



Republic of the Philippines
Province of Iloilo
MUNICIPALITY OF OTON
OFFICE OF THE SANGGUNIANG BAYAN

EXCERPT from the Minutes of Session of the Sangguniang Bayan ng Oton, Iloilo recorded during its Regular Session held at the SB Session Hall on **October 24, 2016** at 9:30 in the morning.

PRESENT:	Hon. Vicente B. Flores, Jr. Hon. Juan Miguel M. Flores Hon. Jafel P. Salinas Hon. Grace Marie Escanlar-Cruz Hon. Lee C. Alison Hon. Eusebio G. Villavicencio, Jr. Hon. Honorato P. Nad Hon. Ma. Lorna T. Geonigo Hon. Margarito T. Clavel III	Vice Mayor and Presiding Officer SB Member SB Member SB Member SB Member SB Member SB Member SB Member SB Member (Liga ng mga Barangay Representative)
Absent:	Hon. Lourdes C. Morones	SB Member (On Leave, MC 6)

ORDINANCE NO. 2016 – 296

AN ORDINANCE PROVIDING FOR A MENTAL HEALTH CARE PROGRAM AND DELIVERY SYSTEM IN THE MUNICIPALITY OF OTON.

AS PROPOSED by Hon. Ma. Lorna T. Geonigo, **ON MOTION** of the Committee on Health and Sanitation composed by Hon. Ma. Lorna T. Geonigo, Hon. Lourdes C. Morones, Hon. Grace Marie Escanlar-Cruz which was duly seconded by Hon. Lee C. Alison

BE IT ORDAINED by the Sangguniang Bayan of Oton, Iloilo, that:

SECTION 1. Short Title. This Ordinance shall be known as the Municipal Mental Health Care Program and Delivery System.

SECTION 2. Introductory Clause. Most Filipinos easily dismiss mental disorder because of lack of knowledge about it. There are people suffering from mental disorder and being indifferent to these people will only bring more harm than good for lack of intervention. Various events like typhoons and other calamities can cause post traumatic effect that will lead to mental disorder. There are also reports of people committing suicide, especially among the youth. Even children of prominent and wealthy figures of the society were not excused. According to the Philippine Statistics Authority, Philippine suicide rate increased alarmingly from 1984 to 2005. In the year 2012, the Department of Health (DOH) estimated 2558 cases, of these 2008 were males and 550 were females. According to the World Health Organization (WHO), suicide is more common in males than in females. The Philippine has the lowest suicide rate among ASEAN Member states. But mental illness, such as depression, persists in the country. The WHO reported in 2011 that the Philippine has the highest incidence of depression in Southeast Asia. In 2004 alone, the DOH reported 4.5 Million cases of depression. Locally, the Oton Municipal Health Office has recorded two (2) suicide cases, all males.

This Municipality has recorded 148 cases of mentally ill patients, 63 are females and 85 are males. In addition, the Oton Police Station, has also identified 348 drug dependents scheduled for data gathering and assessment that needs mental health care intervention.

Mental health will not take a backseat in the health agenda of the Duterte Administration. Health Secretary Paulyn Ubial included "modern-day living diseases," particularly mental health on the list of priority concerns of the Department of Health (DOH). According to her, "mental disorder or illness is not visible to the eye. If there is heart attack or cancer, we can see it, but not in mental health. It can be anyone of us." According to the Health Department, all suicides can be prevented. Besides, this is in line with the anti-drug program of the present administration.

The Philippine Constitution provides that the state shall protect and promote the right to health of the people, instill health consciousness among them and adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost.

The WHO, holistically defines health as the state of physical, social, mental well-being, rather than merely the absence of physical diseases. Good mental health means not simply the absence of detectable mental disorder but a state of well – being in which the individual is able to utilize his abilities, work productively and fruitfully and contribute to the community.

Present responses of the government, non-government, private and academic institutions at the national, regional and local levels on mental health indicate that there is need to improve public awareness of mental health as an integral component of the fatal health case, to ensure its inclusion in the Government's package of health care programs.

Despite the presence of National Mental Health Program in the country, there is little significant programs done for mentally ill patients and mental health programs at the grassroots level especially in the Geographically Isolated and Disadvantaged Area (GIDA) municipalities.

