Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

Eighteenth Congress
First Regular Session

HOUSE BILL NO. 6426

Introduced by Representative Sharon S. Garin

EXPLANATORY NOTE

This bill seeks to institutionalize a national program for the prevention of adolescent pregnancies.

Section 13, Article II of the 1987 Constitution provides:

"The State recognizes the vital role of the youth in nation-building and shall promote and protect their physical, moral, spiritual, intellectual, and social well-being. It shall inculcate in the youth patriotism and nationalism, and encourage their involvement in public and civic affairs."

Adolescent pregnancy is a global problem. It is not just a health issue but underscores socio-economic implications. Adolescent mothers are likely to experience poverty and health development issues. Adolescence is a period between childhood to adulthood. The World Health Organization defines an adolescent as any person between the ages of 10 and 19.

Based on the Save the Children’s Global Childhood Report in 2019, adolescent pregnancy affects 5.99% of Filipino girls, which is the second highest rate in Southeast Asia, and still increasing.

The Commission on Population and Development reported that between 2011 and 2019, pregnancies in the 10-14 age group increased by 50%. An average of 530 adolescent girls become pregnant daily.
In the 2014 Philippine Statistics Authority data, it was cited that babies were delivered by adolescent mothers every hour. The 2017 National Demographic and Health Survey also revealed that 1 in 10 girls, between the ages 15 and 19 has begun childbearing. It also showed that early childbearing is most prevalent in Davao Region with 17.9%, followed by Northern Mindanao with 14.7%.

While there are several laws that provide for reproductive health and health care such as Republic Act No. 10354, otherwise known as the “Responsible Parenthood and Reproductive Health Act of 2012” and Republic Act No. 11223, otherwise known as the “Universal Health Care Act,” there is no law that provides for the prevention of adolescent pregnancies. Several proposals on the subject have been filed in the Seventeenth Congress and similar proposals are again filed in the present Congress. This means that the problem of adolescent pregnancy is a pressing issue.

This bill seeks to institutionalize a national program for the prevention of adolescent pregnancies. It includes organization of regional and local information and service delivery network for adolescent health and development, comprehensive sexual education, establishment of adolescent centers, social protection, as well as program for parents and guardians of adolescent parents. Also, to be able to address the issue of adolescent pregnancy, a national program is proposed to be implemented for the Filipino youth to have better support and education. The national program is proposed to be spearheaded by the Commission on Population and Development in coordination with the national and local government agencies and civic organizations.

In order to secure the future of the Filipino youth, approval of this bill is earnestly recommended.

SHARON S. GARIN
AAMBIS-OWA PARTY-LIST
AN ACT
INSTITUTIONALIZING A NATIONAL PROGRAM FOR THE
PREVENTION OF ADOLESCENT PREGNANCIES AND PROVIDING
FUNDS THEREFOR

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

SECTION 1. Short Title.—This Act shall be known as the "Adolescent
Pregnancy Prevention Act."

SEC. 2. Declaration of Policy. — It is the policy of the State to promote
and protect the right of the adolescent to reproductive health and adopt a
comprehensive approach to youth development which endeavors to make
education, health and other social services available to them. The State also
recognizes the lack of proper information and access to relevant reproductive
health services that give rise to adolescent pregnancies. Towards this end, the
State shall institutionalize a national program that will prevent early and unintended pregnancies.

SEC. 3. Objectives. – This Act shall have the following objectives:

(a) Recognize, promote, and strengthen the role of adolescents and young people in the overall human and socio-economic development of the country;

(b) Create and sustain an enabling environment for adolescents to achieve their development aspirations and potentials as well as mobilize them to positively contribute to the development of the country;

(c) Pursue sustainable and genuine human development that values the dignity of the human person and affords full protection to people’s rights, especially of adolescent women and men and their families;

(d) Promote and protect the human rights of adolescents particularly in their exercise of their rights to sexual and reproductive health, equality and equity before the law, including freedom of expression, the right to development, the right to education, the right to participate in decision-making, and the right to choose and make responsible decisions for themselves;

(e) Provide full and comprehensive information to adolescents to help them prevent early and unintended pregnancies and their life-long consequences;

