EXEMPLARY NOTE

It is the declared policy of the State that it values the dignity of every human person and guarantees full respect for human rights. The State shall likewise protect and promote the right to health of the people and instill health consciousness among them.

Breastfeeding a child is an important and basic act of nurturing that must be protected in the interests of maternal health, child health and family values. A mother has the right to breastfeed a child in any location, public or private, where the mother and child are otherwise authorized to be present, irrespective of whether or not the mother’s breast is covered during or incidental to the breastfeeding.

In recognizing this right, on June 2, 1992, Republic Act (RA) No. 7600, otherwise known as “The Rooming-In and Breastfeeding Act of 1992” was passed to protect the rights of working mothers to engage in the practice of rooming-in and breastfeeding. In 2010, RA 10028, otherwise known as the “Expanded Breastfeeding Promotion Act of 2009,” amended RA 7600 which required that all health and non-health facilities, establishments or institutions to establish lactation stations. On February 23, 2011, the Department of Health launched the exclusive breastfeeding campaign dubbed as “Breastfeeding TSEK: (Tama, Sapat, Ekslusibo)” encouraging mothers to exclusively breastfeed their babies from birth up to six months to reduce child mortality and improve child survival.

Inspite of the passage of RA 7600, as amended, and the initiative of the Department of Health to promote breastfeeding, the challenge to continue exclusive breastfeeding for at least six months is still hampered by many factors such as duration of maternity leave, non-compliance of public and private institutions to allow lactation breaks and availability of lactation stations in workplaces and other establishments.
Moreover, there are many factors that prevent latching to mother’s breast such as seriously-ill infants or mothers, incubated infants, premature babies, sensory disabled infants, infants with special needs or when there is a great interference from different sectors of the society that discriminate nursing mothers.

In order to support breastfeeding in the health facilities, at home, in the community and at the workplace, there is a need to eliminate all health, social, cultural, economic, environmental and other barriers that are prejudicial to the breastfeeding journey of a mother.

In view of the foregoing, the passage of this bill is earnestly sought.
AN ACT PROMOTING BREASTFEEDING PRACTICES IN THE PHILIPPINES AND APPROPRIATING FUNDS THEREFOR

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

ARTICLE 1
TITLE, POLICY, PRINCIPLES, OBJECTIVES, APPLICABILITY, SCOPE AND DEFINITION OF TERMS

Section 1. Short Title – This Act shall be known as the “Breastfeeding Practices Act”

Section 2. Declaration of Principles and State Policies – It is declared policy of the State that it values the dignity of every human person and guarantees full respect for human rights. The State shall likewise protect and promote the right to health of the people and instill health consciousness among them.

Breastfeeding a child is an important and basic act of nurturing that must be protected in the interests of maternal health, child health and family values. A mother has the right to breastfeed a child in any location, public or private, where the mother and child are otherwise authorized to be present, irrespective of whether or not the mother’s breast is covered during or incidental to the breastfeeding.

Towards this end, it shall develop various programs tailored to protect the right of every mother to breastfeed a child by giving them a comprehensive package of health, education and social development programs.

To facilitate full support on breastfeeding, the State shall exert all efforts to remove all health, social, cultural, economic, environmental and other barriers that are prejudicial to the breastfeeding journey of a mother.
Section 3. Objectives – The objectives of this Act are as follows:

1) To recognize the right of every mother to breastfeed her child;

2) To recognize the different practices and technology available to help mothers express their breast milk;

3) To educate mothers on the benefits of breastfeeding and expression of breast milk;

4) To educate mothers on the different alternatives to provide breast milk to a child;

5) To make breast milk readily available to infants in need;

6) To eliminate misconceptions about breastfeeding and different ways of expressing breast milk;

7) Ensure that every breastfeeding mother has access to timely breastfeeding and health information and adequate medical care, including breastfeeding seminars, breastfeeding consultations, medical services and other breastfeeding products that help mother produce or express breastmilk;

8) Direct the Department of Health:
   a) To oversee research and development activities on breastfeeding and the latest technology available to help mothers to express their breast milk;
   b) To continuously educate nurses, doctors, health care practitioners, lactation consultants on breastfeeding;
   c) To conduct public education programs for breastfeeding mothers;
   d) To help the public understand the importance and benefits of breastfeeding; and
   e) Ensure that every barangay shall conduct breastfeeding educational programs.

