

PRESIDENTIAL COMMUNICATIONS OPERATIONS OFFICE
News and Information Bureau

PUBLIC BRIEFING #LagingHandaPH
HOSTED BY PCOO SECRETARY MARTIN ANDANAR
AND UNDERSECRETARY ROCKY IGNACIO
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SEC. ANDANAR: Magandang umaga sa lahat ng ating mga kababayang nakatutok po sa ating programa sa loob at labas ng bansa ngayong Lunes, October 12, 2020. Ako po ang inyong lingkod, Secretary Martin Andanar mula sa PCOO. Good morning, Rocky.

USEC. IGNACIO: Good morning, Secretary Martin. At mula pa rin sa PCOO, ako naman po si Usec. Rocky Ignacio. Muli ninyo kaming samahan ngayong linggo sa panibagong balitaan tungkol sa COVID-19 at sa iba pang mahahalagang hakbangin ng pamahalaan.

SEC. ANDANAR: Ito po ang Public Briefing #LagingHandaPH.

USEC. IGNACIO: At para po sa ating unang balita ngayong araw: Proposed 2021 budget ng Department of Health suportado ni Senator Bong Go.

Sa isinagawang public hearing ng Senate Committee on Finance, Biyernes noong nakaraang linggo ay sinabi ni Senate Committee Chair on Health and Demography na si Senator Go na mahalaga ang sapat na budget ng Kagawaran sa susunod na taon para rin masigurong tuluy-tuloy ang supply ng mga PPEs at COVID-19 test kits, at masiguro ang sapat na kompensasyon para sa mga health workers at sapat ang pondo para sa operational expenses ng mga ospital.

Sa kabilang banda, ikinalungkot naman ng Senador ang pagbaba ng budget para sa epidemiology and surveillance at quick response fund ng DOH. Aniya, naging malaking tulong din ang budget na nakalaan dito para agad na makaresponde ang pamahalaan sa COVID-19 sa taong ito.

Sa proposed budget ay nasa 2.5 billion pesos din ang nakalaan para naman sa COVID-19 vaccine procurement. Ngunit ayon sa Senador, mukhang hindi ito sasapat lalo pa't nasa 3.8 milyong Pilipino ang umaasa sa libreng bakuna. Dagdag pa niya na hindi lang dapat ang pagtugon sa COVID-19 ang ikonsidera sa pag-apruba ng 2021 budget kung hindi maging ang pagresponde din sa anumang health crisis na maaari pang dumating sa bansa sa hinaharap.

SEC. ANDANAR: Samantala, pinasinayaan naman sa Mati City, Davao Oriental ang ikawalumpu't anim na Malasakit Center sa Davao Oriental Provincial Medical Center. Dinaluhan ito ng main proponent ng Malasakit Center na si Senador Bong Go kung saan namahagi rin ang Senador ng mga bisikleta para sa mga health workers, at pagkain naman para sa mga pasyente.

Sa pamamagitan ng Malasakit Center, tanging isang form na lang ang kailangang pirmahan ng mga pasyente o kanilang mga kaanak para humingi ng tulong mula sa PhilHealth, DOH, PCSO at DSWD. Ang naturang Malasakit Center ay ang pinakauna sa probinsiya, pang-apat sa Davao Region at ikadalawampu't isa sa buong Mindanao.

USEC. IGNACIO: Sa Davao City, muli namang binisita ng opisina ni Senator Bong Go ang mga residente ng Barangay 23C na matatandaang naging biktima ng malakas na monsoon wave noong

nakaraang taon. Kamakailan ay muling namahagi ang Senador ng pagkain, medicine at food packs, mask at face shield sa nasa siyamnapung residente ng barangay, habang may mga piling individual naman ang nakatanggap din ng bisikleta.

Nagbigay din ng assistance ang National Housing Authority sa pamamagitan ng kanilang emergency housing assistance program. Nauna nang personal na binisita ng Senador ang lugar ilang araw lang matapos ang kalamidad noong nakaraang taon kung saan nagpaabot din ng agarang tulong ang DOH, DSWD at DTI noong 2019.

SEC. ANDANAR: Ilang estudyante naman sa Parañaque City ang pinagkalooban ng opisina ni Senador Bong Go ng libreng tablet para makatulong sa kanilang blended learning ngayong school year 2020-2021. Tumanggap din ang pamilya nila ng pagkain, gamot at facemasks a face shields, habang ang ilan naman ay nabigyan din ng bisikleta. Sa kabuuan ay nasa isandaan at limampung indibidwal mula sa siyudad ang nabahagian ng tulong mula sa Senador.

