

22 August 2017



SENATOR RISA HONTIVEROS

Chairperson
Committee on Women, Children
Family Relations and Gender Equality
Senate of the Philippines
Roxas Blvd., Pasay City

Dear Chairperson Hontiveros:

The Department of Social Welfare and Development supports Senate Bill No. 1154 entitled: An Act Establishing Refuge and Assistance to Young Pregnant Women in Every Province and City of the Philippines, Appropriating Funds Therefor, and for Other Purposes or the "Young Women's Refuge and Assistance Act", introduced by Senator Maria Lourdes Nancy S. Binay and Senate Bill No. 1482 entitled: An Act Providing for a National Policy in Preventing Teenage Pregnancies, Institutionalizing Social Protection for Teenage Parents, and Providing Funds Therefor or the "Prevention of Adolescent Pregnancy Act of 2017", introduced by the Chairperson.

To contribute to the bills' enhancement, may we recommend the following:

- The consolidation of the two bills into one but to give premium on the access of youth to reproductive health services and comprehensive sexuality education to prevent teenage pregnancies as already provided for in Republic Act No. 10354 or "The Responsible Parenthood and Reproductive Health Act of 2012."
- 2. On Senate Bill No. 1482: Prevention of Adolescent Pregnancy Act of 2017
 - 2.1 Section 4 Development of National Program of Action and Investment Plan for the Prevention of Teenage Pregnancy

To include the Commission on Higher Education (CHED) in the development of evidence based medium term National Program of Action and Investment Plan for the Prevention of Teenage Pregnancy.

2.2 Section 5— Organization and Mobilization of Regional and Local information and Service Delivery Network for Adolescent Health and Development (ISDN for AHD)

Instead of mapping and analyzing the various factors contributing to teenage pregnancy, ISDN for AHD may already make use of the results of national surveys such as the National Demographic and Health Survey and the Young Adult Fertility and Sexuality Survey. The local ISDN can also include the existing children and youth structure at the local level.

2.3 Section 7 —Training of Teachers, Guidance Counselors, and School Supervisors on CSE

To include public health workers engaged in the delivery of health care services e.g., doctors, nurses, midwives, and barangay health workers in the training on Comprehensive Sexuality Education (CSE) to effectively assist or guide adolescents in dealing with their sexuality-related concerns.

2.4 Section 8 — CSE for Out-of-School Adolescents and those with Special Concerns

To include the Department of the Interior and Local Government (DILG) through the Local Government Units (LGUs) to intensify and institutionalize interactive learning methodologies for CSE among out-of-school adolescents in the communities and workplaces.

2.5 Section 12 — Social Protection for Teenage Mothers or Parents

The interventions should not only be limited to female adolescents but should also cover their partners, families & communities as support systems.

- 3. On Senate Bill No. 1154: Young Women's Refuge and Assistance Act
 - 3.1 Sec. 3 Establishment of Refuge and Assistance Centers vis-à-vis Sec. 5 Refuge and Assistance Center
 - a. To merge Sections 3 & 5 into one Section.

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- b. Instead of establishing a Center, we can **tap the established Service Delivery Network** ranging from Barangay Health Stations, Local Health Units, District and/or City hospitals to the provincial and/or Department of Health (DOH) retained hospital under the Responsible Parenthood and Reproductive Health Law, to provide services for young pregnant women. Also, the DSWD has centers and institutions that can provide services and other interventions to Women in Especially Difficult Circumstances (WEDC).
- c. If the author will push for the establishment of said Center, may we recommend the following for consideration of the Committee:
 - c.1 Prioritization should be given to provinces/cities/municipalities with the highest rate of teenage pregnancies in the establishment of Centers.
 - c.2 The management and supervision of Center should be under the Local Social Welfare and Development Office (LSWDO):
 - a. To revise the first paragraph which will be read as follows:

"The centers shall be under the management and supervision of Provincial/City Social Welfare and Development Officer (P/CSWDO) and Provincial/City Health Officer (P/CHO) with regular technical assistance and resource augmentation and regulations from the Department of Social Welfare and Development (DSWD) and Department of Health (DOH) Regional Offices. The center should be directed or supervised by a Social Welfare Officer V (SWO V) instead of a director level to match to the current structure of the DSWD centers.

b. To revise the second paragraph which will read as follows:

"Each center shall have a case worker, an administrative assistant, an on-call OBGyne, a full-time midwife or nurse, a psychologist, and three (3) house parents who will serve three (3) shifts per day to carefully monitor the conditions of the beneficiaries."

c.3 A competitive recruitment process should be undertaken by the Local Social Welfare and Development Office (LSWDO) to ensure that qualified candidates will be hired for these posts.

3.2 Sec. 7 — Rehabilitation and Development Program

To include the **Technical Education and Skills Development Authority** (TESDA) and **Department of Labor and Employment** (DOLE) in the provision of skills trainings generation of livelihood programs as intervention programs for the young mothers.

3.3 Sec. 9 — Funding and Appropriations

The fund for the establishment and operation of the Centers shall be charged to the Gender and Development (GAD) budget of Local Government Units (LGUs).

Attached is a **copy of our Official Position Paper on SB No. 1482** which was submitted to the Senate Committee on Health and Demography thru our Records Unit on 14 June 2017.

Thank you.

Very truly yours,

EMMANUEL A. LEYCO

Officer-In-Charge