

Three years into a distinguished stint as secretary for social welfare and development, Dr. Esperanza Cabral is proving that a cardiologist can be good in matters of the heart in more than one respect

TAKING THINGS TO HEART

Woing her to government service took some time that when she finally gave the sweet answer, she went out to show that she is in for a serious engagement.

Not that Department of Social Welfare and Development (DSWD) secretary and top-notch cardiologist Esperanza Cabral had much of a choice but to take matters to heart right after filling the mutinous shoes of her predecessor Corazon "Dinky" Soliman who resigned in mid-2005 at the height of the "Hello Garci" controversy that rocked the Arroyo administration. The time was early 2006 and two disasters, one man-made and the other indirectly so, exerted *force majeure* on Cabral to heed the persistent call to serve in an area she admitted was quite "out of her radar." She felt that refusing to take the DSWD post at that point would already be sheer arrogance.

It was the time of the stampede at Pasig City's ULTRA sports complex which left 71 people dead and many more aghast as the barrel-scraping desperation of poverty reared its ugly head. Soon after was the mudslide in Southern Leyte that wiped away more than 1,000 lives.

Cabral is no novice to public service as the former director of the Philippine Heart Center and resource person for various government bodies, but the DSWD post would be her first assignment not related to her professional training.

"I only knew one person in DSWD and I knew her only because we went to the same high school decades ago," Cabral recalls. "I had to meet a lot of new people, adjust to them, as well as to the procedures and processes in the office. I had to make sure the department was running properly when I was learning all these things."

Not until three months after, she said, did she become "the DSWD secretary in every sense of the word."

Joining the government also wasn't a very popular decision at the time. "There were some eyebrows raised and some whispering. The loudest whispers and the highest eyebrows belonged to the people who love me the best and whom I love the most," she remembers.

But all things considered, it wasn't a particularly difficult transition for her. She believes herself to be already in command of the weightier matters underlying the nitty-gritty of administration.

"The principles of public service and of management are the same everywhere, whether you are managing a household or a hospital or a department, or whether you are serving as a doctor or secretary or social worker. So in those things, there wasn't very much needed adaptation," she observes.

A couple of such principles dear to her as a manager are accountability and transparency. And once she was completely on top of things at the department, she further upped the ante on those.

Not only are these issues particularly prickly under the present administration as a whole. As the key agency interfacing with foreign and local resources for welfare support in disaster-ridden times, DSWD's level of credibility also has its value in dollars or in whatever currency calamity aid comes in.

One of the things she instituted since the time of the Southern Leyte disaster was to fully document in the DSWD web site external donations for major calamities. "Before I came in, we had a web site that did not con-

tain very much and change very much for maybe months. Now we put down in our web site the donations we received, from whom, how much it is and what we did with the money, goods or services given," she explains.

Where the clinician meets the public servant

Even if thinking on one's feet is more critical than advanced thinking in what DSWD does, Cabral nevertheless stands by her ethos about the "perfectibility of things." This is where Cabral, the public servant, meets Cabral, the clinician. The two have never really parted ways anyway.

"I believe that public service can draw upon the most rigorous of analytical methodology," she said in a recent commencement address to graduating medical students.

She added: "The decisions that occupy me every day at the DSWD are on the surface



SEC. CABRAL

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very different from those I confronted when I was at the Heart Center. But scratch the surface and you will find that what we are working so hard to accomplish at the DSWD is not so different from the mission that physicians have succeeded at so well."

Taking the argument further, she believes that as a doctor by training, she brings a lot of things to the table. "I don't think there is any group better prepared than doctors to do these things. The kind of discipline that doctors have plays a very important role, and was something that to some extent I wanted to and have been able to transfer to DSWD," she says.

This discipline entails, among others, adapting to long working hours—an average of 14 hours in her case—and being awoken any hour of the night or day. As far as her life goes with husband Dr. Bienvenido Cabral and their family, she has been in training for her DSWD stint all her life.

A cardiologist used to evidence-based practice and herself an author of more than 80 scientific papers, she wanted the critical thinking that comes with this territory to be adopted also by those she believes to be in the pinnacle of "compassion and dedication" in government service: the DSWD employees.

As the clinician and scientist probe to validate knowledge, so does the public servant question the status quo to trim red tape and bureaucratic flab. She puts existing department policies through the paces with a razor-sharp scrutiny employed many times to good effect in the clinic, the medical academe, and even in her previous government stints.

As a consultant with the Department of Health, she had previously donned the hats of clinician and public servant at the same time and with distinction as head of a research team that did the first bioavailability studies on generic drugs in the early days of the Generics Law.

Her team's findings that most of these drugs were not equivalent to their innovator counterparts led the government to require bioavailability studies of appropriate drugs before approving sale to the government and the public.

"Of course, I cannot change things overnight," she admits. "There is a change process that needs to be undertaken. But I have tried to do that and to some extent I have been successful, mostly through leading by example."

After three years in her post, her ideas about public service have found some fertile ground among her people in the department. In July 2007, a Pulse Asia survey found the DSWD to have the highest approval rating in the bureaucracy and conversely, the lowest disapproval rating among a number of government agencies surveyed.

The public's highly favorable opinion of DSWD seems to be borne out by the government's own assessment. According to Cabral, the department went from number three to number one among government agencies in terms of efforts to stamp out corruption in the bureaucracy.

In the event that she gets to stay on in DSWD until 2010, a new horizon of public service beckons after, but with a marked difference. "I plan to go back to practice, devoting a bigger part of it to service rather than for income," she says, then adds, "but I don't plan to work 14 hours anymore." **M**