9) Provide regulatory and fiscal incentives to support research and development activities on breastfeeding, health care practitioners who specialize on breastfeeding, and importation or manufacturing of affordable breastfeeding supplements, breast pumps and other paraphernalia that helps mother express breastmilk;

10) Establish milk banks in every region and ensure that every hospital has sufficient amount of breastmilk; and

11) Institutionalize a financial incentive system for establishments involved in clinical research, patient care, medical information management and other similar activities for the benefit of breastfeeding mothers.

Section 4. Applicability. – The provisions in this Act shall apply to all individuals, public and private enterprises as well as government agencies, including their subdivisions and instrumentalities, and government-owned and controlled corporations.
All health and non-health facilities, establishments or institutions which are exempted in complying with the provisions of this Act but nevertheless opted to comply are entitled to the benefits herein stated: provided, that they give their employees the privilege of using the same.

Section 5. Scope. - This Act covers all expectant mothers, lactating mothers, mothers undergoing the process of re-lactation, lactating male, adoptive parent, guardian and donors or breast milk for the consumption of a child who may or may not use devices, containers or breast pump.

Section 6. Definition of Terms. – For purposes of this Act, the following terms are adopted:

a) “Age of gestation” means the length of time the fetus is inside the mother’s womb.

b) “Bottle feeding” means the method of feeding an infant using a bottle with artificial nipples, the contents of which can be any type of fluid.

c) “Breastmilk” means the human milk from a mother.

d) “Breast milk substitute” means any food being marketed or otherwise represented as partial or total replacement of breast milk whether or not suitable for that purpose.

e) “Breast milk supplement” means any food whether manufactures or locally prepared, suitable as a complement to breast milk or infant formula when either insufficient to satisfy the nutritional requirement of the infant. This can include products also commonly called as “weaning food.”

f) “Breast pump” means any item that allows breast milk to be ingested by the baby, such as but not limited to commercially available device or apparatus with suction and, or moving parts intended to remove human milk from the body.

g) “Container” means any form of packaging of products for sale as a normal retail unit, including wrappers.

h) “Distributor” means a person, corporation or any other entity in the public or private sector engaged in the business (whether directly or indirectly) of marketing at the wholesale or retail level a product within the scope of this Act.

i) “Expressed breast milk” means human milk which has been extracted from the breast by hand or by breast pump.

j) “Expressing milk” means the act of extracting human milk from the breast by hand or by pump into a container.

k) “Formula” means the act of feeding a newborn with infant formula usually by bottle. It is also called “artificial feeding.”
l) “Health care system” means any governmental, nongovernmental or private institutions or organizations engaged, directly or indirectly, in health care for mothers, infants and pregnant women; and nurseries or child-care institutions. It also includes health workers in private practice. For purposes of this Act, the health care system does not include pharmacies or other established sales outlets.

m) “Health institutions” refers to hospitals, health infirmaries, health centers, lying-in centers, or puerculture centers with obstetrical and pediatric services.

n) “Health care practitioner” refers to persons who are engaged in health and health-related work, and all persons employed in hospitals, health centers and other health-related establishments, whether government or private.

o) “Infant” means a child within zero (0) to twelve (12) months of age.

p) “Infant Formula” means the breastmilk substitute formulated industrially in accordance with applicable Codex Alimentarius standards.

q) “Label” means any tag, brand, mark, pictorial or descriptive matter, written, printed, stenciled, marked, embossed or impressed on, or attached to, a container of any product within the scope of this Act.