(f) Ensure corresponding interventions that effectively respond to the socioeconomic, health and emotional needs of adolescents and youth, especially young women, with due regard to their own creative capabilities, social, family
and community support, employment opportunities, participation in the political
process, and access to education, health, counselling and high-quality
reproductive health services;

(g) Encourage adolescent mothers and fathers to continue and finish their
education in order to equip them for a better life, increase their human potential,
to help prevent early marriages, high-risk child-bearing and repeated pregnancy,
and reduce associated mortality and morbidity through comprehensive social
protection interventions; and

(h) Recognize and promote the rights, duties and responsibilities of
parents, teachers, and other persons legally responsible for the growth of
adolescents to provide in a manner consistent with the evolving capacities of the
adolescent, and the appropriate direction and guidance in sexual and
reproductive matters.

SEC. 4. National Program on the Prevention of Adolescent
Pregnancy.— The Commission on Population and Development (POPCOM), in
coordination with the Department of Education (DepEd), Department of Health
(DOH), Department of Social Welfare and Development (DSWD), National
Youth Commission (NYC) and civil society organizations, shall develop an
evidence-based medium-term National Program of Action on the Prevention of
Adolescent Pregnancy. The program serves as the national framework for inter-
agency and inter-sectoral collaboration to address the various health, cultural,
socio-economic and institutional determinants of adolescent pregnancy.
The National Program of Action on the Prevention of Adolescent Pregnancy is a priority program of the POPCOM. It shall be based on the inter-agency program of action involving POPCOM, DepEd, DOH, DSWD and the NYC, and shall be eligible for multiyear funding and inter-agency obligational authority to ensure the allocation for the key strategies in government agencies.

SEC. 5. *Information and Service Delivery Network.*— All provinces and chartered cities shall organize and operationalize an Information and Service Delivery Network for adolescent health and development, consisting of different government and non-government organizations, institutions, and facilities catering information and services to adolescents within their locality. The Information and Service Delivery Network may be organized by district in each province or by municipality or city. An effective collaborative and referral system among the members of the Information and Service Delivery Network shall be established and implemented within a catchment area.

The Information and Service Delivery Network shall provide health services that are sensitive to the particular needs and rights of all adolescents, paying attention to the following characteristics:

(a) *Availability.*— Primary health care must 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 must 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 must respect cultural values, must be gender sensitive, must be respectful of medical ethics, and must be acceptable to both adolescents and the communities in which they live; and

(d) Quality.— Health services must be scientifically and medically appropriate, provided by personnel trained to care for adolescents, with adequate facilities, and operating under scientifically accepted methods.

SEC. 6. Functions.—The Information and Service Delivery Network shall perform the following 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 adolescent pregnancies in the region and at the local level;

(c) Capacitate Information and Service Delivery Network agency members, in coordination with relevant regional government agencies, to ensure quality information and services to adolescents;

(d) Provide needed information and services for adolescent development;

(e) Generate or share resources in the implementation of the joint strategic plan of the Information and Service Delivery Network; and
(f) Monitor and evaluate the effectiveness of coordinative and referral systems and other inter-agency interventions jointly implemented by the Information and Service Delivery Network.

The local Information and Service Delivery Network shall be coordinated by the provincial or city population office, or in its absence, the provincial or city health office in collaboration with the sangguniangkabataan federation in the localities with technical assistance from POPCOM, DepEd, DOH, and DSWD.

SEC. 7. Comprehensive Sexuality Education. — The DepEd, in coordination with the DOH, DSWD and NYC, shall develop and promote educational standards, modules, and materials to promote comprehensive sexuality education in schools, communities, and other youth institutions. The comprehensive sexuality education starts from Grade 5 and includes age-appropriate topics such as human sexuality, adolescent reproductive health, health and nutrition, gender-sensitivity, gender equality and equity, and life-skills. The comprehensive sexuality education must enable adolescents to be responsible in nurturing their sexuality, prevent sexual abuse, and avoid unintended pregnancy.

