Community-based Rehabilitation: Mandaluyong’s Project T.E.A.C.H
HIGHLIGHTS

The City Government of Mandaluyong believes in ensuring the well-being of its citizens, particularly of children, thus its social programs and projects are based on the concept of “From Womb to Tomb”. Guided by this model and the four core rights of children, Mandaluyong City has implemented innovative child-friendly programs and projects that have had positive results on children, as evidenced by improvements in the child indicators that the city government closely monitors.

The City has established an enabling environment for child-friendly governance, with:
(a) the existence of an active Local Council for the Protection of Children that spearheads the creation, implementation and evaluation of programs and projects for children;
(b) the enactment of the Mandaluyong City Children's Code; and
(c) the establishment of an Annual Investment Plan for Children.

Among the child-friendly programs of Mandaluyong City are as follows:

1. Bahay Tuluyan and Bahay Pag-Asa -- to address the dearth in facilities to provide shelter and care to street children, abused young girls and old women, and children in conflict with the law (CICL).
2. Task Force Batang Ina -- to respond to the growing concern on teenage pregnancy through a comprehensive program promoting adolescent health and development and providing case management, medical and counseling services.
3. Breastfeeding Patrol -- to correct the insufficient promotion of breastfeeding especially among lower-income women/families.
4. Project TEACH -- to assist children with disabilities who need to be identified and given access to appropriate services, particularly those coming from low-income households.
Introduction

The City of Mandaluyong was not always known as the “Tiger City”, becoming only a city in 1994 and being surpassed by its neighbors in terms of economic growth. Since its establishment, the city rapidly developed into a first class city with a vibrant economy by pursuing reforms to promote investments. The city’s economic growth was coupled with social development as indicated by the various awards and recognition it has received. Mandaluyong was ranked first in terms of “Quality of Life” in the Asian Institute of Management’s (AIM) Philippine Cities Competitiveness Ranking project in 2002. In recent years, Mandaluyong was the recipient of several awards including the 2010 Green Banner Award-Best in Nutrition Program Management and Implementation, the TESDA Kabalikat Award for its initiatives in promoting technical vocational education, and a Presidential Award for “Most Child-Friendly City in the Philippines” (Highly Urbanized City Category) in 2012.

Local State of the children

The City Government of Mandaluyong believes in ensuring the well-being of its citizens, particularly of children, thus its social programs and projects are based on the concept of “From Womb to Tomb”. This is a holistic approach wherein catering to children’s needs begins from the time a mother conceives up until the child grows into an adult. Guided by this model and the four core rights of children, Mandaluyong City has implemented innovative child-friendly programs and projects that have positive impact on the city’s 124,651 children\(^1\). This can be seen in the improvements in child indicators shown in Table 1.

| Table 1. Children Indicators |
|-------------------------------|----------------|----------------|----------------|
| Indicators                   | 2011           | 2012           | 2013           |
|                               | No. | %    | No. | %    | No. | %    |
| **Health and Nutrition**      |     |      |     |      |     |      |
| **Preschool**                 |     |      |     |      |     |      |
| Normal Weight                 | 49,932 | 98.14% | 52,998 | 98.10% | 55,340 | 98.24% |
| Underweight                   | 586  | 1.17% | 575  | 1.06% | 573  | 1.02% |
| Severely Underweight          | 113  | 0.22% | 110  | 0.20% | 111  | 0.20% |
| Overweight                    | 233  | 0.46% | 339  | 0.62% | 307  | 0.54% |
| **School aged**               |     |      |     |      |     |      |
| Normal Weight                 | 26,264 | 81.6% | 29,523 | 87.2% | 30,477 | 89.35% |
| Underweight                   | 4,821 | 14.9% | 1,710 | 5.0%  | 1,978 | 5.7%  |
| Overweight                    | 1,078 | 3.3%  | 2,599 | 7.6%  | 1,651 | 4.8%  |
| **Education**                 |     |      |     |      |     |      |
| Enrollment Rate               | SY 2011-2012 | SY 2012-2013 | SY 2013-2014 |

\(^1\) 0-17 years old. Data as of 2011
The Local Council for the Protection of Children (LCPC) of Mandaluyong City spearheads the creation, implementation and evaluation of programs and projects for children. Below are some of Mandaluyong’s innovative programs for children.

**Mandaluyong Child-Friendly Programs**

1. **Bahay Tuluyan**

Bahay Tuluyan opened its doors in 2002. Originally established to house street children temporarily, the facility extended its services to abused girls and old women that are rescued in the vicinity of Mandaluyong.

The shelter operates 24 hours a day with a staff complement of 3 house parents, 1 psychologist, 2 social workers, 1 administrative staff, and a resident nurse. House parents supervise the children and serve as their secondary parents. They orient the children on their rights and encourage them to have a positive outlook in life. Aside from guidance and counselling the house parents and resident psychologist also conduct skills training and group activities for leisure and recreation.

Referral of children and women in crisis usually comes from the concerned citizens through the City Women’s and Children’s Desk. Services like psychological evaluation and assessment, temporary settlement, and proper referral to the local institutions for treatment and interventions (i.e., medical or other therapy) are provided. As an after-care service, collateral investigation for proper case management and further assistance for the children is conducted by the social workers in the shelter.

It is observed that children served in the shelter demonstrate lessened trauma and are slowly able to interact with other girls and workers in the shelter. In terms of the effect in the community, it is seen that awareness in child protection is heightened through the cases being reported to the City Social Welfare and Development Office.

2. **Bahay Pag-as-a**

As a counterpart of Bahay Tuluyan, Bahay Pag-as-a is a facility catering for male street children and children in conflict with the law. It offers interventions for the
children in terms of legal assistance, referrals to appropriate institutions, social service counseling and psychological evaluation, temporary custody and shelter, values formation and character building session, Balik Aral program, employment, capability building and recreational activities, educational programs, and Parent Effectiveness Seminar.

A critical intervention at Bahay Pag-Asa is the provision of proper case management by social workers to all the children it serves. Moreover, a “value-added” component at the facility is the provision of livelihood skills training especially for older boys. The shelter is also in partnership with the Rizal Technological University (RTU) in Mandaluyong City in conducting the Alternative Learning System (ALS).

3. Task Force Batang Ina

City Ordinance No. 007 series of 2012 created the Task Force Batang Ina which aims to prevent early teenage pregnancy by empowering young people to make wise decisions and take responsibility for sexual and reproductive health and rights.

The project offers innovative programs that promote adolescent health and development, such as the Adolescent Health Program which focuses on educating teenagers and preventing them from being out-of-school youth by providing jobs skills training and assistance for job placement. Meanwhile, the Adolescents Support Program provides intensive counseling and case management for young mothers by raising awareness on their responsibilities as parents, students and employees. It also addresses mental health and trauma challenges of the young mothers together with homelessness issues. Furthermore, the Teen Parent and Child Program gives free medical services covering prenatal care, immunization, and post-partum care to all pregnant teenagers and their children. Table 2 shows the number of beneficiaries assisted by Task Force Batang Ina.

<table>
<thead>
<tr>
<th>Registration</th>
<th>Number of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batang Ina (10-14 years old)</td>
<td>7</td>
</tr>
<tr>
<td>Number of Registered Adolescents</td>
<td>450</td>
</tr>
<tr>
<td>Nature of Assistance</td>
<td>Number of Beneficiaries</td>
</tr>
<tr>
<td>Delivery Assistance</td>
<td>457</td>
</tr>
<tr>
<td>Educational Assistance</td>
<td>304</td>
</tr>
<tr>
<td>Skills Training/Vocational Assistance thru Manpower Training Center</td>
<td>227</td>
</tr>
<tr>
<td>Shelter Assistance</td>
<td>160</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,148</td>
</tr>
</tbody>
</table>

4. Breastfeeding Patrol

The city government of Mandaluyong saw the need to revive and support breastfeeding through the Infant and Young Child Feeding Program with its Breastfeeding Patrol. The program aims to promote breastfeeding by helping the mothers and their family, especially in the lower income bracket. Moreover, the city wants to increase the number of infants exclusively breastfeeding and decrease the number of stores selling infant formula in the catchment area.

