



Republic of the Philippines
CITY GOVERNMENT OF MUNTINLUPA
Sangguniang Panlungsod ng Muntinlupa



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LPB President

COUN. JONAS ANGELO L. ABADILLA
SK Federation President

ORDINANCE NO. **299**

AN ORDINANCE AMENDING ORDINANCE NO. 19-040, OTHERWISE KNOWN AS AN ORDINANCE PROVIDING RESPONSIBLE PARENTHOOD AND REPRODUCTIVE HEALTH CODE OF MUNTINLUPA CITY.

Sponsored by: Hon. Coun. Allan Rey A. Camilon
Hon. Coun. Atty. Raul R. Corro
Hon. Coun. Alexson V. Diaz
Hon. Coun. Paty Katy C. Boncayao
Hon. Coun. Atty. Rachel Katriel Ann C. Arciaga
Hon. Coun. Ivey Rhia A. Tadea
Hon. Coun. Jedidiah R. Presnedi, LPT
Hon. Coun. Ting D. Niefes
Hon. Coun. Mark Lester M. Baes
Hon. Coun. Francis Jan T. Bagatsing
Hon. Coun. Engr. Mamerto T. Sevilla, Jr.
Hon. Coun. Engr. Marissa C. Rongavilla
Hon. Coun. Engr. Arlene D. Hilapo
Hon. Coun. Cornelio M. Martinez
Hon. Coun. Rodolfo W. Moldez, Jr.
Hon. Coun. Allen F. Ampaya
Hon. Coun. Jonas Angelo L. Abadilla

WHEREAS, pursuant to Section 12, Article II of the 1987 Philippine Constitution declares that "It is the duty of the state to protect and strengthen the family as a basic autonomous social institution. It shall equally protect the life of the other and life of the **mother** and the life of the unborn from conception";

WHEREAS, the State recognizes and guarantees the human right of all persons "the right to choose and make decision for themselves in accordance with their religious conviction, ethics cultural beliefs and the demands of responsible parenthood";

WHEREAS, the Local Government Code (LGC) provides that the Population Officer of every city carries out a vital role in the guarantee of the delivery of basic services and provisions of sufficient facilities appurtenant to the integration of the population development principles and in providing such services and facilities; Thus, the Population Officer is mandated to assist the City Mayor in the implementation of programs relative to promotion of responsible parenthood;

WHEREAS, the state recognizes and guarantees the promotion of gender equality, gender equity, women empowerment and dignity as a health rights concern and a social responsibility;

WHEREAS, the State likewise guarantees universal access to medically-safe non-abortifacient, effective, legal, affordable and quality reproductive health care services, relevant information and education thereon according to the priority needs of women, children and other underprivileged sector giving preferential access to those identified through the National Household targeting system for poverty reduction (NHTS- RPR) and other government measures of identifying marginalization "who shall be voluntary beneficiaries of reproductive health care, service and supplies for free";



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SK Federation President

WHEREAS, Section 12 of Republic Act 10354 "An Act Providing for the National Policy on Responsible Parenthood and Reproductive Health (RPRH)" provides the local government units a vital role in the implementation of the RPRH Act as the direct provider of both services and information to their respective constituents;

WHEREAS, on December 16, 2019, the Sangguniang Panlungsod of Muntinlupa enacted Ordinance 19-040 or an An Ordinance Providing Responsible Parenthood and Reproductive Health Code of Muntinlupa City;

WHEREAS, pursuant to Department Order No. 2014-0312 issued by the Department of Health which provides for the guidelines in setting up Family Planning Services in Hospitals, all public hospital of local government units are mandated to implement a full range of Family Planning Services that includes, but not limited to delivery of information to clients, counseling and assessment, provision of pills, injectable condom; and the performance of procedures, such as IUD insertion and removal, subdermal implant insertion and removal, bilateral, tubal ligation via minilaparotomy under local anesthesia (BTIVILLA), and no scalpel vasectomy (NSV), support to the practice of natural planning such as cervical mucus method, basal body temperature (BBT) method, symptothermal method, standard days methods (SDM) and lactational amenorrhea method (LAM); and management of complications and adverse reactions following the use of contraceptives;

WHEREAS, Section 17 of the Local Government Code mandates Local Government Units (LGU) to strive for self-reliance and to continuously exercise their powers, including those necessary for the efficient provision of basic services and facilities required by their constituents, particularly in the realms of health and social welfare. As the key capacity strategies to facilitate the provision of basic family planning and population development services as part of the general welfare services, it is imperative to engage in discussions and raise consciousness on the Responsible Parenthood and Family Planning (RPPF) with emphasis on the implementation of programs such as Kalalakihang Tapat sa Responsibilidad at Obligasyon sa Pamilya (KATROPA), and focusing on the pillars of the Population Development including Adolescent Health and Development (AHD), and Population and Development Integration.

