



REPUBLIC OF THE PHILIPPINES
SANGGUNIANG PANLUNGSOD
CITY OF MANDALUYONG



ORDINANCE NO. 1041, S-2026

**AN ORDINANCE ESTABLISHING AND
INSTITUTIONALIZING THE MANDALUYONG
CITY ADOLESCENT PREGNANCY PREVENTION
AND RESPONSE COUNCIL, DEFINING ITS
COMPOSITION, POWERS AND FUNCTIONS,
AND PROVIDING FUNDS THEREFOR**

WHEREAS, adolescent pregnancy remains one of the most pressing social and health issues confronting our country today. According to the Philippine Statistics Authority (PSA) and the Commission on Population and Development (POPCOM), the Philippines consistently records high rates of adolescent pregnancies, with thousands of young girls giving birth each year. This alarming trend has significant consequences, including health risks for mother and child, school dropout/out of school youth (OSY) and economic burdens;

WHEREAS, in the City of Mandaluyong, cases of adolescent pregnancy continue to rise and pose a serious challenge to our local government. While there are national laws and programs addressing reproductive health and adolescent development, there is an urgent need for a localized, coordinated, cohesive and sustained Council to work on preventing and responding to this growing concern;

WHEREAS, this Ordinance seeks to create and institutionalize the City's Adolescent Pregnancy Prevention and Response Council, which will serve as the primary policymaking, coordinating and monitoring body tasked to formulate policies and programs that focus on preventing teenage pregnancies and provide interventions and a referral system for teenage mothers to access health, education and social services;

WHEREAS, by institutionalizing this cohesive Council, the City of Mandaluyong will have a dedicated mechanism to address adolescent pregnancy comprehensively, balancing prevention, protection and rehabilitation for the affected youth;

WHEREAS, Article II, Section 13 of the 1987 Philippine Constitution recognizes the vital role of the youth in nation-building and mandates the State to promote and protect their physical, moral, spiritual, and social well-being;

WHEREAS, the Constitution upholds the right of the people to health and mandates the State to adopt an integrated and comprehensive approach to health development;

WHEREAS, the United Nations Convention on the Rights of the Child guarantees the right to education, health, and autonomy. Adolescent pregnancy undermines these rights. For some girls, early pregnancy results in death - an ultimate violation of her rights. Upholding these rights helps eliminate conditions that contribute to adolescent pregnancy and can help break the cycle of intergenerational poverty, allowing young women to contribute meaningfully to their household and their community;

WHEREAS, on June 25, 2021, President Rodrigo R. Duterte issued Executive Order No. 141, entitled as: "ADOPTING AS A NATIONAL PRIORITY THE IMPLEMENTATION OF MEASURES TO ADDRESS THE ROOT CAUSES OF THE RISING NUMBER OF TEENAGE PREGNANCIES, AND MOBILIZING GOVERNMENT AGENCIES FOR THE PURPOSE", providing the instructions to all levels of government to assist in addressing the issues related to the increasing number of adolescent pregnancies in the country;

WHEREAS, the Local Government Code of 1991 (RA 7160) empowers local government units to promote general welfare of its constituents, especially in matters affecting health, development, and social services;

WHEREAS, the alarming rise of teenage pregnancies and sexually transmitted infections (STIs) poses a serious public health and social concern, particularly among adolescents and young adults;

WHEREAS, there is a need to establish a local policy that addresses adolescents' sexual and reproductive health needs and reduces the adolescent birth rate significantly through institutionalizing social protection programs for all adolescents (pregnant or non-pregnant);

WHEREAS, there is a need to strengthen institutional mechanisms that will ensure the implementation of programs on reproductive health, social hygiene, and responsible parenthood in coordination with government agencies, civil society organizations, and other stakeholders.

NOW THEREFORE, be it ORDAINED by the Sangguniang Panlungsod of Mandaluyong, in session assembled, that:

ARTICLE 1
TITLE, POLICY AND
DEFINITION OF TERMS

SECTION 1. TITLE. - This Ordinance shall be known as the "Mandaluyong City Adolescent Pregnancy Prevention and Response Council (MCAPPRC) Ordinance.