r) “Lactation management” means the general care of a mother-infant nursing couple during the mother’s prenatal, immediate postpartum and postnatal periods, it deals with education and providing knowledge and information to pregnant and lactating mothers on the advantages of breastfeeding, the risks associated with breastmilk substitutes, milk products not suitable as breastmilk substitute and other matters that would contribute to successful breastfeeding.

s) “Lactation message” is a technique of applying smooth and gentle pressure to specific contact points on the breast to stimulate glands to have continuous flow of breast milk and to prevent clogging of breast milk ducts.

t) “Latching” is the way a baby attaches to his mother’s breast to breastfeed.

u) “Low Birth Weight Infant” means a newborn weighing less than two thousand five hundred (2,500) grams at birth.

v) “Manufacturer” means a corporation or other entity in the public or private sector engaged in the business or function (whether directly or through an agent, or through an entity controlled by or under contract with it) of manufacturing a product within the scope of this Act.

w) “Marketing” means product promotion, distribution, selling, advertising, product public relations, and information services.

x) “Marketing Personnel” means any person whose functions involve the marketing of a product or products coming within the scope of this Act.
y) "Mother" any person who expresses or provides human milk.

z) "Mother’s milk" means the breast milk from the newborn’s own mother.

aa) "Rooming-in" means the practice of placing the newborn in the same room as the mother immediately after the delivery until discharge, to facilitate mother-infant bonding and to initiate breastfeeding. The infant may either share the mother’s bed or be placed in a crib beside the mother.

bb) "Samples" means any single or small quantities of a product provided without cost.

c) "Seriously-ill mother’s" refers to mothers with severe infections, in shock, in severe cardiac or respiratory distress, dying, or those with conditions that may be determined by the attending physician as serious.

dd) "Supplies" means quantities of a product provided for use over an extended period, free or at a low price, for social purposes, including those provided to families in need.

ee) "Wet-nursing" refers to the act of feeding a newborn from another mother’s breast when the newborn’s mother cannot breastfeed.

ff) "Young child" means a person from the age of more than twelve (12) months up to 36 months.

ARTICLE II
BREASTFEEDING RIGHTS

Section 7. Declaring Breastfeeding as Basic Human Right – This Act hereby declares the right of a mother to breastfeed and express breast milk is a basic human right.

Section 8. Right to Breastfeed and Express Breast Milk – A mother may breastfeed a child or express breast milk in any location, public or private, where the mother and child are otherwise authorized to be, irrespective or whether the nipple of the mother’s breast is uncovered during or incidental to breastfeeding or expression of breast milk.

No law or ordinance shall prohibit, restrict or limit a mother from breastfeeding a child or expressing her breast milk in public or private location where the mother and child are otherwise authorized to be.

No person or establishment shall discriminate or interfere with a mother breastfeeding a child or expressing breast milk in any location, public or private where the mother and child are otherwise authorized to be.
Section 9. Breastfeeding Alternatives – This Act recognizes other alternatives available to mothers to provide breast milk to a child other than direct latching. This includes but is not limited to the usage of breast pumps and other paraphernalia that helps mothers’ lactate or express breast milk and receive breast milk. Provided that these alternatives may only be resorted to upon recommendation of a physician or certified lactation consultant.

Section 10. Breastfeeding Awareness Month – To raise awareness on the importance of and to further promote breastfeeding, the month of August in each and every year throughout the Philippines shall be known as “Breastfeeding Awareness Month.”

Section 11. Lactation Stations/Facilities – It is hereby mandated that all health and non-health, public or private facilities, establishments or institutions shall establish lactation stations. The lactation stations shall be adequately provided with the necessary equipment and facilities, such as: changing table, lavatory for hand-washing, unless there is an easily-accessible lavatory nearby; refrigeration or appropriate cooling facilities for storing expressed breast milk; electrical outlets for breast pumps; a small table, comfortable seats, and other items, the standards of which shall be defined by the Department of Health. The lactation station shall not be located in the toilet.

