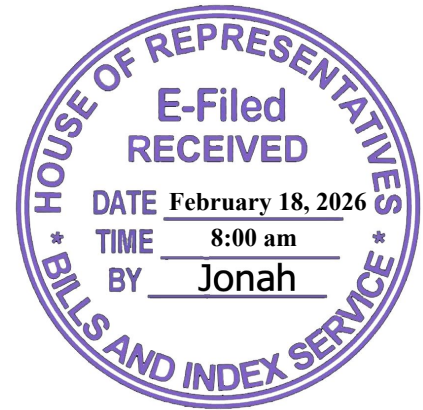




Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

Twentieth Congress
First Regular Session



HOUSE BILL NO. 7834

Introduced by Representative Ann Matibag

**AN ACT
TO ENSURE GENDER RESPONSIVE AND INCLUSIVE PROTOCOLS AND
PROGRAMMING TO ADDRESS THE GENDER-DIFFERENTIATED NEEDS
OF WOMEN DURING PUBLIC HEALTH EMERGENCIES, PUBLIC
HEALTH THREATS, DISASTERS, AND OTHER HEALTH EVENTS OF
PUBLIC CONCERN**

EXPLANATORY NOTE

1
2 The proposed Gender Responsive and Inclusive Pandemic, Emergency or Disaster
3 Management Act seeks to institutionalize gender-responsive and inclusive systems,
4 protocols, and programs in all stages of public health emergencies, disasters, and similar
5 crises.

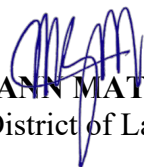
6 The COVID-19 pandemic and recent disasters have revealed how women, particularly
7 those in marginalized sectors, bear disproportionate burdens during emergencies. They
8 face heightened risks of gender-based violence, loss of livelihood, limited access to
9 essential health services—especially sexual and reproductive health—and increased
10 unpaid care work. These gender-differentiated impacts are often overlooked in existing
11 emergency and disaster management policies, resulting in responses that fail to address
12 the specific needs of women and other vulnerable groups.

13 While current laws such as the Magna Carta of Women and the Philippine Disaster Risk
14 Reduction and Management Act affirm gender equality and women's rights, they do
15 not provide clear, enforceable mechanisms to ensure that gender considerations are
16 systematically integrated in emergency preparedness, response, and recovery. This bill
17 fills that gap by requiring government agencies and local government units to adopt
18 gender-responsive approaches, guarantee continuity of essential services, and ensure

1 meaningful participation of women in decision-making and leadership roles during
2 crises.

3 By enacting this measure, the State will not only uphold its constitutional duty to protect
4 and promote the rights of women but also strengthen the overall effectiveness, equity,
5 and sustainability of public health and disaster responses. The proposed Act will help
6 build a more resilient and inclusive society where no one is left behind, even in times
7 of crisis.

8 In view of the foregoing, the immediate passage of this bill is earnestly sought.


REP. ANN MATIBAG
First District of Laguna



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

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

1 CHAPTER I

2 GENERAL PROVISIONS

3 SECTION 1. *Short Title.* – This Act shall be known as the “Gender Responsive
4 and Inclusive Pandemic, Emergency or Disaster Management Act.”

5 SEC. 2. *Declaration of Policy.* – The State hereby affirms its role as the primary
6 duty-bearer in ensuring the enjoyment and fulfillment of all human rights during
7 pandemics, emergencies or disasters, especially the right to life, which permits no
8 derogation even in times of public emergency, and the right to health, so that every
9 individual shall enjoy the highest attainable level of health. It affirms its Constitutional
10 duties to guarantee the equality of men and women to the enjoyment of their human
11 rights, with focus on the differentiated needs of, and impact of emergencies on, women,

1 prohibit discrimination, and create an enabling environment under the “new normal”
2 that guarantees the human rights of women. It acknowledges its corresponding duties
3 relating to women’s rights to participation and representation, protection from gender-
4 based violence during emergency situations, sexual and reproductive health rights
5 (SRHR), and economic empowerment of women. It adopts a zero-tolerance policy
6 towards gender-based violence, abuse and exploitation, which is rooted in gender
7 inequality and discrimination. The implementation of approaches and strategies
8 relevant to disaster risk reduction, emergency and pandemic management must
9 integrate human rights and gender lenses. It is fundamental that policies, plans,
10 programs, actions, conduct and results are non-discriminatory and that no one is left
11 behind.

12 Towards ensuring gender equality, the State shall be guided by existing
13 frameworks on gender-responsive programming during the pandemic, emergency or
14 disaster and shall likewise establish mechanisms and processes to ensure the adoption,
15 reprogramming and/or continuity of programs that serve and address the gender-
16 differentiated needs of women.

17 Accordingly, the State shall:

18 (a) Be the primary duty bearer to enforce the protection of human rights of
19 women during pandemics and other public health emergencies from the
20 point of prevention until recovery and while adapting to the new normal in
21 society;

22 (b) Establish policies and programs to prevent the spread of a “notifiable
23 disease”, to prepare prior to its actual impact, and to deliver treatment, care,
24 support and other essential services to individuals affected in accordance
25 with evidence-based strategies and approaches that uphold the principles of

1 human rights and gender-responsiveness, and taking into account the
2 intersectional considerations that differentiate impact on different groups,
3 identities and sectors;

4 (c) Institutionalize real, actual and meaningful participation of women, at-risk
5 individuals and communities affected by the pandemic, emergency or
6 disaster, and those who are most vulnerable to violations of human rights
7 during such situations in policy and decision making and at every stage of
8 the pandemic, emergency or disaster management, especially in the
9 formulation of general guidelines and resolutions governing the national
10 management of the pandemic, emergency or disaster as well as in its
11 implementation;

12 (d) Empower and collaborate with women and institutionalize their role to
13 publicly lead, decide and promote gender responsive, equitable and
14 universally accessible response, recovery, rehabilitation and reconstruction
15 approaches in all areas of concerns during a pandemic, emergency or
16 disaster;