The psychiatric patient care continues beyond mental hospitals, which must be made available in general hospitals, health centers and homes, and relevant health care activities and interventions must be done closest to where the need or the patient is.

SECTION 3. Declaration of Policy. It is hereby declared the policy of the Municipality to uphold the rights of the people to mental health and encourage mental health consciousness among them. Toward this end, the Municipality shall adopt an integrated and comprehensive approach to the development of the Municipal Health Program and Delivery System to deliver appropriate services and interventions including provision of mental health protection, care, treatment and other essential services to those with mental illness or disability.

SECTION 4. Objective of this Ordinance are as follows:

- a) Promote and shift from a hospital based system to a strengthened community-based mental health care delivery system;
- b) Strengthened and institutionalized the existing mental health program of the Municipality;
- c) Integrate mental health care in the general health care delivery system;
- d) Prevent, treat and control mental illness and rehabilitate persons with mental illness and disability;
- e) Provide access to comprehensive health care and treatment which ensure a well-balanced mental health program of community-based and hospital care and treatment;
- f) Establish a multi-sectoral joint network for the identification and prevention of mental illness or disability and the management of mental health problems among vulnerable groups in the population which, include those affected by overseas employment, (children, adolescents, elderly) those who are in need of specific protection like survivors of extreme life experiences and violence, and the victims of substance (drug and alcohol) abuse, among others;
- g) Protect and promote the mental health of the people through a multi-disciplinary approach that covers health, education, labor and employment, justice and social welfare;

SECTION 5. Definition of Terms. The following terms are being defined for the purpose of this Ordinance:

- a) **Mental Health** – refers to a state of well-being in which an individual fulfills his / her own potential in every stage of human development at work and in relationships in order to cope with the day to day stresses of life and make positive contribution to the community.
- b) **Mental Illness** – refers to mental or psychiatric disorder characterized by the existence of recognizable changes in the thoughts, feelings and general behavior of an individual brought about by neurological causes manifested by genetic or biochemical abnormalities and associated medical conditions which include distress personality disorder, substance use dependency.
- c) **Psychosocial Problem** – refers to a condition that indicates the existence of recognizable changes in the individual behavior, thoughts and feelings brought about closely related to sudden, extreme and prolonged stress in the physical or social environment.
- d) **Mental Disability** – refers to impairments in activity limitations in individual and participatory restriction denoting negative aspects of interaction between an individual and

his government. This results from organic syndromes. Such as mental retardation and acquired lesions of the central nervous system, dementia psychotic and non-psychotic disorder.

- e) **Patients** – refers to a person receiving mental health care and treatment or psychosocial intervention from a mental health care facility or clinic.
- f) **Legal Representative** – refers to a person charged by law with the duty of representing a patient in any specified undertaking or of exercising specified rights in behalf of the patient;
- g) **Mental Health Professionals** – refer to those persons with formal education and training in mental health and behavioral sciences, such as, but not limited to psychiatrist, psychologist, psychiatric nurse or psychiatric social worker;
- h) **Mental Health Workers** – refer to trained volunteers and advocates engaged in mental health promotion and services under the supervision of mental health professionals.
- i) **Allied Professionals** – refer to any trained or certified non-psychiatric physicians, social workers, nurses, occupation therapists, counselors, priests, ministers, pastors, nuns, trained or certified non-psychiatric individual or non-physician.

SECTION 6. Scope of Mental Health. For the purpose of this Ordinance, the following are included in the scope of Mental Health illness and disabilities:

- a) Mental Disorder
- b) Substance (drugs and alcohol) abuse
- c) Depression and other mental health-associated issues and problems, such as those arising from
 - 1) medical illness;
 - 2) psychosocial issues of daily living;
 - 3) being part of high-risk groups such as victims of disasters, children, women and the elderly;
 - 4) family disruptions due to overseas employment and internal migration; and
 - 5) changing lifestyles brought about by rapid urbanization and globalization.

SECTION 7. Municipality of Oton Mental Health Care Committee. Referred to as The Committee – is hereby established for the purpose of this Ordinance. This Committee is established under the Municipal Health Office / Rural Health Unit, to provide for a consistent, rational and unified response to mental health problems, concerns and efforts through the formulation and implementation of the Municipal Mental Health Care Program Delivery System. Also, for the purpose of this Ordinance, the Municipal Mental Health Care Program Delivery System shall constitute a quality mental health program, through the development of efficient and effective structures, systems and mechanisms, that will ensure fair, accessible, affordable, appropriate, efficient and effective delivery of mental health care to all its recipients and stakeholders by qualified, competent, compassionate and ethical mental health professionals and mental health workers.

