



Republic of the Philippines
BATANGAS CITY

Office of the Sangguniang Panlungsod

Tel. No. 722-0304

ORDINANCE NO. 22-31 S. 2023

AN ORDINANCE ESTABLISHING BATANGAS CITY MENTAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF PERSONS UTILIZING PSYCHIATRIC, NEUROLOGIC AND PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFORE AND FOR OTHER PURPOSES

SPONSOR : SP MEMBER OLIVER Z. MACATANGAY
Chairman, Committee on Health

WHEREAS, pursuant to Republic Act No. 11036 otherwise known as "Mental Health Act", declares the policy of the state affirms the basic right of all Filipinos to mental health as well as the fundamental rights of people who require mental health services;

WHEREAS, the state commits itself to promoting the well-being of people by ensuring that; mental health is valued, promoted and protected, mental health conditions are treated and prevented; timely, affordable, high quality and culturally -appropriate mental health case is made available to the public; mental health service are free from coercion and accountable to the service users; and persons affected by mental health conditions are able to exercise the full range of human rights and participate fully in society and at work free from stigmatization and discrimination;

WHEREAS, the state complies strictly with its obligations under the United Nations Declaration of Human Rights, the Convention on the rights of Persons with Disabilities, and all other relevant international and regional human rights conventions and declarations. The applicability of Republic Act No. 7277, as amended otherwise known as the "Magna Carta for Persons with Disability", to person with mental health conditions, as defined herein, is expressly recognized;

WHEREAS, under Republic Act 7160 states that every Local Government Unit shall exercise the powers to support and promote health and safety of their respective territorial jurisdiction;

WHEREAS, mental health is a part of the totality of a person, hence, it must be protected and maintained with all means and with the significant intervention of the City Government of Batangas;

NOW THEREFORE, be it ordained by the Sangguniang Panlungsod of Batangas City in session assembled:

SECTION 1. SHORT TITLE. - This Ordinance shall be known as the "Batangas City Mental Health Ordinance."

HON. NELSON J. CHAVEZ

HON. ARMANDO C. LAZARTE

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HON. NESTOR E. DIMACUHA

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SECTION 2. OBJECTIVES. - The objectives of this ordinance are as follows:

- a) Strengthen effective leadership and governance for mental health by, among others, formulating, developing, and implementing national policies, strategies, programs, and regulations relating to mental health;
- b) Develop and establish a comprehensive, integrated effective and efficient national mental health care system responsive to the psychiatric, neurologic, and psychosocial needs of the people of Batangas City;
- c) Protect the rights and freedoms of persons with psychiatric, neurologic, and psychosocial needs;
- d) Strengthen information systems, evidence and research for mental health;
- e) Integrate mental health care in the basic health services; and
- f) Integrate strategies promoting mental health in educational institutions, the workplace, and in communities.

SECTION 3. DEFINITIONS. - As used in this Ordinance, the following terms are defined as follows:

- (a) **Addiction** - refers to a primary chronic relapsing disease of brain reward, motivation, memory, and related circuitry. Dysfunctions in the circuitry lead to characteristic biological, psychological, social, and spiritual manifestations. It is characterized by the inability to consistently abstain impairment and behavioral control, craving, diminished recognition of significant problems with one's behavior and interpersonal relationships and a dysfunctional emotional response;

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- (b) **Care** - refers to the person, who may or may not be patient's next-of-kin or relative, who maintains a close personal relationship and manifests concern for the welfare of the patient;
- (c) **Confidentiality** - refers to ensuring that all relevant information related to persons with psychiatric, neurologic, and psychological health needs is kept safe from access or use by, or disclosure to, persons or entities who are not authorized to access, use, or possess such information;
- (d) **Deinstitutionalization** - refers to the process of transitioning service users, including persons with mental health conditions and psychosocial disabilities, from institutional and other segregated settings, to community-based settings that enable social participation, recovery-based approaches to mental health, and individualized care in accordance with the service user's will and preference;
- (e) **Discrimination** - refers to any distinction, exclusion or restriction which has the purpose or effect of nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation. Special measure solely to protect the rights or secure the advancement of persons with decision-making impairment capacity shall not be deemed to be discriminatory;
- (f) **Drug Rehabilitation** - refers to the processes of medical or psychotherapeutic treatment of dependency on psychoactive substances such as alcohol, prescription drugs, and other dangerous drugs pursuant to Republic Act 9165, otherwise known as the "Comprehensive Dangerous Drugs Act of 2002". Rehabilitation process may also be applicable to diagnosed behavioral addictions such as gambling, internet and sexual addictions. The general intent is to enable the patient to confront the psychological, legal,

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financial, social, and physical consequences. Treatment includes medication for co-morbid psychiatric or other medical disorders, counseling by experts and sharing of experience with other addicted individuals;

(g) **Impairment or Temporary Loss of Decision-Making Capacity** - refers to a medically-determined inability on the part of a service user or any other person affected by a mental health condition, to provide informed consent. A service user has impairment or temporary loss of decision-making capacity when the service user as assessed by a mental health professional is unable to do the following:

- (1) Understand information concerning the nature of a mental health condition;
- (2) Understand the consequences of one's decisions and actions on one's life or health, or the life or health of others;
- (3) Understand information about the nature of the treatment proposed, including methodology, direct effects, and possible side effects; and
- (4) Effectively communicate consent voluntarily given by a service user to a plan for treatment or hospitalization, or information regarding one's own condition;

(h) **Informed Consent** - refers to consent voluntarily given by a service user to a plan for treatment, after a full disclosure communicated in plain language by the attending mental health service provider, of the nature, consequences, benefits, and risks of the proposed treatment, as well as available alternatives;

(i) **Legal Representatives** - refer to a person designated by the service user, appointed by a court of competent jurisdiction, or authorized by this ordinance or any other

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applicable law, to act on the service user's behalf. The legal representative may also be a person appointed in writing by the service user to act on his or her behalf through an advance directive;