17 (e) Adopt a multi-sectoral and inter-disciplinary approach in the preparation,
18 response and recovery stages of the pandemic, emergency or disaster
19 response management by ensuring an all-of-society engagement and
20 partnership involving the whole government, public health practitioners,
21 technical experts, local communities, civil society organizations, academe,
22 private sector, vulnerable persons and other relevant actors or stakeholders,
23 with the State as the primary duty-bearer;

- 1 (f) Enable equitable and just access of everyone to pandemic, emergency or
2 disaster-related and essential services, as well as sustained access to
3 livelihood and other productive opportunities;
- 4 (g) Undertake appropriate actions to ensure the continuous and effective
5 functioning of and access to concerned institutions, communication
6 systems, referral systems, protection mechanisms and other appropriate
7 measures to address gender-based violence and give priority to access
8 effective remedies, including reprogramming of delivery of services and
9 capacitating service providers to deliver pertinent essential services;
- 10 (h) Ensure that the differentiated needs, multiple burdens and gender-based
11 violence faced by women during the pandemic, emergency or disaster
12 situation are addressed and integrated in measures, actions and conduct
13 relating to the management of the pandemic, emergency or disaster response
14 by integrating intersectional analysis in the formulation of policies, plans
15 and programs relating to pandemic, emergency or disaster management,
16 particularly in the area of security and law enforcement at all levels of
17 government and particularly at the barangay level;
- 18 (i) Ensure access to prompt and substantive social protection and safety nets,
19 taking into account the heightened insecurity and burden on the part of
20 women and at-risk individuals, communities and groups that might hinder
21 access;
- 22 (j) Positively act, address and seek to eradicate and prohibit stigma,
23 discrimination and other conditions that result in gender-based violence and
24 aggravate the situations of women;

1 (k) Craft and design effective communication and information platforms and
2 systems that ensure broad, accurate and prompt dissemination, and effective
3 understanding by all, particularly in relation to monitoring incidence of
4 gender-based violence both in private and public spaces and access to
5 protection mechanisms and effective remedies; and

6 (l) Utilize existing modern information, communication, research and
7 technological capacities and techniques in crafting the policies and
8 protocols with due regard to human rights.

9 SEC. 3. *Purpose.* – The principal purpose of this Act is to ensure that there is
10 adequate statutory power for government agencies to act, pursuant to their respective
11 mandates, upon a declaration of an emergency by the President by reason of a pandemic,
12 emergency or disaster and guided by the policies issued by the Inter-Agency Task Force
13 on Emerging Infectious Diseases (IATF-EID) and principles enunciated herein:

14 (a) To monitor and gather data regarding the realities of women relating to
15 gender-based violence and enjoyment of their human rights in the context
16 of a pandemic that would inform, craft and direct policies to be
17 implemented in all the stages of pandemic management.

18 (b) To effectively prevent, respond and eliminate the incidence of gender-based
19 violence against women and girls through the integration of gender and
20 intersectional analysis in pandemic policy and decision making, planning
21 and programming in all the stages of pandemic management;

22 (c) To develop and craft guidelines and instructions on practices, protocols,
23 systems of coordination and networking, information and education of first
24 responders, especially during the response and early recovery stage, safety
25 and personal protection of workers, and needs of women, girls and at-risk

1 individuals, groups and communities, and ensure its timeliness,
2 responsiveness, availability and accessibility;

3 (d) To ensure that communications systems, referral systems, protection
4 mechanisms and other measures on access to justice and effective remedies
5 by women subject to gender-based violence, or with disability, or in
6 geographically isolated and disadvantaged areas, are in place and continue
7 to operate during the period of a pandemic, emergency or disaster;

8 (e) To provide immediate haven, shelter and security, resources and support to
9 women and girls subject to violence;

10 (f) To enable sufficient and effective regulatory authority to respond and to
11 prevent the incidence of gender-based violence during a pandemic,
12 emergency or disaster, including but not limited to the relaxation of
13 regulatory requirements that impede the delivery of services or its
14 compliance, emergency procurement and provision of emergency funds for
15 these purposes.

16 For this purpose, every department or agency must come up with a gender-
17 responsive pandemic preparedness plan, manual or protocol for women during
18 pandemics, emergencies or disasters within sixty (60) days from the implementation of
19 this Act and ensure the designation of focal persons to supervise and oversee the
20 implementation of said plan, manual or protocol.

21 SEC. 4. *Interpretation of this Act.* – Unless otherwise provided, nothing in this
22 Act shall be construed as precluding provisions in existing Philippine laws,
23 international human rights laws and related instruments, and international humanitarian
24 laws that are more promotive of human rights and the preservation and protection of
25 the right to life.

1 SEC. 5. *Definition of Terms.* – As used in this Act:

2 (a) *Access to justice* refers to the sufficient access to essential services for
3 victim survivors of gender-based violence, and all women and girls in
4 conflict with the law such as the unimpeded availability of legal assistance,
5 case management services, health services, medico-legal services,
6 counselling, protection, operational shelters, and support; with an
7 accountability mechanism in place;

8 (b) *At-risk individuals and groups* refer to the following vulnerable and
9 marginalized persons, sectors and/or groups:

- 10 1) Women and girls with disabilities;
- 11 2) Children;
- 12 3) Elderly women;
- 13 4) Women deprived of liberty especially those who are pregnant, about to
14 give birth, or have just given birth;
- 15 5) Pregnant, lactating, and post-partum mothers;
- 16 6) Members of the LGBTQIA+ community;
- 17 7) Urban and rural poor women;
- 18 8) Women in the informal and formal economy;
- 19 9) Women who are positive with an infectious disease outbreak including
20 those under investigation and monitoring;
- 21 10) Moro and Muslim women;
- 22 11) Rural and indigenous women;
- 23 12) Internally displaced women;
- 24 13) Migrant women and their families;
- 25 14) Persons living with HIV;