WHEREAS, data from the Local Civil Registration of the Muntinlupa recorded a total of 777 live births among adolescents aged 10-19 years in 2023, equivalent to 9.17% of the total live birth deliveries from adolescent mothers; The City acknowledges that there is a need to address this rising number of adolescent pregnancies, that they are vulnerable in engendered patterns of discrimination, deep-seated norms and attitudes that normalize and justify violence against women and children;

WHEREAS, in keeping with its duties and responsibilities to uphold the rights and well-being of its constituents, it is necessary and appropriate for the City Government of Muntinlupa to adopt measures that address gaps in reproductive health care;

NOW THEREFORE, BE IT ORDAINED AS IT IS HEREBY ORDAINED, by the 10th Sangguniang Panlungsod of Muntinlupa in session assembled that:

SECTION 1. Title. This ordinance shall be known as "The Comprehensive Muntinlupa City Responsible Parenthood and Reproductive Health Code"



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COUN. TING D. MEFES

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SECTION 2. Declaration of Policy. The City Government of Muntinlupa shall adopt an integrated and comprehensive policy on reproductive health and responsible parenthood in line with its pursuit of human development that values human dignity and affords full protection to people's rights, especially of women, children, young people and families'.

Moreover, the City recognizes and guarantees the promotion of gender equality, gender equity, women empowerment, and dignity as a health and human rights concern and as a social responsibility. The advancement and protection of women's human rights shall be central to the effort of the City to address reproductive health care involvement of both men and women in family planning and responsible parenthood and the care for adolescents' health and development.

The policy upholds the human rights of all persons including the right to equality and equity, right to development, the right to reproductive health, the right to education, and the right to choose and make decisions for themselves in accordance with their religious convictions, cultural beliefs, and the demands of responsible parenthood.

The policy likewise guarantees universal access to safe, reasonable, and quality reproductive health care services and relevant information thereon even as it prioritizes the needs of women and children, among underprivileged sectors and in raising consciousness to all gender.

SECTION 3. Purpose and Objective - This Code specially aim to:

- (i) Provide the people of Muntinlupa City with timely, complete, and accurate information and education on reproductive health;
- (ii) Provide couples and individuals access to safe, affordable, and quality reproductive health care services;
- (iii) Ensure the planning implementation, monitoring and evaluation of appropriate and effective reproductive health care programs at the City and Barangay level including: (a) maternal, prenatal infant, and child health care, responsible parenthood and family planning information and services; (b) services for the prevention of abortion and management of post-abortion and complication; (c) adolescent and youth health services, prevention and management of reproductive tract infections. HIV/AIDS and other transmittable infections (STIs); (d) elimination of violence against women; education and counseling on sexuality and sexual health (e) treatment of breast, reproductive tract cancers and other gynecological condition (f) male involvement in reproductive health and prevention; and (g) treatment of infertility and sexual dysfunctions.

SECTION 4. Definition of Terms - For purposes of this Ordinance, the following term shall mean:

a) Abortifacient - refers to any drug or devise that induces abortion or the destruction of a fetus inside the mother's womb or the prevention of the fertilized ovum from reaching and being implanted in the mother's womb upon determination of the Food and Drugs Administration (FDA).

b) Adolescent - refers to young people between the ages ten (10) to nineteen (19) years who are in transition from childhood to adulthood;



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c) **Adolescent Health and Development (AHD)** - Adolescent Health and Development Program is one of the key component programs of the Philippine Population and Development Plan of Action (PPD-PoA). The overall goal of the AHD Program is to contribute to the prevention of early and repeat pregnancies.