SECTION 8. Composition. The Committee shall be composed of:

- a) Chairperson – The Municipal Mayor
- b) Vice Chairperson – The Municipal Health Officer
- c) The Members:
 - Chair – SB, Committee on Health
 - Chair – SB, Committee on Women , Children, Family and Gender Development
 - Chair – SB, Committee on Barangay Affairs (ABC President)
 - Chair – SB, Committee on Social Welfare and Community Development
 - Head of the Municipal Social Welfare and Development Office
 - Philippine National Police, Oton Station
 - Municipal Budget Office
 - Rural Health Midwives
 - President, Barangay Health Workers
 - Representative from Oton Women Association Inc.

– Representative from Association of Differently-Abled Persons

SECTION 9. Duties and Functions. The Committee shall exercise the following duties and functions:

- a) Formulate and review policies and guidelines on mental health issues and concerns;
- b) Develop an inclusive and integrated plan and program on mental health;
- c) Conduct regular monitoring and evaluation in support of policy formulation and planning on mental health;
- d) Promote and facilitate collaboration among sectors and disciplines for the development and implementation of mental health related programs within these sectors;
- e) Provide over-all technical supervision and ensure compliance with policies, programs and projects within the comprehensive framework of the Municipal Mental Health Care Program Delivery System and other such activities related to the implementation of this Ordinance through the review of mental health services and the adoption of legal and other remedies provided by law.
- f) Plan and implement the necessary and urgent training and reorientation programs for all mental health professionals, mental health workers, and allied professionals as articulated in this Ordinance;
- g) Review all existing laws related to mental health and recommend legislation which will sustain and strengthen programs, services and other mental health institutions;
- h) Create such inter-agency committees, project task forces and other groups necessary to implement the policy and program framework of this Ordinance;
- i) Perform such other duties and functions necessary in carrying the purpose of this Ordinance

SECTION 10. Quorum. The presence of a majority of the members of the Committee shall constitute a quorum.

SECTION 11. Meeting. The Committee shall meet at least once a month or as frequently as necessary to discharge its duties and functions. The Committee shall be convened by the Chairperson or upon written request of at least three (3) of its members.

SECTION 12. Creation of Barangay Mental Health Care Council Management Team. The Municipal Mental Health Care Program and Delivery System shall evolve from a predominantly hospital based mental health care system to comprehensive community based mental health care systems.

SECTION 13. Composition of the Barangay Mental Health Care Council Management Team.

- a) Chairperson – Punong Barangay
- b) Vice Chairperson – Chair, Kagawad, Committee on Health
- c) The Members:
 - Rural Health Midwife
 - Chair, Kagawad, Committee on Women, Children, Family and GAD
 - Chair, Kagawad, Committee on Peace and Order
 - Chair, Kagawad, Committee on Social Welfare and Community Development
 - BHWs
 - Barangay Tanods

SECTION 14. Functions of the Council.

- a) Continuously monitor and evaluate mentally ill patients as well as prompt detection and referral of new patients;
- b) Attend the Municipal Mental Health Program Activities
- c) Follow-up client satisfaction among those households already visited by the psychiatrist and / or health personnel.
- d) Address Mental Health Program implementation issues and concerns in the barangay level.
- e) Facilitate / recommend actions and findings at the Barangay level regarding mentally ill patients not included during the Municipal Disorder Validation.
- f) Continuous support services and intervention for families and co-workers.
- g) Advocacy and Promotion of Mental Health Awareness among the general population.

SECTION 15. Institutional Support for the Team:

- a) The team is hereby authorized to call upon any department, bureau, office or instrumentalities of the Local Government Unit to extend all necessary assistance to the team;
- b) Continuation of programs for capacity building among existing local mental health workers so that they can undertake mental health care in the community and undertake training and capacity building programs in close coordination with the Municipal Health Unit and other participatory agency;
- c) Capacity building, reorientation and training shall be required for those who are mental health professionals or workers whose previous education and training had not emphasized community mental health perspective;

SECTION 16. Promotion of mental health to protect the right for dignity, respect and justice of those who are suffering from health problem, the committee shall promote an integrated approach to mental health care to prevent mental disorders through programs that strengthen the basic coping mechanisms of individuals in relation to stress and advocacy to raise the value of mental health consciousness among the people.