From its conceptualization in 2007, the Breastfeeding Patrol gained participation and partnerships from various individuals, companies, and non-governmental organizations. Throughout the implementation of the program the city has already trained 2 medical doctors, 6 nurses, 9 midwives, and 46 barangay nutrition scholars on Infant and Young Child Feeding Program (IYFC). Twenty seven Barangay

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2 The City Health Office of Mandaluyong defined Batang Ina as teenage mothers ages 10 to 14 years old.
Breastfeeding Support Group Orientations were held while 26 Barangays with Breastfeeding Support Groups were established. Breastfeeding Stations were also established in the workplace and in schools through the initiative of IYCF like in Globe Telecom Inc. (Mom’s Little Room), Mandaluyong City Hall, Brgy Mabini-J. Rizal, J. Fabella Memorial School, and Highway Hills Integrated School. Barangay milk storage facilities are also present at the Panatag Health Center and at the Mandaluyong City Hall where the main milk storage center is located.

Providing access to therapy and education services for indigent children with special needs through Project TEACH

Rationale

There are around 191,680 children with special needs in the Philippines\(^3\). These children need appropriate services for them to develop and lead productive lives. The first step to getting them the services and care that they need is to identify or diagnose their disability. However, this can only be done by developmental pediatricians of whom there are only around 48 in the whole country. In addition, proper services such as medical rehabilitation and educational services are often costly and low-income families cannot afford these services.

The City Government of Mandaluyong is responding to the problem of limited access of indigents to appropriate care and therapy for children with special needs, through Project TEACH.

Project TEACH or Therapy, Education and Assimilation of Children with Handicap is a community-based rehabilitation (CBR) program benefitting children with disabilities in Mandaluyong City, particularly those living in poverty-stricken areas. In line with promoting a child’s right to development and participation, the project has the following objectives:

\begin{itemize}
  \item a. Teach citizens and employees of Mandaluyong such as teachers, DSWD volunteers, Barangay Health Workers, and other volunteers how to identify children suspected of having special needs;
  \item b. Ensure that children suspected of having special needs are examined by specialists so they can be provided with the appropriate intervention;
  \item c. Organize group of volunteers who will be trained to assist in the provision of therapy and education services for children with special needs; and
  \item d. Provide applicable services for children with special needs.
\end{itemize}

\(^3\) NSO, 2000 Census of Population
**Key Implementation Steps**

A summary of the key implementation steps is shown in Table 3.

### Table 3. Summary of Implementation Steps

<table>
<thead>
<tr>
<th>Steps</th>
<th>Outputs</th>
<th>Key Parties Involved</th>
<th>Timeframe</th>
<th>Budget and Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Conceptualization</strong></td>
<td>Inter-agency committee formed, signed MOA, Resolution to implement MOA</td>
<td>City Mayor, LCPC, REACH Foundation, City Health Office, Division of City Schools-Mandaluyong, City Social Welfare and Development, Persons with Disabilities Affairs Division, Mandaluyong City Medical Center, City Public Information Office, partner NGOs, Mandaluyong City Council</td>
<td>1 year</td>
<td></td>
</tr>
<tr>
<td><strong>2. Development of service-delivery framework</strong></td>
<td>Service delivery framework created, CARES and help desk established, signed MOA</td>
<td>Inter-agency committee, UP-Manila, UST</td>
<td>1 year</td>
<td></td>
</tr>
<tr>
<td><strong>3. Capacity building</strong></td>
<td>• Trained city doctors, barangay health workers, teachers, CREW members • Conducted IEC campaigns</td>
<td>Lay women, Developmental pediatricians, Doctors, Public school teachers, Social workers, Barangay health workers</td>
<td>September 2007-March 2012</td>
<td>Php 110,300.00 Allowances, materials, equipment, office supplies</td>
</tr>
<tr>
<td><strong>4. Identification of indigent children with special needs</strong></td>
<td>Referral</td>
<td>All line agencies and partners</td>
<td>Continuous</td>
<td></td>
</tr>
<tr>
<td><strong>5. Provision of appropriate interventions</strong></td>
<td>Diagnosis</td>
<td>Refer to Table 2</td>
<td>Continuous</td>
<td>Refer to Table 5</td>
</tr>
<tr>
<td><strong>6. Monitoring and Evaluation</strong></td>
<td>Status reports; Parent Report on Client Performance</td>
<td>Inter-agency Committee, Mandaluyong CARES</td>
<td>Continuous (monthly meetings; parent survey every 6 months)</td>
<td></td>
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</tbody>
</table>

1. **Conceptualization**

Project TEACH began in 2003 when the City Government of Mandaluyong partnered with the Independent Living Learning Centre (ILLC), a private facility catering to youth with special needs. The ILLC was formed into the Rehabilitation and Empowerment of Adults and Children with Handicap Foundation, Inc. (REACH) in December 2005.
a. The City Government of Mandaluyong, LCPC members and REACH foundation consulted local partner agencies and units for the creation of an inter-agency committee (See Annex A for composition and structure of committee). The roles and responsibilities of the committee members were identified.

b. A Memorandum of Agreement (MOA) was signed between the REACH Foundation and the LGU in September 2007 to formalize their partnership. There was a turn-over of the CBR project to Mandaluyong City and formal launch of Project TEACH. It may be noted that the REACH Foundation continues to be Mandaluyong City’s major partner for the project.

c. Resolution No. 1348, S-2008 was enacted, authorizing the MOA to implement Mandaluyong’s Community Based Rehabilitation Program through Project TEACH.

2. Development of Service Delivery Framework

The effectiveness of Project TEACH is largely due to its efficient and streamlined service delivery framework that was developed by the inter-agency committee through the following initiatives:

a. Meetings to develop the service delivery framework, design the services, and formulate protocols to operationalize the programs.

b. Establishment of the Center for Alternative Rehabilitation and Education Services (CARES) where therapy and education sessions are provided.


d. MOA signing of University of the Philippines-Manila and University of Santo Tomas with REACH Foundation. This commits the universities to regularly send occupational, physical and speech therapy interns to Project TEACH.

3. Capacity Building for community members

Project TEACH’s collaborative framework entails empowering stakeholders through capacity building and knowledge transfer.

a. Recruitment of experts to teach essential competencies to lay people and local professionals. Three (3) out of the 48 developmental pediatricians in the country conducted a long-term training to Mandaluyong’s government doctors.

b. Barangay Health Workers, school teachers, social workers, day care center workers, the Breastfeeding Patrol, DSWD volunteers, Persons with Disability Coordinators, and doctors at the City Health Office, were trained on how to identify children suspected of having special needs.

c. Training for 27 lay Community Rehabilitation and Education Workers (CREW) who help professionals implement therapy and educational programs for special children. They are lay women residing in depressed areas of Mandaluyong.
d. Guidance teachers in the Mandaluyong City public schools were also given an orientation on the implementing guidelines for mainstreaming and inclusion.

e. Community education programs were conducted to raise awareness regarding children with special needs and address false perceptions.