- 1 15) Women frontline workers (as defined under IATF-EID Guidelines);
- 2 16) Women human rights defenders;
- 3 17) Solo mothers;
- 4 18) Adolescent mothers;
- 5 19) Women who are refugees, asylum seekers, stateless persons, or at risk of
- 6 statelessness;
- 7 20) Women in prostitution/ victim-survivors of illegal recruitment, and
- 8 trafficking;
- 9 21) Women experiencing sexual or domestic violence and online gender-
- 10 based harassment;
- 11 22) Minors and adolescents (population below 19 years of age);
- 12 23) Children in conflict with the law; and
- 13 24) Women and girls who are homeless and street dwellers;
- 14 (c) *Disaster* refers to a serious disruption of the functioning of a community or
- 15 a society involving widespread human, material, economic or
- 16 environmental losses and impacts, which exceeds the ability of the affected
- 17 community or society to cope using its own resources. Disasters are often
- 18 described as a result of the combination of: the exposure to a hazard; the
- 19 conditions of vulnerability that are present; and insufficient capacity or
- 20 measures to reduce or cope with the potential negative consequences,
- 21 disaster impacts may include loss of life, injury, disease and other negative
- 22 effects on human, physical, mental and social well-being, together with
- 23 damage to property, destruction of assets, loss of services, social and
- 24 economic disruption and environmental degradation as defined under

1 Republic Act No. 10121 or the “Philippine Disaster Risk Reduction and
2 Management Act of 2010;”

3 (d) *Early recovery* refers to a multidimensional process of recovery that begins
4 in a humanitarian setting. It is guided by development principles that seek
5 to build on humanitarian programs and catalyze sustainable development
6 opportunities. It aims to generate self-sustaining, nationally-owned, resilient
7 processes for post-crisis recovery. It encompasses the restoration of basic
8 services, livelihoods, shelter, governance, security and rule of law,
9 environment and social dimensions, including reintegration of displaced
10 population. Essential services to address gender-differentiated needs shall
11 be made available during this period;

12 (e) *Emergency* refers to any situation in which the life or well-being of civilians
13 affected by natural disaster, conflict or a public health threat has been or will
14 be at risk unless immediate and appropriate action is taken, and that
15 demands an extraordinary response and exceptional measures;

16 (f) *Essential services* refers to all health and social services, whether provided
17 by a public or private undertaking, to ensure the security, safety and well-
18 being of persons, including but not limited to food, water, medicine, medical
19 devices, public utilities, energy, access to justice, police, health and
20 protection services, and social protection addressing the needs of women
21 during situations of pandemic, emergency or disaster as may be determined
22 by the IATF-EID or other relevant lead government agency or body under
23 the law. Essential services cover health, police and justice, social services
24 and coordination of these services as defined in the “Essentials for Quality
25 Multisectoral Service Provision to Women Migrant Workers Subject to

1 Violence, Brief: COVID-19 and essential services provision for survivors
2 of violence against women and girls; and Essential Services Package for
3 Women and Girls Subject to Violence”. Such services will remain available
4 throughout the preparation period, any possible imposed government
5 lockdown, and during the recovery period;

6 (g) *Frontline workers* refer to those employees within essential industries who
7 must physically show up to their jobs. It includes public and private health
8 workers, such as but not limited to medical professionals, hospital and health
9 facility administrative and maintenance staff, and aides from private health
10 facilities, as well as their service providers, health workers and volunteers
11 of the Philippine Red Cross and the World Health Organization, and
12 employees of Health Maintenance Organizations (HMOs), the Philippine
13 Health Insurance Corporation (PHIC), health insurance providers, disaster
14 risk reduction management officers, public safety officers, and other
15 workers in other high priority sectors: *Provided*, That the IATF-EID shall
16 determine the sectors by which its workers can be classified as frontline
17 workers;

18 (h) *Gender responsive* refers to the consistent and systematic attention given to
19 the gendered differences among individuals in society with a view to
20 addressing status quo and structural constraints to gender equality; this
21 includes creating and sustaining an environment through site selection, staff
22 selection, program development, content, processes and materials that
23 reflects an understanding of the realities of women’s lives and addresses
24 their needs and issues;

- 1 (i) *Health event of public concern* refers to either a public health emergency or
2 a public health threat due to biological, chemical, radio-nuclear and
3 environmental agents as defined under Republic Act No. 11332 or the
4 "Mandatory Reporting of Notifiable Diseases and Health Events of Public
5 Health Concern Act;"
- 6 (j) *Intersectionality* refers to a framework for understanding that people
7 experience overlapping (i.e., intersecting forms of oppression,
8 discrimination and marginalization based on their co-existing identities
9 (e.g., inequality based on gender, age, disability and/or ethnicity);
- 10 (k) *Locally stranded individual* refers to foreign nationals or Filipino citizens in
11 a specific locality within the Philippines who have expressed intention to
12 return to their place of residence or home origin;
- 13 (l) *Marginalization* refers to a condition where a whole category of people is
14 excluded from useful and meaningful participation in political, economic,
15 social, and cultural life;
- 16 (m) Overseas Filipino worker (OFW) – refers to a Filipino who is to be engaged,
17 is engaged, or has been engaged in remunerated activity in a country of
18 which he or she is not an immigrant, citizen, or permanent resident or is not
19 awaiting naturalization, recognition, or admission, whether land-based or
20 sea-based regardless of status; excluding a Filipino engaged under a
21 government-recognized exchange visitor program for cultural and
22 educational purposes. for purposes of this provision, a person engaged in
23 remunerated activity covers a person who has been contracted for overseas
24 employment but has yet to leave the Philippines, regardless of status, and
25 includes “overseas contract workers”. The term “OFW” is synonymous to

1 “migrant worker” as defined under Republic Act No. 11641 or the
2 “Department of Migrant Workers Act;”

3 (n) *Nondiscrimination* refers to the guarantee wherein human rights are
4 exercised without discrimination of any kind based on race, color, sex,
5 language, religion, political or other opinion, national or social origin,
6 property, birth or other status such as disability, age, marital and family
7 status, sexual orientation and gender identity, health status, place of
8 residence, economic and social situation;

9 (o) *Pandemic* refers to the worldwide spread, or over a very wide area, crossing
10 international boundaries and usually affecting a large number of people as
11 declared by the World Health Organization. The term also contemplates
12 other public health emergencies as defined under Republic Act No. 11332
13 and as declared by the Department of Health (DOH);