SEC. 8. Teachers, Guidance Counselors, and School Supervisors. — The DepEd, Technical Education and Skills Development Authority (TESDA) and 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 comprehensive sexuality education are properly
trained on adolescent health and development to effectively educate or guide adolescents in dealing with their sexuality-related concerns. The training shall be in coordination with the DOH, POPCOM, and NYC for technical assistance.

The CHED shall ensure that the comprehensive sexuality education standards are integrated in the curriculum and across specializations in the professional preparation and training of teachers in normal schools or teacher education institutions in the country.

SEC. 9. Education for Out-of-School Adolescents and Those With Special Concerns. – The DSWD, DOH, POPCOM, and the local government units (LGUs) shall coordinate to intensify and institutionalize interactive learning methodologies for comprehensive sexuality education among out-of-school adolescents in the communities and workplaces. The needs of indigenous and working adolescents, and adolescents with disabilities in social institutions must be considered in the design and promotion of sexuality education among them.

SEC. 10. Promotion of Sexuality Education. – The DepEd, DOH, DSWD and POPCOM, in coordination with the Department of Information and Communications Technology, shall optimize social media and other online platforms to reach adolescent netizens with accurate information and messages on adolescent sexual and reproductive health. A web portal for the National Program on the Prevention of Adolescent Pregnancy shall be developed and promoted by the POPCOM to harmonize and link various government websites.
and online services for adolescent sexual and reproductive health including the networked operationalization of Information and Service Delivery Network.

SEC. 11. Adolescent Centers. —A schoolor community-based adolescent center shall be established and operationalized in all municipalities and cities in the country. Adolescent centers serve as facilities where adolescents and youth may access appropriate information and services on adolescent sexual and reproductive health and other health and development concerns relevant to their holistic development. Adolescent centers are the convergence facilities or hubs for the services of the Information and Service Delivery Network members.

The adolescent centers shall also serve as peer helping, counseling, and treatment center especially for adolescents in crisis or victims of abuse and violence.

The adolescent centers shall be mainly managed and operated by the LGUs through sangguniangkabataan members, youth volunteers and workers, and other organized adolescent youth groups recognized by the LGU with the assistance of various adult service providers and youth-serving professionals including civil society organizations.

The POPCOM, in coordination with the DepEd, CHED, DOH, DILG, and civil society organizations, shall formulate the guidelines and standards in setting-up adolescent centers in schools, municipalities or cities.

SEC. 12. Private Sector in the Promotion of Sexuality Education.— The government may enter into public-private partnership agreement in
mobilizing private communication networks and companies in promoting comprehensive sexuality education through text or short message service or media messages. An incentive mechanism for telecommunication companies shall be developed and implemented by appropriate agencies to recognize private participation in promoting comprehensive sexuality education such as adolescent health, behavior, positive attitude towards sex, and sexual relations, among others.

The Movie and Television Review and Classification Board shall review its existing guidelines to ensure that no movie and television program portrays, depicts, promotes, and encourages sexual activities among adolescents as anormative 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 government agencies in designing and implementing innovative programs to prevent adolescent pregnancy.

SEC. 13. Access of Minors to Pornographic Materials and Obscene Shows. – Existing laws penalizing pornography and obscenity in the country shall be strengthened by the following regulatory provisions:

(a) All business establishments providing computer and internet services shall strictly restrict or prohibit minors from accessing pornographic websites
by setting-up filters or parental control programs to block or filter-out
pornographic internet contents in all their computer units and by posting a
signage prohibiting minors from accessing pornographic materials. Failure to
comply with this provision is a ground for the cancellation of the business
permit of the establishment;

(b) Selling and distribution of pornographic printed materials and videos
in any format to minors is prohibited and penalized under existing laws;

(c) Persons within the age of majority who encourage or influence minors
to access pornographic products and contents shall be penalized under existing
laws; and

(d) Any business establishment that allows the participation and access of
minors in obscene shows shall be prosecuted by the cancellation of the business
permit of such establishment.

The sangguniangkabataanat the barangay, municipality or city level shall
organize and mobilize group of youth volunteers in collaboration with barangay
officials and peace officers to monitor compliance of computer shops and
business establishments selling and distributing videos and printed materials in
restricting minors from accessing pornographic products.