Tuluy-tuloy po ang pakikiisa ng Pilipinas sa iba't ibang clinical trials sa buong mundo para mahanap ang tamang bakuna para sa COVID-19 at karamihan sa mga trials na ito ay inaasahang magaganap ngayong buwan dito sa bansa. Isa na rito ang Solidarity Clinical Trial na pangungunahan ng World Health Organization.

Makakapanayam natin si Dr. Rabi Abeyasinghe, ang WHO representative in the Philippines. Good morning, Dr. Rabi. Welcome back to the Public Briefing.

DR. RABINDRA ABEYASINGHE: Good morning, Secretary Andanar; a pleasure to be here.

SEC. ANDANAR: Dr. Rabi, when exactly can we expect the Solidarity Clinical Trial for COVID-19 vaccine to start in the Philippines? How soon is soon?

DR. RABINDRA ABEYASINGHE: We are very eager to start the trials as early as possible. We acknowledge that the process has not been as we planned. We were planning to start the trial as early as October, the beginning of October. But right now, we are looking at starting the trials towards the end of October, and that is a complicated process.

We have shared the protocol with the government of Philippines. I believe the Philippine government's partner in this effort for the vaccine trials is the Department of Science and Technology. So what we need is for the DOST and the principal investigators to approve the protocol and get the necessary regulatory and ethical clearances in the Philippines, and ensure that the requirements for readiness are met. And there are eight criteria that we look for readiness; once those are ready, we believe that finally the selection of the candidate vaccines for the Solidarity Trial will be finalized. And WHO will be in a position to send the candidate vaccines to the Philippines for the start of the trials.

And we are still hoping that the solidarity vaccine trials which at phase 3 clinical trials could hopefully commence by the end of October.

SEC. ANDANAR: What exactly would be done on the dry run within this week?

DR. RABINDRA ABEYASINGHE: That's being coordinated by the DOST at the DOH. So that question will need to be asked by them. WHO is helping with the assessment of the preparedness and

readiness for the introduction of the vaccines and we are hoping that process will be completed in time for the arrival of the vaccines. But we are still waiting for formal, ethical and regulatory clearance from the Philippine government authorities so that we can start with the deployment of vaccines.

However, I need to emphasize again that the WHO is in the process of finalizing the candidate vaccines that will be used from the Solidarity Trials. What is good about the Solidarity Trials is that it's a rolling mechanism, so as vaccines that potentially meet the requirements become available, they could be included in the trials even at the later date.

SEC. ANDANAR: What specific vaccines will be used for this trial and how many? Have they already been identified and approved by the Department of Health and under agencies concerned, Dr. Rabi?

DR. RABINDRA ABEYASINGHE: Unfortunately, WHO is still in the process of finalizing which vaccines will be included in the Solidarity Trial. We are now looking at 42 products that are in clinical... late stage clinical trials. Of those, about eight or nine are close to meeting the requirements. WHO is working the respective manufacturer to finalize which will be the final list that will be included in the solidarity protocols.

That means, it's final at this point of time. So we are not yet clear which vaccines will be included for the Philippines.

SEC. ANDANAR: Dr. Rabi, have we also identified how many individuals are required to participate in the trials?

DR. ABEYASINGHE: For the Philippines, WHO was hoping that the Philippines will include up to 4,000 individuals. The Philippines have identified ten vaccine trial sites; nine of them in the National Capital Region and one in Cebu.

The idea is that there needs to be some level-up COVID-19 transmission to measure the efficacy of the vaccines but we have seen a decline in transmission rates in both Cebu and NCR but we believe that the current level of transmission is still adequate to trial the vaccines.

However, that decisions will be made once we have a candidate vaccines to come in.

SEC. ANDANAR: Since the participants will be bound/identified on a voluntary basis, are there volunteer participants and trials? And what is the information that you have, Dr. Rabindra, with regard to that?

DR. ABEYASINGHE: So, on the number of participants WHO was hoping that there will be up to 4,000 participants from the Philippines. I understand now is that the Philippines is looking at 2,000 – 3,000 participants joining the trial. We are hoping that that number could be increased because the larger the number of people being trialed, the sooner we could get evidence of its efficacy, safety, etc.

The protocol that WHO has currently looks at volunteers between the ages of 18 and 60 years who will be included in the trial. Of course, there are some exclusion criteria – people having comorbidity or especially pregnant ladies et cetera, will not be included in the trial simply because we are evaluating the safety of the pregnant at this point of time.