4. Identification of indigent children who have or who are at risk for having special needs

Prior to the implementation of Project TEACH in 2005, there were less than 500 identified children with special needs based on house visits conducted. As of 2013, there are 700 registered children with special needs in Mandaluyong. The increase in number was expected as the project expanded and information and education campaigns were conducted.

a. The children suspected of having special needs are referred to their respective Barangay Halls for screening.

b. The CSWD determines eligibility for the free services. Priority is given to children from poor families.

5. Provision of appropriate interventions

a. Children with special needs that are eligible for services are then referred to the Mandaluyong CARES where specialists, such as developmental pediatricians and psychologists will make a proper diagnosis (See Annex B for Medical History Form).

b. The findings and recommendations are discussed with the family of the child with special needs. Based on the diagnosis, any of the following services will be provided:

- **Medical/dental assessment or treatment** – The overall health of the child is examined and treatment is given to ensure wellbeing.
- **Counseling services** – Provided to families or parents in need of socio-emotional support.
- **Special Education Programs** – These include: bridging classes/daycare for pre-school children with special needs; one-on-one SPED tutorials in preparation for possible inclusion or mainstreaming; self-contained classes; and mainstreaming through a clustering scheme wherein children with similar needs and baseline skills are grouped.
- **Therapy Services** – These include: Physical Therapy to promote development, maintenance or restoration of Gross Motor Skills and Coordination, Advances Gross Motor Skills, Functional Mobility; Occupational Therapy to help develop Activities of Daily Living, Work Behaviors, Social skills and Fine Motor Skills; Speech Therapy for Articulation, Voice, Hearing, Language, and Oral Peripheral Mechanism; and Multidisciplinary Treatment.
- **Home-care Services** – Necessary services are provided to beneficiaries who are unable to go to the center. Interns, CREW members and staff visit the beneficiaries’ homes every Friday morning.
- **Pre-Vocational/Vocational Skills Training** – Adolescents with special needs are taught skills such as food preparation and arts and crafts as pre-vocational training and vocational skills are taught through the Kitchen Specials program wherein the adolescents with special needs prepare food that are sold to public school canteens.

The project’s implementing partners are shown in Table 4 below.

### Table 4. Project TEACH Service Providers

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Service Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surveillance and Detection</td>
<td>All line agencies and partners</td>
</tr>
<tr>
<td>Referral and resource-support services</td>
<td>PDAD, PIO, Mayor’s Office, CSWD</td>
</tr>
<tr>
<td>Socio-emotional support and counseling</td>
<td>CSWD, KMBKMI, Mandaluyong CARES</td>
</tr>
<tr>
<td>Primary Health Services and Medical Screening</td>
<td>CHO through Barangay Health Centers</td>
</tr>
<tr>
<td>Medical and Dental Ancillary Procedures</td>
<td>Mandaluyong City Medical Center</td>
</tr>
<tr>
<td></td>
<td><em>In case the MCMC does not have the facilities needed, beneficiaries are transferred to other government hospitals. All expenses are still subsidized by the City government.</em></td>
</tr>
<tr>
<td>Therapy Services</td>
<td>Mandaluyong CARES, HOM, KMBKMI, UP, UST</td>
</tr>
<tr>
<td>SPED Tutorials</td>
<td>Mandaluyong CARES, HOM</td>
</tr>
<tr>
<td>SPED Pre-School/Bridging Class</td>
<td>Mandaluyong CARES, DepEd-Manda</td>
</tr>
<tr>
<td>Self-contained classes</td>
<td>Public Schools, Dep-Ed-Manda</td>
</tr>
<tr>
<td>Mainstreaming and inclusion program</td>
<td>Public Schools, Dep-Ed-Manda</td>
</tr>
<tr>
<td>Pre-Vocational and Vocational Skills Training program</td>
<td>Public Schools, Dep-Ed-Manda, Mandaluyong CARES, CHO, PTCA</td>
</tr>
</tbody>
</table>

6. **Continuous monitoring and evaluation of protocols and programs**

   a. The inter-agency committee meets at least once a month to discuss the effectiveness of the programs and possible areas for improvement. Status reports are given by the implementing partners during committee meetings.

   b. The children-beneficiaries are also re-assessed by the developmental pediatricians to check progress and determine if interventions are still appropriate.

   c. A Parent Report on Client Performance is also prepared every six months. This report is based on a survey wherein parents are asked to evaluate the following areas: Client’s progress, Appropriateness of intervention, and Satisfaction in the services received (See Annex C for survey form).

**Achievements**

Around 600 children with special needs have benefited from Project TEACH. The percentage distribution of the diagnosis is shown in Figure 1. The innovative feature of Project TEACH has been recognized by numerous organizations as demonstrated by the following awards bestowed on the project: Top Prize in World Bank’s 2008 Panibagong Paraan: Building Partnerships between NGOs and Local Government Units; Top 3 Most Innovative Health Care Programs in Metro Manila of the Department of Health; Two-time beneficiary of the Philippine-Australian Community

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Assistance Program (PACAP) grant. In addition, much credit was given to Project TEACH when Mandaluyong City was awarded as Most Child Friendly City in the Philippines in 2011.

The results of the latest Parent’s Report are shown below:
Challenges

While Project TEACH is considered as an exemplary child-friendly practice, its implementation still faced challenges. One of these is the lack of manpower to conduct therapy and SPED services. As already mentioned, there is only a limited number of professionals in the field and most do not prefer working in the public sector due to lower salary. The project addressed this issue through the training of the CREW who assist in the provision of therapy services. These workers, mostly women, are given an allowance of as much as P 5,500.00 per month. To augment the assistance given by CREW, interns from UP-Manila and UST are also asked to help in providing therapy and SPED sessions.

Other staffing requirements were also addressed through the formation of Community Service Committees. This scheme requires the families of children with special needs to render community services in exchange for the free therapy and SPED services. Parents can participate in any of the following committees based on their skills and interests: Program Support, Family Support, Information Dissemination, and Housekeeping.

Key Ingredients for Success and Sustainability

The City of Mandaluyong demonstrates its commitment to being a Child-Friendly City by ensuring that the gains achieved in the implementation of child-friendly practices are sustained. The following measures are being undertaken:

1. **Continuous investment on children**

   The operation and expansion of programs and projects for children necessitate allocation of budget. Based on their 2013 Annual Investment Plan (AIP) for Children, Mandaluyong City has allocated P 1,587,696,608.00 for the implementation of programs, projects and activities (PPAs) for children. This is around 55.5 % of the LGU budget (See Annex D for AIP). This amount increases from year to year.
For Project TEACH, initial funding came from NGOs such as the REACH Foundation and other funding agencies, particularly Manulife and the Philippine-Australian grant facility. These organizations were willing to fund the project because they also saw the commitment and capacity of the LGU to sustain and continue the project. Today, funding for Project TEACH comes from the budget allocation of the City Government and DepEd’s Special Education Fund and its partner NGOs. Table 5 below shows the budget allocation and sources of funds for Project TEACH.