d) **Basic Emergency Obstetric and Newborn Care (BEMONC)** - refers to life-saving services for emergency maternal and newborn conditions/complications being provided by a health facility or professional to include the following services: administration of Parental oxytocic drugs, administration of dose of parental anti-convulsant, administration of parenteral antibiotics, administration of material steroids for preterm labor, performance of assisted vaginal deliveries, removal of retained placental products and manual removal of retained placenta. It also includes neonatal interventions which include at the minimum: newborn resuscitation, provision of warmth and referral blood transfusion where possible;

e) **Comprehensive Emergency Obstetric and Newborn Care (CEMONC)** - refers to life-saving services for emergency maternal and newborn conditions/complications as in Basic Emergency Obstetric and newborn care plus the provision of surgical delivery (Cesarean Section) and blood bank services;

f) **Family Planning** - refers to a program which enables couples and individuals to decide freely and responsibly the number and spacing of their children and to have the information and means to do so and to have access to a full range of safe, affordable, effective, non-abortifacient modern natural and artificial methods of planning pregnancy;

g) **Fetal and infant death review** - refers to a qualitative and in-depth study causes of fetal and infant death with the primary purpose of preventing future deaths through changes or additions to programs, plans, and policies;

h) **Gender equality** - refers to the principle of equality between women and men and equal rights to enjoy conditions in realizing their full human potential to contribute to, and benefit from, the results of development, with the state recognizing that all human beings are free and equal in dignity and rights. It entails equality in opportunities in the allocation of resources or benefits or in access to services in furtherance of the rights to health and sustainable human development among others, without discrimination;

i) **Gender equity** - refers to policies, instruments, programs and actions that address the disadvantaged position of women in society by providing preferential treatment and affirmative action. It entails fairness and justice in the distribution of benefits and responsibilities between women and men and often requires women-specific projects and programs to end existing inequalities. This concept recognizes that while reproductive health involves women and men, it is more critical for women's health;

j) **KATROPA** - refers to the acronym meaning KAlalakihang Tapat sa Responsibilidad at Obligasyon sa PAmilya. A program and a strategy that aims to shape and mobilize men to be responsible individuals, parents, and partners for the welfare of their family and community.

k) **Male responsibility** - refers to the involvement, commitment, accountability, and responsibility of males in all areas of sexual health and reproductive health, as well as the care of reproductive health concerns specific to men;



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l) Maternal death review - refers to a qualitative and in-depth study of the causes of maternal death with the primary pregnancy, childbirth and the postpartum period;

m) Maternal health - refers to the health of a woman of reproductive age including, but not limited to, during pregnancy, childbirth and the postpartum period;

n) Modern Methods of Family Planning - refers to safe, effective, non-abortion, and legal methods, whether natural or artificial, that are registered with the FDA, to plan pregnancy.

o) Natural Family Planning - refers to a variety of methods used to plan or prevent pregnancy based on identifying the woman's fertile days.

p) Public health care service provider- refers to: 1) public health care institution, which is duly licensed and accredited and devoted primarily to the maintenance and operation of facilities for health promotion disease prevention, diagnosis treatment and care of individuals suffering from illness, disease, injury, disability or deformity or in need of obstetrical or other medical and nursing care; 2) public health care professional, who is a doctor medicine, a nurse or a midwife; 3) public health worker engaged in the delivery of health care services; 4) barangay health worker who has undergone training program under any accredited government and NGO and who voluntarily renders primarily health care services in the community after having been accredited to function as such by the local health board in accordance with the guidelines promulgated by the Department of Health (DoH).

q) Population and Development Integration - is defined as the explicit consideration and integration of population dynamics and dimensions in the critical steps of any development initiative, such as plan and program development, policy formulation, database management and utilization, and other efforts that aim to improve, in a sustainable manner, the development conditions of the people and the locality in which they live.

r) Poor - refers to members of households identified as poor through the NHTS-PR by the Department of Social Welfare and Development (DSWD) or any subsequent system used by the national government in identifying the poor.

s) Reproductive Health (RH) - refers to the 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. This implies that people are able to have a responsible, safe, consensual and satisfying sex life, that they have the capability to and reproduce and the freedom to decide if, when, and how often to do so. This further implies that women and men attain equal relationships in matters related to sexual relation and reproduction;

t) Reproductive health care - refers to the access to a full range of methods, facilities, services, and supplies that contribute to reproductive health and well-being by addressing reproductive health-related problems, it also includes sexual health, the purpose of which is the enhancement of life and personal relations. The elements of reproductive health care include, but not limited to, the following:



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LPB President

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i. Family planning information and services which shall include as a first priority making women of reproductive age fully aware of their respective cycles to make them aware of when fertilization is highly probable as well as highly improbable.

ii. Maternal, infant, and child health and nutrition, including breastfeeding;

iii. Proscription of abortion and management of abortion complications;

iv. Adolescent and youth reproductive health guidance and counseling;

v. Prevention, treatment and management of reproductive tract infections (RTIs). HIV and AIDS and other sexually transmittable infections (STIs);

vi. Elimination of violence against women and children and other forms of sexual and gender-based violence;

vii. Education and counseling on sexuality and reproductive health;

viii. Treatment of breast and reproductive tract cancers and other gynecological conditions and disorders;

ix. Male responsibility and involvement and men's reproductive health;

x. Prevention, treatment and management of infertility and sexual dysfunction;

xi. Reproductive health education for adolescents; and

xii. Mental health aspect of reproductive health care.

u) Reproductive health care program - refers to the systematic and integrated provision of reproductive health care to all citizens prioritizing women, the poor, marginalized, and those invulnerable or crisis situations;

v) Reproductive health rights - refers to the rights of individuals and couples, to decide freely and responsibly whether or not to have children; the number, spacing, and timing of their children; to make other decisions concerning reproduction, free of discrimination, coercion and violence; to have the information and means to do so; and to attain the highest standard of sexual health and reproductive health; provided, however, that reproductive health rights do not include abortion, and access to abortifacients;

w) Reproductive health and sexuality education - refers to a lifelong learning of providing and acquiring complete, accurate, and relevant age and development appropriate information and education on reproductive health and sexuality through life skills education and other approaches;

x) Reproductive Tract Infection (RTI) - refers to sexually transmitted infections (STIs), and other types of infection affecting the reproductive system;



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y) **Responsible parenthood** - refers to the will and ability of a parent to respond to the needs and aspirations of the family and children. It is likewise a shared responsibility between parents to determine and achieve the desired number of children, spacing and timing of their children according to their own family life aspirations, taking into account psychological preparedness, health status, sociocultural and economic concern consistent, with their religious convictions;

z) **Sexual health** - refers to a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships. As well as the possibility of having a pleasurable and safe sexual experience, free from coercion, discrimination, and violence.

aa) **Sexually Transmitted Infection (STI)** - refers to any infection that may be acquired or passed on through sexual contact, use of IV, intravenous drug needles, childbirth and breastfeeding;

bb) **Skilled birth attendance** - refers to childbirth managed by a skilled health professional including the enabling conditions of necessary equipment and support of a functioning health system, including transport and referral faculties for emergency obstetric care;

cc) **Skilled health professional** - refers to a midwife, doctor or nurse, who has been educated and trained in the skills needed to manage normal and complicated pregnancies, childbirth and the immediate postnatal period, and in the identification, management and referral of complications in woman and newborns;

dd) **Sustainable human development** - refers to bringing people, particularly the poor and vulnerable, to the center of the development process, the center purpose of which is the creation of an enabling environment in which all can enjoy long, healthy and productive lives, done in the natural ecosystem on which all life depends.

SECTION 5. Creation of City Implementation Team for Responsible Parenthood and Reproductive Health Code (CIT - RPRHC) is hereby created to coordinate the planning, program implementation, monitoring and evaluation of the Muntinlupa City Reproductive and Responsible Health Code and will entail the participation of the Muntinlupa City in delivering support to Family Planning information and services including the marginalized and underserved population and the demand to implement the Responsible Parenthood and Reproductive Health Act and Reproductive Health Care Programs. The CIT - RPRHC shall be composed of the following;

Chairman	City Mayor
Co – Chairman	Muntinlupa Population Development Office
Vice Co-Chairman	City Health Office
Members:	<ol style="list-style-type: none">1. City Planning and Development Office2. ABC President (Liga ng mga Punongbarangay)3. Social Services Department4. Local City Registry Office5. Gender and Development Office6. Youth Affairs and Sports Development Office7. Saklolo at Gabay ng Ina at Pamilya (SAGIP)8. Schools Division Office9. People's Coordinating and Monitoring Office10. Sangguniang Kabataan Federation President11. Chairperson of the Committee on Gender and Development, Sangguniang Panlungsod12. Chairperson of the Committee on Persons with Disability, Sangguniang Panlungsod13. Chairperson of the Committee on Social Services and Development, Sangguniang Panlungsod14. City Budget and Management Department15. Muntinlupa City Youth Advocates16. Zonta Club Muntinlupa17. Rotary Club Muntinlupa18. Office for the Senior Citizens Affairs