- (j) **Mental Health** - refers to a state of well-being in which the individual realizes one's own abilities and potentials, scopes adequately with the normal stresses of life, displays resilience in the face of extreme life events, works productively and fruitfully, and is able to make a positive contribution to the community;
- (k) **Mental Health Condition** - refers to a neurologic or psychiatric condition characterized by the existence of a recognizable, clinically-significant disturbance in an individual's cognition, emotional regulation, or behavioral that reflects a genetic or acquired dysfunction in the neurological, psychosocial, or developmental process underlying mental functioning. The determination of neurologic and psychiatric conditions shall be based on scientifically-accepted medical nomenclature and best available scientific and medical evidence;
- (l) **Mental Health Facility** - refers to any establishment, or any unit of an establishment, which has, as its primary function, the provision of mental health services;
- (m) **Mental Health Professional** - refers to a medical doctor, psychologist, nurse, social worker or any other appropriately-trained and qualified person with specific skills relevant to the provision of mental health services.
- (n) **Mental Health Service Provider** - refers to an entity or individual providing mental health services as define in this ordinance, whether public or private, including, but not limited to mental health professionals and workers, social workers and counselors, informal community caregivers, mental health advocates and their organizations, personal ombudsmen, and persons or entities offering nonmedical alternative therapies;

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- (o) **Mental Health Service** - refers to psychosocial, psychiatric or neurologic activities and programs along the whole range of the mental health support services including promotion, prevention, treatment, and aftercare, which are provided by mental health facilities and mental health professionals;
- (p) **Mental Health Worker** - refers to a trained person, volunteer or advocate engaged in mental health promotion, providing support services under the supervision of a mental health professional;
- (q) **Psychiatric or Neurologic Emergency** - refers to a condition presenting a serious and immediate threat to the health and well-being of a service user or any other person affected by mental health facilities and mental health condition, or any other person affected by a metal condition, or to the health or well-being of others, requiring immediate medical intervention;
- (r) **Psychosocial Problem** - refers to a condition that indicates the existence of dysfunctions in a person's behavior, thoughts and feelings brought about by sudden extreme, prolonged or cumulative stressors in the physical or social environment;
- (s) **Recovery-Based Approach** - refers to an approach to intervention and treatment centered on the strengths of a service user and involving the active participation, as equal partners in care, of persons with lived experiences in mental health. This requires integrating a service user's understanding of his or her condition into any plan for treatment and recovery;
- (t) **Service User** - refers to a person with lived experience of any mental health condition including persons who require or are undergoing psychiatric, neurologic or psychosocial care;

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(u) **Support** - refers to the spectrum of informal and formal arrangements or services of varying types and intensities, provided by the State, private entities, or communities, aimed at assisting a service user in the exercise of his or her legal capacity or rights, including community services; personal assistants and ombudsman; powers of attorney and other legal and personal planning tools; peer support; support for self-advocacy; nonformal community caregiver networks; dialogue systems; alternative and manual communication; and the use of assistive devices and technology; and

(v) **Supported Decision Making** - refers to the act of assisting a service user who is not affected by an impairment or loss of decision-making capacity, in expressing a mental health-related preference, intention or decision. It includes all the necessary support, safeguards and measures to ensure protection from undue influence, coercion or abuse.

SECTION 4. RIGHTS OF SERVICE USERS. - Service users shall enjoy, on an equal and nondiscriminatory basis, all rights guaranteed by the Constitution as well as those recognized under the United Nations Universal Declaration of Human Rights and the Convention on the Rights of Persons with Disabilities and all other relevant international and regional human rights conventions and declarations, including the right to:

- (a) Freedom from social economic, and political discrimination and stigmatization, whether committed by public or private actors;
- (b) Exercise all their inherit civil, political, economic, social, religious, educational, and cultural rights respecting individual qualities, abilities, and diversity of background, without discrimination on the basis of physical disability, age, gender, sexual orientation, race, color, language, religion or nationality, ethnic, or social origin;
- (c) Access to evidence-based treatment of the same standard and quality, regardless of age, sex, socioeconomic status, race, ethnicity or sexual orientation;

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- (d) Access to affordable essential health and social services for the purpose of achieving the highest attainable standard of mental health;
- (e) Access to mental health service at all levels of the national health care system;
- (f) Access to comprehensive and coordinated treatment integrating holistic prevention, promotion, rehabilitation, care and support, aimed at addressing mental health care needs through a multidisciplinary, user-driven treatment and recovery plan;
- (g) Access to psychosocial care and clinical treatment in the least restrictive environment and manner;
- (h) Humane treatment free from solitary confinement, torture, and other forms of cruel inhumane, harmful or degrading treatment and invasive procedures not backed by scientific evidence;
- (i) Access to aftercare and rehabilitation, when possible, in the community for the purpose of social reintegration and inclusion;
- (j) Access to information regarding available multidisciplinary mental health services;
- (k) Participate in mental health advocacy, policy planning, legislation, service provision, monitoring, research and evaluation;
- (l) Confidentiality of all information, communications, and records, in whatever form or medium stored, regarding the service user, any aspect of the service user's mental health, or any treatment or care received by the service user, which information, communications, and records shall not be disclosed to third parties without the written consent of the service user concerned or the service user's legal representative, except in the following circumstances:

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- (1) Disclose is required by law or pursuant to an order issued by a court of competent jurisdiction;
- (2) The service user has expressed consent to the disclosure;
- (3) A life-threatening emergency exists and such disclosure is necessary to prevent harm or injury to the service user or other persons;
- (4) The service user is a minor and the attending mental health professional reasonably believes that the service user is a victim of child abuse; or
- (5) Disclosure is required in condition with an administrative, civil, or criminal case against a mental health professional ethics, to the extent necessary to completely adjudicate, settle, or resolve any issue or controversy involved therein;
- (m) Give informed consent before receiving treatment or care, including the right to withdraw such consent. Such consent shall be recorded in the service user's clinical record;
- (n) Participate in the development and formulation of the psychosocial care or clinical treatment plan to be implemented;
- (o) Designate or appoint a person of legal age to act as his or her legal representative in accordance with this ordinance, except in cases of impairment or temporary loss of decision-making capacity;
- (p) Send or receive uncensored private communication which may include communication by letter, telephone or electronic means, and receive visitors at reasonable times, including the service user's legal representative and representatives from the Commission on Human Rights (CHR);
- (q) Legal services, through competent counsel of the service user's choice. In case the service user cannot afford the

