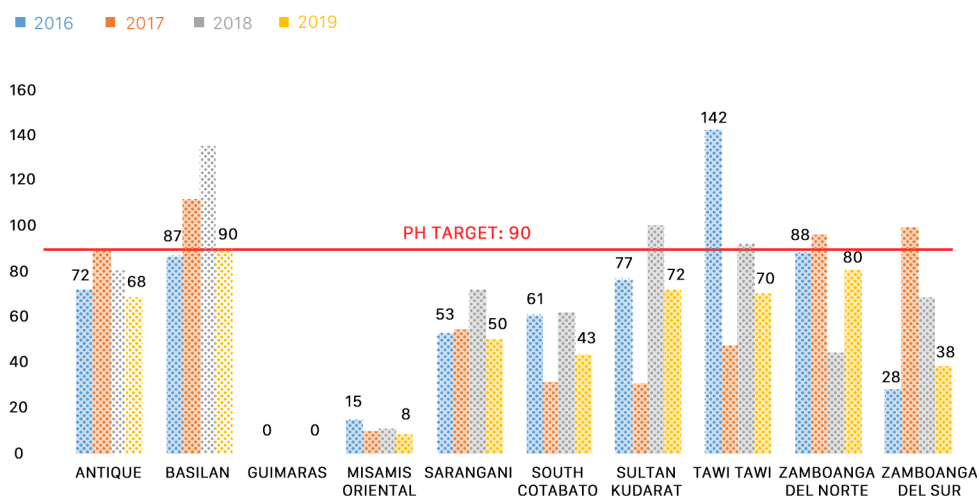
The contributions of IHLGP are prioritized in the 2021 learning and dissemination agenda of the USAID. ZFF continues to actively seek collaborations to share its IHLGP tools, interventions, and learnings as part of its dissemination program (*see below for some of IHLGP's downloadable manuals and tools*). ■



The three-year Institutionalization of Health Leadership and Governance Program (IHLGP), which ended in 2020, shows how leadership acts by regional officials and provincial and city health leaders drive immediate health system reforms leading to better health indicators and outcomes (see charts below). The photo shows health leaders and ZFF officials during the online IHLGP Colloquium held in July 2020.



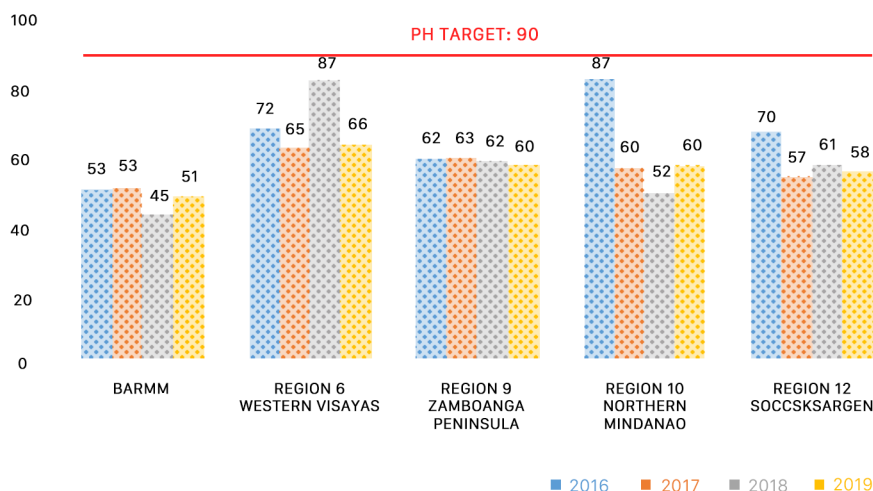
## Maternal Mortality Ratio of 10 IHLGP Provinces, 2016 to 2019



Year-on-year, all but one province reduced the maternal mortality ratio (MMR) in 2019. Compared with the baseline values of 2016, two provinces showed an increase. All provinces, however, have either reached or done better than the 2022 national MMR target of 90. The inconsistent drop in MMR shows more work needs to be done to improve local health care systems, especially in the face of disruptions due to disasters and diseases are more the norm than exceptions.

## Maternal Mortality Ratio in IHLGP Regions, 2016 to 2019

All regions' maternal mortality ratios are below the Philippines' 2022 target of 90, and all show improvements compared with their baseline 2016 values. Regional performance is highly dependent on local governments' health program implementation. To maintain the progress they have made, regional health leaders must continue their active engagement with and support of LGUs.