SEC. 14. Access to Reproductive Health Services.—Sexually active
adolescents or those who have already engaged in sexual activities shall be
allowed to access modern family planning methods with proper counseling by
trained service providers in public and private facilities including the adolescent
centers. For this purpose, all health service providers in health facilities
including school clinics shall be trained on providing adolescent-friendly and
responsive information and services. All health facilities shall be improved to
become an adolescent-friendly facility by maintaining confidentiality, 
providing exclusive schedule for adolescents, ensuring availability of services for
adolescents, and providing non-judgmental health services.

SEC. 15. Adolescent Mothers or Parents.—The adolescent centers shall
provide a comprehensive social protection service to adolescent mothers or
adolescents who are currently pregnant and their partners, to prevent repeated
pregnancies and ensure their well-being while assuming the responsibilities of
being young parents. Such services include the following:

(a) Maternal health services including antenatal and facility-based
delivery;

(b) Post-partum family planning counseling and services for either or
both adolescent parents;

(c) Home-based education for adolescent mothers;

(d) Personal PhilHealth coverage, including the mandatory enrollment
and membership of indigent and indigenous adolescent mothers:

(e) Training and support to livelihood programs for the household of the
adolescent parents especially for the indigents; and

(f) Continuing comprehensive sexuality education for adolescent parents.
SEC. 16. *Parents and Guardians with Adolescent Children.*— A comprehensive sexuality education program for parents and guardians shall be developed and implemented to effectively guide, counsel, and provide consent to their adolescent children in relation to their sexual health. The POPCOM shall endeavor to reach out to parent organizations in schools and communities to promote the program.

SEC. 17. *Adolescent Pregnancy Prevention Month.*— To raise public consciousness on the issues on adolescent pregnancy and generate support from various stakeholders, the entire month of February shall be designated as *Adolescent Pregnancy Prevention Month.* Schools and other stakeholders shall hold activities with the objective of raising awareness and generate critical actions to address the issues of increasing adolescent pregnancy.

Further, the POPCOM, in coordination with DepEd, DOH, DSWD, LGUs and civil society organizations, shall develop, launch, and sustain a nationwide campaign for the prevention of adolescent pregnancy.

SEC. 18. *Integration of the Prevention of Adolescent Pregnancy in Sangguniang Kabataan Programs.*— Strategies and programs which aim to prevent incidence of adolescent pregnancies shall be integrated in the sangguniangkabataan programs at the local and community level. The NYC shall issue guidelines to ensure the implementation of this provision.

The sangguniangkabataanshall likewise implement programs and activities that aim to develop the potentials and skills of adolescents to make
them more productive members of the society. The sangguniangkabataanshall
encourage youth participation in these activities as a means to divert the focus
and potentials of adolescents into more meaningful and productive endeavors.

SEC. 19. *Involvement in Risky Behaviors.* – All barangays shall
implement legal measures to prevent adolescents from engaging in risky
behaviors particularly drinking alcoholic beverages, illegal drug use, hanging-
out late at night that may lead them to sexual activities or engaging in sexual
assault or violence. The barangays shall also strictly prohibit the access of
minors to videoke bars, beer house or pubs, clubs, and other similar facilities
that may encourage adolescents to engage in sexual activities or sex-related
violence and crimes.

SEC. 20. *Duties and Functions.* – In accordance to their existing
mandates, the following national and local government agencies shall perform
the following duties and functions relative to the implementation of this Act:

(a) The DepEd, CHED, and TESDA shall:

(1) Ensure the development and promotion of comprehensive
sexuality education standards and its corresponding learning modules for
teachers and students;

(2) Ensure the comprehensive training of all teachers on
comprehensive sexuality education;

(3) Support the development of school-based adolescent centers;

and
(4) Conduct other extra-curricular activities for adolescent sexual and reproductive health.

(b) The Department of Health shall:

(1) Ensure the availability and provision of adolescent sexual and reproductive health services in all public health facilities;

(2) Ensure the training of health service providers in providing adolescent-friendly and responsive health services using the enhanced adolescent job aid; and

(3) Support and provide technical assistance in the establishment of existing Information and Service Delivery Network at the local level.