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Secretariat:

Muntinlupa Population Development Office
City Health Office

A. CITY LEVEL

SECTION 6. Functions. City Implementation Team for Responsible Parenthood and Reproductive Health Code (CIT - RPRHC) shall function as the central advisory, planning, and policy-making body for the comprehensive and integrated implementation of the City Responsible Parenthood and Reproductive Health Care Program. It shall have the following responsibilities:

(i) Formulate policies that promote and advocate Programs, Projects and Activities (PPAs) for Population and Family Planning, especially in the fulfillment of the Responsible Parenthood and Reproductive Health (RPRH) law in localizing the National programs and submit to the Sangguniang Panlungsod, City Planning and Development Office and City Health Office an annual Responsible Parenthood and Reproductive Health Accomplishment Report;

(ii) Coordinate the full implementation of the Responsible Parenthood and Reproductive Health Care Program with the following components:

- a. Maternal, pre-natal and post-education, care and services;
- b. Immunization and nutrition program and services;
- c. Reproductive and sexual health education for women, men, and youth;
- d. Responsible Parenthood Counseling services that include but are not limited to education on legal and medically safe;
- e. Adolescent Health and Development Services that prevent adolescents' exposure to risky behaviors and early pregnancy;
- f. Implementation and discussion of KATROPA as male responsibility, involvement in health and family planning.

(iii) Monitor the efficient and effective implementation of Responsible Parenthood and Reproductive Health programs and projects.

(iv) Generate various statistics on the Responsible Parenthood and Reproductive Health of local women, more importantly the women of indigenous cultural communities and the indigent women;

(v) Conduct a quarterly meeting and special meetings, if and when necessary;

(vi) Prepare an Annual Work and Financial Plan (AWFP);

(vii) Prepare and submit quarterly accomplishment reports based on the Annual Work and Financial Plan (AWFP) and other reports needed to the Local Chief Executive

(viii) Formulate a training design for RPRH orientations, seminar and trainings;

(ix) Screen and select representative/s to conferences, seminars, trainings and other related RH activities;

(x) Exercise such other function expressly granted, those necessarily implied therefrom, as well as function necessary, appropriate, or incidental to the efficient and effective implementation of the provisions of this Ordinance



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(xi) Utilize various tools of media (print, radio, internet) for publicity and promotional campaigns that aim to increase public awareness on reproductive health, population education and responsible parenthood. They shall also include the development of information, Education and Communication (IEC) materials on these matters.

(xi) SECRETARIAT

The Secretariat shall perform the following functions, namely:

- Issue notices of meeting and provide logistical support in the conduct of meetings, whether regular or special; write, file, disseminate and send correspondences of minutes of meetings; and keep records updated;
- Coordinate the formulation, and execution of strategies, initiatives, regulations of plans, programs, policies, and ordinances of the implementation team;
- Assist and bolster the execution of pioneering pilot programs and services approved by the City Implementation Team, promoting active participation in the initiative.
- Consolidate and assist in the submission of reportorial requirements such as but not limited to quarterly accomplishment reports and Key Results Area for RPRH Law.
- Perform such other functions as may be necessary to implement the foregoing, as may be directed by the competent authority, or as may be provided for by law.

(xiii) **Reportorial requirements:** This sets as the guide for the Local Government Units in submission of their quarterly reports of each fiscal year as follows:

LGU	Date of Submission	Kind of report	Where to Submit
City	Every 20 th day of January, April, July and October	Consolidated City RPRH Report by the Secretary	Department of Health Department of Interior and Local Government Commission on Population and Development Regional Office Copy Furnish Mayor's Office

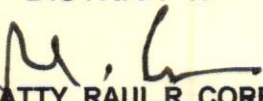
Submission of LGU's quarterly reports shall pass through regular channels of reporting, i.e. the City Mayor and submits the consolidated report to the DILG Provincial Office which in turn submits it to the concerned DILG Regional Office.



