

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

NINETEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. 8982



Introduced by HON. GUS S. TAMBUNTING

AN ACT
INSTITUTIONALIZING THE ESTABLISHMENT OF WOMEN AND CHILDREN
PROTECTION UNITS (WCPU) IN ALL GOVERNMENT HOSPITALS

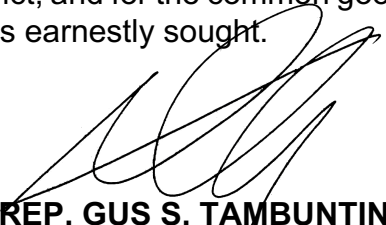
EXPLANATORY NOTE

Close to 9,000 child abuse cases, some of them happening inside the home, were recorded throughout the country last year, according to a report made by the Council for the Welfare of Children (CWC). The Philippines still does not have enough resources to enforce laws against the sexual exploitation of minors, keeping child abuse a significant problem in the country. Data from the Philippine National Police (PNP) showed that more than 12,000 Violence Against Women and Children (VAWC) cases were reported throughout the country in 2021, over 8,000 involving women as victims. In the first half of 2022, the number of cases involving women as victims reached some 5,339 throughout the country.

In the year 2019, with a total of 721 public hospitals in Luzon, Visayas, and Mindanao, there were only 94 WCPUs and VAWC desks that had been established despite the issuance of a 2013 order from the Department of Health.

This bill aims to acknowledge the alarming necessity of institutionalizing the establishment of Women and Children Protection Units in all government hospitals to ensure help is within the reach of the victims. The inclusion of this program in government appropriations should be deemed necessary to make certain that protection units are well-equipped to respond to VAWC cases and to deter gender-based violence (GBV).

On behalf of the people of Parañaque City's Second District, and for the common good of the Filipino people, the approval of the said measure is earnestly sought.


REP. GUS S. TAMBUNTING
2nd District, Parañaque City

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Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

Section 1. Short Title - This Act shall be known as the "Women and Children Protection Units Act of 2023."

Sec. 2. Declaration of Policy - It shall be the policy of the State to recognize and promote the right to health of the people and shall prioritize the needs of the underprivileged, sick, elderly, disabled, women, and children. The State shall support the elimination of all forms of gender-based violence and promote social justice based on the identification and treatment of violence against women and children and in recognition of the rights of women and children as mandated by the Philippine Constitution, the Convention on the Elimination of All Forms of Discrimination Against Women, the Convention on the Rights of the Child, and the Beijing Platform for Action.

Sec. 3. Definition of Terms - As used in this Act, the following terms shall mean the following:

(a) "Children" refer to persons below 18 years old or those over but are unable to fully take care of themselves or protect themselves from abuse, neglect, cruelty, exploitation or discrimination because of physical or mental disability;

(b) "Violence Against Children" refers to all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse. It shall also include the definitions in Republic Act No. 7610, Republic Act No. 9208, Republic Act No. 9775, and other pertinent laws;

(c) "Violence Against Women" refers to any act of gender-based violence that results in, or is likely to result in physical, sexual, psychological harm or suffering to women, including threats of such acts, coercion, harassment or arbitrary deprivation of liberty, whether occurring in public or private life. It includes, but is not limited to, the following acts:

(i) Physical, sexual, psychological, and economic violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, and other traditional practices harmful to women, non-spousal violence, and violence related to exploitation;

(ii) Physical, sexual, psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment, and intimidation at work, in educational institutions and elsewhere, trafficking in women, and prostitution; and

(iii) Physical, sexual, and psychological violence perpetrated or condoned by the State, whenever it occurs. It also includes violence against women as defined in Republic Acts 9208 and 9262 and other relevant laws;

(d) "Women and Children Protection Unit (WCPU)" is a unit composed of a multidisciplinary team of trained physicians, social workers, mental health professionals and police providing comprehensive medical and psychosocial services to women and children victims of violence;

(e) "Child Protection Management Information System (CPMIS)" assures retrieval and management of reports, research and data capture of the WCPU;

(f) "Peer Review" is a process of examination of professional or academic efficiency, and competence by others in the same occupation. In cases of child abuse, the peer review would be the process whereby child protection specialists would examine forensic evidence in order to analyze findings of the physician-examiner in the absence of examiner and reviewer bias;

(g) "Standard Protocol" is a protocol which is a legally binding or otherwise authoritative document that provides directions for the actions of a group or groups as a benchmark of performance;

(h) "Gender Sensitivity" is the ability to recognize gender issues and especially the ability to recognize women's different perceptions and interests arising from their varying gender orientation and gender roles;

(i) "4Rs" refer to the processes of Recognition, Recording, Reporting and Referral of Violence Against Women and Child Abuse Cases.