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service of a counsel, the City Legal Office, or a Legal aid institution of the service user or representative's choice, shall assist the service user;

(r) Access to their clinical records unless, in the opinion of the attending mental health professional, revealing such information would cause harm to the service user's health or put the safety of others at risk. When any such clinical records are withheld, the service user or his or her legal representative may contest such decision with the internal review board created pursuant to this ordinance authorized to investigate and resolve disputes, or with the CHR;

(s) Information, within the twenty-four (24) hours of admission to a mental health facility, of the rights enumerated in this section in a form and language understood by the service user; and

(t) By oneself or through a legal representative, to file with the appropriate agency, complaints of improper ties, abuses in mental health care, violations of rights of persons with mental health needs, and seek to initiate appropriate investigation and action against those who authorized illegal or unlawful involuntary treatment or confinement, and other violations.

SECTION 5. RIGHTS OF FAMILY MEMBERS, CARES AND LEGAL REPRESENTATIVES. - Family members, cares and duly designated or appointed legal representative of the service user shall have the right to:

(a) Receive appropriate psychosocial support from the relevant government agencies;

(b) With the consent of the concerned service user, participate in the formulation, development and implementation of the service user's individual treatment plan;

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- (c) Apply for release and transfer of the service user to an appropriate mental health facility;
- (d) Participate in mental health advocacy, policy planning, legislation, service provision, monitoring, research and evaluation.

SECTION 6. RIGHTS OF MENTAL HEALTH PROFESSIONALS. - Mental health professional shall have the right to:

- (a) A safe and supportive work environment;
- (b) Participate in a continuous professional development program;
- (c) Participate in the planning, development, and management of mental health services;
- (d) Contribute to the development and regular review of standards for evaluating mental health services provided to service users;
- (e) Participate in the development of mental and health policy and service delivery guidelines;
- (f) Except in emergency situations, manage and control all aspects of his or her practice, including whether or not to accept or decline a service user for treatment; and
- (g) Advocate for the rights of a service user, in cases where the service user's wishes are at odds with those of his or her family or legal representatives.

SECTION 7. INFORMED CONSENT TO TREATMENT. - Service users must provide informed consent in writing prior to the implementation by mental health professionals, workers, and other service providers of any plan or program of therapy or treatment, including physical or chemical restraint. All persons, including physical or chemical restraint. All persons, including service users, person with disabilities, and minors, shall be presumed to

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possess legal capacity for the purpose of this ordinance or any other applicable law, irrespective of the nature or effects of their mental health conditions or disability. Children shall have the right to express their views on all matters affecting themselves and have such views given due consideration in accordance with their age and maturity.

SECTION 8. ADVANCE DIRECTIVE. - A service user may set out her preference in relation to treatment through a signed, dated, and notarized advance directive executed for the purpose. An advance directive may be revoked by a new advance directive or by a notarized revocation.

SECTION 9. LEGAL REPRESENTATIVE. - A service user may designate a person of legal age to act as his or her legal representative through a notarized document executed for that purpose.

(a) *Functions.* A service user's legal representative shall:

- (1) Provide the service user with support and help; represent his or her interests; and receive medical information about the service user in accordance with this Ordinance;
- (2) Act as substitute decision maker when the service user has been assessed by a mental health professional to have temporary impairment of decision-making capacity;
- (3) Assist the service user vis-a-vis the exercise of any right provided under this Ordinance; and
- (4) Be consulted with respect to any treatment or therapy received by the service user. The appointment of a legal representative may be revoked by the appointment of a new legal representative or by a notarized revocation.

HON. WILSON
D. CHAVEZ

HON. MAMANDO C.
LAZARTE

HON. OLIVER Z.
MACATINGAG

HON. NESTOR E.
DIMACUHA

HON. ANDREA LOISE F.
MACARAIG

HON. KAREOS
EMMANUELA BUTED

HON. HAMILTON G.
BLANCO

HON. AIVYSSA RENEE
CRUZ

HON. MARCUS
MANUEL D. CASTILLO

HON. ANGELITO
DONDON A. DIMACUHA

HON. MICHAEL C.
VILLENIA

HON. LORENZO A.
GAMBOA, JR.

HON. SIDRA M.
ATIENZA

HON. ZESTER CARLO M.
HERNANDEZ

HON. JOSE SNASH
LUIS F. TOLENTINO



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(b) *Declining an Appointment.* A person thus appointed may decline to act as a service user's legal representative. However, a person who declines to continue being a service user's legal representative must take reasonable steps to inform the service user, as well as the service user's attending mental health professional or worker, of such decision.

(c) *Failure to Appoint.* - If the service user fails to appoint a legal representative, the following persons shall act as the service user's representative, in the order provided below:

- (1) The spouse, if any, unless permanently separated from the service user by a decree issued by a court of competent jurisdiction, or unless such spouse has abandoned or been abandoned by the service user for any period which has not yet come to an end;
- (2) Non-minor children;
- (3) Either parent by mutual consent, if the service user is a minor;
- (4) Chief administrator, or medical director of a mental health care facility; or
- (5) A person appointed by a Court.

SECTION 10. SUPPORTED DECISION MAKING. - A service user may designate up to three (3) persons or "supporters", including the service user's legal representative, for the purposes of supported decision making. These supporters shall have the authority to: access the service user's medical information; consult with the service user *vis-a-vis* any proposed treatment or therapy; and be present during service user's appointments and consultations with mental health professionals, workers and other service providers during the course of treatment or therapy.

