EIGHTEENTH CONGRESS OF THE
REPUBLIC OF THE PHILIPPINES
First Regular Session

HOUSE OF REPRESENTATIVE

H.B. No. 6379

Introduced by Representative TEODORICO T. HAESCO, JR.

EXPLANATORY NOTE

Article II, Section 13 of the 1987 Philippine Constitution provides that "the State recognizes the vital role of the youth in nation-building and shall promote and protect their physical, moral, spiritual, intellectual, and social wellbeing. It shall include in the youth patriotism and nationalism and encourage their involvement in public and civic affairs."

During the World Population Day Forum held in Quezon City last July 2019, the Commission on Population (Popcom) raised concerns about early and unplanned pregnancies by citing that around 500 teenage girls have given birth in the country every day as more adolescents engage in premarital sex. Popcom said some 196,000 Filipinos between the ages of 15 and 19 years old get pregnant each year.1 Further, according to POPCOM Executive Director Juan Antonio Perez, although teenage pregnancy rate in the country declined to 8.7 percent in 2017 from 10.2 percent in 2016, the number still remains high.2

Adolescent pregnancy has serious consequences for young women, their children, and communities as a whole. The rising teenage pregnancy rate in the Philippines has contributed to the country’s population crisis. Further, it perpetuates the cycle of poverty and inequality because most pregnant teenagers have no source of income and face greater financial struggle. It is also important to note that teenage mothers face critical health risks, including inadequate nutrition during pregnancy due to poor eating habits, dangers associated with the reproductive organs not ready for birth, and maternal death due to higher risk of eclampsia, among others. In view of the foregoing circumstances, there is a need to establish a national policy in preventing teenage pregnancies and institutionalize social protection for teenage parents.

TEODORICO T. HAESCO, JR.

1 https://pia.gov.ph/features/articles/1026925
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AN ACT
PROVIDING FOR A NATIONAL POLICY IN PREVENTING ADOLESCENT PREGNANCIES, INSTITUTIONALIZING SOCIAL PROTECTION FOR ADOLESCENT PARENTS, AND PROVIDING FUNDS THEREFOR

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

Section 1. Short Title. - This Act shall be known as the "Prevention of Adolescent Pregnancy Act."

Sec. 2. Declaration of Policy. - It is the policy of the State to recognize, promote, and strengthen the role of adolescents and young people in the overall human and socio-economic development of the country not only in the future but also in the present. It shall also recognize and promote the responsibility of the State to create and sustain an enabling environment for adolescents to enable them to achieve their development aspirations and potentials as well as mobilize them to positively contribute to the development of the nation.

Towards this end, the State shall pursue sustainable and genuine human development that values the dignity of the total human person and affords full protection to people's rights, especially of adolescent girls and boys and their families. It shall promote and protect the human rights of all individuals including adolescents, particularly in their exercise of their rights to sexual and reproductive health, equality and equity before the law, the right to development, the right to education, freedom of expression, the right to participate in decision-making, and the right to choose and make responsible decisions for themselves.

Sec. 3. Development of National Program of Action and Investment Plan for the Prevention of Teenage Pregnancy. - The Council, in collaboration with other relevant national agencies and civil society organizations, shall develop an evidence-based National Medium-Term Plan for the Prevention of Teenage Pregnancy, which shall serve as the national framework for inter-agency and inter-sectoral collaboration at all levels to address the various health, cultural, socio-economic and institutional determinants of teenage pregnancy.
Based on the Medium-Term National Plan, a National Program on the Prevention of Teenage Pregnancy (NPPTP) shall be developed and funded at all levels and shall become a priority program of the Philippine Population Management Program of the Population Commission (POPCOM), spearheaded and coordinated by the Teenage Pregnancy Prevention Council, created under Section 10 of this Act.

The NPPTP shall be based on the inter-agency program of action involving all relevant government agencies and shall be considered as a program that is eligible for multiyear funding and inter-agency obligatory authority to ensure the allocation for the key strategies in all concerned government agencies.

NPPTP shall be formulated with clear and prescriptive guidance for better implementation at the local level.

In order to ensure the full participation of the stakeholders, consultations with children, adolescents, and youth-oriented groups shall be held with the Council's youth representatives. The results of the stakeholders' consultation that will be presented by the youth representatives shall be integrated into the formulation, implementation, operation, measurement, and evaluation of the NPPTP. If necessary, additional consultations with the stakeholders shall be conducted at various levels of the program to guarantee that the NPPTP remain youth focused and oriented.

Sec. 4. Organization and Mobilization of Regional and Local Information and Service Delivery Network for Adolescent Health and Development (ISDN for AHD). - All provinces and chartered cities shall organize and operationalize an ISDN for AHD consisting of different government and non-government organizations, institutions, and facilities disseminating information and services to adolescents within their locality. In cases of provinces and cities with existing ISDNs, they shall now harmonize new and existing efforts and programs for AHD. The ISDN may be organized by district in each province or by municipality/city. An effective collaborative and referral system among the members of the ISDN for AHD shall be established and implemented within a catchment area.