### Table 5. Project TEACH Budget Allocation

<table>
<thead>
<tr>
<th>Source of Funds</th>
<th>Major Expense Items</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Government of Mandaluyong</td>
<td>Salaries, Utilities, Transportation, Infrastructure</td>
<td>P1,640,809.31</td>
<td>P2,105,612.06</td>
<td>P3,307,414.43</td>
</tr>
<tr>
<td>Partner NGOs through REACH Foundation</td>
<td>Allowances, Materials, Equipment, Office Supplies</td>
<td>P 1,111,253.12</td>
<td>P 835,561.88</td>
<td>P 229,928.78</td>
</tr>
<tr>
<td>Sub-Total</td>
<td></td>
<td>P 2,752,062.43</td>
<td>P 2,941,173.94</td>
<td>P 3,537,343.21</td>
</tr>
</tbody>
</table>

2. **Institutionalization of children’s rights**

To ensure the permanence of child-friendly projects as part of Mandaluyong’s programs, Ordinance Number 405, creating the Mandaluyong City Children’s Code was ratified in 2008. Through this ordinance, programs and projects for children will continue even if there is a change in administration of the City. Project TEACH is included in the ordinance under Section 27 (See Annex E for Mandaluyong Children’s Code). Likewise, Resolution No. 1348, S-2008 authorized the MOA to implement Mandaluyong’s Community Based Rehabilitation Program through Project TEACH. Further institutionalization of Project TEACH was achieved through protocols developed by partner agencies. Focal persons in each agency have been assigned to assist indigent families of children with special needs.

**Stakeholder collaboration**

The role of key stakeholders in the successful implementation of Project TEACH cannot be emphasized enough. Its cost-effective service delivery model will not function without the commitment of partner organizations and agencies. Furthermore, these partnerships are all formalized through a MOA to ensure accountability.

The inter-agency committee collaborates to continually develop guidelines and protocols that can improve the effectiveness of service delivery. For instance, the clustering scheme for inclusion and mainstreaming of children with special needs is one of the innovations for Project TEACH. Previously, parents based their choice of school on proximity, resulting in a heterogeneous class profile, making it difficult for the teacher to address the individual needs of students. Through Project TEACH, DepEd-Mandaluyong clustered public schools that offer Special Education to have more homogenous classes. In addition, every SPED school was assigned a specific specialty program. For instance, one school focuses on occupational skills, another in hearing impaired, functional areas, or regular academics. Through this scheme

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3 Ibid., p.5
teachers are able to manage the class well and address the specific needs of the children.

As mentioned, parents and community volunteers are likewise an essential part of service delivery. Their services help in minimizing operational costs. The commitment of experts such as the 3 developmental pediatricians who train the city doctors is also vital to the continuation of the project.
### Bottleneck Analysis

<table>
<thead>
<tr>
<th>Bottleneck Description</th>
<th>Enabling Environment</th>
<th>Supply</th>
<th>Demand</th>
<th>Quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy and SPED services are usually expensive.</td>
<td>There are only around 48 developmental pediatricians in the whole country. Limited number of professionals in the field of therapy and SPED services.</td>
<td>Poor families with children with special needs cannot afford to send their children to centers or facilities with therapy and SPED services.</td>
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</table>

<table>
<thead>
<tr>
<th>Policy/ Programme Intervention</th>
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<tbody>
<tr>
<td>Functional Local Council for the Protection of Children (LCPC) Mandaluyong City Children's Code (created through Ordinance Number 405) Resolution No. 1348, S-20098 authorizing the implementation of Mandaluyong’s Community-based Rehabilitation Program</td>
<td>Project TEACH – a community-based rehabilitation program for children with disabilities in Mandaluyong City, particularly those living in poverty-stricken areas. -teachers, DSWD volunteers, barangay health workers, and other volunteers</td>
</tr>
</tbody>
</table>
through Project TEACH
Provision of more than 50% of the LGU budget for the implementation of programs, projects, and activities for children
Provision of budget from the City government and DepEd's Special Education Fund and partner NGOs
MOA with UP-Manila and University of Santo Tomas
Partnership with private companies (Manulife and the Philippine-Australian grant facility)

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<tr>
<th>Indicators for Monitoring</th>
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<thead>
<tr>
<th></th>
<th>taught how to identify children suspected of having special needs</th>
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<tbody>
<tr>
<td></td>
<td>- establishment of the Center for Alternative Rehabilitation and Education Services</td>
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<td></td>
<td>- establishment of help desk at the City Social Welfare and Development Office</td>
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<td></td>
<td>- capacity-building for community members</td>
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<td></td>
<td>- additional manpower from UP-Manila and UST (interns)</td>
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<table>
<thead>
<tr>
<th></th>
<th>Number of children with special needs have availed of the community-based rehabilitation program</th>
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<tbody>
<tr>
<td></td>
<td>Number of people trained to assist in the provision of therapy services</td>
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<table>
<thead>
<tr>
<th></th>
<th>Children with special needs have shown progress during or after the provision of services</th>
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Lessons Learned as Child-Friendly City

The accolades bestowed on the City of Mandaluyong for its innovative child-friendly programs and projects are much appreciated and valued by the groups and individuals involved in their implementation. However, as expressed by the members of the LCPC, these awards and recognition are just “icing on the cake”. The most essential action is truly assessing the situation of children in the locality and thinking of ways on how to address problems or potential problems. For the LCPC, they did not think of the possible awards that they could get for implementing these programs. They underscore the importance of remaining committed to advocating children’s rights.

Mandaluyong’s LCPC demonstrates commitment by striving to accomplish the planned programs for children. Beyond their individual capacities and roles in the LGU, they deliberate on the interventions needed to address issues concerning children as a group. Often, they hold meetings beyond the usual work hours and sometimes for 5-6 times per month. Thus, time management is one of their biggest challenges. In addition, they emphasize that the involvement of the BCPCs in program implementation is a crucial element for success. They often visit the Barangays for the implementation of projects. The LCPC and BCPC exchange and share information on the approaches to undertake. Orientations for the BCPC Child Representatives are regularly done and these representatives are consulted regarding the type of programs they want to implement in their community. This guarantees that the interventions and projects being implemented truly address the needs of Mandaluyong’s children.

References

Mandaluyong CARES. (2011). Powerpoint Presentation on Project TEACH

Interviews with:
Mandaluyong CARES Therapist, October 2, 2014
Mandaluyong Social Worker, October 2, 2014
Bahay Tuluyan House Parent, October 2, 2014

Focus Group Discussions with:
Members of the Local Council for the Protection of Children, September 24, 2014
Representatives of REACH Foundation, September 24, 2014
ANNEX A: Project TEACH Inter-Agency Committee

**PROJECT TEACH**

**COMMITTEE MEMBERS AND CONSULTANTS**

**HON. MAYOR BENJAMIN C. ABALOS JR.**
City of Mandaluyong

**ABELARDO APOLLO I. DAVID, JR., MOCCTHY, OTRP**
Program Director, Project TEACH
President, REACH Foundation

### MEMBERS

**LOCAL GOVERNMENT DEPARTMENTS**

- **DR. PECOS C. CAMARINES**
  - Chief, City Health Department
- **MRS. TERESITA C. PILLAS**
  - OIC, City Social Welfare and Development Department
- **MRS. MERLINDA IBUSAG**
  - OIC, Day Care Service Program
- **DR. FLORENCIA C. DOMINGO**
  - Consultant, Department of Education, Mandaluyong City
- **MS. HELEN GRACE Y. GO**
  - OIC, Office of the Schools Division Superintendent
- **DR. ZALDY CARPESO**
  - Director, Mandaluyong City Medical Center
- **MRS. ERDELINDA DIAZ**
  - Division SpEd/IIE Coordinator
- **MRS. DERLINA LANZA**
  - Mandaung City Manpower Development Center
- **MS. WENNAG G. MARQUEZ**
  - OIC, Persons with Disability Affairs Division
- **MR. JIMMY ISIDRO**
  - Chief, Public Information Office
- **MS. KAREN JEOARHA M. BALLAD, PTPR**
  - Head, Mandaluyong C.A.R.E.S.