In addition, all health and non-health, public or private facilities, establishments or institutions shall take strict measures to prevent any direct or indirect form of promotion, marketing, and/or sales if infant formula and/or breast milk substitutes within the lactation stations, or in any event or circumstances which may be conducive to the same.

Apart from the said minimum requirements, all health and non-health, public or private facilities, establishments or institutions may provide other suitable facilities or services within the lactation station.

Upon application to, and determination by, the Secretary of the Department of Labor and Employment for the private sector, and the Chairperson of the Civil Service Commission for the public sector, all health and non-health, public or private facilities, establishments and institutions may be exempted for a renewable period of two (2) years from establishing lactation station where the construction of lactation station is not feasible or necessary due to the peculiar circumstances or the workplace or public place taking into consideration, among other the physical size of the establishment.

Section 12. Lactation Periods. – Nursing employees shall be granted break intervals in addition to the regular time-off for meals to breastfeed or express milk, these intervals, which shall include the time it takes an employee to get to and from the workplace lactation station, shall be counted as compensable hours worked. The Department of labor and Employment (DOLE) may adjust the same: Provided, that such intervals shall not be less than a total for forty (40) minutes for every eight (8)-hour working period.

Section 13. Breastfeeding or Expression of Breast Milk in the Workplace. – All health and non-health, public or private facilities, establishments shall establish lactation stations. Thus,

a) Mothers shall have the right to breastfeed their babies in the workplace. Employers shall develop policies and programs which will facilitate the continuation of breastfeeding of women when they return to work, including the setting up of lactation stations in the workplace.
b) Employers shall provide lactation periods for their employees who want to express milk or breastfeed. It shall be an additional break time from those already authorized (i.e. meal or coffee-break).
c) Owners of malls, theme parks and other large establishments shall establish lactation stations within their business premises. They shall also include changing tables for women who wish to change the clothes or diapers of the children.

Station 14. Breastfeeding Discriminatory Practices. – Breastfeeding a child or expressing breast milk as part of breastfeeding shall not be considered an act of public indecency and shall not be considered nudity, indecent exposure, sexual conduct, lewd touching, or obscenity.

Moreover, indecent exposure, sexual conduct, lewd touching, obscenity, and similar terms do not include the act of a mother breastfeeding a child or expressing breast milk in a public location where the mother and child are otherwise authorized to be.

Section 15. Work Discrimination. – No employer shall discriminate against any employee with respect to terms and conditions of employment on account of her condition as a breastfeeding mother. Provided, that the nature of their work is not detrimental to breastfeeding.

ARTICLE III
HUMAN MILK BANK

Section 16. Provision of Facilities for Breastmilk Collection and Storage. – Health institutions adopting rooming-in and promoting breastfeeding shall provide equipment, facilities, and supplies for breast milk collection, storage and utilization, the standards of which shall be defined by the Department of Health.

Section 17. Establishment of Regional Milk Banks. – The Local Government Unit in coordination with the Department of Health shall establish at least one milk bank per region and establish guidelines in proper storage and distribution of breast milk.

ARTICLE IV
ROOMING-IN AND BREASTFEEDING OF INFANTS

Section 18. Scope. – The provisions of this Article shall apply to all private and government health institutions adopting rooming-in and breastfeeding.

Section 19. Normal Spontaneous Deliveries. – The following newborn infants be put to the breast of the mother immediately after birth and forthwith roomed-in within thirty (30) minutes:
   (a) Well infants regardless of; and
   (b) Infants with low birth weights but who can suck.

Section 20. Deliveries by Caesarian section. – Infants delivered by a caesarian section shall be roomed-in and breastfed within three (3) to four (4) hours after birth.

Section 21. Deliveries outside Health Institutions. – Newborns delivered outside health institutions whose mothers have been admitted to the obstetrics department and who both meet the general conditions stated in Section 19 of this Act, shall be roomed-in and breastfeed immediately.