The ISDN for AHD will provide health services that are sensitive to the particular needs and human rights of all adolescents, paying attention to the following characteristics:

a) Availability - Primary health care should include services sensitive to the needs of adolescents, with special attention given to sexual and reproductive health and mental health;

b) Accessibility - Health facilities, goods, and services should be known and easily accessible (economically, physically, and socially) to all adolescents, without discrimination. Confidentiality must be guaranteed and maintained at all times;

c) Acceptability - Health facilities, goods, and services should respect cultural values, be gender sensitive, be respectful of medical ethics, and be acceptable to both adolescents and the communities in which they live;

d) Quality - Health services and goods should be scientifically and medically appropriate, which requires personnel trained to care for adolescents, and provide adequate facilities, and scientifically accepted methods.
The ISDN for AHD shall perform the following tasks and functions:

a) Map and analyze the various factors contributing to pregnancies among adolescents at the regional and local levels;

b) Identify, harmonize, coordinate, and implement inter-agency interventions to address the various issues related to teenage pregnancies in the region and at the local level;

c) Capacitate ISDN for AHD agency-members in collaboration with relevant regional government agencies to ensure quality information and services to adolescents;

d) Provide, in collaboration with concerned LCDs, needed information and services for adolescent development;

e) Generate or share resources in the implementation of the joint strategic plan of the ISDN for AHD; and

f) Monitor and evaluate effectiveness of coordinative and referral systems and other interagency interventions jointly implemented by the ISDN.

Sec. 5. Age and Development-Appropriate Comprehensive Sexuality Education. – The Department of Education, with assistance from the Council and in collaboration with other relevant agencies, shall develop and promote educational standards, modules, and materials to promote comprehensive responsible sexuality education in schools, communities, and other youth institutions. The comprehensive sexuality education (CSE) shall be a compulsory part of education, integrated at all levels with the end goal of normalizing discussions about adolescent sexuality and reproductive health and to remove stigma from all levels. The Council shall ensure that the CSE is medically accurate, rights-based, and inclusive and non-discriminatory towards lesbians, gays, bisexuals, transgenders, intersex, or queers (LGBTIQs) adolescents.

The CSE shall include age and development-appropriate topics such as, but not limited to: human sexuality, consent, adolescent reproductive health, effective contraceptive use, disease prevention, HIV/AIDS and the more common Sexually Transmitted Infections (STIs), hygiene, health and nutrition, healthy lifestyles, gender-sensitivity, gender equality and equity, teen dating, prevention of gender and sexual violence, digital citizenship and issues like pornography, and life-skills.

The purpose is to equip them with the knowledge, skills, and values to make informed and responsible choices about their sexual and social relationships.

The CSE shall be standardized and implemented in all public and private basic education institutions. CSE delivery shall not be dependent upon the discretion of the school administration or on its teachers. It shall be integrated in the school curriculum, guided by international standards. In order to ensure proper compliance, the provision and delivery of CSE in public and private basic education institutions shall be listed as one of the criteria and an accreditation requirement of DEPED’s Philippine Accreditation System for Basic Education (PASBE). Schools refusing to implement CSE shall have their accreditation reviewed by the PASBE board.

The Council shall undertake annual reviews to determine the effectiveness of the curriculum and to make revisions as necessary to enhance implementation of the program. In addition, the Council shall formulate a guide for CSE delivery for schools.
Sec. 6. Training of Teachers, Guidance Counselors, and School Supervisors on CSE
- The Council, with the DepED and the Commission on Higher Education (CHED), shall
ensure that all teachers, guidance counselors, instructors, and other school officials
entrusted with the duty to educate adolescents on CSE shall be properly trained on
adolescent health and development and gender sensitivity to effectively educate or guide
adolescents in dealing with their sexuality-related concerns. The training activities shall
include the legal and human rights instruments applicable to the sexual and reproductive
health of adolescents, especially in cases of unintended pregnancies as a result of sexual
violence. Funding for the training shall be allotted in the concerned government agencies'
anual allocation to be approved by Congress.

As a result of the training, schools shall institute policies to support teenage
mothers in ensuring that they stay in school and complete their education.

The CHED shall ensure that CSE standards are integrated in the curriculum and
across specializations in the professional preparation and training for would-be teachers
in normal schools or teacher education institutions in the country.

Sec. 7. CSE for Out-of-School Adolescents and those with Special Concerns. - The
Council, the Local ISDN, and the Local Government Units (LGUs) shall collaborate to
intensify and institutionalize interactive learning methodologies for CSE among out-of-
school adolescents in the communities and workplaces as well as unsuitably housed
youth. Provided, that the needs of indigenous, working persons-with-disabilities, and
adolescents in social institutions are considered in the design and promotion of sexuality
education among adolescents.