Sec. 4. Coverage - This shall apply to the entire health sector, including the DOH health care facilities, LGU-supported health facilities, private health care facilities, other DOH attached agencies, development partners and other relevant stakeholders involved in its implementation.

Sec. 5. General Guidelines for the Establishment of Women and Children Protection Units - The following guidelines shall be followed in the establishment of Women and Children Protection Units (WCPUs):

(a) Policies and guidelines shall be developed in accordance with recent data gathered through prevalence surveys, efficacy studies, and other research done locally and internationally. Recommendations from international organizations may also be utilized when appropriate;

(b) Recognition, reporting, and care management of cases involving violence against women and children shall be through medical and psycho-social teamwork including the mental health intervention and local government unit response and cooperation, whenever necessary;

(c) Every province/chartered city shall establish at least one (1) Women and Children Protection Unit;

(d) All health facilities shall ensure to have competent and trained gender- responsive professionals who will coordinate the services needed by women and children who were victims of violence;

(e) The quality of health care services shall be standardized and maintained by all women and children protection units;

(f) A mechanism shall be created and a harmonized database be maintained for all reports submitted by the different women and children protection units; and a

(g) Public-Private Partnership shall be enhanced by establishing a service delivery network within their area to ensure sustainability of WCPU human resource. Sec. 6. Implementing Guidelines for the Establishment of Women and Children Protection Units - The following guidelines shall be followed in the implementation of Women and Children Protection Units (WCPU):

(a) Steering Committee on Women and Children Protection (SCWCP) – The Steering Committee on Women and Children Protection, hereinafter referred to as the "Committee," shall be created primarily responsible for policy making, coordinating, monitoring, and overseeing the implementation of this Order.

(i) SCWCP Membership, Structure and Functions - The Committee shall be composed of the following:

(1) Undersecretary of Health or representative as chairperson of SCWCP;

(2) Undersecretary of the Department of the Interior and Local Government or representative;

(3) Undersecretary of the Department of Social Welfare and Development or representative;

(4) A director of the Department of Health - National Center for Disease Prevention and Control (NCDPC);

(5) A director of the Department of Education;

(6) A director of a DOH - retained hospital;

(7) A director of DOH - Legal Service;

(8) Executive Director of the Philippine Commission for Women;

(9) A representative duly appointed under the by-laws of an organization or Foundation with expertise and experience in Women and Child protection work; and

(10) One representative each from the Philippine Obstetrics and Gynecological Society, Inc., the Philippine Pediatric Society, the Philippine College of Emergency Medicine, the Philippine College of Surgeons, the Philippine Academy of Family Physicians, Inc., and the Philippine Psychiatric Association.

The Chairperson shall appoint a Vice-Chair from among the Committee members who shall preside over the meeting in the former's absence.

(ii) Functions - The Committee shall have the following functions:

(1) Provide overall leadership, policy and program directions;

(2) Monitor the progress of the program with the assistance of the National Center for Health Facility Development (NCHFD) and Center for Health Development (CHD) using the Performance Standards and Assessment Tools for Services Addressing Violence Against Women in the Philippines;

(3) Provide assistance in the security/protection of WCPU staff from perpetrators;

(4) Ensure that networking and inter-organizational linkages are available at the national, regional and local levels;

(5) Resolve issues, concerns and/or problems, make recommendations and decisions that may affect the execution of the project in terms of strategic direction, significant change of scope, timing, resource, and cost requirements;

(6) Nominate the members of the Technical Working Group (TWG);

(7) Draft / review / comment and recommend approval of Resolutions / Circulars / Memoranda and Administrative Orders on VAWC for issuance by the relevant Department(s);

(8) Propose a Costed Implementation Plan, the whole or elements of which, upon Committee approval, shall be inserted into relevant plans and budgets of the department and which shall be funded fully before any other expenditures of GAD budgets in all levels and instrumentalities of government;

(9) Sustain Public-Private Partnership to assist in the sustainability of WCPU human resource;

(10) Submit to the Office of the Secretary of Health its annual report on policies, plans, programs, accomplishment and statistical reports, and narrative description of activities on or before the last working day of February of every year; and

(iii) The Committee shall meet regularly at least once every quarter. The venue shall be agreed upon by the members. Special meetings may be requested by the Chairperson or any Committee member, as the need arises.