14 (p) *Preparedness* refers to efforts that focus on ensuring adequate capacity and
15 knowledge, while reinforcing the ability to anticipate, respond and recover
16 from the impact of emergency situations. Essential services to fully address
17 gender-differentiated needs especially of women and girls shall be included
18 in these efforts;

19 (q) *Prevention* refers to taking action to stop gender-based violence (GBV)
20 from first occurring (e.g., scaling up activities that promote gender equality
21 or working with communities to address practices that contribute to GBV).
22 Mitigation refers to reducing the risk of exposure to GBV (e.g., ensuring
23 that reports of “hot spots” are immediately addressed through risk-reduction
24 strategies);

- 1 (r) *Recovery* is the process following relief and supports the transition into
2 long- term reconstruction and development. Recovery actions are most
3 effective if anticipated and facilitated from the very outset of a humanitarian
4 response. It involves the restoration and improvement of facilities,
5 livelihoods and living conditions of crisis-affected communities, including
6 efforts to reduce risks brought on by the crisis. Essential services to address
7 gender-differentiated needs shall be made fully available during this period;
- 8 (s) *Response* refers to an emergency response that involves the provision of
9 emergency services and public assistance during or immediately after a
10 humanitarian crisis to save lives, reduce health impacts, ensure public safety
11 and protection, and meet the basic needs of women, girls, boys and men in
12 the affected population. This stage can range from a few days or weeks to
13 many months and even years, particularly in protracted insecurity and
14 displacement contexts. For the purposes of this Act, response shall be
15 undertaken upon the declaration of the DOH of a public health emergency.
16 Essential services to address gender-differentiated needs shall be made
17 available during this period;
- 18 (t) *Social protection floors* refers to nationally defined sets of basic social
19 security guarantees that should ensure, as a minimum that, over the life
20 cycle, all in need have access to essential health care and to basic income
21 security which together secure effective access to goods and services
22 defined as necessary at the national level; which include among others:
23 access to essential health care, including maternity care; basic income
24 security for children, providing access to nutrition, education, care and any
25 other necessary goods and services; basic income security for persons in

active age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability; basic income security for older persons;

(u) *Social safety nets* refer to noncontributory interventions designed to help individuals and households cope with chronic poverty, destitution, and vulnerability, such as unconditional and conditional cash transfers, noncontributory social pensions, food and in-kind transfers, school feeding programs, public works, and fee waivers. These programs target the poor and vulnerable;

(v) *Stigma* refers to a set of negative and often unfair beliefs that a society or group of people have about something such as in the context of women; and

(w) *Violence against women (VAW)* refers to any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or in private life.

CHAPTER II

PROGRAMMING AND MANAGEMENT TO ADDRESS GENDER-DIFFERENTIATED NEEDS OF WOMEN DURING PANDEMICS, EMERGENCIES OR DISASTERS

SEC. 6. *Leadership, Participation and Empowerment of Women.* – During a pandemic, emergency or disaster, women shall be empowered to be included in the national and local government’s response systems to address the gender-differentiated needs of the different groups of women especially the marginalized. It is thus mandated that response and recovery systems must ensure that women are placed strategically and participate meaningfully in leadership, decision-making, and policy-making positions at all levels. In accordance with this, the Philippine Commission on Women

1 (PCW) shall be made a permanent member in the IATF-EID or similar bodies that will
2 be created in response to a pandemic, emergency or disaster to help facilitate the
3 continuous integration of a gender-responsive plan to be developed therein in national
4 governance response systems. Further, forty percent (40%) of membership of all
5 development councils from the regional, provincial, city, municipal and barangay levels
6 shall be composed of women.

7 SEC. 7. *Humanitarian Principles Guiding Programming and Management to*
8 *Address Gender-Differentiated Needs of Women During the Pandemic, Emergency or*
9 *Disaster.* – Following the Inter-Agency Standing Committee (IASC) Guidelines for
10 Integrating Gender-Based Violence Interventions in Humanitarian Action, and the
11 United Nations Population Fund (UNFPA) Minimum Standards for Prevention and
12 Response to Gender-based Violence in Emergencies, the following principles shall
13 ground, inform and guide the formulation and implementation of policies, plans,
14 programs, and other appropriate measures, including affirmative actions, in managing
15 the pandemic, emergency or disaster:

16 (a) *A survivor-centered approach* which creates a supportive environment in
17 which survivors' rights and wishes are respected, their safety is ensured, and
18 they are treated with dignity and respect;

19 (b) *A human rights-based approach* that seeks to analyze and address the root
20 causes of discrimination and inequality to ensure that everyone has the right
21 to live with freedom and dignity, safe from violence, exploitation and abuse,
22 in accordance with principles of human rights law;

23 (c) *A community-based approach* that ensures that affected populations are
24 engaged actively as partners in developing strategies related to their
25 protection and the provision of humanitarian assistance. This approach

- 1 involves direct involvement of women, girls and other at-risk groups at all
2 stages in the humanitarian response, to identify protection risks and
3 solutions, and build on existing community-based protection mechanisms;
- 4 (d) The *humanitarian principles of humanity, impartiality, independence and*
5 *neutrality* which should underpin the implementation of the Minimum
6 Standards and are essential to maintaining access to affected populations
7 and ensuring an effective humanitarian response;
- 8 (e) The “*do no harm*” *approach* which takes into account all measures
9 necessary to avoid exposing people to further harm as a result of the actions
10 of humanitarian actors;
- 11 (f) The *principles of partnership* which comprise a framework for all actors in
12 the humanitarian space to follow principles of equality, transparency, a
13 results-oriented approach, responsibility and complementarity;
- 14 (g) Taking into account the best interests of the child wherein child and
15 adolescent girl and boy survivors of sexual abuse have the right to have their
16 best interests assessed and determined and taken as a primary consideration
17 in all decisions that affect them;
- 18 (h) Focus should be given to the intersectionality of the circumstances of
19 women, taking into account the specific needs and concerns of marginalized
20 and vulnerable women groups including women and girls deprived of
21 liberty, women working in the informal sector, women migrant workers, and
22 other similarly situated at-risk individuals and groups; and
- 23 (i) *Rights-based policing* wherein human rights principles and practices are
24 taught and applied at all levels, in policy, doctrinal, operational and
25 administrative functions of the police organization.