SEC. ANDANAR: You mentioned evaluating safety, is there a way to ensure the participants of their safety? Will they be monitored individually and diligently?

DR. ABEYASINGHE: That is what is expected of the Philippine counterparts, to do their monitoring on a weekly basis at a minimum and follow-up the recipients of the vaccine on a weekly basis at a minimum so that any side effects however small or minor may be picked-up early enough and reported. So, this is what is expected as the contribution from the Philippine participant, authorities who will be joining the trial. Of course, the solidarity Trials are multi countries, multi-center trials and the proposals is that it will help us to include a large number of persons.

We are looking at up to 60,000 patients who could be included so that we can have the evidence of the efficacy and safety early in the first three trials.

SEC. ANDANAR: In September, DOST or Department of Science and Technology earmarked a total budget of P89 million for the Solidarity Trial as confirmed by the Department of Health. May we ask Dr. Rabindra why a budget, is this is necessary for the trial?

DR. ABEYASINGHE: Let's be clear that the allocation made by the DOST is through the coordination of local efforts and for local expenditures. WHO takes the responsibility of shipping the vaccines to the country, providing the vaccines free of charge and ensuring that any insurance for recipients are provided so that they are well look after.

Most of the expenditure earmarked by DOST is for logistical reasons, for management of the protocols and for follow-up of recipients and ensuring that the trials go according to plan in the country.

SEC. ANDANAR: Let's proceed to the media questions for Dr. Rabindra. Usec. Rocky?

USEC. IGNACIO: Okay. Thank you, Secretary Martin. Good morning, Dr. Rabindra. Questions from Red Mendoza of Manila Times: Two WHO experts—

DR. ABEYASINGHE: Good morning.

USEC. IGNACIO: Good morning, sir. Two WHO experts Mike Ryan and David Nabarro have both said that there should be a stop on lockdowns as it destroys economies. These statements have been given wide media play and is now being used by WHO's critics as

proof that lockdowns do not really help in the situation. What is the WHO's official stand on the statements of the two officials?

DR. ABEYASINGHE: Thank you, Usec. Rocky. This is a very important question and we like to really clarify this. We have not said that lockdowns have no place. We have been clear from the beginning of this pandemic, in fact since April, both the DG our regional director and myself have clarified, we want this response to be not only a health but an economic response as well, so we are as entrusted in mitigating the health impact and ensuring that the economy is not damaged and economic revival is ensured.

For this, it is necessary that early detection of cases from isolation of close contacts and positives and quarantining of both and appropriate contract tracing and proper management of cases is ensured. If these measures are in place together with compliance with public health behaviors and the avoidance of the crisis, we could avoid large scale lockdowns.

That's what we have been advocating for countries right from the beginning of this outbreak. We don't view lockdowns as the primary response and if you look at very carefully what Dr. David Nabarro and Mike Ryan are saying, they are saying the same message. We don't view large lockdowns as the primary response. The primary response should be a public health response and when this fails, when the health systems are being overwhelmed, it is necessary to use lockdowns as a last resort. That is what have been advocating right from the beginning.

The early lockdowns help the countries to expand their capacities and better prepared to beat surges in cases. That's why we are seeing low mortality in the Philippines and we are seeing increase diagnostics because their diagnostic capacity was increased. But we have not in any stage advocated that large scale lockdowns should be the primary response. This is very clear. So, there is no actual [garbled] or change in our position, we have always been advocating the same position.

USEC. IGNACIO: Yes. Dr. Rabindra, the WHO has announced that some low and middle income countries will receive antigen test kits funded by the Gates Foundation, is the Philippines one of those countries who will receive those kits?

DR. ABEYASINGHE: Thank you again Usec. Rocky, for the question. The question is important because there are many countries that still don't have capacity for RT-PCR testing. WHO has been clear that the antigen test have significant limitations. Their capacity is limited to the victims/patients with high viral loads in the upper respiratory tract, so, using antigen test will mean that a significant proportion of positive cases are missed but this is the measure that will help low and middle income countries that don't have capacity for RT-PCR to have some kind of diagnostics.

That is why WHO is advocating for those countries to use antigen test in the absence of capacity for RT-PCR and not as a replacement for RT-PCR. I hope that is clear.