(iv) Term - The Committee members shall hold office for three (3) years and may be reappointed or until their successors shall have been appointed and duly qualified.

The Committee members shall designate the Director III of the NCDPC-FHO as the Chairperson of the Technical Working Group (TWG), as well as the members of the TWG representing the NGO, specialty organizations, faith based, and community-based organization. The selected staff from the Family Health Office will act as the secretariat as

may be necessary to discuss and address particular concerns to ensure functionality of WCPUs.

(b) Technical Working Group (TWG) - The functions of the Technical Working Group are the following:

- (i) Identify/map out health care facilities that need to establish WCPUs, using demographic and population ratio criteria;
- (ii) Formulate standard protocols and procedures for multidisciplinary care for women and children victims of abuse and violence;
- (iii) Set the criteria and procedures on certification standards of women and children protection units;
- (iv) Set minimum competency requirements for training programs that are gender-responsive which include but shall not be limited to Certification for Women and Child Protection Specialty Training Program;
- (v) Monitor and evaluate the efficiency, effectiveness and sustainability of the WCPUs;
- (vi) Recommend policy reforms and new guidelines anchored on evidence- based interventions and approaches; and
- (vii) Perform other functions as may be necessary for the implementation of the revised issuance.

(c) The Secretariat - The selected staff from the Family Health Office shall act as the secretariat whose functions are the following:

- a) Provide administrative support to the Steering Committee and TWG in all activities related thereto;
- b) Facilitate and organize meetings, workshops, symposiums, for a and other activities as instructed by the Steering Committee and/or TWG;
- c) Prepare minutes of the meeting and other required documentation;
- d) Ensure availability of logistics requirements during the conduct of the activities.

The members of the Technical Working Group and the corresponding members of the secretariat previously appointed by the Steering Committee members shall hold permanent appointments for continuity purposes.

Sec. 7. Minimum Requirements for All Hospitals - The following are the minimum requirements for all hospitals:

(a) Training - The Committee is mandated to ensure that all hospital personnel undergo training on the recognition, reporting, recording and referral (4R's) of cases of violence against women and children.

(b) Women's and Children's Protection Coordinator - Hospitals without a women and children protection unit must have a women and children's protection coordinator (WCPC) responsible for coordinating the management and referral of all violence against women and children cases in a hospital facility.

Sec. 8. Roles and Responsibilities - The National Center for Disease Prevention and Control (NCDPC) shall:

- (a) Manage, supervise and monitor the overall execution of the revised WCPU Policy;
- (b) Provide overall policy direction and guidance;
- (c) Monitor and evaluate the impact of WCPU in families and survivor of violence against women and their children;
- (d) Conduct capacity building activities for Women and Child Protection; and
- (e) Monitor WCPU reports and analyze data for decision making.

The Health Human Resource Development Bureau shall:

- a) Develop and implement plans and programs on the recruitment, selection, deployment, and utilization of health human resources for WCPU;
- b) Assist in the development of training programs, designs and manuals for various stakeholders of WCPU;
- c) Identify and coordinate with institutions that provide capability building on WCPU;
- d) Institute career development based on training needs; and
- e) Together with the steering committees, monitor standards on the health human resource of WCPU.

The National Epidemiology Center (NEC) shall:

- a) Manage the development of the operational policies, practices, standards and protocols to ensure the effective and efficient implementation of Online National Electronic Injury Surveillance System (ONEISS); and
- b) Develop an efficient and effective surveillance system for WCPU.

The Information Management Service (IMS) shall:

- a) Ensure that the system is updated and that all software-related problems are properly addressed;
- b) Conduct orientation and training on the ONEISS-V A WC System among the Information Technology staff of the hospital who will manage the ONEISS; and
- c) Maintain ONEISS-VAWC records submitted to them.