1 SEC. 8. *Guarantee of non-discrimination.* – This Act shall prohibit
2 discrimination in all forms committed against women as provided under Republic Act
3 No. 9710 or the “Magna Carta of Women” even, and especially, during the occurrence
4 of a pandemic, emergency or disaster. Those found guilty under this provision shall be
5 meted out a penalty one degree higher than those penalties provided for discrimination
6 under Republic Act No. 9710. The Revised Penal Code shall have suppletory
7 application in setting the penalties.

8 SEC. 9. *Strengthening Gender-Based Violence (GBV) Preparedness and*
9 *Response Systems.* – GBV preparedness and response systems in the context of the
10 pandemic, emergency or disaster shall be considered essential services and appropriate
11 budgetary allotment from the emergency funding shall be ensured towards the
12 formulation, reprogramming or continuity of said systems. Strict adherence to the
13 following must be undertaken:

- 14 (a) Women and the most vulnerable among them must be placed at the front
15 and center of leadership and policy and decision-making positions in key
16 processes in the formulation, planning, programming and implementation
17 of prompt, effective and survivor-centered measures to address issues of
18 violence against women and girl-children during pandemics, emergencies
19 or disasters;
- 20 (b) GBV services, especially temporary shelters, psychosocial services, and
21 legal aid, shall remain functional and accessible notwithstanding the
22 occurrence of a public health emergency. Local Inter-Agency Task Forces
23 during pandemics, emergencies or disasters shall ensure that temporary
24 shelters are of adequate capacity and GBV services are available to women

1 staying in any detention, quarantine or isolation facilities where prolonged
2 stay is required or necessary;

3 (c) This process must be based on data and evidence and must integrate first
4 responder systems to properly respond in the time of pandemics,
5 emergencies or disasters;

6 (d) The State shall utilize a multisectoral/interdisciplinary, all-of-government,
7 and all-of-society approach wherein the State collaborates with non-state
8 actors to achieve maximum efficiency and effectiveness;

9 (e) The national government, through the Department of the Interior and Local
10 Government (DILG), shall assume the key leadership role but shall also
11 empower local authorities and local communities to address the pandemic,
12 emergency or disaster, including provision of resources, support and
13 incentives, and enabling decision-making authorities and responsibilities:
14 *Provided, That* local governments shall undertake continuous monitoring of
15 their constituents and provision of additional services when applicable, to
16 ensure that rehabilitated victims of GBV are not subject to repeated cycle of
17 abuse;

18 (f) Communication systems, with emphasis on localized communication down
19 to the level of barangays, must be established in coordination with the
20 Department of Information and Communications Technology (DICT) and
21 National Telecommunications Commission (NTC), for education and
22 information dissemination on pandemic and emergency risks and access to
23 social protection, safety nets, referral systems, protection measures and
24 other appropriate measures in cases of GBV, which shall include traditional
25 modes of communication to reach women living in remote areas or areas

1 with limited access such as newspaper, pamphlets, and radio: *Provided*,
2 That, relevant language, format, and relevant channels that are culturally
3 appropriate shall be taken into consideration to ensure effective
4 communication with individuals and communities;

5 (g) The State must give premium to the aspect of preparedness and early
6 information and communication campaigns about the pandemic or
7 emergency towards and informed public to affect attitudes and behaviors
8 and shall encourage private investments on these areas, more than on post-
9 disaster response and recovery: *Provided*, That the state shall strengthen
10 implementation of existing mechanisms of Inter- Agency Council on
11 Violence Against Women and their Children (IACVAWC) in reporting
12 gender-based violence cases;

13 (h) The state shall ensure an inclusive GBV preparedness and response systems
14 that embrace transgender and gender-diverse individuals among the
15 beneficiaries; and

16 (i) Effective and meaningful global partnership must be fostered and existing
17 international cooperation strengthened.

18 The DILG, in coordination with the local government units (LGUs), is
19 mandated to ensure that the rights of women and services accorded them are to remain
20 available and accessible in all stages of the emergency crisis responses.

21 SEC. 10. *Sexual and Reproductive Health Rights (SRHR) and Essential Services*
22 *Package.* – It shall be the duty of national and local authorities to prioritize specific
23 health needs of all women and girls at the community level, particularly access to sexual
24 and reproductive health services including pre- and post-natal healthcare and post-
25 partum psychiatric care, access to essential services as defined above and physical

1 rehabilitation during pandemics, emergencies or disasters. The preparedness and
2 response systems must include, but not limited to:

- 3 (a) Available staff, funds and other resources;
- 4 (b) Unhampered mobility and available public and safe transportation;
- 5 (c) Availability and continuity of reproductive health services and essential
6 services packages for women and girls of all ages;
- 7 (d) Knowledge and awareness of women of these available services;
- 8 (e) Gender-sensitive support to frontline health workers on both facility and
9 community level;
- 10 (f) Additional financial, human, or logistical support to female health workers
11 to offset the additional burden of household management; and
- 12 (g) Systematic coordination and planning of addressing the gaps in accessing
13 SRHR services;
- 14 (h) Adoption of a strategy to ensure access of pregnant women to ante and post-
15 natal care including post-partum psychiatric care during lockdowns with
16 corresponding precautions to protect them from risks of exposure such as,
17 but not limited to, provision of maternal health information, provision of
18 online check-ups, and updated referral hospitals and lying-in clinics during
19 the lockdowns;
- 20 (i) Provision to women deprived of liberty of sufficient and regular access to
21 sexual and reproductive health information, services, and products inside
22 the detention and correctional facilities;
- 23 (j) Measures to protect pregnant women deprived of liberty and their unborn
24 child as well as women who have just given birth and their newborn infant,

1 such as but not limited to, house arrests, furloughs to attend to
2 physical/medical checkups, release on recognizance, among others; and

3 (k) Provision of reasonable accommodation to ensure women with disabilities’
4 access to SRHR services.