Source: Field Health Service Information System

## Leadership Acts of DOH Regional Directors and Local Chief Executives

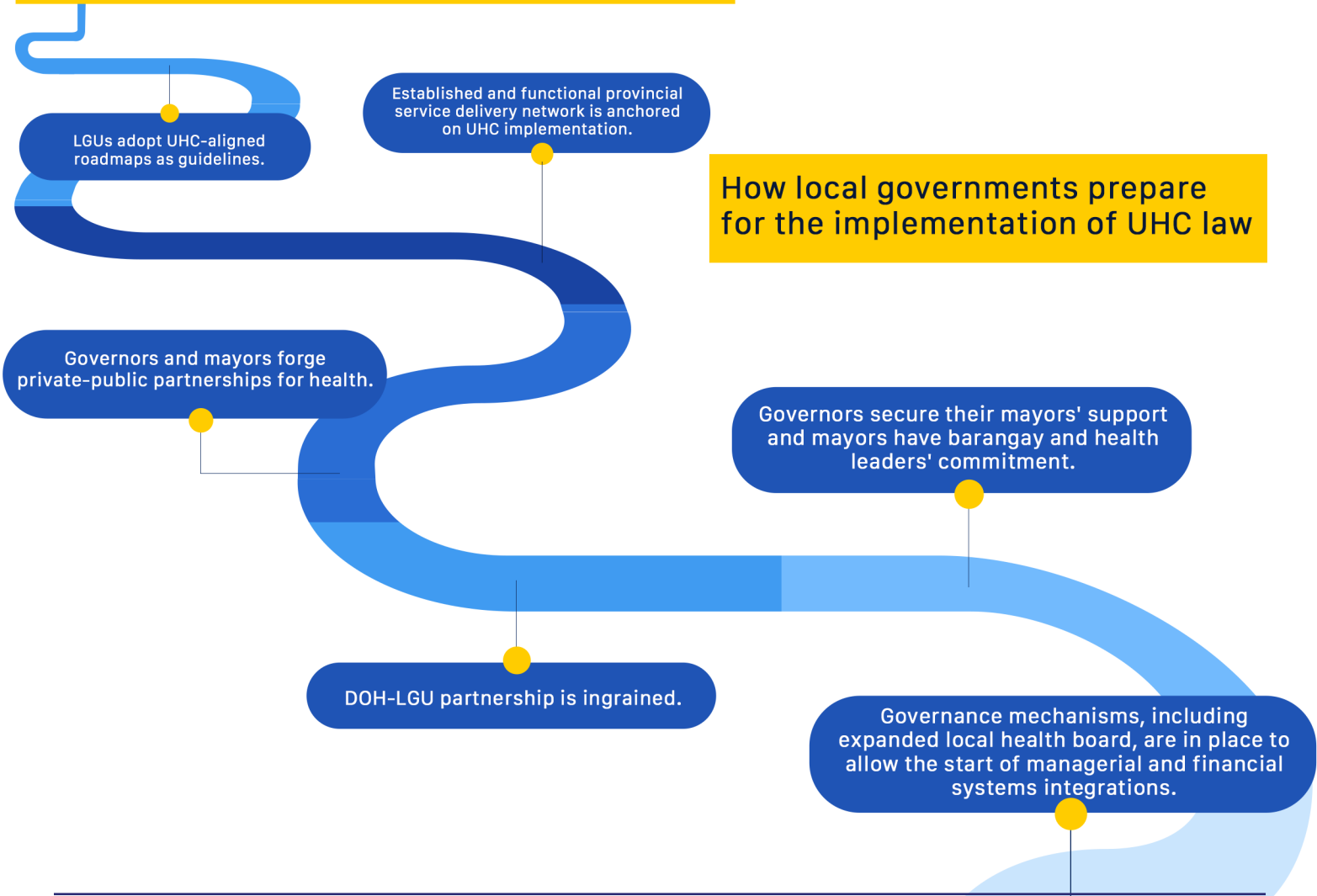
### REGIONAL DIRECTORS

- Monitored and assessed performance of local health systems and addressed system gaps
- Assisted in local government units' creation of health investment, service delivery network, and resiliency plans
- Supported local chief executives' (LCEs) plans and programs
- United stakeholders where political dynamics are challenging
- Communicated DOH policies, priorities, and directives to provinces, cities, and municipalities
- Enhanced quality management and feedback systems
- Created organizational structures that have HLGP coordinator, guiding coalition, and annual training budget for LCEs

### LCEs

- Gained clear health vision and sense of purpose
- Prioritized health advocacy with staff and constituents
- Increased health budget and installed support mechanisms for sustained health service delivery
- Implemented disaster risk reduction and management for health plans
- Organized and trained barangay leaders and health workers
- Built and strengthened partnerships with different stakeholders

## Universal Health Care (UHC)



## UHC Preparatory Work and Pandemic Response

Three years before the enactment of the 2019 Universal Health Care (UHC) Act, the Foundation's Provincial Leadership and Governance Program (PLGP) started work with provincial governors to align provincial health goals with municipal health systems for the acceleration of the improvement of health indicators.

The creation of a functional service delivery network (SDN) is the precursor of the health care provider network called for under the UHC Act. The establishment of SDN facilitated the early implementation of measures that helped contain COVID-19 transmissions in the three provinces of Agusan del Sur, Aklan, and Bataan.

PLGP's program design was aligned with the national government's four-point strategic COVID-19 response: contact tracing, physical distancing, diagnostics, and medical management. The provincial health teams were guided to activate their local emergency response teams, promote health protocols and safety measures, and set up and accredit isolation and quarantine facilities. The Foundation's donation of personal protective equipment, ventilators, and reverse transcription polymerase chain reaction (RT-PCR) test machines supplemented the provinces' capacities to detect cases and treat patients.

### Quick, coordinated response

"We have organized municipal contact tracing teams together with the PNP (Philippine National Police), and this has been a very active collaboration between the LGU (local government unit) and the PNP. We were able to trace close contacts within 24 hours, and immediately quarantine and swab them for the COVID-19 virus," Aklan Governor Florencio Miraflores said.

Agusan del Sur Governor Santiago Cane Jr. used his political capital in requesting the provincial board to realign ₱500 million for the COVID-19 response. He also mobilized municipal mayors to implement the province's food security plan during the lockdown.

Bataan Governor Albert Garcia quickly secured public-private partnerships to streamline the referral of cases, increase quarantine facilities, and support front-line health workers. He also recognized the importance of up-to-date province-wide situation reports. "We established our unified health information system, the One Bataan COVID-19 Call Center, and used technology like the QR code, GeoTime App, and IP radios to put us all on the same page down to the barangay level," Garcia said.

The Foundation conducted mentoring sessions to support the provinces' risk communication programs to fill information gaps and promote the practice of minimum health standards.



## Early preparation for vaccine administration

The Foundation prepared the provinces for their vaccine administration starting with a supply chain capacity assessment. Micro-plans for vaccination were prepared based on government guidelines. Working groups were organized to do master-listing of the eligible population, identify the vaccination workforce, and map out vaccination centers.

The continued ability of the three provinces to manage cases amid surges and re-start business activities generated interest from other groups. A derivative pandemic response program is now shared with other LGUs through a partnership with the Local Government Academy of the Department of the Interior and Local Government and ZFF's online learning platform (see *page 17 for lessons learned under the program*).

Looking ahead, ZFF seeks to develop LGU leaders' ability to establish resilient health systems by emphasizing primary health care. ZFF and the provinces will co-create client-centric, comprehensive and integrated health systems that produce better health outcomes and higher patient satisfaction. ■



Amid resources going mostly to COVID-19 response, the Foundation's partner provinces address the health and nutrition of children among other key health issues.

Location: Agusan del Sur

The Foundation's three partner provinces were quick to respond to the pandemic thanks to the reforms they had established in their health systems. Most of these reforms occurred during the second (2016-2018) and early third (2019-2021) cycles of ZFF's Provincial Leadership and Governance Program. ZFF adjusted the roadmap initially designed for the transition toward UHC to include the elements needed for a pandemic response; thus, the goals of attaining UHC and establishing resilient health system continued despite COVID-19.