HON. NELSON J. CHAVEZ

HON. WYLANDO C. LAZARTE

HON. OLIVERA MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA LOISE F. MACARANG

HON. KABLOS EMMANUEL A. BUTED

HON. HAMILTON G. BLANCO

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HON. MARCUS MANUEL D. CASTILLO

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SECTION 11. INTERNAL REVIEW BOARD. - Public and private health facilities are mandated to create their respective internal review boards to expeditiously review all cases, disputes, and controversies involving the treatment, restraint or confinement of service users within their facilities.

(a) The Board shall be composed of the following:

- (1) A representative from the CITY HEALTH OFFICE;
- (2) CHAIRMAN - COMMITTEE ON HEALTH;
- (3) CHAIRMAN - COMMITTEE ON HUMAN RIGHTS;
- (4) A person nominated by an organization representing service users and their families duly accredited by the Philippine Council for Mental Health; and
- (5) Other designated members deemed necessary, to be determined under the implementing rules and regulations (IRR).

(b) Each internal review board shall have the following powers and functions:

- (1) Conduct regular review, monitoring, and audit of all cases involving the treatment, confinement or restraint of service users within its jurisdiction;
- (2) Inspect mental health facilities to ensure that service users therein are not being subjected to cruel, inhumane, or degrading conditions or treatment;
- (3) *Motu proprio*, or upon the receipt of a written complaint or petition filed by a service user or a service user's immediate family or legal representative, investigate cases, disputes, and controversies involving the involuntary treatment, confinement or restraint of a service user; and

HON. NELSON J. CHAVEZ

HON. ARMANDO C. LAZARTE

HON. OLIVER MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA RUISE F. MACARAIG

HON. CARLOS EMMANJUEL A. BUTED

HON. HAMILTON G. BLANCO

HON. ANISSA RENEE A. CRUZ

HON. MARCUS MAQUIEL D. CASTILLO

HON. ANGELITO DONDON A. DIMACUHA

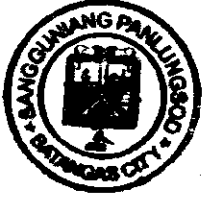
HON. MICHAEL C. VILLENA

HON. LORENZO A. GAMBOA JR.

HON. ISORA M. ATIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE JONASH LUIS F. TOLENTINO



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- (4) Take all necessary action to rectify or remedy violations of a service user's rights vis-à-vis treatment, confinement or restraint, including recommending that an administrative, civil or criminal case be filed by the appropriate government agency.

SECTION 12. EXCEPTIONS TO INFORMED CONSENT. - During psychiatric or neurologic emergencies, or when there is impairment or temporary loss of decision-making capacity in whether physical or chemical, may be administered or implemented pursuant to the following safeguards and conditions:

- (a) In compliance with the service user advance directives, if available, unless doing so would pose an immediate risk of serious harm to the patient or another person;
- (b) Only to the extent that such treatment or restraint is necessary, and only while a psychiatric or neurologic emergency, or impairment or temporary loss of capacity exists or persists;
- (c) Upon the order of the service user's attending mental health professional, which order must be reviewed by the internal review board of the mental health facility where the patient is being treated within fifteen (15) days from the date such order was issued, and every fifteen (15) days thereafter while the treatment or restraint continues; and
- (d) That such involuntary treatment or restraint shall be in strict accordance with guidelines approved by the appropriate authorities, which must contain clear criteria regulating the application and termination of such medical intervention, and fully documented and subject to regular external independent monitoring, review, and audit by the internal review boards established by this Act.

HON. NELSON J. CHAVEZ
HON. MAMANDO C. LAZARTE

HON. DIANE V. Z. MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA Q. SEF. MALARAIG

HON. CARLOS EMMANJUEL A. BUTED

HON. HAMILTON G. BLANCO

HON. AYNSSA RENEE A. CRUZ

HON. MARCUS MAXUEL D. CASTILLO

HON. ANGELITO DONDON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. GAMBOSA JR.

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SECTION 13. COMPLIANCE FOR QUALITY OF MENTAL HEALTH SERVICES. - Mental health services provided pursuant to this Ordinance shall be:

- (a) Based on medical and scientific research findings;
- (b) Responsive to the clinical, gender, cultural and ethnic and other special needs of the individuals being served;
- (c) Most appropriate and least restrictive setting;
- (d) Age appropriate; and
- (e) Provided by mental health professionals and workers in a manner that ensures accountability.

SECTION 14. MENTAL HEALTH SERVICES AT THE COMMUNITY LEVEL. - Responsive primary mental health services shall be developed and integrated as part of the basic health services at the appropriate level of care, particularly at barangay level of Batangas City. The standards of mental health services shall be determined by the DOH in consultation with stakeholders based on current evidence.

The Local Government Unit (LGU) and academic institution shall create their own program in accordance with the general guidelines set by the Batangas Council for Mental Health, created under this Ordinance, in coordination with other stakeholders. Barangays and academic institutions shall coordinate with City Health Office and CSWDO for the implementation of the program.

SECTION 15. CITY MENTAL HEALTH CARE FACILITY. - The Local Government Unit (LGU) through the City Health Office shall fund and assist the operation of city mental health care facility in accordance to Department of Health (DOH) standard and provide appropriate mental health care services, and enhance the rights-based approach to mental health care.

City mental health care facility shall in addition to adequate room, office or clinic, have a complement of mental health

HON. NELSON L. CHAVEZ

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HON. MARCUS MANUEL D. CASTILLO

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professionals, allied professionals, support staff, trained barangay health workers (BHWs) volunteer, family members of patients or service users, basic equipment and supplies and adequate stock of medicines appropriate at that level.

SECTION 16. REPORTORIAL REQUIREMENTS. - The LGU through the City Health Office shall make a quarterly report to the Philippine Council for Mental Health through DOH. The report shall include, among others, the following data: number of patients/service users attended to and or served, the respective kinds of mental illness or disability, duration and result of the treatment, and patients/users' age, gender, educational attainment and employment without disclosing the identities of such patients/service user.

SECTION 17. SUICIDE PREVENTION. - Mental health services shall also include mechanisms for suicide intervention, prevention, and response strategies, with particular attention to the concerns of the youth. Twenty-four seven (24/7) hotlines, to provide assistance to individuals with mental health conditions, especially individuals at risk of committing suicide, shall be set up, and existing hotlines shall be strengthened.