5 The Department of Health and each Barangay Health Emergency Response
6 Team are mandated to ensure that the specific health needs, especially sexual health
7 and reproductive needs of women and girls are included in the implemented essential
8 health packages, systems and protocols in their constituency, including universal health
9 coverage, during pandemics, subject to other existing laws.

10 SEC. 11. *Gendered Approach to Vaccination.* – The procurement, allocation,
11 distribution, delivery, facilitation and administration of vaccines must be transparent
12 and must take into account gender-based differences in immunological responses, care
13 burden or work of women both paid and unpaid, security of women against gender-
14 based violence and other forms of attacks and other factors that increase women’s
15 vulnerability. Safe, efficacious and free vaccines or medications, including newly-
16 approved ones for the current pandemic or health emergency, must be available and
17 accessible to women, taking into account intersectional considerations that may impede
18 such access and vulnerabilities of women that affect their right to life, health and
19 security: *Provided,* That such access shall be in accordance with the priority and health
20 protocols of the Philippines or relevant code of practice, and is rights-based, non-
21 discriminatory, voluntary and based on informed consent. Information on vaccination
22 and the scientific evidence behind it must be clear and effectively communicated. These
23 gendered approach must be integrated in legal, policy and program implementation of
24 vaccinations to address the pandemics, emergencies or disasters.

1 In policy and decision-making affecting vaccine availability, quality and access,
2 including prioritization and development of criteria, representation and participation of
3 women must be guaranteed.

4 SEC. 12. *Social Protection.* – It shall be the duty of national and local authorities
5 such as the Department of Social Welfare and Development (DSWD), Department of
6 Labor and Employment (DOLE), DILG and Civil Service Commission (CSC), in
7 coordination with the various Local Government Units, to target the most vulnerable
8 and economically marginalized sectors of women, taking into account their various
9 intersectionality, and ensure that social protection and safety nets are afforded to them,
10 with emphasis on victims of gender-based violence. The measures shall include, but not
11 limited to:

12 (a) Empowering women through their access to sustainable livelihood and/or
13 employment as may be practicable, such as through the capacity-building
14 and other services rendered by local Public Employment System Offices and
15 work-from-home programming, and access to flexible financing and loans;

16 (b) Ensuring the unimpeded provision of safety nets and cash-based
17 interventions to poor elderly women, solo mothers, adolescent mothers and
18 other vulnerable and poor women;

19 (c) Prioritizing gender, disability, age and other overlapping vulnerabilities in
20 the assessments of needs and decisions on targeting;

21 (d) Ensuring that women victims have adequate access to counseling and
22 shelters that have access to adequate resources for the needs of women;

23 (e) Providing women access to opportunities such as trainings and seminars
24 pertinent to their capacity to sustain themselves;

- 1 (f) Ensuring that work environments, including work-from-home
2 arrangements, are VAW-free through continuous monitoring of the
3 situations of vulnerable women and their protection, guaranteeing
4 accountability of the perpetrators and holding of regular seminars to educate
5 on VAW issues and standards especially during a pandemic, among others;
- 6 (g) Ensuring effective and inclusive grievance and redress mechanisms
7 embedded in social protection programming which are designed to be
8 accessible and inclusive of girls, women, women and girls with disabilities,
9 children, older people, and other at-risk individuals and groups;
- 10 (h) Providing work-from-home setup for women subjected to violence in their
11 workplaces until the perpetrator has been held accountable; and
- 12 (i) Enforcing other laws and issuances which may be enacted by virtue of the
13 existence of such pandemic, emergency or disaster, which contain services
14 and protection afforded to women, particularly on social protection.

15 SEC. 13. *Protection for Locally Stranded Individuals.* – The DILG, in
16 coordination with the LGUs and the respective designated barangays, shall ensure the
17 safety and security of all displaced migrants or individuals and at-risk individuals and
18 groups due to the pandemic, emergency or disaster. This shall include an efficient
19 mechanism for immediate delivery of food (in full respect for the individual's dietary
20 restrictions by reason of health or religion), shelter and medical supplies for women and
21 children, including assisting mothers with breastfeeding, feed and care for their babies
22 and other support.

23 SEC. 14. *Economic Empowerment.* – The DOLE shall, in coordination with the
24 local government units and offices, including the CSC and Public Employment Service
25 Office (PESO), enact mechanisms and procedures to address the difficulties faced by

1 women in the employment sector during the pandemic, emergency or disaster such as
2 job loss, business closure and debt incurred by repatriated migrants and those who have
3 been contracted for overseas employment but have yet to leave the Philippines. All
4 measures shall tend to the continuous employment of women. These should include
5 considerations regarding the workplace arrangements, access to credit and financing
6 schemes, marketplace and community supply chain, and the women working in the
7 informal economy. For this purpose, said units and offices must be well-equipped and
8 capacitated to perform all measures necessary to address the livelihood and
9 employment concerns of their constituents, with special attention to vulnerable women
10 and the protection afforded to them under other laws.

11 The DOLE is mandated to ensure that women are afforded flexible work
12 arrangements during a pandemic, emergency or disaster. They shall provide for rules
13 and regulations for this purpose, taking into account the specific needs and concerns
14 faced by women under such circumstances.

15 The Department of Agriculture, Department of Tourism, Department of Trade
16 and Industry (DTI), and Technical Education and Skills Development Authority and
17 other relevant agencies shall also bolster entrepreneurship and provide adequate
18 livelihood opportunities and skills development to women.

19 SEC. 15. *Protection of Rural Women and Indigenous Women.* – The concerned
20 local government unit shall ensure that women in rural and indigenous communities
21 belonging to their jurisdiction have adequate and unimpeded access to health, legal, and
22 socio-economic services. This guarantee for indigenous women must be undertaken
23 with due respect to their indigenous health systems, practices and beliefs. They shall be
24 furnished with the same, if not more, opportunities and facilities as those of their urban
25 counterparts, as far as may be practicable.