USEC. IGNACIO: Questions from Kristine Sabillo of ABS-CBN: What can the WHO say about the fact that the Philippines is now in the top 20 countries with the most number of COVID-19 cases and that our positivity rate is still above the 5% benchmark of the WHO, this despite a reported decline in trend in the number of cases?

DR. ABEYASINGHE: The number of cases reported in a country is dependent on its population size and its capacity to detect. So, if you look at the Philippines, the Philippines from a population perspective I believe the 12th or the 13th largest population among countries in the world; and from a testing capacity, a significant higher testing capacity than many other countries in this part of the region.

So, if you look at it, the fact that the Philippines is reporting a large number of cases and is listed as the 20th country with the most number of cases does not actually translate to high incidence at a population rate. So, we have to be careful in interpreting data and not think and jump to wrong conclusions.

This is critically important, you have to look at it from a comprehensive perspective – what capacity do we have? How good are we at reporting? And what is the population rate of infections we are seeing? And in this respect, the Philippines has significantly higher population testing rate than many other country and equally importantly much lower proportion of fatal cases than many other countries in the region.

USEC. IGNACIO: What is your recommendation for the Philippines to improve its COVID response?

DR. ABEYASINGHE: Again, I don't want to repeat the same message but it is largely the same message. We need to ensure that we have consistent messaging from the government, from the media, from the private sector recognizing the importance of the three key public health behaviors that WHO has been advocating right from the beginning of this pandemic - hand hygiene, respirator etiquette, physical distancing.

Couple these three key public health behaviors with the avoidance of the three 'Cs' – avoid crowded, congested, closed places so that you minimize your risk of infection. And as we recognize the need to bring the economy, we need to carefully calibrate these measures so that we don't allow for a significant increase in transmission again as I have seen in many other countries – now in Europe and North America who relaxed completely the compliances with the measures and now we're experiencing again a significant surge and a need for large scale lockdowns.

The secret of success is to balance these measures and ensure a smooth and gradual opening of the economy while controlling the pandemic 'til we have effective vaccines and therapies at our disposal.

USEC. IGNACIO: Dr. Rabi, question from Marichu Villanueva of Philippine Star: Can you clarify Dr. Rabi, which does WHO protect: The volunteer participants of solidarity test or the COVID-19 vaccine being tested?

DR. ABEYASINGHE: We are interested in the patient's welfare. So if the vaccine is being tested on volunteers, our focus will be on protecting them. We want transfer and sharing of information that's why we are advocating that the vaccine trial multi center, multi country so that there is open access and sharing of information about the actual efficacy and safety profile of the products. And the WHO mandate is to protect the health of people and we have not changed that up to date.

USEC. IGNACIO: Question from Joseph Morong of GMA-7: How far along is the WHO as far as the solidarity trial is concerned? Any vaccine that is emerging to be a frontline runner to be used in the global tests?

DR. ABEYASINGHE: That's a good question there. I believe 2 or 3 candidate vaccines that are being reviewed very closely but I have already mentioned no final decision has been made and in the absence of that decision, I am unable to mention which vaccines are being shortlisted or selected. I appreciate your understanding.

USEC. IGNACIO: What is your comment on the Philippines being number 18 with most cases in the world? Does it mean that the strategy against COVID is not effective?

DR. ABEYASINGHE: By number of cases you maybe number 18, I believe it's number 20. I'm not quite sure, but if you look at the—and that number of cases is a reflection of how much you are testing. But the key issue is how many people are dying and if you look at from the proportion of fatal cases, I believe that the Philippine response has been very proactive and very good in controlling this pandemic.

Of course it is still early, we need to ensure that we comply with all of the protocols that we've been following and ensure that we continue with that process because if we tend to relax and become complacent, we run the risk of having another surge of cases. And as we haven't really zeroed and flattened the cases, we need to continue to stay vigilant and continue to increase our preparedness and response capacity not only here in the National Capital Region and Metro Manila but even beyond in other provinces where we are seeing a small upsurge in cases now.

USEC. IGNACIO: Dr. Rabi, question from Evelyn Quiroz of Pilipino Mirror: Polio is a disease which can easily be prevented by vaccination. For the first time after 19 years, polio has reemerged in the country. Is this an indication of the failure of the Department of Health's vaccination program?

DR. ABEYASINGHE: That's a complex question that actually has about 4 or 5 questions in them. One of the reasons we view why we had a resurgence of polio cases is because of poor vaccination coverage and that has been influenced by many factors not only the responsibility of the Department of Health. There have been concerns about vaccine hesitancy and vaccine safety not related to polio which have we know adversely impacted the uptick of the expanded program of immunization vaccine or childhood vaccines, not only the polio vaccine.