### Provinces' COVID-19 Responses



#### BATAAN

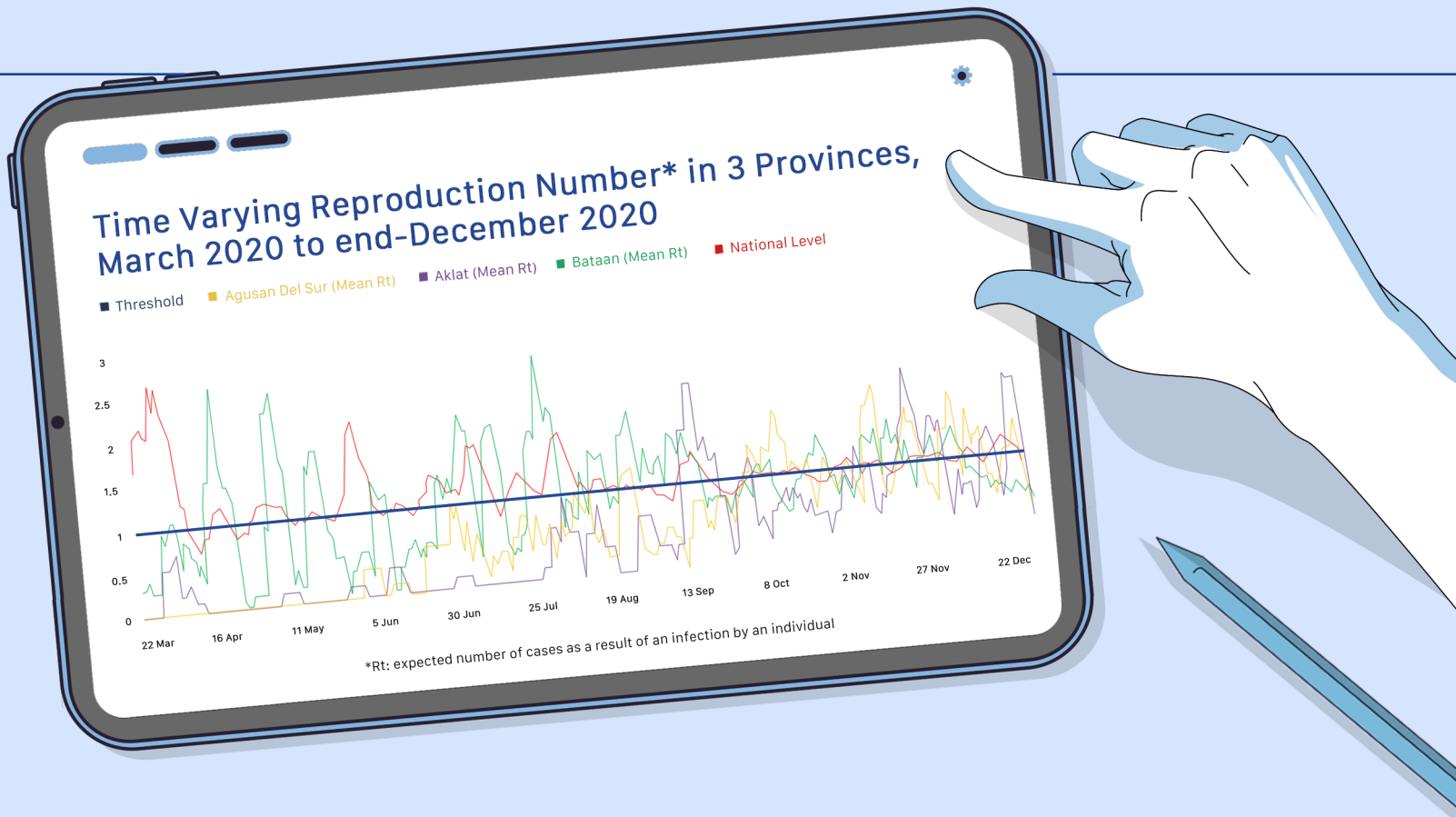
Close to Metro Manila and hosting a freeport zone with 46,000 workers, Bataan was a hot spot for COVID-19, but it minimized local transmission and managed critical cases. The provincial government set up a COVID-19 Command Center to capture and integrate health data across all levels of care — barangay, municipality, provincial, regional. A hospital bed tracker app enabled health workers to know where to send patients needing critical care. Bataan's functional SDN proved to be valuable in facilitating COVID-19 case referrals from barangays to hospitals.

#### AKLAN

As a center of tourism with direct flights from China, Aklan quickly established health protocols in its air, land, and sea borders. Before Boracay reopened on Oct. 1, the province already had a tracking and monitoring system to keep tab on everyone returning to or passing through Aklan. The system ensured individuals undergo all health and safety protocols. A comprehensive pandemic response strategy was co-created by the provincial government with all 17 municipalities.

#### AGUSAN DEL SUR

Until regional travel was allowed in May, Agusan del Sur did not have COVID-19 cases. The landlocked province in Mindanao implemented strict border control and set up quarantine facilities near its entry points. To provide food aid to residents and incentives for medical front-liners, the provincial government realigned its budget, spending some ₱514 million for its COVID-19 response. A 24/7 operations center was set up to facilitate the referral of COVID-19 cases according to the care they need.



Of the three partner provinces, Bataan had the most number of COVID-19 cases and recorded higher than both the threshold reproduction number (Rt) of 1 and national average Rt during the early stages of the pandemic. However, by the end of the year, its response programs significantly improved enabling it to slow down the spread of COVID-19 cases even after it re-started business activities. The provinces of Agusan del Sur and Aklan anticipated the surge in cases so despite the increase in Rt, both remained in control of the situation with their adequate health care capacities and in-place safety protocols.

## Lessons Learned: Provincial Health Leadership and Governance Program

ZFF's systems approach to help provinces achieve UHC-mandated integrations enabled the containment of the spread of COVID-19.

- Working toward continuity of care (from villages to hospitals), health care facility accreditation, good information system, and resilient health system helped establish a working service delivery network, which was expanded to include the private sector amid the pandemic and thereby equipped provinces in managing COVID-19's spread.

**Expanded and functional provincial health boards (PHBs) can quickly respond to emergencies.**

- PHBs became the provincial inter-agency task force on COVID-19.
- Barangay leaders and workers were easily mobilized into Barangay Health Emergency Response Teams.

**Increased provincial health budget addressed such needs as health facilities and information upgrades, and additional health workers.**

## Nutrition for Human Capital Development

A partnership program to address malnutrition became an opportunity for the Zuellig Family Foundation to prove that the application of the ZFF Health Change Model brings immediate improvements in nutrition outcomes.

ZFF's nutrition leadership and governance program centers on the first 1,000 days (F1KD) of a child (from conception until two years of age), the crucial period for brain and body development.

Reduction of the stunting rate is a primary objective because stunting's consequences have serious implications for the child's survival, educational performance, and future economic productivity. Since 2003, the stunting rate among Filipino children up to the age of two years has never been below 20% (according to the Food and Nutrition Research Institute, *see page 20 for related information*).

ZFF's first partnership for nutrition was in 2016 with Swiss-Norwegian Kristian Gerhard Jebsen Foundation (KGJF). The intervention assisted two towns that had participated in past ZFF programs, Looc in Romblon and Gamay in Northern Samar. It involved nutrition leadership training for mayors, health and nutrition workers, and officials of different agencies like agriculture, education, and social welfare, whose programs have an impact on nutrition.

In the two pilot sites, an accelerated reduction was established after two years: 19 percent in 2017 and 15 percent in 2019, when the country's overall stunting rate was 21.9 percent (*see page 20 for related information*).

### Integration leads to effective response

In 2019, ZFF partnered with Canada-based Nutrition International to improve nutrition governance in the cities of Puerto Princesa, Tacurong, and Tagum.

By including health and non-health programs into the nutrition systems of the three cities, the city governments managed to continue providing nutrition services despite allocating most of their resources to COVID-19 response. Improved data management provided updated nutrition data as the basis for corrective action. Skills training enhanced the competencies of their nutrition and health front-line workers. The LGUs also visited every community to identify and address barriers to nutrition access.