**NON-GOVERNMENT AGENCIES**

- **MS. DOMINIQUE G. MALING, OTRP**
- **MS. CHERRYL JOYCE G. DAGUMAN, PTPR**
  - Training and Service Coordinators, REACH Foundation, Inc.
- **MRS. ROSALIE B. ESCOTO**
  - Director, Hands of Mercy, Inc.
- **MS. MERCEDES CAPANANG**
  - President, Mandaluyong Federation of Parent-Teacher Association

**DEVELOPMENTAL PEDIATRICIANS:**

- **DR. JACQUELINE O. NAVARRO**
- **DR. MA. ANNA LOURDES A. MORAL**
- **DR. MARIZEL R. PULHIN-DACUMOS**
ANNEX B: Medical History Form

General Data:
Name: __________________________    Nickname: ________________
Date of Birth: ______________     Sex: 
Date of Consult: ____________
Corrected Age (if preterm): ___
Nationality: ________________
Address: ______________________________________________________________________
Phone/ Mobile Number: _______________________________

<table>
<thead>
<tr>
<th></th>
<th>Father</th>
<th>Mother</th>
<th>Guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Address</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Number</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Referral Source:
Name: __________________________
Profession: _____________________
Partner Agency: __________________
Contact Number: ________________

Reason for Referral/ Consult:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
## Background Information:

1. Has your child been seen and evaluated by other professionals prior to this visit?
   - ( ) Yes
   - ( ) No

2. If yes, please fill in the details:

<table>
<thead>
<tr>
<th>Name</th>
<th>Specialty</th>
<th>Age of Child When Seen</th>
<th>Diagnosis</th>
<th>Work-ups/Results</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

3. Has your child undergone any intervention?

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Where</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech Therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play Therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavior Therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Counseling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special Education</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Maternal History

Pregnancy length in weeks or months: __________
Maternal age at time of pregnancy: ____________
Paternal age at time of pregnancy: ____________

OB Score: G P ( )

Substances used during pregnancy:
- Cigarettes How many? _____ Duration? _____
- Alcohol
- Drugs

Please describe type of alcohol/drug, frequency of use, and at what time of pregnancy:
______________________________________________________________________
______________________________________________________________________

Pregnancy complications (i.e. bleeding, excessive vomiting, hypertension, etc.):
______________________________________________________________________
______________________________________________________________________
Delivery:
Type of labor:  (  ) spontaneous   (  ) induced
    If induced, specify reason: ______________________
Duration of labor: __________
Type of delivery:  (  ) vaginal   (  ) Caesarian (CS)
    If CS, specify indication: ______________________
Place of delivery:  (  ) home   (  ) hospital   (  ) clinic   (  ) others: __________
Anesthesia:
    o None
    o Local (epidural/spinal)
    o General
    o Others: __________

Check all that apply:
    o Forceps
    o Excessive blood loss
    o Multiple birth

Birth History
Birth Weight: _____ lbs. /kgs.
Birth Length: _____ cm.
Head Circumference: _____ cm.
# of days child stayed in the hospital following birth: _____
# of days mother stayed in the hospital following child’s birth: _____
APGAR score: _____
Were there problems during labor and delivery?  (  ) yes   (  ) no
    If yes, please elaborate: __________________________________________________

Neonatal History:
Check all those that apply:
    o Jaundice
    o Incubator
    o Blood Transfusions
    o Rashes
    o Respiratory problems (  ) given oxygen? Duration? ________
    o Birth defects: Specify: ________________________________
    o Other problems: ________________________________

Medical History
  1. What are your medical concerns about this child?
     ________________________________________________________________________
     ________________________________________________________________________
  2. Has this child received treatment for this problem? (  ) yes   (  ) no
  3. Is this child on any medication? (  ) yes   (  ) no
     If yes, list name of drug and dosage given on a daily basis: ______________________
How long has he been on medication? ___________________________________
Has this child experienced any problem while on medication? ________________
_______________________________________________________________________

Infancy and Childhood
Check all that apply. If yes, please specify.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colicky</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feeding problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sleeping problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restless</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hyperactive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did not enjoy cuddling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uncoordinated</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accident prone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speech not understandable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not toilet trained</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Odd behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head banging</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are there any problems/comments regarding this child’s infancy and early childhood development?
_______________________________________________________________________

Childhood Diseases
Check all those that apply:
- Asthma
- Respiratory infections
- Head injuries/fall
- Headaches
- Convulsions
  - Type of seizure: _________________
  - Onset of seizure: _______________
  - Medications: ___________________
  - Work-ups: _____________________
- Diarrhea
- Poisoning
- Ear infections
- Allergies
- Hospitalizations:
  ________________________________________________________________
- Emergency Room Consults:
  ________________________________________________________________
- Surgery:
  ________________________________________________________________
**Nutritional History:**
( ) breastfeeding  ( ) formula feeding  ( ) mixed
Started to eat solid food at: _____ month
Any feeding difficulties? ________
Present diet: __________________________________________________________

**Immunization History**
( ) BCG
( ) DPT1  ( ) DPT2  ( ) DPT3  ( ) DPT Booster
( ) OPV1  ( ) OPV2  ( ) OPV3  ( ) OPV Booster
( ) Hepa B1  ( ) Hepa B2  ( ) Hepa B3
( ) Measles  ( ) MMR
( ) Others ________

**Developmental History**

<table>
<thead>
<tr>
<th>Gross Motor</th>
<th>Approximate Age of Attainment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prone</td>
<td></td>
</tr>
<tr>
<td>Sits without support</td>
<td></td>
</tr>
<tr>
<td>Crawls</td>
<td></td>
</tr>
<tr>
<td>Pulls to stand</td>
<td></td>
</tr>
<tr>
<td>Walks alone</td>
<td></td>
</tr>
<tr>
<td>Runs</td>
<td></td>
</tr>
<tr>
<td>Ascends and descends stairs</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fine Motor</th>
<th>Approximate Age of Attainment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visual tracking</td>
<td></td>
</tr>
<tr>
<td>Reaches for objects</td>
<td></td>
</tr>
<tr>
<td>Holds bottle</td>
<td></td>
</tr>
<tr>
<td>Casting</td>
<td></td>
</tr>
<tr>
<td>Drinks from cup</td>
<td></td>
</tr>
<tr>
<td>Scribbles</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Receptive Language</th>
<th>Approximate Age of Attainment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turns to sound</td>
<td></td>
</tr>
<tr>
<td>Responds to name calling</td>
<td></td>
</tr>
<tr>
<td>Understands no</td>
<td></td>
</tr>
<tr>
<td>Commands with gestures</td>
<td></td>
</tr>
<tr>
<td>Commands without gestures</td>
<td></td>
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</tbody>
</table>
### Expressive Language

<table>
<thead>
<tr>
<th>Approximate Age of Attainment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Babbling</td>
</tr>
<tr>
<td>Discriminates mama, papa</td>
</tr>
<tr>
<td>Jargoning</td>
</tr>
<tr>
<td>Many intelligible words</td>
</tr>
<tr>
<td>2-word sentences</td>
</tr>
</tbody>
</table>

### Personal/Social

<table>
<thead>
<tr>
<th>Approximate Age of Attainment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Close open/ bye-bye</td>
</tr>
<tr>
<td>Eats with spoon</td>
</tr>
<tr>
<td>Toilet-trained</td>
</tr>
<tr>
<td>Dresses/ undresses</td>
</tr>
<tr>
<td>Helps in domestic activities</td>
</tr>
</tbody>
</table>

Rate of over-all development: ( ) slow  ( ) normal  ( ) fast

Does this child continue to have wetting accidents in bed? ( ) yes  ( ) no
Does this child continue to have soiling accidents in bed? ( ) yes  ( ) no
Does this child continue to have soiling accidents in clothing? ( ) yes  ( ) no

### Educational History

Has your child ever been in school? ( ) yes  ( ) no

If yes, please give details:

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Grade level</th>
<th>Age started</th>
<th>Type of program (SPED/regular)</th>
<th>Schedule/ Teacher: Student ratio</th>
<th>Performance</th>
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Did this child experience any problems in class? If yes, please elaborate.