SECTION 17. Providing PHILHEALTH Benefits for the Indigent Patients. To help facilitate treatment for less privileged patients or the indigents, enrolling them in the PhilHealth Program is a necessity to further help the needy, marginalized and vulnerable disadvantaged individuals and families in this Municipality which is the thrust of the Duterte Administration.

SECTION 18. Access to Effective and High Quality Mental Health Care. Any person shall have the right to receive mental health care appropriate to his needs and shall be entitled to care and treatment in accordance to the same standards and accessibility as other sick individuals. An improved, effective and easy access to mental health care shall be made possible and a shift from predominantly hospital-based mental health care to community-based care shall be provided.

SECTION 19. Determination of Person with Mental Illness or Disability. The determination that a person has mental illness or disability shall be made according to internationally accepted medical classification and standards.

SECTION 20. Confidentiality/ Access to Information. All patients or clients with mental illness or disability shall enjoy the right to confidentiality. Only patients or former patients shall be entitled to have access to their personal mental health records. For justifiable reason, such confidential information may not be given to the patient but instead be given to the patient's representative or counsel.

SECTION 21. Patient's Treatment. A patient with mental illness or disability shall have the right to treatment in the least restrictive environment suited to the patient's mental health needs.

SECTION 22. Consent to Care, Treatment or Rehabilitation. The consent of the patient to be treated or admitted in a mental health facility shall be obtained freely, without threat to or improper inducements and with pertinent disclosure to the patient of adequate and understandable information in a form or language that is understood by the patient. When the patient at the relevant time, lacks the capacity to give or withhold consent, his next of kin or legal representative shall give consent.

SECTION 23. Mental Health Consultation Room. A Consultation Room shall be provided to give mental health patients privacy during consultation and assessment by the Municipal Physician-in-Charge.

SECTION 24. Psychiatric Service in the Rural Health Unit. Psychiatric services shall be established in the Municipal Health Unit which shall provide the following:

- a) Outpatient Clinic in collaboration with mental health program at the primary health centers in the area;
- b) Linkage and possible supervision of home care services for those with special needs as to consequence of long term hospitalization, unavailable families, inadequate or non-compliance to treatment;

- c) Coordination with drug rehabilitation centers on the care, treatment and rehabilitation of persons suffering from drug or alcohol induced mental, emotional and behavioral disorder;
- d) Referral system with other health and special welfare programs, both government and non-government, for programs in the prevention of mental illness, the management of those at risk for mental health and psychosocial problems and mental illness or disability.

SECTION 25. Implementing Rules and Regulations. Within ninety (90) days from the effectivity of this Ordinance, the Office of the Local Chief Executive shall, in coordination with the committee, formulate the rules and regulations necessary for the effective implementation of this Ordinance.

SECTION 26. Appropriation. The LGU – Oton shall appropriate funds in the amount of Three Hundred Thousand Pesos (P300,000.00) for the implementation of this Ordinance.

SECTION 27. Repealing Clause. All municipal ordinances or parts of any municipal ordinance inconsistent with the provisions of this Ordinance are hereby repealed or modified accordingly.

SECTION 28. Effectivity Clause. This Ordinance shall take effect upon approval.

SECTION 29. Copies. This Ordinance shall be furnished to the Office of the Mayor; All LGU–Oton Department Heads; Liga ng mga Barangay; Rural Health Unit, Association of Barangay Health Workers; Oton Women’s Association Inc.; Association of Differently–Able Persons; and the Sangguniang Panlalawigan of Iloilo for information, guidance and review respectively.

APPROVED UNANIMOUSLY.

I HEREBY CERTIFY to the correctness of the foregoing Ordinance.

Concurred: 
JAFEY V. SALINAS
 Chair, Committee on Rules and Privileges


KERRY ANN T. LACIFICAR
 Secretary to the Sanggunian

Approved: 
CARINA V. FLORES
 Municipal Mayor

Attested: 
VICENTE B. FLORES, JR.
 Vice Mayor and Presiding Officer

Date Approved by LCE: NOV 07 2016

Date Posted: NOV 07 2016

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