And so it is critically important that we act early to bring back the vaccination coverage. We know that the poor vaccination coverage also resulted in a large measles outbreak in the Philippines in 2018-19; so recognizing this, WHO is now working together with DOH, UNICEF, Rotary International and other partners in the polio response. That response has now being completed on the

Mindanao islands, in NCR, Region III and IV, IV-A and we are embarking on doing the remaining areas of Luzon and Visayas starting on the 26th of this month.

And also, we want to support the DOH in its supplementary immunization for measles and rubella in anticipation of a possible large scale outbreak because we know that EPI [*Expanded Program on Immunization*] vaccine coverage has suffered also as a result of the COVID pandemic. So we want to increase the immune levels in the young children and protect them so that we don't have a repeat of large outbreaks of polio, measles and rubella.

USEC. IGNACIO: Okay. Dr. Rabi, question from Joseph Morong again of GMA-7: With regard to COVAX, how soon can we have a vaccine you think that can be for distribution?

DR. ABEYASINGHE: The COVAX initiative is for—to ensure that the vaccines are universally accessible to all and that we meet the principles that have been identified by the Strategic Advisory Group on immunization of WHO. We have 6 principles that have been clearly defined by the SAGE [*Strategic Advisory Group of Experts*] for COVID vaccines and the COVAX mechanism is a mechanism to ensure that... given the fact that the vaccine trials are undergoing phase 3 trials, only about to commence a large scale during this month or later. We don't expect a vaccine to be available for population deployment before the middle of next year; so at the earliest, maybe June next year.

SEC. ANDANAR: Thank you, Undersecretary Rocky. Lastly Dr. Rabi, your message for the Filipinos who are continuously facing and battling this pandemic?

DR. ABEYASINGHE: From the beginning we have been giving one message – these needs to be a comprehensive, coordinated message across government, different levels of government, across private sector and across the community.

We need to work together; we need to work together to ensure that there is compliance with the basic public health behaviors that we have mentioned. We need to ensure that the physical distancing is maintained. This is critical to interrupt the transmission of the virus and we need to ensure that we make every effort to protect the most vulnerable, dearly beloved, the elderly and peoples suffering from comorbidities. We have to continue to work together and the message that we are tired, we want to go back to the life that we have been before.

I think we have to partake for what's the time being and keep working so that we ensure that everybody is protected until they have good protection for every body and we can go back to life as we were in before. This is the new normal, we have to recognized that this is this behaviors are critical and important in this time and that we maintain all of those behaviors to ensure, I thought that protecting the most vulnerable, continue to bear fruit while we ensure the economy gradually opens up and we minimize the suffering brought about by economic hardships of people in the most vulnerable categories. Thank you.

SEC. ANDANAR: We are all hoping for the positive outcome of the solidarity trial. Thank you so much for your time, Dr. Rabindra Abeyansinghe from the World Health Organization.

DR. ABEYASINGHE: Thank you, Secretary Andanar, pleasure to be here. Have a good day.

USEC. IGNACIO: Sa gitna nang patuloy na paglaban ng ating bansa sa COVID-19. Tuluy-tuloy din naman ang pagtuligsa ng ating pamahalaan sa illegal na droga. Ang isa pinakatututukan ni Pangulong Rodrigo Duterte bago pa man ang pandemya. Kaugnay niyan ay makakausap po natin ang tagapagsalita ng Philippine Drugs Enforcement Agency, si Director Derrick Carreon. Good morning po, sir?

DIR. CARREON: Magandang umaga po sa ngalan ni Director General Wilkins M. Villanueva.

USEC. IGNACIO: Welcome po sa Laging Handa Public Briefing. Director one week po matapos ang utos ni Pangulong Duterte sa PDEA para sirain itong confiscated shabu at ilan pang illegal drugs na nasa poder ng ilang law enforcement agencies. Ano po ang update dito? Naka-comply po ba ang PDEA sa kautusan ng Pangulo?

DIR. CARREON: Yes, Ma'am. Sa katunayan po kasalukuyan po ang ating paghahanda, dahil sa October 15 po, itong darating na Huwebes ay nakatakda po tayong magsunog ng at least one ton of dangerous drugs sa atin pong destruction site sa Trece Martirez, Cavite, Ma'am.