1 SEC. 16. *Utilization of Information and Communications Technology (ICT).* –

2 This Act mandates the emphasis on the enhancement of the capacity of ICT systems to
3 facilitate and aid the implementation of provisions under this Act. The DICT and NTC,
4 in coordination with public utilities and telecommunication providers, shall provide
5 assistance to ensure the accessibility of the services provided through the use of ICT
6 system including, but not limited to, immediate assistance from the Philippine National
7 Police (PNP), information dissemination through short message service, and other
8 services. ICT assistance shall include strengthening ICT literacy and access to
9 technology of women especially in poor communities and remote areas, reasonable
10 accommodation for persons with disabilities, such as provision of Filipino Sign
11 Language, among others.

12 SEC. 17. *Protection for Women Migrant Workers and other Overseas Filipinos*
13 *and Their Children.* - Interagency bodies such as the IATF-EID, Inter-Agency Council
14 on Violence Against Women and Their Children (IACVAWC), Inter-Agency Council
15 Against Trafficking (IACAT) and the Sub-Committee on International Migration and
16 Development (SCIMD), as well as government agencies part of the One-Country Team
17 approach in countries of destination such as the Department of Foreign Affairs (DFA),
18 DOLE, and DSWD and other migrant-serving agencies such as the Commission on
19 Filipinos Overseas are mandated to ensure that women migrant workers, and other
20 overseas Filipinos and their children are given adequate resources and access to legal,
21 medical, and social services in the receiving State, during transit and upon return,
22 especially during repatriation. Relevant embassies and foreign affairs personnel must
23 make representations with the respective host governments to ensure the protection of
24 women migrant workers and their children during pandemics, emergencies or disasters.

1 Coordination among these bodies is imperative, taking into account, but not limited to,
2 the following:

3 a) Responsibility to prevent and reduce GBV in migrant women and their
4 children, including through international, regional, and bilateral
5 cooperation;

6 b) Development of consistent and coherent frameworks and protocols between
7 the Philippines and the receiving country for the expedited process of
8 seeking redress by women subjected to violence;

9 c) Global partnership and international cooperation such as through drafting
10 agreements on the extension of stay permits of the women migrant workers
11 and their children between the host country and the country of origin and
12 through the relaxation of migrant workers' requirements to access social
13 services;

14 d) Migrants and marginalized and other at-risk individuals or groups should be
15 included in the public health strategies with due consultation with them;

16 e) Grant of bilateral incentives between countries to encourage employers to
17 renew contracts for existing workers in the host country;

18 f) Labor, economic livelihood, and social protections for migrant;

19 g) Freedom of movement;

20 h) Non-discrimination;

21 i) Access to health, especially sexual and reproductive health rights services;

22 j) Access to justice; and

23 k) Access to social protection and social services.

1 SEC. 18. *Specific Protective Measures for Women Migrant Workers, and other*
2 *Overseas Filipinos and Their Children.* – In relation to the preceding section, the
3 following measures shall be undertaken, among other appropriate measures:

4 a) During crisis preparation:

- 5 1. Track information on conflicts and natural disasters and potential
6 impact on migrants and their children;
- 7 2. Collect and share information on women migrant workers and their
8 children, subject to privacy, confidentiality, security, and safety of
9 migrants;
- 10 3. Maintain an updated registry of sex-disaggregated data of migrant
11 workers and their children;
- 12 4. Incorporate women migrant workers and their children in the
13 prevention, preparedness, and emergency response systems and
14 contingency planning;
- 15 5. Communicate effectively with migrants;
- 16 6. Establish coordination agreements beforehand; and
- 17 7. Build capacity and learn lessons from emergency response and post-
18 crisis action.

19 b) During emergency response:

- 20 1. Communicate widely with women migrant workers and their
21 children on evolving crises and how to access help;
- 22 2. Provide humanitarian assistance without discrimination;
- 23 3. Establish clear referral procedures and systems; and
- 24 4. Relocate women migrant workers and their children, when needed.

25 c) After the crisis:

- 1 1. Address migrants' and their children's immediate needs and support
- 2 them to rebuild their lives;
- 3 2. Ensure rehabilitation, integration and other interventions; and
- 4 3. Support migrant women's and their children's host communities.

5 CHAPTER III

6 COORDINATION MECHANISMS DURING PANDEMICS, EMERGENCIES OR 7 DISASTERS

8 SEC. 19. *National Preparedness and Response Program to Address the*
9 *Gender-Differentiated Needs of Women During the Pandemic, Emergency or Disaster.*

10 – To ensure access to essential services including access to justice and remedial
11 measures and to mitigate the impact of any health event of public concern, emergency
12 or disaster on the economy, a coherent, appropriate, efficient, developmental, evidence-
13 based and survivor-centered national program against GBV and addressing gender-
14 differentiated needs of women especially from marginalized sectors must be developed
15 to inform, direct and coordinate its implementation at all levels and to ensure
16 accessibility, availability and quality of services at the community level. For this
17 purpose, the National Disaster Risk Reduction and Management Council (NDRRMC)
18 and PCW, in coordination with the IATF-EID, shall come up with said national plan,
19 to be cascaded to the local government units, and must be automatically integrated into
20 the national strategy to manage the pandemic, emergency or disaster. This plan shall be
21 subjected to review every two (2) years. It shall address GBV and gender-differentiated
22 needs at all stages of the pandemic, emergency or disaster management, and
23 anticipating related events and factors that might impede the functioning of legal,
24 medical, social, remedial and other protection measures and mechanisms, to include,
25 but not limited to:

- 1 (a) Understanding the nature and risks of the pandemic, emergency or disaster
2 to be able to address the specific barriers and obstacles faced by women that
3 manifest in GBV, taking into account intersecting vulnerabilities and the
4 multiple burdens they experience, and addressing stigma and discriminatory
5 practices, attitudes and behaviors resulting in GBV, and providing for their
6 food and nutrition security as well as access to essential services and
7 government social protection and safety nets;
- 8 (b) Gathering, managing, and utilizing data concerning the risks and incidence
9 of GBV to inform policies and programs to achieve gender inclusive
10 responses and address gaps and lapses in ensuring access by women of
11 protection mechanisms;
- 12 (c) Providing prompt, accurate, disaggregated, accessible, up to date,
13 comprehensible, science based, and transparent data on women;
- 14 (d) Developing protocols and guidelines of conduct relating to the delivery of
15 service to women in the context of pandemic, emergency or disaster;
- 16 (e) Strengthening protection from sexual exploitation and abuse through
17 capacity building for service providers and governmental workers on early
18 identification and mitigation of such risks as well as strengthening
19 nationwide helplines and community-level referral to ensure they are
20 functional to prevent and respond to cases including chain management and
21 service provision plans for these services to stay open during the outbreak;
- 22 (f) Providing a clear channel of communication with GBV service providers and
23 actors as well as women's organizations and local GBV service providers
24 and survivor-centered referral systems through the utilization of technology;