The Legal Service shall:

- a) Render legal assistance and advice to the Secretary of Health and his support staff on matters, policies on VAWC;
- b) Prepare legal opinions on VAWC matters regarding provision of laws, circulars, rules and regulations as well as VAWC legal queries within the DOH;
- c) Perform legal counseling and advice regarding the enforcement, application of VAWC laws, rules and regulations; and
- d) Answer all VAWC legal queries and communication referred to Legal Service regarding VAWC laws.

The National Center for Health Promotion (NCHP) shall:

- a) Translate the evidence based WCPUs research findings into key messages prototype IEC materials that are appropriate for specific population segments; and

- b) Develop a communication plan for the WCPU Events/campaigns.

The National Center for Health Facility Development shall:

- a) Set standards for the technical operation/management of WCPUs to include reporting mechanism; and
- b) Provide implementation support for hospitals to comply with the service requirements of WCPU.

The Bureau of Health Facilities and Services shall

- a) Integrate standards on WCPU service requirements of health facilities in licensing checklist;
- b) Set basic standards for WCPU service requirements for health facilities; and
- c) Inspect WCPUs to establish compliance to the set standards.

The Centers for Health Development shall:

- a) Ensure the adoption and implementation of this policy by LGUs in the different localities within their respective regions in public and private health care facilities;
- b) Certify health care facilities in the regions meeting the standard service requirements of WCPU through their Licensing Operations Unit;
- c) Provide technical assistance to leverage resources and monitor implementation of WCPUs in health facilities;
- d) Formulate and implement advocacy plans for local chief executives to generate stakeholders' support from relevant partners; and
- e) Monitor the implementation of this revised policy and guide in both public and private hospitals, and in different localities in their respective regions.

The Local Government Units shall:

- a) Conduct training and orientation on the 4Rs for medical and non- medical staff;
- b) Orient/ train public and private health workers;
- c) Provide budgetary allocation for an effective/efficient operation of WCPUs, particularly on the hiring of dedicated staff to manage the unit;
- d) Advocate with municipalities/cities and other concerned agencies and stakeholders to adopt and implement;
- f) Generate and allocate logistics and human resources in support of WCPU provision of services for victims of violence (e.g., counterpart funds for training, procurement of supplies); and
- g) Maintain an accurate, complete and timely database on WCPU clients.

The Child Protection Network Foundation, Inc. & Women Protection Unit of UP-PGH (Women's Desk), in collaboration with non-government organizations and foundations engaged in women and child protection, shall:

- a) Provide technical expertise and support for the establishment of WCPUs;
- b) Support the training of physicians and social workers in WCPUs as facilitators/ resource persons; and
- c) Converge efforts with the Council for the Welfare of Children, Philippine Commission on Women, and other organizations working on women and children health and gender concerns.

The Council for the Welfare of Children (CWC) and Philippine Commission on Women (PCW) shall:

- a) Provide expertise and technical assistance on gender-responsive delivery of services to the WCPU service providers; and
- b) Assist the DOH in monitoring the implementation of WCPU in coordination with the Steering Committee. Likewise, the Standard Performance Assessment Tools shall be used for this purpose.

The Philippine Health Insurance Corporation (PhilHealth) shall develop a PhilHealth Insurance benefit packaged for WCPU inpatient and outpatient services for the abused/survivors of violence in accredited hospital facilities in consideration to active and non-active members.

Sec. 8. Appropriations - The fund needed to initially implement the provisions of this Act must be sourced primarily from the General Appropriations Act. This law shall be in the form of an automatic appropriation that shall be programmed annually, without regard to the budget proposal or approved appropriations of the concerned government agencies and any of its political subdivisions, government owned and/or controlled corporations.

Sec. 9. Implementing Rules and Regulations - The Department of Health (DOH) shall promulgate the necessary implementing rules and regulations within ninety (90) days from the effectivity of this Act.

Sec. 10. Separability Clause - If any portion or provision of the Act is declared void or unconstitutional, the remaining portions or provisions hereof shall not be affected by such declaration.

Sec. 11. Repealing Clause - Any provision of law or regulations inconsistent herewith is hereby repealed, revoked, or modified accordingly.

Sec. 12. Effectivity Clause - This Act shall take effect after fifteen (15) days following its publication in the Official Gazette or in any newspaper of general circulation.

Approved,