Delivery of CSE in a non-formal education setting shall be ensured by DepEd
through their Alternative Learning System. Community youth leaders, through the
Sangguniang Kabataan (SK), Task Force on Youth Development (TFYD), or Local Youth
Development Council (LYDC) shall invest in a concentrated effort in reaching these
groups and encourage peer to peer counseling. Volunteer groups and interested civil
society organizations (CSOs) and non-government organizations (NGOs) shall be
recognized for supplemental support to local ISDNs.

DEPED, along with other relevant government agencies, shall be tasked to 19
integrate a CSE syllabus that is culturally sensitive into the existing Madrasah curriculum.

Sec. 8. CSE for Parents and Guardians with Adolescent Children. - A community-
based program for education and awareness of parents and guardians about teen
sexuality shall be developed and implemented with the main objective of capacitating
them to effectively guide, counsel, and provide support to their adolescent children in
concerns and decisions related to their sexual health. The CSE specifically designed for
parents and guardians should include discussions on how to address the familial and
societal norms that encourages risk behaviors and perpetuates ignorance of adolescent
sexual and reproductive health. Furthermore, this parent and guardian oriented CSE shall
 incapacitate and encourage them to continue their sexual education with their children and
wards in their households.
The module for this CSE program shall be developed by the council. The topics to be included shall include but are not limited to: positive discipline, responsible parenthood, violence against women and children, and dealing with bullying and the possible stigma of being a teen parent.

These classes shall be conducted by trained Municipal/City Social Welfare and Development Officers. Several avenues that can be pursued are Family Development Sessions (FDS) of the DSWD and PTA meetings. The M/CSWDOs shall endeavor to reach out to parent organizations in schools and communities to promote such program.

Sec. 9. Participation of the Private Sector in the Promotion of CSE. - The government may enter into public-private partnership agreement in mobilizing private communication networks and companies in promoting CSE through text or short message service (SMS) or media messages. An incentive mechanism for telecommunication companies shall be developed and implemented by concerned agencies to recognize private participation in promoting CSEs and adolescent youth health-seeking behavior, positive attitude towards sex, sexual relations and sexuality, etc.

The Movie and Television Review and Classification Board (MTRCB) shall review their existing guidelines to ensure that no movie and television programs portray, depict, promote, and encourage unsafe sexual activities among adolescents as a normative behavior in the society. An incentive scheme for adolescent-friendly television programs shall likewise be developed and implemented to encourage movie and television networks to produce materials and programs that promote responsible sexuality among adolescents.

Other private companies may be engaged to partner with the government agencies in designing and implementing innovative programs to prevent adolescent pregnancy.

Sec. 10. Teenage Pregnancy Prevention Council. – It shall be established to be composed of the following:
   a) The Department of Health (DOH) Secretary as the Chairperson;
   b) The POPCOM Board of Commissioners Chair as Co-Chairperson;
   c) Senior officials (at least Undersecretary level) of the National Youth Commission (NYC), DEPED, DSWD, Department of Interior and Local Government (DILG), CHED, and Technical Education and Skills Development Authority (TESDA) as ex-officio members;
   d) Five members appointed by the Chairperson who are persons with knowledge, expertise, accomplishment, and with no less than five-year experience in the fields of public health, adolescent rights and social protection, education, psychology, and social welfare, provided that one qualified member is appointed in each field; Provided further, That majority of these appointed members are female; and
   e) Two representatives of children and youth appointed by the Council Chairperson from various nationally represented youth organizations, provided that one is male and one is female.
Sec. 11. Powers and Duties of the Council. The Council shall have the powers as
follows:

a) To propose legislative and administrative policies on the prevention of adolescent
pregnancy;

b) To develop operational guidelines for government agencies and private
organizations in the development and implementation of comprehensive
strategies and programs for prevention of adolescent pregnancy, including sexual
violence;

c) To monitor implementation of the provision of the law;

d) To conduct research and generate evidence on the drivers of teenage pregnancy
to inform programs and policies; and

e) To provide relevant agencies and private organizations with recommendations
and solutions to challenges and gaps in the course of implementing the program.

Sec. 12. Implementing Rules and Regulations. - Within ninety (90) days from the
approval of this Act, the Council shall be organized to formulate the Implementing Rules
and Regulations of this Act.

Sec. 13. Separability Clause. - If any part, section or provision of this Act is declared
invalid or unconstitutional, the other parts thereof not affected thereby shall remain in
full force and effect.

Sec. 14. Repealing Clause. - All laws, acts, presidential decrees, executive orders,
administrative orders, rules and regulations, or parts thereof, inconsistent with or
contrary to the provisions of this Act are hereby amended, modified or repealed
accordingly.

Sec. 15. Effectivity. - This Act shall take effect fifteen (15) days after its publication in
the Official Gazette or in a newspaper of general circulation.

Approved,