SECTION 2. DECLARATION OF POLICY. - It shall be the policy of the Mandaluyong City Government to:

- a. Recognize, promote, and strengthen the role of adolescents and young people in the overall human and socio-economic development of the City;
- b. Pursue sustainable and genuine human development that values the dignity of the total human person and afford full protection to people's rights, especially those of adolescent women and men and their families;

- c. 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;
- d. Pursue an adolescent pregnancy reduction strategy that is anchored on the empowerment of adolescents and their rights to health and development that is cognizant of the structural barriers, including, but not limited to, gender, poverty, age, ethnicity, and disability, that lead to adolescent pregnancy; and that is based on adolescents' needs and preferences;
- e. Provide full and comprehensive information to adolescents to help them prevent early and unintended pregnancies and their lifelong consequences;
- f. Provide safe, quality, and respectful maternal health care, including antenatal, delivery, and postnatal care, to adolescent women and enable their access to these services;
- g. Ensure corresponding interventions that could respond to the socio-economic, health and emotional needs of adolescents and youth, especially young women, with due regard for their own creative capabilities, for social, family and community support, employment opportunities, participation in the political process, and access to education, health, counseling, and high-quality reproductive health services;
- h. Encourage and enable adolescent mothers and fathers to continue and finish their education in order to equip them for a better life, to increase their human potential, to help prevent early marriages, high-risk childbearing and repeated pregnancy, and to reduce associated mortality and morbidity through comprehensive social protection interventions; and
- i. Recognize and promote the rights, duties, and responsibilities of parents, teachers, health professionals, and other persons legally responsible for the growth of adolescents to provide in a manner consistent with the evolving capacities of adolescent, appropriate direction and guidance in sexual and reproductive matters.

SECTION 3. DEFINITION OF TERMS. For purposes of this Ordinance, the following terms shall be defined and used as follows:

- a. Adolescents - refers to the population between the ages of 10 and 19;
- b. Adolescent Sexual and Reproductive Health (ASRH) Care - refers to the access to a full range of methods, techniques, and services that contribute to reproductive health and well-being of young people by preventing and solving reproductive health-related problems. Following the WHO's definition of sexual health, ASRH is a state of complete physical, mental, and social well-being, and not merely the absence of disease and infirmity, in all matters relating to the sexual and reproductive system and to its functions and processes, in individuals aged 10 to 19;

- c. **Adolescent Sexuality** - adapted from the World Health Organization's definition of sexuality, adolescent sexuality is a central aspect of being human throughout life, which encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction of individuals aged 10 to 19. It is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles, and relationships; and is influenced by the interaction biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors;
- d. **Harm-reduction principle** - refers to interventions aimed at reducing negative effects of behaviors. The goal is to address risk behaviors that occur alongside the harms of pregnancy to adolescent bodies;
- e. **Information and Service Delivery Network for Adolescent Health Development (ISDN)** - refers to the network facilities, institutions, and providers within the city with health and social system that offers information, training, and core packages of health and social care services in an integrated and coordinated manner;
- f. **Mandaluyong City Youth Development Council (MCYDC)** - refers to the local body to be created based on Republic Act No. 10742 (SK Reform Law) which is composed of representatives of youth and youth-serving organizations in the provincial, city, and municipal level with the primary function of assisting in the planning and execution of projects and programs of the Sangguniang Kabataan, and the Pederasyon ng Sangguniang Kabataan in all levels. For this purpose, the City's established the Mandaluyong Youth Development Office (MYDO), which shall be designated as the secretariat of the MCYDC;
- g. **Male involvement and participation** - refers to the involvement, participation, commitment of and joint responsibility of men with women in all areas of sexual and reproductive health, as well as reproductive health concerns specific to men;
- h. **Normal Schools or Teachers College** - refers to the learning institutions training or educating teachers;
- i. **Public-Private Partnership (PPP)** - refers to a contractual arrangement between the City Government and a private sector partner to finance, design, construct, operate, and maintain infrastructure or development projects and services, as defined and governed by the Republic Act No. 11966, otherwise known as the "Public-Private Partnership (PPP) Code of the Philippines, and its Implementing Rules and Regulations";
- j. **Reproductive Health** - refers to a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity in all matters relating to the reproductive system and to its functions and processes;
- k. **Comprehensive Sexual Education (CSE)** - is a package of teaching and imparting information on cognitive, emotional, physical, and social aspects of gender, sexuality, and adolescent reproductive health. It aims to equip children and young people with age-appropriate knowledge, skills, attitudes, and values that will empower them to realize their health, well-being, and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and understand and ensure the protection of their rights throughout their lives. It is a rights-based, gender-focused approach to adolescent health education taught over several years with progressive appropriateness

based on age-appropriate information consistent with the evolving capacities of young people and adolescents;

- l. Risky Behaviors - refers to ill-advised practices and actions that are potentially detrimental to a person's health or general well-being of a child, including but not limited to (1) Early Sexual Initiation; (2) Unprotected sexual activity; (3) Having multiple sexual partners; and (4) substance use that may lead to impaired decision-making regarding sexual health;
- m. Social Protection - consists of policies and programs designed to reduce poverty and vulnerability by promoting efficient labor markets, diminishing people's exposure to risks, and enhancing their capacity to manage economic and social risks, such as unemployment, exclusion, sickness, disability and old age;
- n. Peer Educator — refers to an adolescent, typically a high school student aged 15-19, who is trained to provide basic information, support, and referrals to their peers on adolescent health and development within a school or community setting;
- o. Teen Educator – refers to a young person, aged 18-30 years old, who has undergone more intensive training by the City Health Department on various Teen Educator modules, and who shall assist health care providers in delivering health services and conducting more formal educational sessions in the community;
- p. Mandaluyong City Adolescent Pregnancy Prevention and Response Council (MCAPPRC) hereafter referred to as the Council, is an interagency and inter-sectoral council that shall be formed through this Ordinance and serve as its implementing body.