Did this child fail any subjects? If yes, which ones?

Did this child repeat any grades? If yes, which ones and what were the reasons for repeating?

Is this child receiving any tutorials? If yes, please fill in the following:

<table>
<thead>
<tr>
<th>Subject</th>
<th>Age started</th>
<th>Frequency</th>
<th>Outcome</th>
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<tbody>
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</table>

Other school problems: ________________________________
**Family History:**

1. Child is living with: ________________________________________
2. Is the child adopted? ( ) yes ( ) no  
   If yes, age of adoption: __________
3. Status of parents’ marriage  
   ( ) married  ( ) divorced  
   ( ) separated  ( ) widowed  
   ( ) single parent
4. Other children

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Sex</th>
<th>Educational status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

5. Do other members suffer from a similar problem with hyperactivity, alcoholism, substance abuse or some other types of psychological, emotional, learning problem and/or neurological disorder, etc.?  

<table>
<thead>
<tr>
<th>Relationship to patient</th>
<th>Current age</th>
<th>Type of problem</th>
<th>Severity type of treatment</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

6. Mother’s personal history  
   Name: ________________________________________  
   Age: _______  
   Birth Date: ______________________  
   Birth place: ____________________  
   Educational Attainment: ________________________  
   Have you ever experienced any difficulties in school? If yes, please explain: ________________________  
   Did you repeat any grades or fail any subjects? If yes please specify. ________________________

**Previous work history**

7. Father’s personal history  
   Name: ________________________________________  
   Age: _______  
   Birth Date: ______________________  
   Birth place: ____________________  
   Educational Attainment: ________________________  
   Have you ever experienced any difficulties in school? If yes, please explain: ________________________
Did you repeat any grades or fail any subjects? If yes please specify.

Previous work history

PHYSICAL EXAMINATION

Anthropometric measurements (include percentiles)
- Weight
- Length/Height
- Head circumference
- Heart rate
- Respiratory rate
- Blood pressure

Describe findings (dysmorphisms, cutaneous stigmata, etc.)
- Head
- EENT
- Chest/Lungs
- CVS
- Abdomen
- Extremities
- Vision/Hearing

Neurologic Examination
- Mental Status Exam
  - Sensorium
  - Orientation
  - Attention
  - Affect
  - Level of activity
  - Language: Comprehension/Expression:
    - Verbal/Non-verbal:
  - Praxis
  - Gnosis
  - R/L Orientation
- Cranial Nerves I-XII
- Motor
- Sensory
- Cerebellar
- Autonomics
- Reflexes
  - DTRs
  - Pathologic Reflexes

**Present Profile:**
Developmental tool used:

<table>
<thead>
<tr>
<th>Skill</th>
<th>Approximate Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Motor</td>
<td></td>
</tr>
<tr>
<td>Fine Motor</td>
<td></td>
</tr>
<tr>
<td>Receptive Language</td>
<td></td>
</tr>
<tr>
<td>Expressive Language</td>
<td></td>
</tr>
<tr>
<td>Personal/Social</td>
<td></td>
</tr>
<tr>
<td>School Related Activities</td>
<td></td>
</tr>
</tbody>
</table>

**Observed Behavior:**

**Impression/Diagnostic Consideration:**

**Management:**

Examined by: ________________________________  
Developmental Pediatrician in-charge
**ANNEX C: Parent Report on Client Performance (Form)**

**PARENT REPORT ON CLIENT PERFORMANCE**

<table>
<thead>
<tr>
<th>Pangalan:</th>
<th>Edad: ___________ Kasarian: ___________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tirahan:</td>
<td>___________________________________</td>
</tr>
<tr>
<td>Numero ng Telefono:</td>
<td>____<strong><strong><strong><strong><strong><strong><strong><strong><strong><strong>/</strong></strong></strong></strong></strong></strong></strong></strong></strong></strong></td>
</tr>
<tr>
<td>Pangalan ng Magulang/Tagap-agala:</td>
<td>________________________</td>
</tr>
<tr>
<td>Petsa ng Initial Evaluation:</td>
<td>________________________</td>
</tr>
<tr>
<td>Tagal ng Pagteterapi/ Pagtanggap ng Serbisyo:</td>
<td>________________________</td>
</tr>
</tbody>
</table>

Magandang araw po! Upang matulungan kami na lalong mapabuti ang mga serbisyong aming ibinibigay sa inyong anak, kami po ay humihingi ng isang report mula sa inyo. Mangyari lamang pong pakisagutan ang mga katanungang naririto ng mabuti. Maraming salamat po!

I. Anu-ano ang mga problema na inyong napansin sa inyong anak na naging dahilan upang dalhin ninyo siyang dito sa center?

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</tbody>
</table>

II. Anu-ano ang mga serbisyo inyong natatanggap sa kasalukuyan? Pakilagyan ng √ ang lahat ng naangkop sa inyong anak.

<table>
<thead>
<tr>
<th>Service</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Therapy</td>
<td></td>
</tr>
<tr>
<td>Physical Therapy</td>
<td></td>
</tr>
<tr>
<td>Speech Therapy</td>
<td></td>
</tr>
<tr>
<td>Sped Bridging Program</td>
<td></td>
</tr>
<tr>
<td>Sped Tutorials</td>
<td></td>
</tr>
<tr>
<td>Pre-Voc Program</td>
<td></td>
</tr>
</tbody>
</table>

Dalas: Kadalasan, sa isang buwan gaano kadalas siyang pumapasok?

<table>
<thead>
<tr>
<th>Service</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>walang pagliban</td>
<td></td>
</tr>
<tr>
<td>lumiliban ng isang beses</td>
<td></td>
</tr>
<tr>
<td>lumiliban ng 2-3 beses</td>
<td></td>
</tr>
<tr>
<td>lumiliban ng 4-5 beses</td>
<td></td>
</tr>
<tr>
<td>lumiliban ng 6-7 beses</td>
<td></td>
</tr>
<tr>
<td>palagiang pagliban</td>
<td></td>
</tr>
</tbody>
</table>

III. Sino po ang pangunahing taga-pangalaga ng bata?

<p>| | |</p>
<table>
<thead>
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<th></th>
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</thead>
</table>

Ano po ang antas ng edukasyon ng pangunahing tagapangalaga?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
IV. May mga pagkakataon po ba para maisagawa o magamit din ang mga techniques na ginagamit sa inyong anak sa center sa ibang lugar maliban sa center? May pagkakataon din po bang maisagawa ang mga home program na itinuturo sa inyo dito?

☐ MERON  ☐ WALA

Kung meron, magbigay po ng mga halimbawa:

-----------------------------------------------------------------------------------------------------------------

-----------------------------------------------------------------------------------------------------------------

Kung wala naman po, ano po ang mga maaring nakahadlang para maisagawa ang mga ito?