Section 22. Exemptions. – Infants whose conditions do not permit rooming-in and breastfeeding, as determined by the attending physician, and infants whose mothers are:
   (a) Seriously-ill;
   (b) Taking medications contraindicated to breastfeeding;
(c) Violent psychotics; or
(d) Whose conditions do not permit breastfeeding and rooming-in as determined by the physician shall be exempted from the provisions of Sections 19, 20 and 21: Provided, that these infants shall be fed expressed breast milk or wet-nursed as may be determined by the attending physician.

ARTICLE V
EDUCATION, MARKETING OF BREASTMILK SUBSTITUTES,
BREASTMILK SUPPLEMENTS AND RELATED PRODUCTS

Section 23. Educating the Public. – The government shall ensure that objective and consistent information infant and young child feeding is available for use by families and provided to those involved in the field of infant and young child nutrition. This responsibility should cover the planning, provision, design and dissemination information, or their control. Informational and educational materials, whether written, audio, or visual, dealing with the feeding of infants and intended to reach pregnant women and mothers of infants and young children should include clear information on all the following points.

(a) Benefits and superiority of breast-feeding;
(b) Maternal nutrition;
(c) Preparation for and maintenance of breast-feeding;
(d) Breastfeeding or expressing of breast milk in the workplace;
(e) Negative effects on breast-feeding of introducing partial bottle-feeding;
(f) Difficulties of reversing the decision not to breast-feed; and
(g) Where needed, the proper use of infant formula, whether manufactured industrially or home-prepared. In addition, the social and financial implications of its use; the health hazards of unnecessary or improper use of infant formula and other breast-milk substitutes shall be included. Such materials should not use any pictures or text which may idealize the use of breastmilk substitutes.

Section 24. Integration of Breastfeeding Education in the Curricula. – To encourage and promote breastfeeding, the Department of Education, the Commission on higher Education and the Technical Education and Sills Development Authority shall integrate in the relevant subjects in the elementary, high school and college levels, especially in the medical and education, the importance, benefits, methods or techniques of breastfeeding, and change of societal attitudes towards breastfeeding.

Section 25. Facilities. – the facilities of health care system shall not be used for the following:

(a) Any activity with the purpose of promoting infant formula or other products within the scope of this Act. However, dissemination of information to health professionals in accordance with Section 26 is not precluded.
(b) The display of products within the scope of this Act, for placards or posters concerning such products, or for the distribution of material provided by a manufacture or distributor other than that specified in Section 23.

Section 26. Information Provided to Health Professionals. – Information provided by manufacturers and distributors to health professionals regarding products within the scope of this Act should be restricted to scientific and factual matters, and such information should not imply or create a belief that bottle-feeding is equivalent to superior to breastfeeding. It should also include the information specified in Section 23.
Section 27. Inducements. – No financial or material inducements to promote products within the scope of this Act should be offered by manufacturers or distributors to health workers or members of their families, nor should these be accepted by health workers or members of their families.

Section 28. Samples Not Provided to Health Workers. – Samples of infant formula or other products within the scope of this Act, or equipment or utensils for their preparation or use, should not be provided to health workers except when necessary for the purpose of professional evaluation or research at the institutional level. Health workers should not give samples of infant formula to pregnant women, mothers of infants and young children, or members of their families.

Section 29. Labeling. – Labels should not contain anything that will undermine or discourage breastfeeding. They shall only contain necessary information about the appropriate use of the product, and so as not to discourage breastfeeding.

Section 30. Label Guidelines – Every container shall have a clear, conspicuous and easily readable message printed on it, or on a label which cannot readily be detached from it. It shall be in Filipino or English, and shall contain the following.