(c) The Department of Social Welfare and Development shall:

(1) Take the lead in providing social protection for adolescent parents;

(2) Ensure the integration of social protection services in adolescent centers; and

(3) Promote comprehensive sexuality education for adolescents with special needs and in difficult circumstances.

(d) The National Youth Commission shall:

(1) Ensure the integration of adolescent sexual and reproductive health and comprehensive sexuality education promotion in the sangguniangkabataan programs and projects; and
(2) Capacitate the sangguniangkabataan in the implementation
of this Act at the local level.

(e) The Commission on Population and Development shall:

(1) Develop and coordinate with the relevant agencies the
National Program on the Prevention of Adolescent Pregnancy as part of
the national population management program;

(2) Implement a program for the training of parents and
guardians in effectively guiding adolescents on adolescent sexual and
reproductive health issues;

(3) Set-up the national database for adolescent pregnancy that
may be used for plan and program development; and

(4) Take the lead in the nationwide and community-based
campaign for the prevention of adolescent pregnancy including the
development and maintenance of the web portal for relevant online
information and services.

(f) The Commission on Welfare of Children shall develop and implement
comprehensive sexuality education strategies for adolescents;

(g) The MTRCB shall review its guidelines to discourage television
networks and movie producers to portray sexual activities involving adolescents
as a normative behavior;

(h) The LGUs shall:
(1) Ensure the development of local strategies for the prevention of adolescent pregnancy in their localities;

(2) Ensure the promotion of comprehensive sexuality education in schools and communities;

(3) Mobilize the sangguniangkabataan for key strategies in the prevention of adolescent pregnancy in the locality;

(4) Facilitate the organization and mobilization of Information and Service Delivery Network;

(5) Ensure the availability and provision of appropriate health and social services for adolescents;

(6) Set-up database on adolescent pregnancy for programming and planning;

(7) Implement a program for the training of parents and guardians in effectively guiding adolescents on adolescent sexual and reproductive health issues; and

(8) Allocate funds necessary for the strategies in preventing adolescent pregnancy.

(i) The civil society organizations shall serve as partners of the national and local government units in the implementation of the provisions of this Act.

SEC.21. Annual Report. – The POPCOM shall, through the Director General of the National Economic and Development Authority, submit to both Houses of Congress, or upon the request of the Congressional Oversight
Committee, an annual report giving a detailed account of the status of the implementation of this Act.

SEC. 22. **Donation or Grants.** – The POPCOM is authorized to accept grants, contributions, donations, endorsements, bequests or gifts in cash, or in kind from local and foreign sources in support of the development and implementation of the National Program on the Prevention of Adolescent Pregnancy. Such donations may not be used to fund personal services, expenditures and other operating expenses of the program.

The proceeds of such grants, contributions, donations, endorsements, bequests or gifts in cash, or in kind shall be used to finance the following:

(a) Research, information dissemination and service delivery for adolescent health and development;

(b) Education and training on comprehensive sexual education;

(c) Improvement of adolescent centers; and

(d) Conduct of such other activities necessary to carry out the objectives of this Act.

SEC. 23. **Funding Allocation.** – The DepEd, DOH, DSWD and LGUs shall allocate from their annual appropriations adequate funds for strategies and activities within their mandates that are contributory to the implementation of this Act. In subsequent budget proposals, the DepEd, DOH, DSWD and LGUs shall appropriate funds for program implementation, including continuing education and training as well as project monitoring and evaluation.
SEC. 24. **Implementing Rules and Regulations.** – Within ninety (90) days upon the effectivity of this Act, an inter-agency technical working group consisting of DepEd, DOH, DSWD and DILG, with POPCOM as Secretariat, and representatives from civil society organizations, shall be organized to formulate the implementing rules and regulations of this Act.

SEC. 25. **Separability Clause.** – If any provision or part of this Act is declared invalid or unconstitutional, the remaining parts or any provision not affected shall remain in full force and effect.

SEC. 26. **Repealing Clause.** – All laws, presidential decrees, executive orders and their implementing rules inconsistent with the provisions of this Act are hereby, repealed, amended or modified accordingly.

SEC. 27. **Effectivity Clause.** – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,