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DISTRICT 1:


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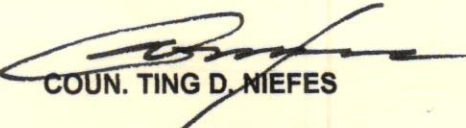

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COUN. ATTY. RACHEL C. ARCIAGA


COUN. IVEE RHIA ARCIAGA TADEFA


COUN. ALLAN REY A. CAMILON


COUN. JEDIDIAH R. PRESNEDI, LPT


COUN. TING D. NIEFES

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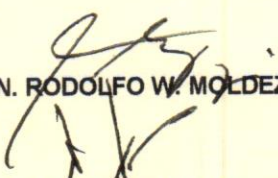
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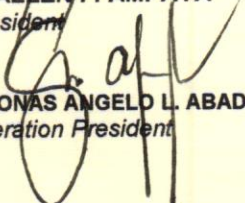

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COUN. ENGR. ARLENE D. HILAPO


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SK Federation President

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(xiii) Accomplishment Reports

a. The quarterly accomplishment report of the City Implementation Team shall include activities undertaken based on the approved AWFP. A copy must be submitted to the Secretariat. The Secretariat shall consolidate and provide a copy of the same to the Commission on Population and Development - National Capital Region (CPD - NCR), Department of Interior and Local Government - National Capital Region (DILG-NCR), Local Chief Executive and City Planning and Development Office (CPDO)..

b. The CIT - RPRHC shall use the prescribed templates for each Key Result Area (Family Planning, Adolescent Sexual and Reproductive Health, Gender-Based Violence, HIV/AIDS, Maternal Newborn, Child Health and Nutrition)

SECTION 7. Strengthening the Technical Capability of the CIT - RPRH - The Technical Capability of the CIT - RPRH shall be strengthened through the following:

(i) Attend capability-building and education activities for health professionals and service providers, including Family Health Workers, Barangay Health Workers, and other Concerned individuals;

SECTION 8. Muntinlupa Population and Development Office and City Health Office - shall perform the following functions:

(i) Provide health information regarding the different family planning methods;

(ii) Organize responsible parenthood and family planning classes that includes: ‘

Pre-Marriage Orientation and Counseling, RPPF in the communities, marginalized sectors and in the workplace, and

KATROPA discussion and special counseling sessions;

(iii) Encourage parents to use all modern and permanent methods

a. Modern Method

i. Modern Artificial Family Planning

1. Condom

2. IUD (IntraUterine Device)

3. Pills (COC - Combined Oral Contraceptives; POP - Progestin Only Pill)

4. Depo Medroxyprogesterone Acetate (DMPA)

5. Progestin Subdermal Implant (PSI)

ii. Modern Natural Family Planning

1. Lactational Amenorrhea Method (LAM)

2. Cervical Mucus Method (CCM)

3. Basal Body Temperature (BBT)

4. Sympto Thermal Method (STM)

b. Permanent Method

i. Non-Surgical Vasectomy (NSV)

ii. Bilateral Tubal Ligation (BTL)

(iv) Record couples who do not use family planning methods but want to practice family planning and other RPPF indicators;



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(v) Promote Comprehensive Sexuality Education to adolescents and youths.

SECTION 9. Reproductive Health and Sexuality and other AHD related program- Mandatory Reproductive Health and Sexuality Education shall be provided to all in-school and out-school youths in Muntinlupa City:

(i) Reproductive and sexuality education in an age-appropriate manner shall be taught by adequately trained teachers starting from the Grade 5 up to College and shall commence at the start of the school year immediately following the effectivity of this ordinance.

(ii) The CIT-RPRHC shall coordinate with the formulation of the sexuality education Curriculum to the AHD Council, which shall be common to both public and private schools;

(iii) The Council shall coordinate with the City chapters of the Sangguniang Kabataan, and th AHD council in organizing and providing Reproductive Health and Sexuality Education classes for all adolescents;

(iv) The CIT - RPRH , in coordination with the Sangguniang Kabataan, AHD Council and The City's Social Services and Development Office shall likewise provide training and funding for the operation of Peer Counseling services addressing the reproductive health problems of the youth.

The hospital both **Public and Private** should prepare the Hospital Service Statistics Report for Adolescent Pregnancy. This summarizes the number of clients provided with health care services that are related to Adolescent Pregnancy and to be submitted quarterly to the City Health Office and copy furnished to the Muntinlupa Population Development Office (MPDO).