USEC. IGNACIO: Director Carreon may mga katanungan po para sa inyo mula po sa media. Ang tanong po ni Evelyn Quiroz sa inyo, the past four years of the Duterte Administration has seen significant headway in the fights against illegal drugs, and then the COVID-19 pandemic happened. Has the pandemic affected PDEAs fight against the drug menace?

DIR. CARREON: Well, nakikita naman po natin, mula noong sinimulan iyong pinaigting na kampanya laban sa illegal na droga, talagang tumaas po iyong bilang ng ating anti-drug operations conducted, persons arrested, cases filed and volume and value of drugs confiscated. Ngayon nangyari po iyong pandemya, naging hamon po ito sa lahat ng ating mga operatiba. Alam naman po ng lahat, hindi lang po sa aming hanay, ngunit pati sa aming mga kasamahan sa Philippine National Police at sa National Bureau Investigation and other law enforcement agencies – napakahirap pong magsagawa ng anti-drug operations lalung-lalo na po ngayon sa panahon ng pandemya. Ngunit hindi po nangangahulugan dito na titigil po tayo, ma'am.

Katunayan, sabi nga po ni Director General Wilkins M. Villanueva, kasabay po ng pagsalubong sa hamon ng COVID-19 ay ang pagpapatuloy ng ating pinaigting na kampanya laban sa illegal na droga sa pamamagitan po ng pakikipag-ugnayan natin sa ating mga kasamahan, lalung-lalo na po sa mga barangay para mas madali po ang coordination at ang pagsagawa ng anti-drug operations sa iba't ibang lugar po. And ibig pong sabihin nito, hindi po tayo titigil, dahil ang mga sindikato ay hindi rin tumitigil sa pagpapakalat ng illegal na droga sa ating bansa.

Sa katunayan po, nito lamang nakaraan, nagsagawa po tayo ng simultaneous conduct of implementation of search warrants, kaya dalawang drug den po ang aming nalansag sa pinagsanib na puwersa ng PDEA Regional office-NCR at Malabon City Police station 7. Nang magsagawa po tayo ng simultaneous implementation and search warrants, dalawang drug den maintainers at limang drug den visitors ang naaresto at humigit kumulang na 25 gramo po ng shabu ang ating nakumpiska dito na nagkakahalaga ng 170,000 kasama ang mga drug paraphernalia po, ma'am.

So, in total po mula noong July 1, 2016 to August 31, 2020. Mula ng nagsimula po iyong ating pinaigting na kampanya laban sa illegal na droga, 603 drug dens na po ang ating nalansag. Ito po

iyong mga tinatawag na one-stop-shop facilities na kung saan ay maaari pong bumili at gumamit ng illegal na droga ang mga parokyano po nila.

USEC. IGNACIO: Opo, marami daw pong pending at archived cases ang naka-link sa mga confiscated illegal drugs na ito na nasa halos 700 kilos ng shabu at nagkakahalaga ng halos 4.76 billion pesos. Ano daw po ang mangyayari sa mga pending cases na ito at patuloy po ba itong tututukan ng PDEA?

DIR. CARREON: Opo, ma'am. Katunayan po ang ginagawa po natin ngayon ay—actually na bring up po itong issue na ito during the Senate hearing, kung saan natanong po ng mga kagalang-galang na senador iyong estado nitong mga pending cases natin. So, ang naging action taken po rito ni Director General Wilkins M. Villanueva ay sumulat po tayo ng liham sa kagalang-galang na Secretary of Justice po natin, Secretary Menardo Guevarra at humingi po tayo ng tulong, ma'am, upang iyong mga handling prosecutors po dito sa mga pending drug cases na ito ay magkaroon po ng concurrence or sumang-ayon or tulungan po tayong maghain ng motion doon sa iba't ibang korte – kasi iyong iba po, may nakahain ng motion and then iyong others, we need a concurrence to the motion for the conduct of ocular inspection, the taking of representative samples at ang eventual po na pagbigay ng court order for destruction nitong mga cases po nakabinbin ngayon sa iba't ibang korte kasama na rin po iyong mga pending cases na archived and under automatic review.

Actually, ma'am, to correct the figure, ang total po rito is something like 540.6 kilograms of shabu at definitely po sisikapin po naming makuha iyong mga kaukulang court orders po dito upang maisama po natin sa ating impending destruction on October 15.

USEC. IGNACIO: Oo, pero totoo po ba na mayroon pa rin kayong mga undestroyed drug evidence as far as above far back as 2010 at gaano karami po iyong confiscated drugs na hanggang ngayon po ay naghihintay pa rin ng court order for disposal?