-----------------------------------------------------------------------------------------------------------------

-----------------------------------------------------------------------------------------------------------------

V. Sa kasalukuyan, ang mga pangunahing kahinaan ng inyong anak bago magsimula ang terapi at/o SPED sessions ay:

1- Lubos na lumala
2- Bahagyang lumala
3- Walang pagbabago
4- Bahagyang bumuti
5- Lubos na bumuti

VI. Sa aking palagay, ang programang pangterapi at pang-edukasyon na ipinatutupad sa aking anak ay:

1- Lubos na hindi angkop
2- Hindi naaangkop
3- Naaangkop
4- Bahagyang naaangkop
5- Lubos na naaangkop

VII. Ang angking pangkalahatang saloobin sa mga programang ipinatutupad sa aking anak ay:

1- Lubos na hindi nagagalak
2- Hindi nagagalak
3- Nagagalak
4- Bahagyang nagagalak
5- Lubos na nagagalak
### ANNEX D: Annual Investment Plan

#### PROGRAMS FOR CHILDREN

<table>
<thead>
<tr>
<th>Program/Project/Activity Description</th>
<th>Target Beneficiaries</th>
<th>Implementing Office/Agency</th>
<th>Schedule of Implementation</th>
<th>Expected Outputs</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Public Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Service Sector</td>
<td></td>
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</tr>
<tr>
<td>Office of the City Mayor</td>
<td></td>
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<tr>
<td>10-1011</td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Education and Technology</td>
<td>Out of School Youths</td>
<td>Manpower and Youth Development Division</td>
<td>January - December</td>
<td>Manpower Bldg. Additional training facilities/College scholarships for deserving students</td>
<td>7,000,000.00</td>
</tr>
<tr>
<td>Health</td>
<td>Local Household Residents</td>
<td>MCMC</td>
<td>January - December</td>
<td>Lined up programs/projects implemented</td>
<td>2,707,992.00</td>
</tr>
<tr>
<td>Expansion of Mandaluyong City Medical center, more services and medicines in health centers, and MCMC.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>20,000,000.00</td>
</tr>
<tr>
<td>Immunization and family planning programs of Health Center</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase of equipment</td>
<td>City Health Office</td>
<td></td>
<td></td>
<td></td>
<td>1,300,000.00</td>
</tr>
</tbody>
</table>
### Detailed Programs/Project/Activity by Sector

**Budget Year 2013**
**City of Mandaluyong**

<table>
<thead>
<tr>
<th>AP REFERENCE CODE</th>
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<th>EXPECTED OUTPUTS</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Public Information Division</strong></td>
<td>17-1121 3. Prepares and monitors press releases in print and broadcast media. 4. Submits clippings/news articles about the city. 5. Provides video and photo coverages to various activities of the city involving children and family. 6. Monitor city projects. 7. Provides training workshop for student journalists.</td>
<td>Program Implementers Funding agencies</td>
<td>Public Information Division</td>
<td>January - December</td>
<td>Video presentation and documentation</td>
<td></td>
</tr>
<tr>
<td><strong>Civil Registry Department</strong></td>
<td>10-1051 1. In coordination with the national Statistic Office, conducts massive information campaign for the Civil registration program in Mandaluyong.</td>
<td>New born children</td>
<td>Civil Registry Department</td>
<td>January - December</td>
<td>100% registered births in the city</td>
<td>7,000,000.00 Gen. Fund Local Tax Revenue Civil Registry Appropriation</td>
</tr>
<tr>
<td></td>
<td>2. Transfers monthly record of birth, death, marriage and other registration documents including judicial decrees affecting civil status to the NSO.</td>
<td>Local Household/ Residents Families</td>
<td>Civil Registry Department</td>
<td>January - December</td>
<td>Civil registration records efficiently transmitted to NSO</td>
<td></td>
</tr>
</tbody>
</table>

### Detailed Programs/Project/Activity by Sector

**Budget Year 2013**
**City of Mandaluyong**

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<th>EXPECTED OUTPUTS</th>
<th>FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Civil Registry Department</strong></td>
<td>10-1051 3. Computerize the recording of civil registry documents covering vital events (birth, death, marriage) subject to the agreement between the LGU concerned and the OCPG (Office of the Civil Registrar-General).</td>
<td>Local Household/ Residents Families</td>
<td>Civil Registry Department</td>
<td>January - December</td>
<td>Efficient documentation, storage and retrieval of civil registry documents</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Conduct seminars, symposium, for a and other forms of information dissemination tackling the importance of Civil registration program in the country.</td>
<td>Local Household/ Residents Families</td>
<td>Civil Registry Department</td>
<td>January - December</td>
<td>Increased level of awareness of the community in the importance of civil registration</td>
<td></td>
</tr>
</tbody>
</table>
### Detailed Programs/Project/Activity by Sector
**City of Mandaluyong**

#### Budget Year 2013

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<tbody>
<tr>
<td>10-1013</td>
<td>1. Conduct researches and studies on problem affecting public order, security and safety and makes appropriate recommendations therein. &lt;br&gt;2. Undertakes physical security surveys on City owned installations. &lt;br&gt;3. Provide security and safety services to personnel, documents, city and other gov't owned installation.</td>
<td>Local Constituents</td>
<td>City Civilian Affairs and Security Department</td>
<td>January</td>
<td>December</td>
<td>Availability of reference materials on public order, security and safety. Regular monitoring and surveillances of city owned installations, personnel documents. City and other gov't owned installations properly secured.</td>
</tr>
<tr>
<td></td>
<td>Assistance to PNP</td>
<td>PNP Personnel</td>
<td>City Government</td>
<td>January</td>
<td>December</td>
<td></td>
</tr>
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#### Detailed Programs/Project/Activity by Sector
**City of Mandaluyong**

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<tr>
<td>Social Services</td>
<td>Offers free training in different vocational, technical and livelihood, namely: &lt;br&gt;Hard Courses (6 months) &lt;br&gt;a. Automotive Servicing &lt;br&gt;b. Building Wiring Installation &lt;br&gt;c. Caregiver &lt;br&gt;d. Computer Hardware Technician &lt;br&gt;e. Radio/TV Servicing &lt;br&gt;f. Refrigeration Aircon Servicing</td>
<td>Out of School Youths High School Graduate Other Local Residents</td>
<td>Marpower and Youth Development Training Division</td>
<td>January</td>
<td>June</td>
<td>Increased employment and livelihood opportunities to local labor force</td>
</tr>
<tr>
<td>Education and Manpower Development</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8,800,000.00</td>
</tr>
<tr>
<td>Manpower and Youth Development Training Division</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8,800,000.00</td>
</tr>
<tr>
<td>30-39951</td>
<td>Soft Courses (3 months) &lt;br&gt;a. Carpentry &lt;br&gt;b. Basic Computer Literacy &lt;br&gt;c. Beauty Care &lt;br&gt;d. Dressmaking &lt;br&gt;e. Food Processing &lt;br&gt;f. Hotel and Restaurant Services</td>
<td>Out of School Youths High School Graduate Other Local Residents</td>
<td>Marpower and Youth Development Training Division</td>
<td>January</td>
<td>December</td>
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### Detailed Programs/Project/Activity by Sector
#### City of Mandaluyong

**Budget Year 2013**

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<th>Expected Outputs</th>
<th>Funding</th>
<th>Source</th>
</tr>
</thead>
</table>
| Cultural Affairs, Tourism and Sports Development Department | Sports Activities/Events/Competition  
   a. Inter-Banggay Basketball Tournament  
   b. Alya Lakad  
   c. National Sports Events  
   d. Basic Swimming Lessons  
   e. Datang Pinoy Athletic Meet  
   f. Children Chorale Group  
   g. Ballet Phil for children | Local Youth Population  
   Culinaras Affairs Tourism and Sports Development Department | January  
   December | Sports development for younger population | 36,600,000.00 | Gen Fund, Local Tax Revenue, CATSDP Appropriation |