SECTION 18. PUBLIC AWARENESS. - The LGU through the City Health Office, CSWDO, shall initiate and sustain a heightened citywide multimedia campaign to raise the level of public awareness on the protection and promotion of mental health and rights including, but not limited to, mental health and nutrition, stress handling, guidance and counseling, and other elements of mental health.

SECTION 19. INTEGRATION OF MENTAL HEALTH INTO THE EDUCATIONAL SYSTEM. - The State shall ensure the integration of mental health into the educational system, as follows:

- (a) Age-appropriate content pertaining to mental health shall be integrated into the curriculum at all educational levels; and
- (b) Psychiatry and neurology shall be required subjects in all medical and allied health courses, including post-graduate courses in health.

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SECTION 20. MENTAL HEALTH PROMOTION IN EDUCATIONAL INSTITUTIONS. - Educational Institutions, such as schools, colleges, universities, and technical schools, shall develop policies and programs for students, educators, and other employees designed to: raise awareness on mental health issues, identified and provide support and services for individuals at risk, and facility access, including referral mechanisms of individual with mental health conditions to treatment and psychosocial support.

All public and private educational institutions shall be required to have a complement of mental health professionals.

SECTION 21. MENTAL HEALTH PROMOTION AND POLICIES IN THE WORKPLACE. Employers shall develop appropriate policies and programs on mental health issues, correct the stigma and discrimination associated with mental conditions, identify and provide support for individuals with mental health conditions to treatment and psychosocial support.

SECTION 22. CAPACITY BUILDING, REORIENTATION, AND TRAINING. In close coordination with mental health facilities, academic institutions, and other stakeholders, mental health professionals, workers, and other service providers shall undergo capacity building, reorientation, and training to develop their ability to deliver evidence-based, gender-sensitive, culturally appropriate and human rights-oriented mental health services, with emphasis on the community and public health aspects of mental health.

SECTION 23. CAPACITY BUILDING OF BARANGAY HEALTH WORKERS (BHWs). - The City Health Office shall be responsible for disseminating information and providing training programs to Barangay Health Workers. The LGUs, with technical assistance from the DOH, shall be responsible for the training of BHWs and other barangay volunteers on the promotion of mental health. The DOH shall provide assistance to LGUs with medical supplies and equipment needed by BHWs to carry out their functions effectively.

SECTION 24. RESEARCH AND DEVELOPMENT. - Research and development may be undertaken, in collaboration with academic institutions, psychiatric, neurologic, and related associations,

HON. NELSON J. CHAVEZ

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and non-government organizations, to produce the information, data, and evidence necessary to formulate and develop a culturally relevant national mental health program incorporating indigenous concepts and practices related to mental health.

High ethical standards in mental health research shall be promoted to ensure that: research is conducted only with the free and informed consent of the persons involved; researchers do not receive any privileges, compensation or remuneration in exchange for encouraging or recruiting participants; potentially harmful or dangerous research is not undertaken, all research is approved by an independent ethics committee, in accordance with applicable law.

Research and development shall also be undertaken vis-à-vis none medical, traditional or alternative practices.

SECTION 25. DUTIES AND RESPONSIBILITIES OF THE CITY HEALTH OFFICE (CHO). - The CHO shall:

- (a) Integrate mental health care services in the basic health care services, and ensure that mental health services are provided in primary health care facilities and hospitals, within their respective territorial jurisdictions;
- (b) Establish training programs necessary to enhance the capacity of mental health care service providers at the LGU level, in coordination with appropriate national government agencies and other stakeholders;
- (c) Promote deinstitutionalization and other recovery-based approaches to the delivery of mental health care services;
- (d) Establish, reorient, and modernize mental health care facilities necessary to adequately provide mental health services, within their respective territorial jurisdictions;
- (e) Where independent living arrangements are not available, provide or facilitate access to public housing facilities,

HON. NELSON I. CHAVEZ

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HON. ANDREA LOISE F. MACARAIG

HON. CARLOS EMMANJUEL A. BUTED

HON. HAMILTON G. BLANCO

HON. ALYSSA RENEE A. CRUZ

HON. MARCUS MANUEL D. CASTILLO

HON. ANGELITO DOMDON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. RAMBOA, JR.

HON. SIBRA M. ATIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE JONASH LUIS F. GOJENTINO



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training and skills development programs, and disability or pension benefits;

- (f) Refer service users to mental health facilities, professionals, workers, and other service providers for appropriate care; and
- (g) Establish a multi-sectoral stakeholder network for the identification, management, and prevention of mental health conditions.

SECTION 26. DUTIES AND RESPONSIBILITIES OF THE CITY SOCIAL WELFARE AND DEVELOPMENT OFFICE (CSWDO). - The CSWDO shall:

- (a) Refer service users to mental health facilities, professionals, workers, and other service providers for appropriate care;
- (b) Provide or facilitate access to public or group housing facilities, counselling, therapy, and livelihood training and other available skills development programs; and
- (c) In coordination with DOH and concerned agencies, formulate, develop, and implement community resilience and psychosocial well-being training, including psychosocial support services during and after natural disaster and other calamities.

SECTION 27. UPGRADING HEALTH CARE FACILITIES. - The City Government of Batangas upon its determination of necessity based on well-supported data provided by the City Health Office, shall establish or upgrade facilities with adequate and qualified personnel, equipment and supplies to be able to provide mental health services and to address psychiatric emergencies: *Provided*, That people in geographically isolated and/or high populated and depressed areas shall have the same level of access and shall not be neglected by providing other means such as home visits or mobile health care clinic, as needed; *Provided further*, That the national government shall provide additional funding and other necessary assistance for the effective implementation of this provision.