ARTICLE II

THE MANDALUYONG CITY ADOLESCENT PREGNANCY PREVENTION AND RESPONSE COUNCIL

SECTION 4. CREATION OF THE COUNCIL. There is hereby created the Mandaluyong City Adolescent Pregnancy Prevention and Response Council (MCAPPRC) in the City of Mandaluyong.

Membership and Composition: The Mandaluyong City Adolescent Pregnancy Prevention and Response Council (MCAPPRC) shall be composed of the following:

Chairperson : Office of the Mayor

Vice Chairperson : Sanggunian Committee on Health Chairperson

Members :

- Sanggunian Committee on Women, Children and Family Relations Chairperson
- Sangguniang Kabataan Federation President
- Liga ng Barangay President
- City Health Officer

- City Social Welfare and Development Officer
- City Population Officer
- City Gender and Development (GAD) Focal Person
- City Youth Development Officer
- City Schools Division Superintendent/DepEd Representative
- City Planning Department
- City Legal Department
- City Nutrition Action Officer (CNAO),
- Commission on Higher Education (CHED)
- Local Council for the Protection of Children (LCPC)
- City Women's Protection Center
- Department of the Interior and Local Government-
Mandaluyong City
- Representative from the Philippine National Police —
Women and Children Protection Desk
- Representative from accredited CSOs/NGOs working on
adolescents' health, youth, or women's issues
- Representative from the faith-based sector
- Regular Experts Resource Persons who shall assist and
provide support concerning adolescents composed of the
following from the national agencies:
 - Department of Health – NCR
 - Commission on Population - NCR
 - National Youth Commission
 - TESDA-NCR

SECTION 5. POWERS AND FUNCTIONS. The Council shall have the following powers and functions:

1. Identify factors contributing to the increase Adolescent Pregnancy and map out of areas concern in the City where the identified factors are concentrated.
2. Formulate and regularly review a Mandaluyong City Action and Investment Plan for the Prevention of Adolescent Pregnancy (MCAIP-PAP), in collaboration with relevant government agencies, NGOs and CSOs, and other stakeholders.
3. Ensure the operationalization and implementation of the Action Plan.
4. Strengthen collaboration between government agencies and CSOs involved in the implementation of the Mandaluyong City Prevention of Adolescent Pregnancy Program under this Ordinance and Action Plan, including the delivery of related services.
5. Formulate, recommend, and ensure implementation of guidelines and policies, programs and projects addressing social hygiene, adolescent health, and adolescent pregnancy prevention and response necessary for the implementation of this Ordinance.
6. Conduct and strengthen advocacy information and education campaigns (IEC) on responsible parenthood, reproductive health, and prevention of sexually transmitted infections.

7. Coordinate with schools, barangays, CSOs, and other stakeholders in conducting seminars, workshops, and community-based interventions.
8. Consult and coordinate with national government agencies (DOH, POPCOM, DEPED, DSWD, etc.) for program alignment.
9. Ensure integration of adolescent health and development initiatives in the City's development plan.
10. Monitor and evaluate the implementation of adolescent pregnancy prevention programs at the barangay level.
11. Monitor the progress of the response to the City's Teenage/Adolescent Pregnancy situation and actively seek good practices from all stakeholders.
12. Establish a referral mechanism for pregnant teens for health, education, psychosocial, and livelihood assistance.
13. Strengthen partnerships among government agencies, non-government organizations, schools, faith-based institutions and the community.
14. Monitor the implementation of the (MCPAIP-PAP), undertake mid-term assessments, including spending assessments, and evaluate its impact, every year for the first 3 years and every 3 years, thereafter.
15. Advocate and recommend for policy reforms to the City Council to strengthen the City's response that will institutionalize or continue the interventions required in addressing the gaps to the adolescent pregnancy situation.
16. Organize and operationalize (monitor, supervise and evaluate) an Information and Service Delivery Network for Adolescent Health Development (ISDN for AHD) which shall consist of different government and non-government organizations, institutions, and facilities disseminating information and services to adolescents.
17. Identify gaps in the City's response on the part of government agencies and its partners from the civil society and international organizations to develop and implement the initial interventions required to address such gaps.
18. Submit an annual report to the Sangguniang Panlungsod on the status of adolescent pregnancy prevention efforts to the Office of the Mayor, City Council, and as needed, to the related national government agencies.
19. Recommend budgetary requirements to ensure the effective implementation of programs.
20. Review and recommend to the City Mayor potential public private partnerships with media entities for the promotion of Reproductive Health Education (RHE) and other objectives of this Ordinance.