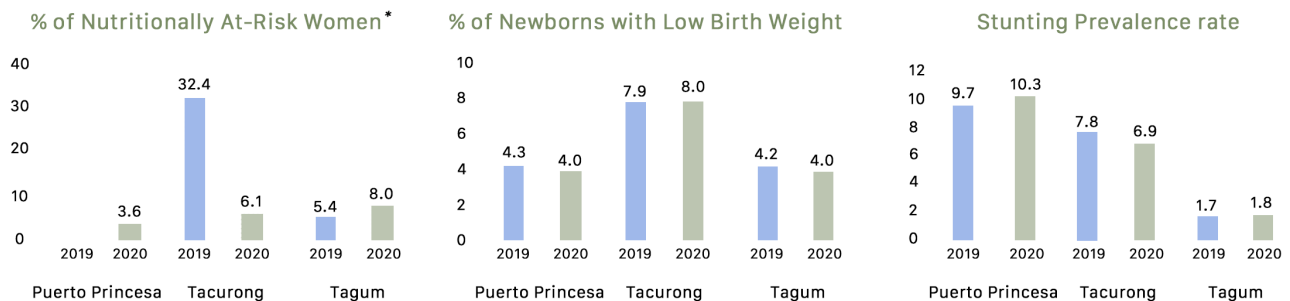
These activities led the cities to deliver uninterrupted support for the nutritional needs of identified families with pregnant women and/or malnourished children during the pandemic by keeping basic health services going, including vegetables in food distribution, promoting food security, and keeping track of the vulnerable and malnourished.

After 12 months of close attention, the incidence of nutritionally at-risk (NAR) pregnant women and infants with low birth weight (LBW) decreased.

The decrease in NAR and LBW is an essential precondition to the reduction of stunting. With improvements in these precursor indicators, a marked reduction in stunting can be expected within two years.

ZFF’s intervention shows that an effective response to malnutrition requires leadership skills and determined action in order to mobilize multiple stakeholders for cohesive implementation of complementary and supplementary programs with specific nutrition targets. ■

### Nutrition Indicators in Puerto Princesa, Tacurong, Tagum



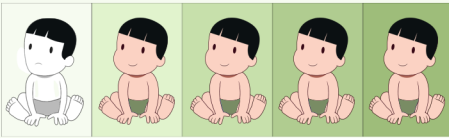
\*No available 2019 data for Puerto Princesa  
Sources: Operation Timbang and Field Health Service Information System

Nutrition indicators generally improved but an increased number of nutritionally at-risk pregnant women in Tagum and incidence of low birth weight among infants in Tacurong were reported. The city governments did not track all multigravidas (women who have been pregnant more than once) and adolescent mothers, therefore, they did not get proper nutritional support.

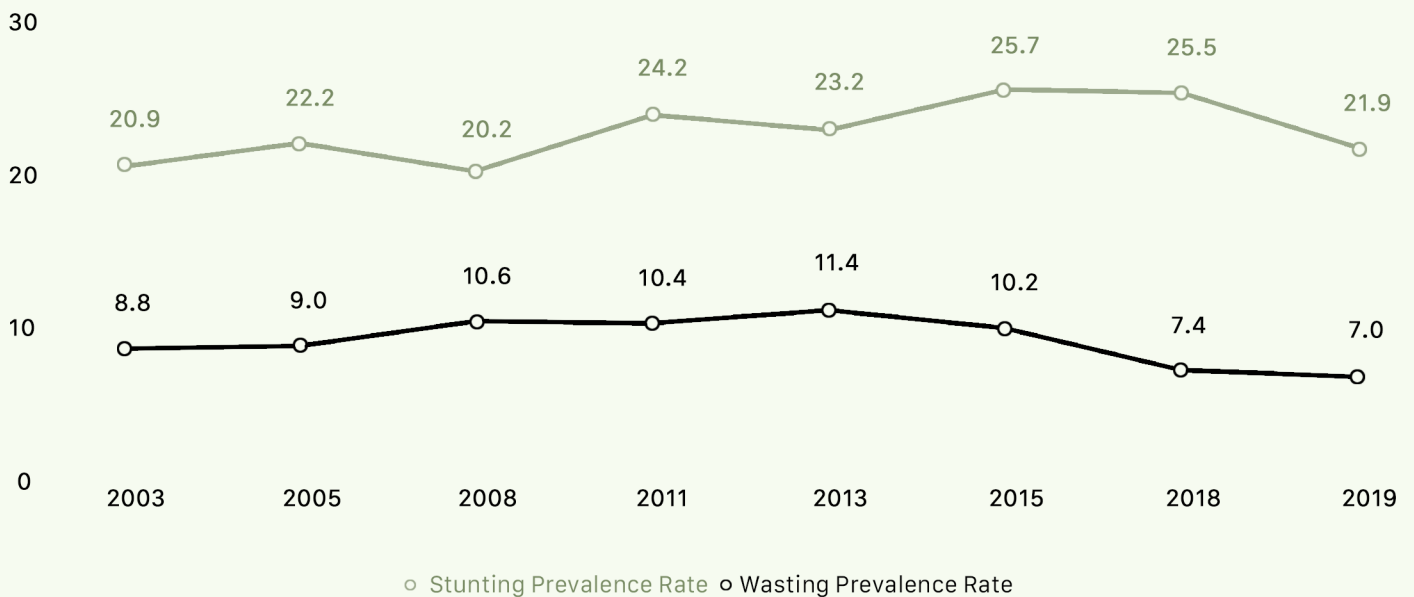
1 IN 5

FILIPINO INFANTS UP TO 23 MONTHS OLD IS STUNTED

Aside from growth in height, the period between the time of conception until age two is an important period for brain and physical development. Any impairment during this period may be irreversible.



MALNUTRITION AMONG FILIPINO CHILDREN UP TO 23 MONTHS, 2003 TO 2019



Source: Food and Nutrition Research Institute

Stunting—being short for one’s age—affects at least 20% of Filipino children under two years. Between 2003 and 2019, the stunting prevalence rate increased by 5%. Wasting—having low weight for one’s height—has never reached the prevalence rate target of 5%.

# ZFF'S RESPONSE TO MALNUTRITION

Interventions for the first 1,000 days

<p><b>NUTRITION-SPECIFIC PROGRAMS</b> address immediate underlying causes of undernutrition.</p> <ul style="list-style-type: none"> <li>Prenatal Care</li> <li>Postpartum Care and Lactation Support</li> <li>Exclusive Breastfeeding</li> <li>Nutrition Tracking / Supplementation</li> <li>Birth / Family Planning</li> <li>Diet Diversification / Optimal Feeding / Supplementation / Vaccination / Acute Malnutrition Rehabilitation / Childhood Illness Management</li> </ul>	<p><b>TARGET OUTCOMES</b></p> <p><b>PREGNANCY</b> Reduction of Nutritionally-at-risk Pregnant Women</p> <p><b>BIRTH</b> Low Incidence of: Low Birth Weight Neonatal Death Maternal Mortality</p> <p><b>INFANCY AND EARLY CHILDHOOD</b> Low Incidence of: Wasting Child Morbidity Reduction of: Stunting Child Mortality</p>	<p><b>NUTRITION-SENSITIVE PROGRAMS</b> can influence the underlying causes of undernutrition.</p> <ul style="list-style-type: none"> <li>School Reintegration for Adolescent Mothers</li> <li>Behavior Adoption Program</li> <li>Water, Sanitation, and Hygiene / Social Protection / Proper Child Care Programs / Support Programs for Parents and Caregivers</li> <li>Productivity Improvement Changes / Enterprise Development / Small Integrated and Diversified Family Farms</li> </ul>
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## ZFF'S ONGOING NUTRITION PROGRAMS



### CITY NUTRITION GOVERNANCE PROGRAM

A partnership program with Canada-based Nutrition International started in mid-2019 applies ZFF's lessons from its prototype program to improve nutrition in the cities of Puerto Princesa, Tacurong, and Tagum.