SECTION 10. Pre-Marriage Orientation and Counseling - It is mandatory for the following persons to undergo Pre-Marriage Orientation and Counseling

For PMO:

- Future spouse;
- Unwed/single parents, live-in partners of common law spouses who intend to register their illegitimate child;
- All municipal government officials or employees and personnel of national government agencies whose officers are situated in the City of Muntinlupa.
- Couple whose spouse is detained in the City Jail.

The following procedures will be observed in availing Responsible Parenthood Counseling/Pre-Marriage Orientation and Counseling services;

For couples applying for marriage license:

- Shall submit complete documentary requirements to the Local Civil Registry Office;
- The Local Registry Office refers couples' applicants to the Reproductive Health Care Section of the City Health Office or its city counterpart, Muntinlupa Population Development Office Couple applicants personally register for Responsible Parenthood Counseling now called Pre-Marriage Orientation and Counseling and accomplish Marriage Expectation Inquiry Form (MEIF)

COUN. ALEXSON V. DIAZ

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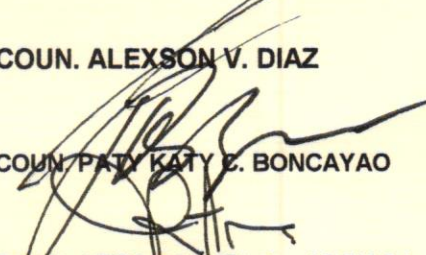
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DISTRICT 1:


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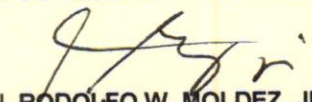
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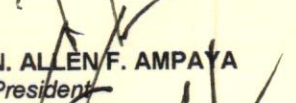

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LPB President


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SK Federation President

(iii) The PMOC Team shall review study accomplished MEIF to assess the needs of couple applicants and determine the focus of the counseling sections

(iv) The CHO-RHCS and PMOC Team shall recommend all modern methods such as Natural Family Planning Methods, Artificial Spacing Methods and Permanent Methods:

(v) Couple's applicants, without exemption, should attend all session on time based on schedules as may be decided by the Muntinlupa Population Development Office (MPDO) through the Pre-Marriage Orientation and Counseling Team (PMOC) as the implementing body for availing the said services;

(vi) CHO-RHCS and the PMOC Team shall issue the Responsible Parenthood Certificate or Certificate of Compliance to the couple who complied with the prescribed counseling session;

(vii) The Certificate of Compliance should be signed by the head of the Muntinlupa Population Development Office (MPDO), SSD, CHO and the Mayor;

(viii) Couple are then referred back to the Civil Registrar's Office for the issuance of marriage license after applying with responsible parenthood orientation and counseling/Certificate of Compliance and or Pre-Marriage Counseling Certificate Requirements

For unwed/single parents and common law spouse:

(i) Barangay Health Workers to conduct a door-to-door survey to determine the unwed/single parent and common law spouses in various communities whom they shall organize for Responsible Parenthood Counseling at the CHO-RHCS or in their respective Barangay;

(ii) The CHO-RHCS and the Muntinlupa Population Development Office (MPDO) through the Pre-Marriage Orientation and Counseling Team (PMOC) shall utilize a values-oriented approach and focus in the counseling sessions with the view of encouraging unwed parent and common law spouses to legitimize their union through marriage;

(iii) The CHO-RHCS and the Muntinlupa Population Development Office (MPDO) through the Pre-Marriage Orientation and Counseling Team (PMOC) shall recommend all modern family planning methods such as Natural Family Planning Methods, Artificial Spacing Methods and Permanent Methods;

SECTION 11. Family Planning Program and Services - Family Planning programs and services shall be accessible, affordable, and available to all regardless of sex, age, status religious convictions, and culture or ethnicity based on the following pillars:

1. Respect for Life - the conduct of programs and services that shall emphasize the promotion and protection of the life of the mother and her child.

2. Responsible Parenthood - programs and services to be conducted that shall encourage and facilitate the couple of their right and duty to determine the desired number of children they might have when they might have these children. Such programs shall also include the following:



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COUN. ATTY. RAUL R. CORRO

- a. KATROPA Program/Discussions
- b. Adolescent Health and Development Programs

COUN. ALEXSON V. DIAZ

3. **Birth Spacing** - information, education, medical and psychological services shall guide couples to decide to have children when they are both physically and emotionally ready to raise them.