SECTION 6. MEETINGS AND QUORUMS. The MCAPPRC shall meet at least once every quarter, at any venue, the notice of the meeting, including the agenda, shall be sent to members at least one (1) month before the scheduled meeting, except in case of emergencies, in which case, a 48-hour notice shall be sufficient.

- a. The presence of the Chairperson or the Vice Chairperson and at least ten (10) permanent members of the MCAPPRC shall constitute a quorum to do business, and a majority vote of those present shall be sufficient to render decisions.
- b. Secretariat. The MCAPPRC shall be supported by MYDO, serving as secretariat, members of which shall be appointed by the Office Head.

SECTION 7. DEVELOPMENT OF MANDALUYONG CITY PROGRAM OF ACTION AND INVESTMENT PLAN FOR THE PREVENTION OF ADOLESCENT PREGNANCY (MCPAIP-PAP). The MCAPPRC, in collaboration with other relevant government agencies and local civil society organizations, shall develop an evidence-based Local Program of Action and Investment Plan. This plan shall serve as the local framework for inter-agency and inter-sectoral collaboration at all levels to address the various health, cultural, socio-economic, and institutional determinants of adolescent pregnancy. The initial MCAIP-PAP shall be developed within sixty (60) days upon approval of this Ordinance and shall be reviewed annually. The MCAPPRC shall monitor the implementation of the MCAIP-PAP, undertake mid-term assessments, including spending assessments, and evaluate its impact, every year for the first 3 years and every 3 years, thereafter.

**ARTICLE III
KEY PROGRAMS AND MECHANISMS
(THE THREE PILLARS)**

A. PILLAR 1: PREVENTION AND EMPOWERMENT

SECTION 8. CULTURALLY SENSITIVE, AGE AND DEVELOPMENT APPROPRIATE REPRODUCTIVE HEALTH EDUCATION (RHE). The Council, through the City Schools Division and the Public Information Department, and in collaboration with relevant government agencies and civil society organizations, shall develop and promote localized messaging and educational information that promotes adolescent reproductive health in schools, communities, and other youth institutions. The Council shall ensure that the messaging produced are included in local materials and that they are culturally sensitive, age and development-appropriate and has included adolescent and youth groups in the consultation for the development of

messaging and information, as well as elders and leaders of the various religious sectors. The messaging and information shall be made compulsorily carried in city-based education messaging and must be integrated at all levels of learning with the end goal of normalizing the discussion of sex and gender, adolescent sexuality, reproductive health, and to remove stigma on the discussion of these topics. The materials and modules developed must be evidence-based, medically accurate, rights-based, culturally sensitive, and non-discriminatory towards adolescents of different sexual orientation, gender identity, and gender expression. In coordination with the Department of Education, through the City Schools Division, the current curricula, including books and modules, shall be regularly reviewed, updated and broadened with a view to ensuring adequate coverage of concerns such as gender sensitivity, sexual consent, reproductive health choices and responsibilities, and sexually transmitted diseases, including HIV/AIDS. This curriculum shall be designed to strengthen respect for human rights and fundamental freedoms, including those related to reproductive health, sexuality, population and development. The materials shall be complementary to the Responsible Parenthood and Reproductive Law and should be based on the need for responsible human sexuality and must reflect the realities of current sexual behavior. The Council, through the Public Information Department, shall optimize the social media and other online platforms to reach adolescent netizens with accurate information and messages on adolescent sexual and reproductive health (ASRH) concerns. The PAISD shall ensure that local issues on adolescent reproductive health are covered and widely disseminated as well as advocate for the adolescent pregnancy prevention through provided regular reports on the trend and incidence rates of adolescent pregnancy in the City and to provide regular reports on the trend and incidence rates of teenage pregnancies in the country and to provide the public with information, resources and healthy practices for ASRH, among others.

SECTION 9. ADOLESCENT SEXUALITY AND REPRODUCTIVE HEALTH (ASRH) TRAINING FOR POLICY-MAKERS. For the City-level, the Office of the Mayor (MO), together with the Chairperson of the Committee on Women, Children & Family Relations and Gender and Development Department, for the Barangay Level, the Liga ng mga Barangay President, and for the Sangguniang Kabataan-level, the SK Federation President, shall be responsible for disseminating guidelines and providing training programs for policymakers to enable a better understanding of ASRH as well as policies and practices to promote it. The guidelines shall be framed from a lens of gender equality and women's human rights and shall be made in consultation with academic institutions and civil society organizations focused on gender and women's human rights. The said offices shall ensure that sufficient funding is allocated in the City, barangay and SK annual budget for the training of policymakers.