(a) Words “Important Notice” or their equivalent;
(b) A statement of superiority of breast-feeding;
(c) A statement that the product should be used only on the advice of a health worker as to the need for its use and the proper method of use;
(d) Instructions for appropriate preparation, and a warning against the health hazards of inappropriate preparation.
(e) The ingredients used;
(f) The composition/analysis of the product;
(g) The storage conditions required; and
(h) The batch number and the date before which the product is to be consumed, taking into account the climatic and storage conditions of the country concerned.

Section 31. Prohibited Design of Container and Label. – Containers and labels shall not contain the following:

(a) Pictures of infants and other pictures or text which may idealize the use of infant formula. However, graphics for easy identification of the product as a breastmilk substitute and for illustration of methods of preparation are allowed.
(b) Terms “humanized”, “materialized” or similar terms.

(a) Inserts giving additional information about the product and its proper use, subject to the above conditions, may be included in the package or retail unit. When labels give instructions for modifying a product into infant formula, the above should apply.

Section 32. Warning Label. – The quality of products is an essential element for the protection of the health of infants and therefore should be of a highly recognized standard. Food products within the scope of this Act should, when sold or otherwise distributed, meet applicable standards recommended by the Codex Alimentarius Commission and also the Codex Code of Hygienic Practice for Foods for Infants and Children.
ARTICLE VI
CERTIFIED LACTATION CONSULTANTS

Section 34. Creation of Philippine Board of Lactation Consultants – There shall be a board of lactation consultants in the country under the Department of Health (DOH) to certify lactation consultants that educates, provide consultation, assist and treat breastfeeding mothers.

Section 35. Composition of the Board – The Board of Lactation Consultants shall be a collegial body headed by the Assistant Secretary of the DOH as chairman, one representative each from the Department of Social Welfare and Development, the National Institutes of Health, a national support group, a member of the academe, and a representative from the Department of Justice as members. Lastly, a representative from the DSWD as the secretariat.

Section 36. Qualifications of a Certified Lactation Consultant. – In order to be a lactation consultant, the applicant who should be a Filipino Citizen must submit the following certification issued by appropriate authorities attesting the following:

(a) The applicant must be a physician or a health care practitioner;
(b) The applicant has not been convicted of any crime involving moral turpitude;
(c) The applicant has passed the psychiatric test administered by DOH-accredited psychologist or psychiatrist;
(d) The applicant has passed the drug test conducted by an accredited and authorized drug testing laboratory or clinic;
(e) The applicant must have completed breastfeeding training seminar as established by the Department of Health;
(f) The applicant has passed certification exam conducted by the Department of Health;

The Department of health may impose other requirements as it may deem necessary, taking into account international standard of accrediting lactation consultants.

Section 37. Breastfeeding Seminars. – Any establishment whether public or private may sponsor breastfeeding seminars. However, no person other than a certified lactation consultant shall be allowed to conduct breastfeeding seminars.

Section 38. Breast Examination. – No person other than a physician may examine a mother’s breast, prescribe breastfeeding supplements, diagnose or conduct lactation massage.

Section 39. Duties and Functions of the Board. – the Board shall have the following duties and responsibilities:

1) To enforce the provisions of this Act;
2) To conduct certification exams for Lactation Consultants;
3) To conduct continuing lactation education for Lactation Consultants;
4) To keep abreast on the recent studies and technologies available in the market to help mother produce and express milk;
5) Support the conduct of research and development initiatives for breastfeeding;
6) Promote coordination and cooperation among institutions involved in researches on breastfeeding;
7) Enter into agreements with and award research grants for centers for researches doing studies on the benefits of breastfeeding and breast milk;
8) Identifying projects that should be conducted in the future on breastfeeding;
9) Ensure that manufacturers and distributors of breastfeeding supplements, breast pumps and other breastfeeding or breast pump paraphernalia met international standards and has passed examination and approval of the proper government agency;
10) Promote the development of updated treatment guidelines on the different approach to breastfeeding mothers based on their circumstances;
11) Work hand in hand with the Department of Labor and Employment and the Civil Service Commission to ensure compliance of all public or private entities and establishments;
12) Establish a referral system to facilitate the provision of appropriate medical care to breastfeeding mothers;
13) To conduct case studies and evaluation to the different conditions affecting breastfeeding mothers and their families;
14) To investigate any violation of this Act or of the rules and regulations issued thereunder, as may come to the knowledge of the Board and for this purpose to issue subpoena and subpoena duces tecum to alleged violators or witnesses to secure their attendance in investigations or hearings, and the production of books, papers, and documents in connection therewith and compel attendance by the power of contempt.
15) To conduct yearly examination and evaluation of certified lactation consultants assigned in every field office;
16) To look, from time to time, into the conditions affecting the breastfeeding mothers;
17) To provide reasonable accommodation and accessible environment for breastfeeding mothers; and
18) To advocate respect and awareness about the efforts made to improve the quality of life of breastfeeding mothers and the child.