COUN. RAY KATHY C. BONCAYAO

4. **Informed Choice** - The conduct of programs shall provide accurate information that facilitates decision-making of the couple and individual on family planning based on freedom of choice and voluntary decision respecting their moral, cultural, and spiritual beliefs.

COUN. ATTY. RACHEL C. ARCIAGA

COUN. IVEE RHIA ARCIAGA-DAFEA

SECTION 12. Recording and reporting of Family Planning Services

- All Family Planning Services Record (or FP Form 1), Consent Forms for surgical procedures, and Patient card should be properly filed and recorded. The hospital both **Public and Private** should prepare the Hospital Service Statistics Report Form for Family Planning, which summarizes the number of clients provided with FP services per unit (as reflected in the FP Logbook/clinic census) and submitted to the City Health Office. FP Coordinator every month and forwarded to the FHSIS Coordinator to be included as part of the reporting requirements.

COUN. ALLAN REY A. CAMILON

COUN. JEDIDIAH R. PRESNEDI, LPT

COUN. TING D. NIEFES

DISTRICT 2:

SECTION 13. Population and Development Integration. - A population

management strategy, as the explicit consideration and integration of population dynamics and dimensions in the critical steps of any development initiative, such as plan and program development, policy formulation, database management and utilization, and other efforts that aim to improve, in a sustainable manner, the development conditions of the people and the locality.

COUN. MARK LESTER M. BAES

- a. Build awareness, appreciation, and skills of key decision-makers, planners, and the public on considering population factors in development initiatives;
- b. Integrate population variables and dynamics in sectoral development strategies particularly in health and nutrition, education, employment, agriculture, environment, climate change, food security, and other sectors in which population is a critical factor;
- c. Promote initiatives on Population, Health, Employment, and Environment (PHEE) and other inter-sectoral and integrative strategies at the regional and local levels that promote collaboration among key stakeholders in addressing population and development issues;
- d. Promote Population and Development Education (POPDEVED);
- e. Build leadership and management capacities particularly at the local level for developing and implementing POPDEV-related initiatives;
- f. Continuously improve the data and knowledge base on the inter-linkages of population and development through research and studies.

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COUN. ENGR. ARLENE D. HILAPO

COUN. CORNELIO M. MARTINEZ

SECTION 14. Implementing Rules and Regulations – the Muntinlupa

Population Development Office shall promulgate rules and regulations for the effective implementation of this ordinance.

COUN. RODOLFO W. MOLDEZ, JR

COUN. ALLEN F. AMPAYA
LPB President

COUN. JONAS ANGELO L. ABADILLA
SK Federation President

SECTION 15. Funding and Appropriation - Immediately after this Ordinance shall take effect, the City Government of Muntinlupa shall appropriate funds to be taken from the general fund and other sources necessary for the efficient and effective operations of the Committee and implementation of the provisions hereof.



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SK Federation President

SECTION 16. Honoraria. Subject to the availability of funds and submission of requisite reportorial documents related to attendance in meetings, each member of the CIT-RPRHC shall receive the amount of Three Thousand (Php 3,000.00) Pesos. Each member of the Secretariat shall receive the amount of Two Thousand (Php 2,000.00) pesos for the conduct of advocacy activities, attendance of seminars, and submission of requisite reportorial documents. The honoraria shall be given quarterly and when special meetings are conducted.

SECTION 17. Separability Clause - If any part section or provision of this ordinance is held invalid or unconstitutional, other provisions not affected thereby shall remain in full force and effect.

SECTION 18. Repealing Clause - All other ordinance, resolutions or local - executive orders or rules regulations contrary to or inconsistent with the provision of this ordinance are hereby repealed or modified accordingly.

SECTION 19. Effectivity - This Ordinance shall take effect fifteen (15) days after publication in a local newspaper of general circulation within Muntinlupa City.

ENACTED, by the 10th Sangguniang Panlungsod of Muntinlupa this 20th day of January, 2025, on its 130th Regular Session.

I HEREBY CERTIFY, as to the correctness of the foregoing Ordinance.

CECILIA C. LAZARTE
Secretary to the Sanggunian

ATTESTED:

ARTEMIO A. SIMUNDAC
City Vice-Mayor/Presiding Officer

APPROVED:

ROZZANO RUFINO B. BIAZON
City Mayor

Date: FEB 05 2025

Norie/10th SP