SECTION 10. TRAINING OF TEACHERS, GUIDANCE COUNSELORS, SCHOOL SUPERVISORS AND SCHOOL NURSES ON ADOLESCENT REPRODUCTIVE HEALTH CURRICULUM. The MCAPPRC, in coordination with DepEd, TESDA, and CHED, shall allocate funds for the program training in the City's Annual Budget, to ensure that teachers, guidance counselors, instructors, and school nurses are properly trained on adolescent health and development to effectively educate or guide adolescents in dealing with their sexuality-related concerns. The training must introduce and improve the delivery of the current service to promote greater responsibility and awareness of the interrelationships between adolescent health issues, including sexual and reproductive health and gender equity.

SECTION 11. RHE FOR OUT-OF-SCHOOL ADOLESCENTS AND THOSE WITH SPECIAL CONCERNS. The MCAPPRC, through the City Social Welfare and Development Department, City Health Department, the Sangguniang Kabataan Federation, and Mandaluyong Youth Development Office, shall collaborate to intensify and institutionalize interactive learning methodologies for Reproductive Health Education (RHE) 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. Provided further, that the City Schools Division shall ensure that the delivery of RHE in a non-formal education setting through their Alternative Learning System by carrying localized messaging on adolescent health. Provided further that the community youth leaders, through the SK and the Barangay, shall invest in a concentrated effort to reach these groups and encourage them to undergo peer education training. Volunteer groups and interested civil society organizations (CSOs) and non-government organizations (NGOs) shall be recognized for supplemental support to the local ISDNs.

SECTION 12. MEDIA PARTICIPATION IN RHE PROMOTION. The City Mayor is hereby authorized by the Sangguniang Panlungsod to enter into Public Private Partnership (PPP) agreements with private media networks and companies for the purpose of promoting Reproductive Health Education (RHE). The exercise of this authority for any specific partnership shall be contingent upon a prior and favorable recommendation from the Mandaluyong City Adolescent Pregnancy Prevention and Response Council.

The Council shall have the following powers and responsibilities:

- a. Promote responsible and evidence-based information on reproductive health through coordination with local media outlets, educational institutions, and community platforms.
- b. Authorize the City Mayor to enter into Public Private Partnerships (PPPs) for the promotion of reproductive health education, subject to the review and recommendation of the Council.
- c. Review and recommend partnerships, programs, or initiatives related to reproductive health promotion to ensure alignment with City policies, protection of minors, and adherence to national standards.

- d. Develop guidelines for media engagement, advocacy campaigns, and dissemination of reproductive health information to ensure accuracy, inclusiveness, and sensitivity to cultural and community values.

SECTION 13. ENCOURAGING MALE INVOLVEMENT. The Council, through the MYDO, the Sangguniang Kabataan Federation, and the City Social Welfare and Development Department, shall develop programs that will promote male involvement:

- a. Mandaluyong Youth Development Office (MYDO) – Shall develop youth-centered initiatives that encourage young men to participate in discussions and capacity-building activities on reproductive health, respectful relationships, mental health, and prevention of risky behaviors.
- b. Sangguniang Kabataan (SK) Federation – Shall integrate male involvement strategies into youth assemblies, barangay programs, peer education initiatives, and community outreach activities, ensuring that young men are informed, empowered, and engaged.
- c. City Social Welfare and Development Department (CSWDD) – Shall facilitate family development sessions, parenting programs, and community interventions that highlight the role of fathers and male caregivers in supporting adolescent health, responsible decision-making, and gender-sensitive practices.
- d. The participation of men and boys shall be aligned with national policies on adolescent health, gender equality, and responsible parenthood, and shall form part of an inclusive and community-based approach to reproductive health education.

SECTION 14. INTEGRATION OF LOCAL PROGRAM FOR THE PREVENTION OF ADOLESCENT PREGNANCY IN SK PROGRAMS. Strategies and programs that aim to prevent the incidence of teenage pregnancies shall be integrated into the SK programs at the local and community level. In the absence of the SK, the Barangay Council shall undertake the responsibility of integrating adolescent pregnancy prevention programs into the barangay council's activities. The Council shall issue guidelines to ensure the implementation of this provision. The SK and/or Barangay Council shall likewise implement programs and activities that aim to develop the potential and skills of adolescents to make them more productive members of society. The topics of the said programs and activities are inclusive of but are not limited to: leadership training and life skills seminars that may be conducted jointly for adolescents and their families. They shall encourage youth participation in these activities as a means of diverting the focus and potentials of adolescents into more meaningful and productive endeavors. They shall enlist the support and participation of the local barangay council, the local Council for the Protection of Children, and the barangay health center to be able to provide a more complete array of services, activities, and programs.