### PROVINCIAL NUTRITION GOVERNANCE PROGRAM

Partnerships with UNICEF and the Kristian Gerhard Jepsen Foundation started in 2020 and used the new lessons from the program of Nutrition International to address malnutrition and stunting in the provinces of Northern Samar, Samar, Zamboanga del Norte, Sarangani, and Basilan.



## Call for Stronger ASRH Leadership and Governance

Teenage pregnancy entails increased risks of morbidity and mortality to both the adolescent mother and her child. Local health leaders in the Foundation’s partner areas have acknowledged the challenges of keeping the youth from engaging in risky sexual behavior and tracking pregnancies.

Before the national government sounded the alarm on the growing number of minors giving birth, ZFF had an implementation framework for adolescent sexual and reproductive health (ASRH) encompassing both the supply-side and demand-side factors affecting access to ASRH information, services, and commodities.

### ASRH Partnerships

Since 2016, ZFF’s leadership training for the senior officials of the Commission on Population and Development (PopCom) has helped the agency engage and coach local government leaders to ensure that population management measures are budgeted and implemented.

In 2019, ZFF’s partnership with the United Nations Population Fund (UNFPA), called the Youth Leadership and Governance Program (YLGP), began interventions to increase the demand for ASRH services among the youth. The program engages the presidents of the Sangguniang Kabataan (Youth Council) Federations in the provinces of Sarangani, Sultan Kudarat and Lanao del Sur (see page 23 for adolescent birth rate data).

As a result of YLGP, youth leaders intensified their participation in their local government’s development, planning, implementation, and monitoring of sexual reproductive health programs (see page 25 for learnings under the YLGP).

In the last quarter of 2020, the Foundation launched The Challenge Initiative (TCI) in the Philippines, co-managed and co-funded by ZFF and the Bill and Melinda Gates Institute for Population and Reproductive Health. The TCI aims to reduce teenage pregnancies by developing positive health-seeking behavior among adolescents and improving access to modern contraceptives.

ZFF-partner cities—Dipolog, Cagayan de Oro, and Puerto Princesa—are the program’s pilot sites for the implementation of high-impact approaches such as those proven in the four other global TCI hubs of the Gates Institute.

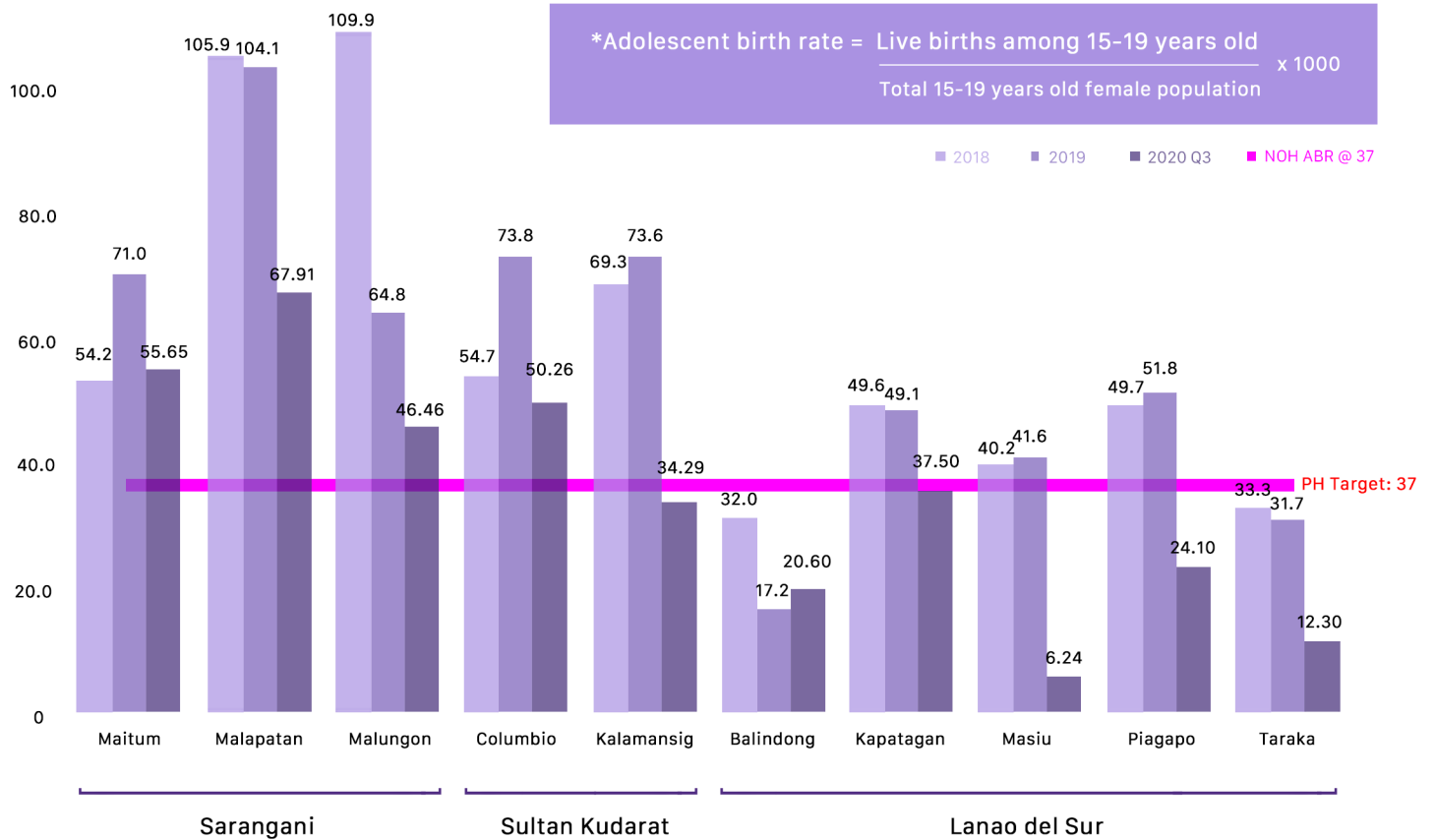
The initiative expects the three cities to demonstrate responsive governance for reproductive health, provide sufficient budgets, and generate strong community support for the continuous provision of ASRH health programs.

PopCom’s participation is expected to replicate this project in other cities by 2022. ■



# ADOLESCENT BIRTH RATES\* (15-19 YEARS OLD)

2018, 2019 AND 2020 3RD QTR  
(Source: Field Health Service Information System)



Sangguniang Kabataan (SK) Federation President Harley Bermudez of Columbio, Sultan Kudarat (third from left), and SK Chairman Khen Mayo of Barangay Libertad (second from left) speak to 17-year old Valerie, a Blaan, who was in Grade 11 when she stopped schooling to give birth. Youth leaders in Columbio have implemented programs to encourage teenage parents to go back to school as well as keep adolescents from engaging in risky behavior that may result in pregnancies or sexually transmitted diseases.