- 1 (g) Assisting in the planning of national, local and community units by
2 developing, identifying and sharing best practices;
- 3 (h) Providing technical assistance, training, and consultation to improve
4 preparedness and response capabilities, with focus on the needs of women
5 and other vulnerable groups, including to support the achievement of
6 evidence-based benchmarks and objective standards to monitor, assess and
7 measure levels of preparedness, response and recovery;
- 8 (i) Improving systems of public, private, and civil society collaboration and
9 partnership to formulate, and address gaps and inefficiencies in the, policies,
10 plans and programs to address GBV during pandemic, emergency or disaster;
- 11 (j) Representation and participation of women in coordination and decision-
12 making bodies; and
- 13 (k) Carrying out other duties related to the national preparedness and response
14 program and recovery activities for women.

15 SEC. 20. *Capacity-Building of the Local Government Units (LGUs)*. – The
16 DILG, with the LGUs, shall be given the appropriate and sufficient funding by the
17 national government to properly carry out the designated provisions under this Act.
18 They shall be capacitated to be able to develop their pandemic, emergency or disaster
19 preparedness protocols through a gender-differentiated localized response, taking into
20 account the local contexts and concerns of the different women sectors in their area.
21 This includes protocols and systems for assistance to gender-based violence, provisions
22 for access to sexual and reproductive health needs, and ensuring availability of basic
23 services for women through all phases of the national response regarding the pandemic,
24 emergency or disaster.

The LGUs shall ensure that they have capable and trained personnel to provide the essential services package for women and are oriented about the policies, principles and procedure regarding gender equality, prohibition against gender-based violence, and gender sensitivity as well as those governing the management of the pandemic, emergency or disaster. They are also mandated to use data-gathering and data-analytics to further improve and strengthen their services. They shall also provide an accessible feedback mechanism to further guide their practice.

SEC. 21. *Community Engagement.* – Subject to the guidelines and safety protocols during pandemics, emergencies or disasters, the LGUs, in coordination with the women’s rights organizations, women-led organizations, civil society organizations, non-government organizations, private sector and other stakeholders, shall conduct regular dialogues and information drives with the community to educate them on gender issues as a preventive measure to prevent gender-based violence and address gender-differentiated needs. Through this multi-sectoral mechanism, women can participate and put forth their specific needs for integration in the local government pandemic, emergency or disaster programming and management.

CHAPTER IV

FINAL PROVISIONS

SEC. 22. *Appropriations.* – The amount needed for the initial implementation of this Act shall be taken from the current fiscal year’s appropriations for the Calamity Fund, Gender and Development (GAD) budget or special health funds of agencies and LGUs, and other appropriations available for the purpose. Thereafter, the amount necessary for the full implementation of this Act shall be included in the annual General Appropriations Act.

1 SEC. 23. *Penalties.* - Any public officer, employee of an agency or any private
2 individual mandated to implement this Act, who shall fail to perform in accordance
3 with the mandates, duties, tasks and other acts imposed by this law shall be
4 administratively liable for neglect in the performance of duty during the pandemics,
5 emergencies or disasters. Should damage or injury be inflicted on any person by reason
6 of such neglect, the aggrieved party can have recourse against the erring public officer,
7 employee or private individual for appropriate legal remedies as the law may provide
8 or afford, including criminal cases. In case of gender-based violence amounting to a
9 crime or offense is committed by a public officer or employee while in the performance
10 of any acts covered herein, penalties next higher in degree shall be imposed, including
11 sexual harassment, especially in quarantine facilities, and against persons belonging to
12 at risk individuals and those adversely affected by the pandemic, emergency or disaster.

13 SEC. 24. *Joint Congressional Oversight Committee.* - There is hereby created a
14 Joint Congressional Oversight Committee to monitor the implementation of this Act
15 and to review the implementing rules and regulations promulgated. The Committee
16 shall be composed of five (5) Senators and five (5) Representatives to be appointed by
17 the Senate President and the Speaker of the House of Representatives, respectively. The
18 Oversight Committee shall be co-chaired by the Chairpersons of the Senate Committee
19 on Women, Children, Family Relations and Gender Equality and the House Committee
20 on Women and Gender Equality.

21 SEC. 25. *Implementing Rules and Regulations.* – Within one hundred twenty
22 (120) days from the effectivity of this Act, the PCW, as lead agency shall, in
23 coordination and consultation with the Commission on Human Rights (CHR), IATF-
24 EID, DILG, DOH, Commission on Population and Development, DOLE, DSWD,
25 Department of Foreign Affairs, National Economic and Development Authority, DTI,

1 DICT, Department of Justice, PNP, Civil Service Commission, NDRRMC and other
2 concerned government agencies, as well as women’s rights organizations, women-led
3 organizations, civil society organizations, academe, private sector, public health
4 practitioners and other key actors and stakeholders, promulgate rules and regulations to
5 implement this Act.

6 SEC. 26. *Supplementary Applications*. – The applicable provisions of the Revised
7 Penal Code shall have supplementary application insofar as they are consistent with the
8 provisions of this Act.

9 SEC. 27. *Separability Clause*. – If any part or provision of this Act is declared
10 invalid or unconstitutional, the other parts hereof not affected thereby shall remain
11 valid.

12 SEC. 28. *Repealing Clause*. – All laws, decrees, executive orders, issuances,
13 rules and regulations, or parts thereof inconsistent with the provisions of this Act are
14 hereby repealed or modified accordingly.

15 SEC. 29. *Effectivity*. – This Act shall take effect within fifteen (15) days after
16 its publication in the *Official Gazette* or in a newspaper of general circulation.

17 *Approved,*