B. PILLAR 2: ACCESSIBLE AND ADOLESCENT-FRIENDLY SERVICES

SECTION 15. INFORMATION AND SERVICE DELIVERY NETWORK FOR ADOLESCENT HEALTH DEVELOPMENT (ISDN FOR AHD). Within six (6) months upon approval of this Ordinance, the MCAPPRC, as coordinated by the City Health Department, together with MYDO, as Secretariat, and the Sangguniang Kabataan Federation, 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. The ISDN for AHD shall provide health services that are sensitive to the needs and human rights of all adolescents to enable them to deal in a positive and responsible way with their reproductive health and sexuality. The ISDN shall perform the following tasks:

- a. Assist the MCAPPRC in mapping and analyzing the various factors contributing to pregnancies among adolescents;
- b. Identify and map different facilities which are providing information and services, and harmonize and coordinate these with the City interventions to address the various issues related to teenage pregnancies;
- c. Provide, in collaboration with concerned Departments, needed information and services for adolescent development;
- d. Generate or share resources in the implementation of the joint strategic plan of the ISDN for AHD;
- e. Monitor and evaluate the effectiveness of coordinative and referral systems and other interagency interventions jointly implemented by the ISDN. MCAPPRC shall provide for the capacity-building of the ISDN for AHD members, in collaboration with relevant government agencies, to ensure quality information and services are provided to the adolescents.

SECTION 16. ACCESS TO REPRODUCTIVE HEALTH SERVICES. All public health facilities, including barangay health stations and the City Health Department, shall ensure daily availability of essential reproductive health services during operating hours.

Pursuant to existing Ordinance and related laws, the City shall continue to provide to family planning information, counseling, and services. The City Government shall ensure that all minors shall be given access to family planning methods information and services, with the consent of their parents or guardians, and after counselling. The counseling is carried out with the end in view of ensuring healthy practices through the promotion of optimal health outcomes and protecting minors, especially those in vulnerable circumstances, from possible predatory and sexually exploitative practices. For this purpose, the City Health Department shall ensure that all health service providers in all health facilities shall be trained on providing adolescent-friendly and responsive information and services. It is the duty of health service providers to provide complete and medically correct information on possible reproductive health services including the right

to informed choice and access to legal, medically safe and effective family planning methods with proper consent from their parents or guardians for minors.

Provided, that within three (3) years of the implementation of this Ordinance, all city health facilities, such as, but not limited to, health centers and city-run hospitals, shall establish Adolescent Friendly Health Clinic or existing facilities shall be enhanced to become an adolescent-friendly facility by ensuring confidentiality, availability of information and services, non-judgmental, stigma-free and gender responsive health service providers. The Council, through the City Health Department and the Social Welfare Development Department, shall ensure that ASRH training is integrated in the pre-service curriculum training of Barangay Health Workers (BHWs), front-line health care providers, and social workers. The said training shall include topics such as, but not limited to: consent, adolescent sexual and reproductive health, effective contraception use, disease prevention, HIV/AIDS and the more common STIs, hygiene, healthy lifestyles, and prevention of gender and sexual violence. Linkages and referral systems shall be established in educational institutions to bridge gaps in between information and access to ASRH services for in-school adolescents. For Out-of-School Youths (OSYs) and other groups, a community peer educator could be chosen to advocate accessing ASRH services and distribution of commodities. In cases of pregnant adolescents, a wider spectrum of Maternal and Neonatal care services shall be made available to them spanning the pre-natal, antenatal, and post-natal stages of pregnancy and its respective health care requirements. Provision of reproductive health services to adolescents shall be based on the principles of non-discrimination and confidentiality, the rights of adolescents, their evolving capacities, and as a life-saving intervention. Provided further that, it shall be ensured that adolescents are not denied the information and services needed to prevent future unintended adolescent pregnancies and are able to access treatment and care services without fear of stigmatization, discrimination, and violence.

C. PILLAR 3: SOCIAL PROTECTION AND REHABILITATION

SECTION 17. SOCIAL PROTECTION FOR ADOLESCENT MOTHERS OR PARENTS. - In accordance with the Reproductive Health Law, a comprehensive social protection service shall be provided to adolescents who are currently pregnant and their partners to prevent repeat pregnancies and to ensure their well-being while assuming the responsibilities of being young parents. Such services shall include the following:

- a. Maternal health services including pre-natal, ante-natal, and post-natal check-ups and facility-based delivery;
- b. Post-natal family planning counseling and services for either or both teenage parents;
- c. Personal PhilHealth coverage, making mandatory enrollment and membership of indigent teenage moms/mothers;
- d. Training, skills development, and support to livelihood programs for the household of the teenage parents especially for the indigents;

- e. Continuing CSE for teenage parents;
- f. Couples counseling on parenting, and positive discipline for the impending parents;
- g. Psychosocial support and mental health services for teen mothers.