DIR. CARREON: Yes, ma'am. Katunayan po ang current inventory natin is at 2.82 tons of illegal drugs ang total value po, updated po ito, Ma'am, kasi po noong nakaraang linggo P14 billion iyong estimated value noong nasa kustodiya po natin. Ngunit dahil may mga nag-turnover po sa atin na mga other law enforcement agencies and courts upang maihabol po sa ating upcoming destruction, ang current inventory po natin sa PDEA laboratory Service ay nasa 2.82 tons, valued at P15.189 billion.

Ma'am, ipaliwanag lang po natin ano, in fact, katatapos lang po ng ating destruction of dangerous drugs noong pagkatapos pong umupo ni Director General Wilkins M. Villanueva, nagsagawa po tayo ng joint destruction of dangerous drugs kasama po ang Philippine National Police nitong August 21, ito lang po, very recently. Kung saan ang halaga po nito ay more than P13 billion worth of illegal drugs, weighing more than one ton, kung saan ang bulk po nito ay mula sa Philippine National Police and about another 800 kilos – actually more than two tons – 800 kilos po mula sa PDEA. So, 13 plus billion po iyan, ngunit dahil po may mga patuloy po tayong large volume of confiscation of illegal drugs, kapag nababawasan po iyong inventory natin, may pumapasok naman pong panibago. Kaya sa pananaw po ng mga karamihan parang hindi nauubos iyong illegal na droga. Ito po ay dahil patuloy po ang kampanya natin and resulting in huge volumes of confiscations of illegal drugs. Ngunit makakaasa po ng buong sambayanan na patuloy po nating gagampanan ng ating panunungkulan hindi lang sa operations ngunit pati po iyong pag-follow up ng mga kaukulang orders upang eventually po ay masunog na po natin itong mga illegal na droga na nasa ating kustodiya.

USEC. IGNACIO: Pero, Director this is an ongoing problem daw po ayon kay Senator Franklin Drilon kung saan hindi daw po nasusunod ng implementing agency at maging ng judiciary ang batas na nakasaad sa Comprehensive Dangerous Drugs Act of 2002 na dapat after four days ng pagkakakumpiska sa mga ebidensiya ay sisirain na ito. At ito po ay sa kabila rin ng pag-iisyu ng Office of the Court Administrator ng isang circular order na dapat umanong sundin ng mga husgado sa paghawak ng mga kasong may kaugnayan sa drugs. Ano po sagot dito ng PDEA?

DIR. CARREON: Well, ginagalang po natin ang obserbasyon ng mga kagalang-galang na senador tungkol dito at ng iba pang mga hanay ng ating mga kababayan maski ang pangkaraniwang mamamayan.

Kaya nga po patuloy ang ating pakikipag-ugnayan sa Department of Justice at gayun din po sa iba't ibang mga courts. Mabuti nga po, ma'am, at nag-isyu po ng tinatawag din po na Office of the Court Administrator Circular #118, Series of 2020 kung saan po ay ipinagbigay-utos po ni Honorable Court Administrator Justice Jose Midas Marquez - na siya po palang panauhing pandangal natin noong nakaraang August 21 destruction - strongly advising the different courts na may jurisdiction po dito sa mga kaso involving five kilograms and up na kaagad-agad po ng sundin ang provisions po ng Republic Act 9165, particularly po ang Section 21 as amended by Republic Act 10640 upang matanggap na nga po or makuha na po namin ang court orders for destruction, at ng eventually po ay ma-execute po namin ang court orders sa pagsunog po nitong mga bulk pieces of drug evidence na nasa kustodiya po namin at gayun din sa kustodiya ng iba pang law enforcement agencies tulad ng PNP at ng NBI.

Batid po natin ang challenges dito sa paggulong po ng wheels of justice dahil nga po kapag gumugulong ang isang kaso sa ilegal na droga, nangyayari po diyan siyempre kapag naghain ng mosyon iyong defense counsel ay doon po nagkakaroon ng pansamantalang delay doon po sa proseso ng ating pagtanggap ng mga court orders. Ngunit tayo ay patuloy na makikipag-ugnayan sa iba't iba pong mga prosecutors at gayun din po sa korte upang makuha na po natin iyong mga kaukulang papeles po.

USEC. IGNACIO: Okay. Maraming salamat po sa inyong panahon, Director Derrick Carreon ng PDEA. Stay safe po, Director.