EVERY HOUR  
**21 BABIES**  
ARE BORN TO  
ADOLESCENT MOTHERS

*(Source: Philippine Statistics Authority)*



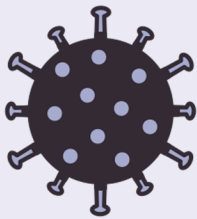
#1 LAOS  
#2 CAMBODIA  
#3 THAILAND

**#4 PHILIPPINES**

#5 VIETNAM

**HIGHEST**  
ADOLESCENT BIRTH RATE  
IN SOUTHEAST ASIA

*(Source: PopCom)*



COVID-19 EFFECTS

**21% INCREASE**  
IN UNPLANNED PREGNANCIES  
AMONG ADOLESCENTS  
+102,000 UNINTENDED PREGNANCIES

*(Source: PopCom)*

## LESSONS LEARNED UNDER YOUTH LEADERSHIP AND GOVERNANCE PROGRAM

### Accredited Adolescent-Friendly Health Facilities (AFHFs) can improve access to information and services.

- In AFHFs where peer education was held and commodities were available, first and repeat pregnancies among adolescents could be prevented.
- Collaboration among Sangguniang Kabataan leaders and municipal, provincial and regional health officers fast-tracked establishment and accreditation of AFHF.

### More investments are needed to engage youth leaders and the youth in sexual and reproductive health issues.

- When capacitated, youth leaders forge public-private partnerships to overcome barriers to the access of modern contraceptive commodities.
- Technical working groups on adolescent sexual and reproductive health were critical enabling environments for youth leadership involvement in planning and implementing programs.

### Adolescent Birth Rate (ABR) can decline.

- Reduction in ABR is possible if systems for both supply and demand are present.

### Need for continuously updated information

- By having an accurate profile of the youth, local governments identified the vulnerable who needed immediate interventions.
- More efficient delivery of health and non-health services: health counseling, natal care, alternative learning, scholarships, life skills, and livelihood

---

## PROGRAM PARTNERS



### Commission on Population and Development (PopCom)

The collaboration with PopCom aims to improve the capacities of senior national and regional officials to engage with LGUs and monitor the local implementation of the Responsible Parenthood and Reproductive Health Act.



### The Challenge Initiative (TCI) in the Philippines

The TCI in the Philippines is co-funded and co-managed by ZFF and the Bill and Melinda Gates Institute for Population and Reproductive Health. It works to improve adolescent and youth sexual reproductive health (AYSRH) systems in LGUs to improve access to services while also promoting positive behavior toward AYSRH among community members.



### United Nations Population Fund (UNFPA)

The UNFPA partnership focuses on improving the capacities of youth leaders to create demand for adolescent sexual and reproductive health services among the youth.

# MOVING FORWARD 2021-2030

Dr. Maria Ellen Licup-Medina, Associate Director, leads an online training session for ZFF staff members to improve their capacities in health leadership, management, and information technology amid the pandemic.



## Building health systems to withstand disruption

The COVID-19 pandemic has highlighted the shortcomings of the public health system and the vital importance of health leadership and good governance.

The Foundation's programs which targets the effectiveness of local health system, nutrition, and adolescent sexual and reproductive health (ASRH) have made significant systemic changes such as established health service provider networks, increased health budgets, and improved health indicators.

In the coming years, ZFF will increase its leading edge in health leadership and governance by continuously learning, investing in internal staff capacity, and forging partnerships.

### Partnering for faster health reforms

Through broader collaborations with the government, the private sector, and other stakeholders, ZFF will generate diversified support and create new and improved capacities for public health leadership and governance. The Foundation will also tap its partner LGUs, resource partners, and academic partners as key messengers to the national government for health and nutrition policy reforms and increased program support.

The Foundation will pool its experiences and knowledge with the expertise and resources of its key public and private partners and create a common data bank of tested systems and best practices that can be used by all LGUs and produce faster results.

## Improving internal capacity

To raise credibility in the performance of their duties, especially in dealing with political leaders, the Foundation's staff members will be trained to improve their competencies in five essential capacities—leadership, public health, program management, training, and coaching.

The Foundation has embraced digital solutions and workplace innovations. As such, ZFF programs have been offered online. Moreover, more practical solutions will be pursued to deliver its interventions, especially in areas that lack IT infrastructure.

## Strengthening knowledge management

ZFF has a culture of learning to capture shared insights and multiple perspectives from programs that work. Crucial to this is an operational knowledge management (KM) strategy that generates evidence of positive implementation results.

Though still a work in progress, a functional KM system is embedded in all ZFF projects and support units. The system is integral to the effective and sustained upgrade of health leadership and governance.

## Catalyst for better health outcomes

Partnerships have contributed to improving ZFF's internal system and capacity, thereby increasing the number of local leaders and local government units exposed to the ZFF Health Change Model.

Because of the pandemic, local health leaders and public health practitioners who are familiar with the Foundation's program recognize the value of health leadership and governance and increasingly advocate the replication of such interventions in other areas across the country. The Foundation is prepared to respond to this demand with competent staff, tested approaches, new knowledge, and complementary partnerships. ■



To ensure the smooth implementation of the program, Bataan Governor Albert Garcia (front row, right) leads the preparations for the vaccination program in his province. With him are doctors from the private and public hospitals.

# Festschrift for Roberto R. Romulo

## **EQUITY IN HEALTH** A FESTSCHRIFT FOR ROBERTO R. ROMULO



Roberto R. Romulo

Published in 2020 as a tribute to Ambassador Roberto R. Romulo and as a reference book on the health care system of the Philippines, "Equity in Health" consists of two main parts — commentary and research. The authors of the articles and research papers share the Zuellig Family Foundation's advocacy for health equity, especially among the disadvantaged and risk-prone sectors in the society.

The commentary section tackles the current status of the public health system, and the roadmaps toward resilient local health systems and Universal Health Care in the Philippines. The articles comment on ZFF's Health Change Model and dissect key health concerns in the country, including adolescent sexual and reproductive health (ASRH), nutrition and stunting, and mobilizing local government units for child stunting prevention.

The research section consists of analytical papers on the findings and results of ZFF programs on leadership and governance, nutrition, and ASRH in Quezon, Sorsogon, Camarines Norte, Romblon, Palawan, Capiz, Eastern Samar, Samar, Northern Samar, Leyte, Biliran, Misamis Oriental, and Zamboanga del Sur.