HON. NELSON J. CHAVEZ

HON. ARMANDO C. VAZARTE

HON. OLIVER M. MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA LOISEF. MACARAIG

HON. KARLOS EMMANJUEL A. BUTED

HON. HAMILTON G. BLANCO

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HON. JOSH JONASH LUIS JOLENTINO



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SECTION 28. MANDATE. - The City Council for Mental Health, herein referred to as the Council, is hereby established as a policy-making planning, coordinating and advisory body, attached to the City Health Office to oversee the implementation of this Ordinance, particularly the protection of the rights and freedom of persons with psychiatric, neurologic, and psychosocial needs and the delivery of rational, unified and integrated mental health services responsive to the needs of every Batangueños.

SECTION 29. DUTIES AND FUNCTIONS. - The Council shall exercise the following duties;

- (a) Develop and periodically update, in coordination with the City Health Office, a city multi-sectoral strategic plan for mental health that further operationalizes the objectives of this ordinance which shall include the following:
 - (1) The city target and strategies in protecting the rights of constituents with mental health needs and in promoting mental health and the well-being, as provided in this Ordinance;
 - (2) The city government plan in establishing a rational, unified and integrated service delivery network for mental health services including the developmental health human resources and information system for mental health; and
 - (3) The budgetary requirements and a corollary investment plan that shall identify the sources of funds for its implementation;
- (b) Monitor the implementation of the rules and regulations of this Ordinance and the strategic plan for mental health, undertake mid-term assessments and evaluations of the impact of the interventions in achieving the objectives of this Ordinance;
- (c) Ensure the implementation of the policies provided in this Ordinance, and issue or cause issuance of orders,

HON. NELSON J. CHAVEZ
 HON. ARMANDO C. LAZARTE
 HON. OLIVERIZ MACATANGAY
 HON. NESTOR E. DIMACUHA
 HON. ANDREA LOISE F. MACARAIG
 HON. KARLOS EMMANJUEL A. BUTED
 HON. HAMILTON G. BLANCO
 HON. ALESSA RENEE A. CRUZ

HON. MARCUS MANUEL D. CASTILLO
 HON. ANGELITO DONDON A. DIMACUHA
 HON. MICHAEL C. VILLENA
 HON. LORENZO A. GAMBORA, JR.
 HON. ISHARA M. ATIENZA
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or make recommendations to the implementing agencies as the Council considers appropriate;

- (d) Coordinate the activities and strengthen working relationships among Batangas City Government, Barangay Level and non-government organizations involved in mental health promotion;
- (e) Coordinate with non-government organizations and Barangay Health Workers regarding data collection, research and treatment modalities for persons with psychiatric, neurologic and substance use disorder and other addictions;
- (f) Coordinate joint planning and budgeting of relevant agencies to ensure funds for programs and projects indicated in the strategic medium-term plan are included in the agency's annual budget;
- (g) Call upon other government agencies and stakeholders to provide data and information in formulating policies and programs, and to assist the Council in the performance of its functions; and
- (h) Perform other duties and functions necessary to carry out the purpose of this Ordinance.

SECTION 30. COMPOSITION. - The City Mental Health Council shall be composed of the following:

- (a) City Mayor - Chairman
- (b) City Health Officer - Vice Chairman
- (c) Chairman of the Committee on Health
- (d) Chairman of the Committee on Human Rights
- (e) Representative from the City Social and Welfare Development Office (CSWDO)

HON. NELSON J. CHAVEZ

HON. AMANDO C. LAZARTE

HON. JOAQUIN L. MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA LOISE F. MACARAIG

HON. KARLOS EMMANJUEL A. BUTED

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HON. ALESSA RENEE AL CRUZ

HON. MARCUS MAQUIEL D. CASTILLO

HON. ANGELITO DOMDON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. GAMBON, JR.

HON. ISIDRA M. ATIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE YONASH LUIS K. TOLENTINO



Republic of the Philippines
BATANGAS CITY

Office of the Sangguniang Panlungsod

Tel. No. 722-0304

Continuation of Ordinance No. 22-31 S. 2023

AN ORDINANCE ESTABLISHING BATANGAS CITY MENTAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF PERSONS UTILIZING PSYCHIATRIC, NEUROLOGIC AND PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFORE AND FOR OTHER PURPOSES

- (f) School Division Superintendent of the Department of Education
- (g) Representative from the Commission on Higher Education (CHED)
- (h) Representative from ABC
- (i) Representative from SK
- (j) Local Government Operations Officer of the Department of Interior and Local Government (DILG);
- (k) Local Youth Development Officer (LYDO) - Batangas City
- (l) One (1) from the academe/research;
- (m) One (1) representative from medical or health professional organizations;
- (n) One (1) representative from non-government organizations (NGOs) involved in mental health issues.

The members of the Council from the government may designate their permanent authorized representatives.

Within thirty (30) days from the effectivity of this Ordinance, the members of the Council from the academe/research, private sector and NGOs shall be appointed by the City Mayor from a list of three (3) nominees submitted by the organizations, as endorsed by the Council.

Members representing the academe/research, private sector and NGOs of the Council shall serve for a term of three (3) years. In case a vacancy occurs in the Council, any person chosen to fill the position vacated by a member of the Council shall only serve the unexpired term of said member.

HON. NELSON J. CHAVEZ

HON. IRMANDO C. LAZARTE

HON. BLWERT. MACATANGAY

HON. VESTOR E. DIMACUHA

HON. ANDREA LOISEF. MACAPANG

HON. KARIOS EMMANJUELA A. BUTED

HON. HAMILTON G. BLANCO

HON. ALYSSA RENEE A. CRUZ

HON. MARCUS MANUEL D. CASTILLO

HON. ANGELITO BONDON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. GAMBOSA, JR.

HON. SIDRA M. TIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE JONASH LUIS F. TORRENTINO



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SECTION 31. VOLUNTARY SUBMISSION OF A DRUG DEPENDENT TO CONFINEMENT, TREATMENT AND REHABILITATION. - Persons who avail of the voluntary submission, provision and persons charged pursuant to Republic Act No. 9165, otherwise known as the "Comprehensive Dangerous Drugs Act of 2002", shall undergo an examination for mental health conditions and, if found to have mental health conditions, shall be covered by the provision of this Ordinance.