Suspension, forced resignation, and other discriminatory acts in the workplace against pregnant girls and adolescent fathers are prohibited and shall be penalized according to existing laws and ordinances.

The Council, through the Social Welfare Development Department and the Mandaluyong Youth Development Office, shall implement a continuing CSE program for teenage mothers and fathers with technical assistance from the Council.

The services provided herein must safeguard the rights of the adolescents to privacy, confidentiality, respect, and informed consent, respecting cultural values and beliefs.

SECTION 18. SOCIAL PROTECTION IN CASES OF SEXUAL VIOLENCE. The Council shall ensure that a strengthened social protection mechanism against violence for adolescents, especially for girls, is provided. Through the Mandaluyong City's Women's Protection Center, City Social Welfare and Development Department, and the City Legal Department, expectant and current mothers whose pregnancies were the result of sexual violence shall be given access and support to legal, medical, and psychosocial services. Furthermore, the Council shall reinforce the capacities of health facilities in providing comprehensive care for adolescents in case of sexual violence. Health service providers, particularly the BHWs, other primary health care providers, and local population officers must ensure utmost confidentiality in handling cases of sexual exploitation and abuse. They shall be trained and be given confidentiality and safeguarding guidelines and tools for spotting sexual exploitation and abuse of adolescents. A referral pathway shall be created by the Council, through the assistance of the Mandaluyong City Women's Protection Center, to ensure that identified sexual abuse and exploitation survivors are assisted and properly handled in reference to the existing protocol for handling violence against women and gender-based violence.

SECTION 19. SOCIAL PROTECTION IN CASES OF HUMANITARIAN, ARMED CONFLICT AND EMERGENCY SITUATIONS. The Council and the ISDN shall be bolstered in the events of humanitarian crises, armed conflict, or emergency situations. They shall ensure swift and efficient delivery of ASRH services to vulnerable adolescents and young pregnant girls. Increased vigilance shall be practiced in cases of gender violence, sexual assault, and exploitation in these situations. All incidences of the situations shall be immediately addressed through appropriate channels. Special attention shall be given to young mothers who are at the late stages of pregnancy in case of (premature) labor. To ensure delivery of health services to adolescents and adolescent expectant parents, the City shall incorporate ASRH-specific content and safeguards in their City Disaster Risk Reduction and Management Plan.

SECTION 20. CARE AND MANAGEMENT FOR FIRST TIME PARENTS. All pregnant teens, especially those who are poor and hard-to-reach groups shall have access to skilled care throughout their pregnancy, delivery, and postnatal periods. Health Care providers shall strive to provide teenage mothers with their birth plans that detail their intended place of childbirth delivery, availability of transport to these health care institutions, and respective costs. Special attention shall be given to younger pregnant mothers during obstetric care. Workshops, classes, and seminars for first-time parents shall be provided with ante and postnatal education. These classes shall include topics such as, but not limited to: infant feeding and care, positive discipline, responsible parenthood, and safe sex practices. These classes shall be made available free of charge and at times most convenient for the teen parents. Educational institutions shall be encouraged to develop and establish support mechanisms that will encourage the return of teen parents (especially teen mothers), for instance: in-school day-care and breastfeeding stations.

SECTION 21. RESIDENTIAL CARE FACILITIES FOR DISADVANTAGED WOMEN. The existing residential care facilities for disadvantaged women such as, but not limited to, the Mandaluyong City Protection Center and Bahay Tuluyan Center, shall be capacitated to accommodate the needs of pregnant girls. The management of the said facilities shall be trained to provide ASRH information and services to their residents and may also coordinate with their respective ISDN in providing information and services. In order to effectively serve their pregnant teen residents, these centers shall get support from the nearest Health Center in relation to health personnel such as on-call barangay health workers, on-call midwives and on-call physicians. Within a year after the establishment of this Ordinance, the MCAPPRC must revisit the rate of teen pregnancy and identify whether there is a demand and need for a residential care facility for disadvantaged pregnant adolescents.

ARTICLE IV IMPLEMENTING AND FINAL CLAUSES

SECTION 22. PROHIBITED ACTS. The following acts are prohibited:

- a. **Discriminatory Acts and Practices** - Committing any discriminatory act against an adolescent seeking information or services provided under this Ordinance;
- b. **Willful Misinformation** - Knowingly providing false or misleading information regarding the services and benefits under this Ordinance;
- c. **Unjust Denial of Information and Services** - Unjustifiably denying any adolescent access to the information, services, or benefits guaranteed by this Ordinance.