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## FINANCIAL HIGHLIGHTS

### THE ZUELLIG FAMILY FOUNDATION, INC.

(A Nonstock, Nonprofit Corporation)

### STATEMENTS OF ASSETS, LIABILITIES AND FUND BALANCE

	December 31	
	2020	2019
<b>ASSETS</b>		
<b>Current Assets</b>		
Cash (Note 4)	₱87,043,158	₱32,015,754
Receivables (Note 5)	318,670	128,142
Prepayments and other current assets	915,165	810,848
Total Current Assets	88,276,993	32,954,744
<b>Noncurrent Assets</b>		
Property and equipment (Note 6)	3,361,046	4,286,049
Retirement asset (Note 13)	5,002,370	6,141,241
Refundable deposit	37,500	37,500
Total Noncurrent Assets	8,400,916	10,464,790
<b>TOTAL ASSETS</b>	<b>₱96,677,909</b>	<b>₱43,419,534</b>
<b>LIABILITIES AND FUND BALANCE</b>		
<b>Current Liabilities</b>		
Accrued expenses and other payables (Note 7)	₱15,403,733	₱14,442,471
Deferred donations (Note 8)	54,177,185	1,861,800
Total Current Liabilities	69,580,918	16,304,271
<b>Noncurrent Liability</b>		
Deferred donations (Note 8)	1,665,961	1,730,889
Total Liabilities	71,246,879	18,035,160
<b>Fund Balance</b>	<b>25,431,030</b>	<b>25,384,374</b>
<b>TOTAL LIABILITIES AND FUND BALANCE</b>	<b>₱96,677,909</b>	<b>₱43,419,534</b>

See accompanying Notes to Financial Statements.

For the complete audited financial statement report and accompanying notes to financial statement, go to <https://zuelligfoundation.org/our-performance/annual-reports/>.

**THE ZUELLIG FAMILY FOUNDATION, INC.**  
**(A Nonstock, Nonprofit Corporation)**

**STATEMENTS OF REVENUES AND EXPENSES**

	<b>Years Ended December 31</b>	
	<b>2020</b>	<b>2019</b>
<b>REVENUES</b>		
Donations (Note 10)	<b>₱206,600,358</b>	₱150,717,607
Interest (Note 4)	<b>46,655</b>	95,004
Gain from sale of asset	–	230,984
Others	–	63,375
	<b>206,647,013</b>	151,106,970
<b>EXPENSES (Note 11)</b>		
Donations and contributions	<b>78,073,267</b>	1,022,823
Salaries, wages and other benefits (Note 12)	<b>75,203,812</b>	66,750,905
Utilities	<b>15,634,266</b>	13,890,889
Professional fees	<b>15,527,266</b>	16,089,215
Trainings and seminars	<b>7,432,106</b>	27,604,482
Transportation and travel	<b>4,536,359</b>	18,237,373
Materials and supplies	<b>3,208,931</b>	3,337,947
Representation and entertainment	<b>1,680,379</b>	2,363,716
Depreciation and amortization (Notes 6 and 11)	<b>1,609,973</b>	1,746,218
Retirement cost (Note 13)	<b>1,138,871</b>	1,249,572
Unrealized foreign loss - net	<b>930,904</b>	427,883
Taxes and licenses (Note 15)	<b>152,741</b>	57,376
Other expenses	<b>1,471,482</b>	1,174,602
	<b>206,600,357</b>	153,953,001
<b>EXCESS (DEFICIENCY) OF REVENUES OVER EXPENSES</b>	<b>₱46,656</b>	<b>(₱2,846,031)</b>

*See accompanying Notes to Financial Statements.*

**THE ZUELLIG FAMILY FOUNDATION, INC.**  
**(A Nonstock, Nonprofit Corporation)**

**STATEMENTS OF CASH FLOWS**

	<b>Years Ended December 31</b>	
	<b>2020</b>	<b>2019</b>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Excess (deficiency) of revenues over expenses	<b>₱46,656</b>	(₱2,846,031)
Adjustments for:		
Depreciation and amortization (Notes 6 and 11)	<b>1,609,973</b>	1,746,218
Movements in retirement asset (Note 13)	<b>1,138,871</b>	1,249,572
Unrealized foreign exchange loss - net	<b>930,904</b>	427,883
Interest income (Note 4)	<b>(46,655)</b>	(95,004)
Gain from sale of asset	–	(230,984)
Revenues (expenses) before working capital changes:		
Decrease (increase) in:		
Receivables	<b>(190,528)</b>	83,570
Prepayments and other current assets	<b>(104,317)</b>	(14,835)
Increase (decrease) in:		
Deferred donations	<b>52,250,457</b>	3,592,689
Accrued expenses and other payables	<b>961,262</b>	(9,010,814)
Net cash provided by (used in) operations	<b>56,596,623</b>	(5,097,736)
Interest received	<b>46,655</b>	95,004
Net cash provided by (used in) operating activities	<b>56,643,278</b>	(5,002,732)
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Additions to property and equipment (Note 6)	<b>(684,970)</b>	(1,537,939)
Proceeds from sale of office equipment	–	270,829
Net cash used in investing activities	<b>(684,970)</b>	(1,267,110)
<b>NET INCREASE (DECREASE) IN CASH</b>	<b>55,958,308</b>	(6,269,842)
<b>EFFECT OF FOREIGN EXCHANGE RATE CHANGES ON CASH</b>	<b>(930,904)</b>	(427,883)
<b>CASH AT BEGINNING OF YEAR</b>	<b>32,015,754</b>	38,713,479
<b>CASH AT END OF YEAR (Note 4)</b>	<b>₱87,043,158</b>	₱32,015,754

*See accompanying Notes to Financial Statements.*

## 2020: Crisis, Continuity and Resilience

Since its establishment in 2008, the Zuellig Family Foundation has advocated the importance of collaborative leadership to improve the health situations of rural communities in the Philippines.

In 2020, when the COVID-19 pandemic struck, the Foundation's work and programs became even more vital as communities were challenged to find a sustainable path to protect the people from the virus spread with science-backed health care.

ZFF's ongoing programs in health leadership and governance were aligned with the national government's strategic COVID-19 response objectives.

Amid the confusion of the global pandemic, ZFF pushed the important message that building a resilient health system was not just about preparing for a health crisis like COVID-19 but ensuring that basic issues like nutrition, adolescent health, and maternal and child care are being addressed at all times. It is in times of crisis that people better appreciate the leadership and governance capacities of local chief executives in safeguarding lives and providing safety nets.

### Report Scope and Boundaries

ZFF continues the practice of reporting the organization's sustainability performance as part of its Annual Report, and this Sustainability Report covers 2-year initiatives from 2019 to 2020.

As metrics for the Foundation's progress have been comprehensively reported in the main section of this Annual Report, this section will instead cover the Foundation's performance on particular sustainability aspects material to its stakeholders, namely: good governance, program management, and operational impact.

This report has been prepared following the GRI Standards: Core option with additional G4 NGO Sector Disclosures. The reporting structure

and process prescribed by the global standards have provided the Foundation the framework to continuously assess internal processes, program effectiveness, and the impact of its activities to identify areas of improvement for the benefit of all stakeholders.

### Approach to Sustainability

#### *Designing resilience into sustainable health programs*

The Foundation's capability to sustain its programs, ensure its relevance and usefulness for the times, and secure the safety of its workforce, emerged as issues of prime importance.

With a commitment to pursue continuous improvement, the Foundation aligned with the government's mission to deliver urgent COVID-19 responses to Filipino communities while also identifying Material Aspects and key sustainability issues for appropriate responses to immediate concerns.

The Foundation conducted a Materiality Assessment exercise wherein a survey with key departments and stakeholders validated the material topics. The survey ascertained the current level of criticality of the material topics which has the most impact on the mission of the Foundation and its stakeholders.

The survey results showed, for both stakeholder and business perspectives, Program Management topics remain as most material for the organization as a whole, followed by Good Governance and Operational Impact.