SECTION 32. PENALTY CLAUSE. - Any person who commits any of the following shall, upon conviction by final judgment, be punished by imprisonment of maximum of six (6) months, or a fine of not more than Five Thousand Pesos (Php 5,000.00) at the discretion of the court:

- (a) Violation of confidentiality of information, as defined under Section 3(c) of this Ordinance;
- (b) Discrimination against a person with mental health condition, as defined under Section 3(e) of this Ordinance; and
- (c) Administering inhumane, cruel, degrading or harmful treatment not based on medical or scientific evidence as indicated in Section 4(h) of this Ordinance;

If the violation is committed by a juridical person, the penalty provided for in this Ordinance shall be imposed on the directors, officers, employees or other officials or persons therein responsible for the offense.

If the violation is committed by an alien, the alien offender shall be immediately deported after service of sentence without need of further proceedings.

These penalties shall be without prejudice to the administrative or civil liability of the offender, or the facility where such violation occurred.

SECTION 33. APPROPRIATIONS. - The amount needed for the initial implementation of this Ordinance shall be subject for the availability of funds by the city government.

HON. NELSON J. CHAVEZ

HON. ARMANDO C. LAZARTE

HON. QUINCY Z. MACATANGAY

HON. VESTOR E. DIMACUHA

HON. ANDREA LOISE F. MACARAIG

HON. KARLOS EMMANUEL A. BUTED

HON. HAMILTON G. BLANGO

HON. ALESSA RENEE A. CRUZ

HON. MARCUS MANUEL D. CASTILLO

HON. ANGELITO DONDON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. GAMBOA, JR.

HON. SIDRA M. ATIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE JONASH LUIS F. TOLENTINO



Republic of the Philippines
BATANGAS CITY

Office of the Sangguniang Panlungsod

Tel. No. 722-0304

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Continuation of Ordinance No. 22-31 S. 2023

AN ORDINANCE ESTABLISHING BATANGAS CITY MENTAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF PERSONS UTILIZING PSYCHIATRIC, NEUROLOGIC AND PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFORE AND FOR OTHER PURPOSES

SECTION 34. IMPLEMENTING RULES AND REGULATIONS (IRR). - The City Health Officer in coordination with City Mental Health Council shall issue the IRR necessary for the effective implementation of this Ordinance within Thirty (30) days from the effectivity thereof and submit the copy to the Sangguniang Panlungsod.

SECTION 35. SEPARABILITY CLAUSE. - If any provision of this Ordinance is declared unconstitutional or invalid by a court of competent jurisdiction, the remaining provisions not affected thereby shall continue to be in full force and effect.

SECTION 36. REPEALING CLAUSE. - All laws, rules and regulations which are inconsistent with or contrary to the provisions of this Ordinance are hereby amended or repealed accordingly.

SECTION 37. EFFECTIVITY. - This Ordinance shall take effect upon its approval.

ENACTED by the Sangguniang Panlungsod this 28th day of November, 2023.

ATTY. OLIVA D. TELEGATOS
Secretary

ATTESTED:

ATTY. ALYSSA RENEE A. CRUZ
Presiding Officer

APPROVED:

BEVERLEY ROSE A. DIMACUHA
City Mayor

Date Approved: DEC 15 2023

HON. NELSON J. CHAVEZ

HON. ARMANDO C. LAZARTE

HON. OMBERTO Z. MACATANGAY

HON. NESTOR E. DIMACUHA

HON. ANDREA NOISE F. MACARAIG

HON. CARLOS E. BUTED

HON. HAMILTON G. BLANCO

HON. MARCUS MAXUEL D. CASTILLO

HON. ANGELITO DONJON A. DIMACUHA

HON. MICHAEL C. VILLENA

HON. LORENZO A. GRAMBOA, JR.

HON. JODYRA M. ATIENZA

HON. ZESTER CARLO M. HERNANDEZ

HON. JOSE JONASH LUIS F. TOLENTINO

**REPUBLIC OF THE PHILIPPINES
BATANGAS CITY**

OFFICE OF THE SANGGUNIANG PANLUNGSOD

**EXCERPT FROM THE MINUTES OF THE REGULAR SESSION HELD BY THE
MEMBERS OF THE SANGGUNIANG PANLUNGSOD OF BATANGAS CITY
ON NOVEMBER 28, 2023 AT THE SANGGUNIANG PANLUNGSOD SESSION HALL**

PRESENT:

| | |
|---|--------------------------------|
| Hon. Alyssa Renee A. Cruz | Presiding Officer |
| Hon. Hamilton G. Blanco, | Sangguniang Panlungsod Member |
| Hon. Karlos Emmanjuel A. Buted, | " |
| Hon. Nestor E. Dimacuha, | " |
| Hon. Oliver Z. Macatangay, | " |
| Hon. Nelson J. Chavez, | " |
| Hon. Jose Jonash Luis F. Tolentino, | " |
| Hon. Zester Carlo M. Hernandez, | " |
| Hon. Isidra "Ched" M. Atienza, | " |
| Hon. Lorenzo A. Gamboa, Jr., | " |
| Hon. Michael C. Villena, | " |
| Hon. Angelito Dondon A. Dimacuha, | Liga ng mga Barangay President |
| | |
| Hon. Andrea Loise F. Macaraig, (On Leave) | Sangguniang Panlungsod Member |
| Hon. Armando C. Lazarte, (On Leave) | " |
| Hon. Marcus Manuel D. Castillo, (O.B.) | SK Pederasyon President |

"On motion of SP Member Macatangay seconded by SP Member Nestor Dimacuha, the following Resolution was Adopted:

RESOLUTION NO. 22-468 S. 2023

**ADOPTING THE REPORT OF THE COMMITTEE ON HEALTH AND APPROVING
ON SECOND AND FINAL READING THE BATANGAS CITY
MENTAL HEALTH ORDINANCE**

RESOLVED, to adopt the Report of the Committee on Health and to approve on Second and Final Reading the Batangas City Mental Health Ordinance.