SECTION 23. PENALTIES. Any person who commits any of the prohibited acts defined in Section 22 shall, upon conviction, suffer the penalty of a fine of Php5,000.00 and imprisonment of one (1) to two (2) months, without prejudice to other administrative or civil actions:

- a. **Violation of Confidentiality/Data Privacy** - A person who violates confidentiality of the client-beneficiary adolescent/s and data privacy under this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.
- b. **Discriminatory Acts and Practices** – A person who commits any of the discriminatory acts and practices to the client beneficiary adolescent/s under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.
- c. **Misinformation** - A person who provides false information under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.
- d. **Denial of Adolescent Health Information and Services including Maternal and Child Health Services** – A person who denies Information and Services to the client beneficiary adolescent/s under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.

Provided that, for violation of any of the prohibited acts, in cases that involves a juridical person, the foregoing fines and penalties shall be imposed on the directors and officers of the juridical person committing the prohibited act and, after due process, their license or permit to operate or conduct business in the City may be perpetually revoked, and the fine of Five Thousand Pesos (P5,000.00) shall be imposed.

Provided further that, if the offender of any of the above-mentioned prohibited acts is a public officer, elected or appointed, he/she shall also suffer the penalty of suspension not exceeding one (1) year or removal and forfeiture of retirement benefits depending on the gravity of the offense after due notice and hearing by the appropriate body or agency. Provided finally that, if the offender of any of the above-mentioned prohibited acts is an alien, he/she shall, after service of sentence, be deported immediately without further proceedings by the Bureau of Immigration.

- SECTION 24. **APPROPRIATION.** The initial amount of Two Hundred Thousand Pesos (P200,000.00) necessary for the implementation of this Ordinance shall be charged against the available funds of the City's Adolescent Health and Development Program, subject to all existing budgeting, accounting, and auditing rules and regulations. Thereafter, the funds necessary for the continued implementation of this Ordinance shall be included in the Annual Investment Program (AIP) and Annual Budget of the City Government.
- SECTION 25. **IMPLEMENTING RULES.** All provisions of this Ordinance which are executory in nature, shall be immediately implemented. The Mandaluyong City Adolescent Pregnancy Prevention and Response Council (MCAPPRC) may promulgate additional and clarificatory rules and regulations for the proper implementation of this Ordinance, as needed.
- SECTION 26. **REPEALING CLAUSE.** All ordinances, resolutions, executive issuances, or rules and regulations, or parts thereof, whose provisions are inconsistent with or contrary to the provisions of this Ordinance, are hereby deemed repealed, amended, or modified accordingly.
- SECTION 27. **SEPARABILITY CLAUSE.** If, for any reason, any section or provision of this Ordinance is held unconstitutional or invalid, the other sections or provisions hereof shall not be affected thereby.
- SECTION 28. **EFFECTIVITY.** This Ordinance shall take effect fifteen (15) days after its publication in a newspaper of general circulation within the City of Mandaluyong.

ENACTED on this 7th day of January 2026, in the City of Mandaluyong.

I HEREBY CERTIFY THAT THE FOREGOING ORDINANCE WAS ENACTED BY THE SANGGUNIANG PANLUNGSOD OF MANDALUYONG IN A SPECIAL SESSION HELD ON THE DATE AND PLACE FIRST ABOVE GIVEN.


MA. TERESA S. MIRANDA
Sanggunian Secretary

ATTESTED BY:

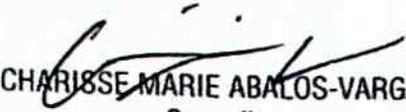

ANTONIO DLS. SUVA, JR.
City Vice Mayor
& Presiding Officer

APPROVED BY:


CARMELITA A. ABALOS
City Mayor

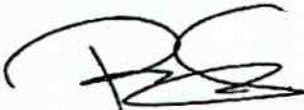
Date: JAN 21 2026

DISTRICT I


CHARISSE MARIE ABALOS-VARGAS
Councilor

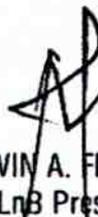

ANJELO ELTON P. YAP
Councilor


DANILO L. DE GUZMAN
Councilor


CARISSA MARIZ S. MANALO
Councilor


GRACE MARIE V. ANTONIO
Councilor

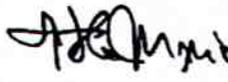

ESTANISLAO V. ALIM III
Councilor


DARWIN A. FERNANDEZ
LnB President


CHERYL N. MINA
SK Federation President

DISTRICT II

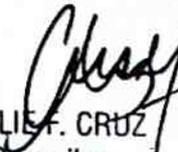

BENJAMIN A. ABALOS III
Councilor


ALEXANDER C. STA. MARIA
Councilor


MICHAEL ERIC G. CUEJILO
Councilor


FERNANDO S. OCAMPO
Councilor


REGINALD S. SANTIAGO
Councilor


LESLIE F. CRUZ
Councilor