Section 40. Continuing Education, Re-education and Training of Health Workers and Health Institutions. – The Department of Health with the assistance of other government agencies, professional and non-governmental organizations shall conduct continuing information, education, re-education, and training programs for physicians, nurses, midwives, nutritionist-dieticians, community health workers and traditional birth attendants and other health worker on current and updated lactation management.

Information material shall be given to all health workers involved in maternal and infant care health institutions.

ARTICLE VII
MISCELLANEOUS PROVISIONS

Section 41. Department of Health Certification. – Any health and non-health facility, establishment or institution satisfying the requirements of Sections 11 herein relative to the proper lactation station may apply with the local Department of Health office for a working mother-baby friendly certification. The Department of health shall promulgate guidelines to determine eligibility for such certification, which shall include an annual Department of Health inspection to confirm the continued compliance with its standards.

The Department of Health shall maintain a list of ‘mother-baby friendly’ establishments, which it shall make available to the public.

Section 42. Role of National Agencies and Local Government Units. – Local government units shall promote the establishment of breastfeeding support groups, breastfeeding centers, breastfeeding seminars, breast milk donations and milk banks in their respective territorial jurisdiction.
National agencies and local government units may enter into joint ventures with organizations or associations supporting breastfeeding and the expression of breast milk and other undertaking that shall enhance the health, physical fitness, economic and social well-being of breastfeeding mothers and their child.

Section 43. Implementing Rules and Regulations. – The Department of Health shall formulate, within ninety (90) days upon the effectivity of this Act, the implementing rules and regulations in consultation with the local government units, non-governmental organizations and people’s organizations.

Section 44. Penal Clause. – Any person who violates any provision of this Act shall suffer the following penalties:

a) A fine of not less than Five Thousand Pesos (P 5,000.00) but not exceeding Ten Thousand Pesos (P 10,000.00) or imprisonment of not less than one (6) months but not more than one (1) year, or both without prejudice to other civil, administrative or criminal liabilities that may arise therefrom to be imposed on the director, trustees or officers of any public or private corporations, entities, organizations or establishments.

b) A fine of not less than Fifty Thousand Pesos (P50,000.00) but not exceeding One Hundred Thousand Pesos (P100,000.00) or imprisonment not less than one (1) year but not more than six (6) years or both without prejudice to other civil, administrative or criminal liabilities that may arise therefrom to be imposed on the director, trustees or officers of any public or private corporations, entities, organizations or establishments.

Section 45. Appropriations. – The amount necessary to carry out the provisions of this Act shall be included in the budget of concerned government agencies in the General Appropriations Act of the year following its enactment into law and thereafter.

Section 46. Repealing Clause. – All laws, decrees, executive orders, administrative orders or parts thereof inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

Section 47. Separability Clause. – If any provision of this Act is held invalid or unconstitutional, other provisions not affected thereby shall continue to be in full force and effect.

Section 48. Effectivity Clause. – This Act shall take effect fifteen (15) days following its complete publication in the Official Gazette or in at least two (2) newspaper of general circulation.

Approved,