UNANIMOUSLY APPROVED. "

I hereby certify that the foregoing Resolution No. 22-468 S. 2023 was approved by the Sangguniang Panlungsod of Batangas City during its Regular Session held on November 28, 2023.



ATTY. OLIVA D. TELEGATOS

Secretary

ATTESTED:

ATTY. ALYSSA RENEE A. CRUZ
Presiding Officer

ODT/ystingchuy...



Republic of the Philippines
BATANGAS CITY

Office of the Sangguniang Panlungsod

Tel. No. 722-0304

COMMITTEE REPORT

**TO : THE HONORABLE PRESIDING OFFICER AND
SANGGUNIANG PANLUNGSOD MEMBERS**

FROM : COMMITTEE ON HEALTH

**SUBJECT : AN ORDINANCE ESTABLISHING BATANGAS CITY MENTAL
HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF
INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING
THE RIGHTS OF PERSONS UTILIZING PSYCHIATRIC, NEUROLOGIC AND
PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFORE
AND FOR OTHER PURPOSES**

BACKGROUND

The aforementioned subject was referred to the Committee on Health on August 07, 2023.

The last Committee Hearing was held on September 12, 2023 for third reading at Sampaguita Farm Sampaga, Batangas City and in attendance were the following:

SANGGUNIANG PANLUNGSOD MEMBERS

| | |
|------------------------------------|---|
| Hon. Atty. Alyssa Renee A. Cruz | City Vice Mayor and Presiding Officer |
| Hon. Oliver Z. Macatangay | Chairman – Committee on Health |
| Hon. Jose Jonash Luis F. Tolentino | Member – Committee on Health |
| Hon. Karlos Emmanjuel A. Buted | Member – Committee on Health |
| Hon. Lorenzo A. Gamboa Jr. | Member – Committee on Health |
| Hon. Marjorie Manalo | Member – Committee on Health/ Ex-Officio/SK Federation President |
| Hon. Hamilton G. Blanco, | Sangguniang Panlungsod Member |
| Hon. Andrea Loise F. Macaraig | Sangguniang Panlungsod Member |
| Hon. Nestor E. Dimacuha | Sangguniang Panlungsod Member |
| Hon. Armando C. Lazarte | Sangguniang Panlungsod Member |
| Hon. Nelson J. Chavez | Sangguniang Panlungsod Member |
| Hon. Zester Carlo M. Hernandez | Sangguniang Panlungsod Member |
| Hon. Isidra "Ched" M. Atienza | Sangguniang Panlungsod Member |
| Hon. Michael C. Villena | Sangguniang Panlungsod Member |
| Hon. Angelito "Dondon" A. Dimacuha | Ex-Officio/ABC President |

PROPONENTS

Dra. Rosanna Carmelita Barrion
Atty. Shaira Camille Humarang
Hazel Magpantay
Dra. Imelda M. Martin
Dr. Normando B. Napenas
Rosanni Del Mundo
Mrs. Hiyasmin Candava
Mrs. Charity Nunez
Mr. Nelberth Magbanua
Dra. Belinda Sabellano

City Health Officer
City Legal Office - Representative
PMHA Representative
PMHA Representative
PMHA Chapter Chairperson
Colegio ng Lungsod ng Batangas
City Social Welfare Development Office
City Social Welfare Development Office
Local Youth Development Officer (LYDO)
DepEd Batangas City – Representative

DISCUSSIONS

During discussions, the committee scrutinized that mental health is defined as a state of well-being that enables people to cope with the stresses of life. The committee highlighted the prevalence of mental issues and the increase of suicides incident in Batangas City mostly during the last outbreak of Covid 19. Therefore, having such an ordinance will help for the urgent need to identify and help people who are vulnerable and experiencing depression. A public campaign is needed to prevent and remove the stigma attached to mental health problems by launching a mental awareness drive. And it's important for people to know and understand that having a mental health problems can be treated with proper care and professional attention.

The committee ensures that everyone's suggestions are incorporated to improve further the subject ordinance. And each of Sanggunian Council Members gave suggestions to include all activities they mentioned that will help for the mental health awareness of the City for the purpose of prevention in the Internal Rules and Regulations (IRR).

The committee also closely reviewed the budget allocation for this ordinance for its effective implementation that will help the people of the City of Batangas.

FINDINGS

After deliberations of this proposed ordinance, the committee and Sangguniang Panlungsod Members finds the following objectives:

(a) To strengthen effective leadership and governance for mental health by, among others, formulating, developing, and implementing national policies, strategies, programs, and regulations relating to mental health;

(b) Develop and establish a comprehensive, integrated effective and efficient national mental health care system responsive to the psychiatric, neurologic, and psychosocial needs of the people of Batangas City;

(c) Protect the rights and freedoms of persons with psychiatric, neurologic, and psychosocial needs;

(d) Strengthen information systems, evidence and research for mental health;

(e) Integrated mental health care in the basic health services; and

(f) Integrate strategies promoting mental health in educational institutions, the workplace, and in communities.

RECOMMENDATIONS

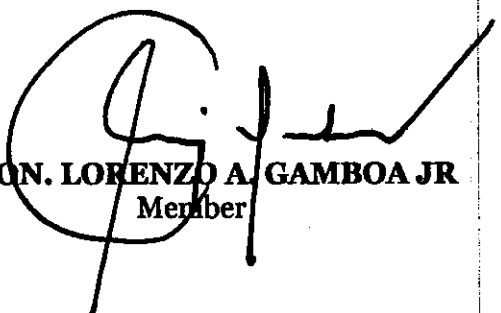
Considering the foregoing, the committee recommends the following:

1. Adoption of this Committee Report
2. Approval of the attached Proposed Ordinance on Final Reading.

Respectfully submitted, November 28, 2023.


HON. OLIVER Z. MACATANGAY
Chairman

HON. JOSE JONASH LUIS T. TOLENTINO
Member


HON. LORENZO A. GAMBOA JR.
Member


HON. KARLOS EMMANJUEL A. BUTED
Member

HON. MARJORIE MANALO
Member/SK Federation President