The result further emphasized that projects' implementation remains ZFF's top priority, and the importance of delivering its programs with responsiveness, efficiency, and good governance.

Understandably, environmental topics were the least material given the low physical impact of ZFF's operations. Considered the most material Operational Impact topic is

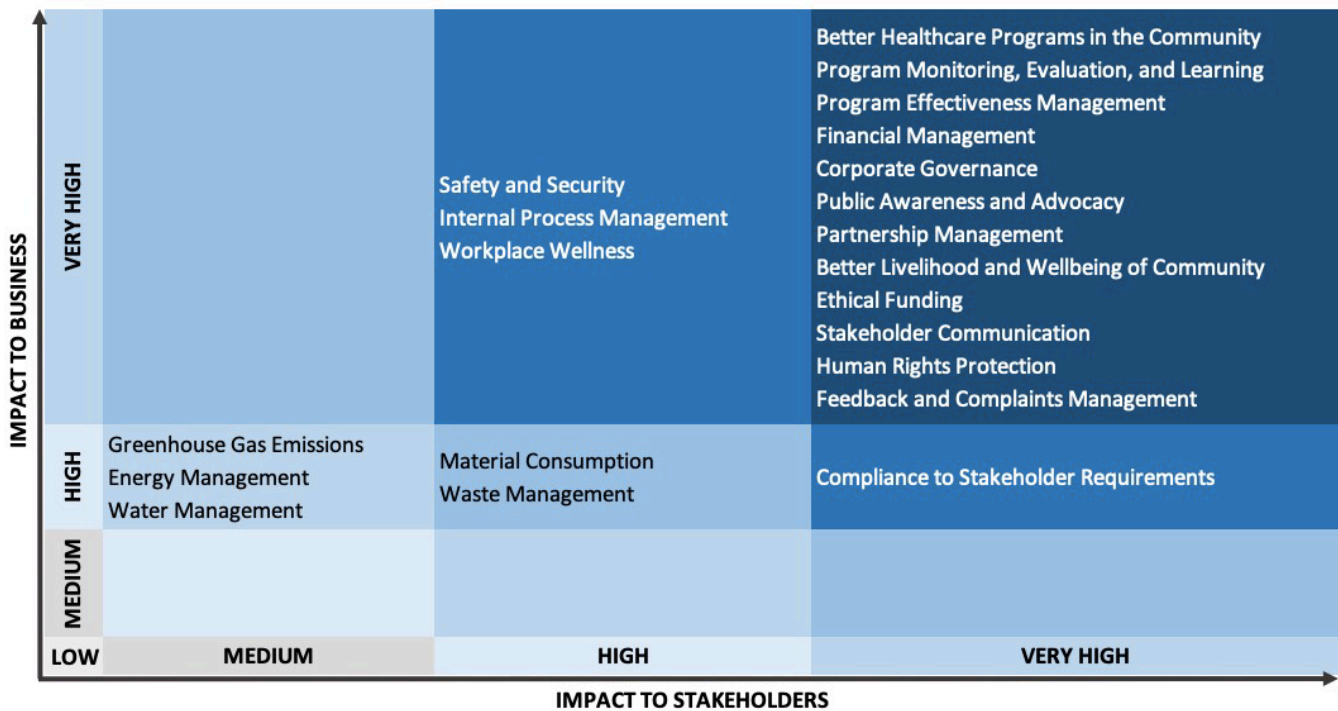
human rights protection, strongly relating to the Foundation’s activities and its priority on people, its internal staff and its external partners and participating communities.

**Stakeholder Engagement**

Through constant engagement throughout the crisis, the Foundation continues to earn the full support of its internal and external stakeholders and their commitment to ZFF’s long-term success.

Continuing to espouse the values and principles it believes in, the Foundation maintained communication and engagement activities safely and responsibly, optimizing the use of technology and digital platforms for essential interactions.

**Materiality Matrix**



The matrix helps visualize the findings from the materiality assessment exercise conducted with the departments and stakeholders of ZFF. The exercise identifies and prioritizes the issues that have the biggest impact on the mission of the Foundation and its stakeholders.

For detailed disclosure of material topics, please refer to <https://zuelligfoundation.org/our-performance/sustainability-reports/>.

## ABBREVIATIONS

**ABR** - Adolescent Birth Rate

**AFHF** - Adolescent-Friendly Health Facility

**ASRH** - Adolescent Sexual and Reproductive Health

**AYSRH** - Adolescent and Youth Sexual Reproductive Health

**BARMM** - Bangsamoro Autonomous Region in Muslim Mindanao

**DILG** - Department of the Interior and Local Government

**DOH** - Department of Health

**F1KD** - First 1,000 Days

**FNRI** - Food and Nutrition Research Institute

**GRI** - Global Reporting Initiative

**GPPI** - Good Practices and Promising Interventions

**HLGP** - Health Leadership and Governance Program

**IHLGP** - Institutionalization of Health Leadership and Governance Program

**KGJF** - Kristian Gerhard Jebsen Foundation

**KM** - Knowledge Management

**LBW** - Low Birth Weight

**LCE** - Local Chief Executive

**LGU** - Local Government Unit

**MMR** - Maternal Mortality Ratio

**NAR** - Nutritionally-at-risk

**NGO** - Non-government organization

**NOH** - National Objectives for Health

**PCNC** - Philippine Council for NGO Certification

**PHB** - Provincial Health Board

**PLGP** - Provincial Leadership and Governance Program

**PLGP-3** - Provincial Leadership and Governance Program (third cycle)

**PNP** - Philippine National Police

**PopCom** - Commission on Population and Development

**PPE** - Personal Protective Equipment

**RT-PCR** - Reverse Transcription Polymerase Chain Reaction

**SDN** - Service Delivery Network

**SK** - Sangguniang Kabataan

**Soccksargen** - South Cotabato, Cotabato, Sultan Kudarat, Sarangani, and General Santos

**TCI** - The Challenge Initiative

**TPR** - Teenage Pregnancy Rate

**UHC** - Universal Health Care

**UNFPA** - United Nations Population Fund

**UNICEF** - United Nations Children's Fund

**USAID** - United States Agency for International Development

**YLGP** - Youth Leadership and Governance Program

**ZFF** - Zuellig Family Foundation

2020 Integrated Annual and Sustainability Report

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Feedback: Please send your comments to ZFF's Corporate Communications unit at [feedback@zuelligfoundation.org](mailto:feedback@zuelligfoundation.org)



This Annual and Sustainability Report was printed on Forest Stewardship Council (FSC)-certified paper. In an effort to reduce consumption of resources from printing and distributing hard copies, an electronic copy of this report with complete 2020 audited financial statements may be downloaded from <https://zuelligfoundation.org/our-performance/annual-reports/>.



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[www.zuelligfoundation.org](http://www.zuelligfoundation.org)

Km. 14 West Service Road corner Edison Avenue,  
Sun Valley, Parañaque City 1700, Metro Manila, Philippines  
[communications@zuelligfoundation.org](mailto:communications@zuelligfoundation.org)  
63 2 88214332 / 63 2 88214428