DIRECTOR CARREON: Maraming salamat po, sa ngalan po ni Director General Wilkins Villanueva, God bless po sa inyo, ma'am. Thank you very much.

SEC. ANDANAR: Maraming salamat po, Director.

Samantala, kahapon, October 11, 2020, ay nakapagtala ang Department of Health ng 339,341 total confirmed cases ng COVID-19 sa bansa matapos itong madagdagan ng 2,502. Two hundred ninety-three thousand seventy-five naman ang kabuuang bilang ng mga gumaling na kahapon ay nadagdagan ng 17,057, habang walumpu't tatlo ang nadagdag sa mga nasawi na sa kabuuan ay nasa 6,329 na.

USEC. IGNACIO: Kapansin-pansin sa ating line graph na taas-baba ang kasong naitatala sa kada araw. Makikita rin na hindi pa bumababa sa 2,000 po ang COVID-19 cases na nairi-report sa nakalipas na isang linggo.

Sa NCR pa rin po naitala ang pinakamataas na kaso kahapon na umabot sa 782 cases. Sumunod naman ang Rizal na nakapagtala ng 141 new cases. Ang Laguna ay nasa ikatlong puwesto na may 128 na bagong kaso. Sumunod naman ang Cavite na may 125 cases, at panlima ang Bulacan na may 119 new cases.

SEC. ANDANAR: Tulad ng ating naiulat, tuwing Lunes ay malaki ang ibinababa ng active cases dahil sa mataas na bilang ng recoveries tuwing Linggo. Kung last week ay nasa 14% ang active cases, bumaba na ito sa 11.8%, katumbas ito ng 39,945 cases. Sa bilang na ito, 3.9% ay kritikal, 1.8% ang severe, 11.2% ang walang sintomas at malaking bahagi o 83% ay mild cases lamang.

USEC. IGNACIO: Bagama't patuloy na bumababa ang bilang ng active cases, huwag pa ring kalimutang magsuot ng facemasks. Ugaliin natin ang pagsusuot nito lalo na kung tayo po ay lalabas ng bahay dahil sa pamamagitan ng pagsusuot ng mask ay nababawasan nito ng 67% ang tiyansa na tayo ay makahawa o 'di kaya ay mahawa ng sakit. Maging BIDA Solusyon sa COVID-19.

Para po sa inyong mga katanungan at concerns tungkol po sa COVID-19, maaari ninyo pong i-dial ang 02-894-COVID o kaya ay 02-894-26843. Para po naman sa mga PLDT, Smart, Sun at TNT subscribers, i-dial ang 1555. Patuloy rin kayong makibalita sa mga pinagkakatiwalaang sources ng impormasyon tungkol sa COVID-19, maaari ninyong bisitahin ang covid19.gov.ph.

SEC. ANDANAR: Puntahan natin ang mga balitang nakalap ng ating mga kasamahan mula sa Philippine Broadcasting Service hatid sa atin ni John Mogol. Take it away, John.

[NEWS REPORTING]

SEC. ANDANAR: Maraming salamat, John Mogol.

Alamin naman natin ang pinakahuling balita mula sa PTV Cordillera kasama si Eddie Carta.

[NEWS REPORTING]

USEC. IGNACIO: Maraming salamat sa iyo, Eddie Carta ng PTV Cordillera. Mula Cordillera, puntahan natin ang kaganapan sa Cebu kasama si John Aroa. John?

[NEWS REPORTING]

USEC. IGNACIO: Mula sa PTV Cebu, magbabalita naman sa Davao City si Julius Pacot. Julius?

[NEWS REPORTING]

SEC. ANDANAR: Salamat sa'yo, Julius Pacot mula sa PTV Davao.

USEC. IGNACIO: Samantala, Secretary, pasalamatan na rin natin ang ating mga partner agency para sa kanilang suporta sa ating programa at maging ang Kapisanan ng mga Brodkaster ng Pilipinas. Salamat din po sa Filipino Sign Access Team for COVID-19. Mabuhay po kayo!

SEC. ANDANAR: At diyan po nagtatapos ang ating programa sa araw na ito. Ako po ang inyong lingkod, Secretary Martin Andanar mula sa PCOO.

USEC. IGNACIO: At ako naman po si Usec. Rocky Ignacio. Secretary, 74 days na lang at Pasko na.

SEC. ANDANAR: Talagang malapit na 'no. Kailangan magdasal para tayo po ay mag-survive. Hanggang bukas pong muli dito sa Public Briefing #LagingHandaPH.

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