

REPUBLIC OF THE PHILIPPINES HOUSE OF REPRESENTATIVES

15 March 2011

HON. ROGELIO J. ESPINA

Chairman
Committee on Population and Family Relations
House of Representatives
Constitution Hills, Quezon City

Dear Chairman Espina:

The principal authors of House Bill 4244, the consolidated substitute bill on "The Responsible Parenthood, Reproductive Health and Population and Development Act of 2011" met yesterday to formalize voluntary amendments to the bill in order to preclude misconceptions and protracted debates. The authors have also authorized me to inform you that the following amendments be adopted as Committee amendments at the proper time:

1. Section 13 on "Roles of Local Governments in Family Planning Programs" found on lines 9-14, page 12, of the bill, which reads: "The LGUs shall ensure that poor families receive preferential access to services, commodities and programs for family planning. The role of Population Officers at municipal, city and barangay levels in the family planning effort shall be strengthened. Barangay health workers and volunteers shall be capacitated to give priority to family planning work."

should be amended by deleting the phrase "give priority to family planning work." found in the last sentence of the Section, and should be substituted with the phrase "help implement this Act." This would obviate complaints that family planning is given inordinate priority.

HON. EDCEL C. LAGMAN

Representative, First District of Albay
Minority Leader

Minority Office:

2. Section 15 on "Mobile Health Care Service" found on page 12, lines 20-25, and page 13, lines 1-6, reading "Each Congressional District may be provided with at least one (1) Mobile Health Care Service (MHCS) in the form of a van or other means of transportation appropriate to coastal or mountainous areas. The MHCS shall deliver health care supplies and services to constituents, more particularly to the poor and needy, and shall be used to disseminate knowledge and information on reproductive health. The purchase of the MHCS may be funded from the Priority Development Assistance Fund (PDAF) of each congressional district. The operation and maintenance of the MHCS shall be operated by skilled health providers adequately equipped with a wide range of reproductive health care materials and information dissemination devices and equipment, the latter including, but not limited to, a television set for audio-visual presentations. All MHCS shall be operated by a focal city or municipality within a congressional district."

should be amended to read as follows: "Each Congressional District may be provided with at least one (1) Mobile Health Care Service (MHCS) in the form of a van or other means of transportation appropriate to coastal or mountainous areas, the procurement and operation of which shall be funded by the National Government. The MHCS shall deliver health care supplies and services to constituents, more particularly to the poor and needy, and shall be used to disseminate knowledge and information on reproductive health. [The purchase of the MHCS may be funded from the Priority Development Assistance Fund (PDAF) of each congressional district.] The operation and maintenance of the MHCS shall be operated by skilled health providers adequately equipped with a wide range of reproductive health care materials and information dissemination devices and equipment, the latter including, but not limited to, a television set for audio-visual presentations. All MHCS shall be operated by a focal city or municipality within a congressional district."

The reason for this amendment is to liberate the PDAF without prejudice to Members of the House who may still wish to use a portion of their PDAF for the purchase and operation of the MHCS.

3. Section 16 on "Mandatory Age-Appropriate Reproductive Health and Sexuality Education" found on page 13 from lines 7-25, and page 14 from lines 1-13, which reads: "Age-appropriate Reproductive Health and Sexuality Education shall be taught by adequately trained teachers in formal and non-formal education system starting from Grade Five up to Fourth Year High School using life skills and other approaches. The Reproductive Health and Sexuality Education shall commence at the start of the school year immediately following one (1) year from the effectivity of this Act to allow the training of concerned teachers. The Department of Education (DEPED), Commission on Higher Education (CHED), TESDA, Department of Social Welfare and Development (DSWD), Department of Health (DOH) shall formulate the Reproductive Health and Sexuality Education curriculum. Such curriculum shall be common to both public and private schools, out of school youth, and enrollees in the Alternative

Learning System (ALS) based on, but not limited to, the psychosocial and physical wellbeing, demography and reproductive health, and the legal aspects of reproductive health.

"Age-appropriate Reproductive Health and Sexuality Education shall be integrated in all relevant subjects and shall include, but is not limited to, the following topics:

- a. Values formation;
- b. Knowledge and skills in self protection against discrimination, sexual violence and abuse, and teen pregnancy;
- c. Physical, social and emotional changes in adolescents;
- d. Children's and women's rights;
- e. Fertility awareness;
- f. STI, HIV and AIDS;
- g. Population and development;
- h. Responsible relationship;
- Family planning methods;
- j. Proscription and hazards of abortion;
- k. Gender and development; and
- I. Responsible parenthood.

"The DepEd, CHED, DSWD, TESDA, and DOH shall provide concerned parents with adequate and relevant scientific materials on the age-appropriate topics and manner of teaching Reproductive Health Education to their children."

should be amended by providing a final paragraph which shall read: "Parents shall exercise the option of not allowing their minor children to attend classes pertaining to Reproductive Health and Sexuality Education."

4. Section 20 on "**Ideal Family Size**" found from lines 5-9 on page 15 which reads: "The State shall assist couples, parents and individuals to achieve their desired family size within the context of responsible parenthood for sustainable development and encourage them to have two children as the ideal family size. Attaining the ideal family size is neither mandatory nor compulsory. No punitive action shall be imposed on parents having more than two children."

should be deleted in its entirety considering that the norm on ideal family size is neither mandatory nor punitive. Its total deletion will preclude further misinformation and misrepresentation as to the import of the provision. Moreover, its deletion will also underscore freedom of informed choice.

5. Section 21 on "**Employers' Responsibilities**" found on page 15 from lines 10-15 and on page 16 from lines 1-4 which reads: "The Department of Labor and

Employment (DOLE) shall ensure that employers respect the reproductive rights of workers. Consistent with the intent of Article 134 of the Labor Code, employers with more than 200 employees shall provide reproductive health services to all employees in their own respective health facilities. Those with less than 200 workers shall enter into partnerships with hospitals, health facilities, or health professionals in their areas for the delivery of reproductive health services.

"Employers shall furnish in writing the following information to all employees and applicants:

- a. The medical and health benefits which workers are entitled to, including maternity and paternity leave benefits and the availability of family planning services;
- b. The reproductive health hazards associated with work, including hazards that may affect their reproductive functions especially pregnant women; and
 - c. The availability of health facilities for workers.

"Employers are obliged to monitor pregnant working employees among their workforce and ensure that they are provided paid half-day prenatal medical leave for each month of the pregnancy period that the pregnant employee is employed in their company or organization. These paid prenatal medical leave shall be reimbursable from the Social Security System (SSS) or the Government Service Insurance System (GSIS), as the case may be."

should be deleted in its entirety considering that this provision is a restatement and amplification of the existing Article 134 of the Labor Code. This deletion would obviate further objections and debates.

5. Section 28 (e) on "**Prohibited Acts**" found on lines 24-25 on page 21 which reads: "Any person who maliciously engages in disinformation about the intent and provisions of this Act." **should be deleted in its entirety** in order to afford widest latitude to freedom of expression within the limits of existing penal statutes.

Thank you and warmest personal regards.

Very truly yours,

EDCEL C. LAGMAN