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<th>Schedule of Implementation</th>
<th>Expected Outputs</th>
<th>Funding</th>
<th>Source</th>
</tr>
</thead>
</table>
| City Health Department | A. Family Health  
   1. Family Planning  
   To provide young married couples within the reproductive age group to practice Responsible Parenthood and Family Planning | Local womens and their families  
   City Health Department | January  
   December | Number of women practicing a contraceptive method of choice, Contraceptive prevalence rate increased | 125,600,000.00 | Gen Fund, IRA (for salaries of devolved employees)  
   Local Tax Revenue  
   City Health Dept. Appropriation |
|                    | 2. Maternal Program  
   Provision of pre-natal services to pregnant mothers including tetanus immunization | Pregnant women and their children  
   0-18 mos children |                     | Percent of pregnant women provided with quality care, Maternal death reduced. | 1,800,000.00 |                     |
|                    | 3. Child Health  
   a. Expanded Program Immunization  
   Delivery of routine immunization services in the health centers |                     |                     | Number of 0-18 months old infants fully immunized, No mortality due to immunizable diseases | 3,430,000.00 |                     |
|                    | b. IYCF  
   c. IMCI |                     |                     |                           | 8,800,000.00 |                     |
<p>|                    |                     | 500,000.00 |                     |                           | 3,600,000.00 |                     |</p>
<table>
<thead>
<tr>
<th>AP REFERENCE CODE</th>
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<th>FUNDING</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Health Department</td>
<td>1. Capability building and training</td>
<td>Local health workers and Nutritionists/BIMS</td>
<td>Nutrition Office</td>
<td>January</td>
<td>Training, Seminar Orientation and Workshop conducted</td>
<td>500,000.00</td>
<td>Gen. Fund</td>
</tr>
<tr>
<td>40-4411</td>
<td>Capability building and training</td>
<td>Local health workers and Nutritionists/BIMS</td>
<td>Nutrition Office</td>
<td>January</td>
<td>Training, Seminar Orientation and Workshop conducted</td>
<td>500,000.00</td>
<td>Gen. Fund</td>
</tr>
<tr>
<td>40-4411</td>
<td>Planning, Monitoring Evaluation</td>
<td>Parents, BNS, BNGS, Daycare</td>
<td>Nutrition Office and City Council</td>
<td>July</td>
<td>Celebration of the Nutrition Month, Breastfeeding Month and Garansidad Pambata conducted</td>
<td>500,000.00</td>
<td>Gen. Fund</td>
</tr>
<tr>
<td>40-4411</td>
<td>Advocacy and social mobilization</td>
<td>Low income families and household</td>
<td>Nutrition Office</td>
<td>January</td>
<td>Priority Action of the Updated MTP/PLAN conducted and implemented</td>
<td>10,000,000.00</td>
<td>Gen. Fund</td>
</tr>
<tr>
<td>40-4411</td>
<td>Program, Project and Activities in Support of the Accelerated Hunger Mitigation Program</td>
<td></td>
<td>Nutrition Office</td>
<td>January</td>
<td>Priority Action of the Updated MTP/PLAN conducted and implemented</td>
<td>10,000,000.00</td>
<td>Gen. Fund</td>
</tr>
</tbody>
</table>

*Note: The text is not fully transcribed due to formatting issues.*
### DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR
#### City of Mandaluyong

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>City Health Department</td>
<td>40-4411</td>
<td><strong>1. Physical Development:</strong> 1. Purchased of the following BNS and Nutrition Supplies 2. Printer (HP desk D-2550) 3. Binding Machine</td>
<td>Nutrition Office</td>
<td>January</td>
<td>December</td>
<td>Number of targeted clients identified with dental cases</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>2. Dental Prevention and Treatment of Dental caries and periodical disease.</strong></td>
<td>All local household residents</td>
<td>January</td>
<td>December</td>
<td>Number of targeted clients identified with dental cases</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>3. Infectious Disease:</strong> 1. National Tuberculosis Program (NTP) Case Finding of TB patients through Sputum examination and treatment and follow-up of patient positive for Acid Fast Bacilli</td>
<td>Low income households and TB patients</td>
<td>January</td>
<td>December</td>
<td>Number of TB cases identified. Number of cases treated. Number of TB cases diagnosed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Rabies Prevention and Control Program Prevention on human rabies thru post-exposure immunization of animal bites</td>
<td>All local household residents</td>
<td>January</td>
<td>December</td>
<td>Number of animal victims vaccinated No death due to rabies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th>EXPECTED OUTPUTS</th>
<th>FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Health Department</td>
<td>40-4411</td>
<td><strong>3. Control of Diarrhea Disease (CDD): Immediate assessment and treatment of patients with diarrhea to prevent dehydration and death</strong></td>
<td>All local household residents</td>
<td>City Health Department</td>
<td>January</td>
<td>December</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>4. Control of Acute Respiratory Infection:</strong> Early diagnosis and management of pneumonia and other respiratory infections.</td>
<td>Household residents/families specially children 0-6 years old</td>
<td>January</td>
<td>December</td>
<td>Number of pneumonia cases detected early and given adequate treatment Deaths due to pneumonia in 0-6 yrs old reduced</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>5. Dengue Prevention and Control:</strong> Determination of larval index/mosquito density and institution of preventive measures.</td>
<td></td>
<td>January</td>
<td>December</td>
<td></td>
</tr>
</tbody>
</table>

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### Detailed Programs/Project/Activity by Sector

**City of Mandaluyong**

**Budget Year 2013**

#### Mandaluyong City Medical Center

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<tr>
<th>AIP REFERENCE CODE</th>
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<th>FUNDING</th>
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</thead>
</table>
| 40-4421            | Program, Targets and Activities following:  
1. Pediatric Infectious Ward – this ward further needs additional facilities and equipments as we would only expect an ever increasing demand for such care especially that the most common morbidity etiology of cases in a third world country is due to infectious conditions.  
2. Hospital Information System (HIS) – there is a need to acquire additional hardware for hospital computerization information system, reporting and logistical efficiency will be greatly improved and will contribute to the quality health care envisioned. As a part and parcel of the ongoing MandaCARES Hospitalization Program and to streamline all hospital recording system and update.  
Purchase of furniture, fixture and equipment. | Patients 0-18 years old  
Local residents and emergency cases | Mandaluyong City Medical Center | January | December | 96,080,000.00 | Gen. Fund  
Local Tax  
MCMC Appropriation |
|                    | 1,068,000.00 | 100% building and hospital equipment service fully maintained and improved | 23,380,000.00 |

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### Detailed Programs/Project/Activity by Sector

**City of Mandaluyong**

**Budget Year 2013**

#### Mandaluyong City Medical Center

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</table>
| 40-4421            | 3. Pulmonary Care Unit – just like the previous new projects mentioned this unit being new needs further improvement in its facilities by acquiring new equipments and supplies so that it could continue pulmonary care and therapy, respiratory conditions, being the most common cause of morbidity.  
4. Medical Pediatric Intensive Care Unit and Neonatal ICU – underwent improvement and expansion. With this change there will be a significant increase in the maintenance cost in so far as this hospital is concern. To also add equipments and facilities.  
5. In-Patients Wards – admission of patients Internal Medicine - Male/Female Ward, Pediatrics, Surgery, OB-Gyn, ENT  
6. Maintaining accreditation level of the following  
a. Department of Pediatric  
b. Department of OB-Gyne | Mandaluyong City Medical Center | January | December | 10,000,000.00 | Gen. Fund  
Local Tax  
MCMC Appropriation |
|                    | 2,700,000.00 | 1,000,000.00 |
### DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR

**Budget Year 2013**
**City of Mandaluyong**

#### Public Employment Service Division

**Reference Code:** 60-5900

**Program/Project/Activity Description:** Special Program for Employment of Students (SPES)

This program shall endeavor to provide employment to deserving students coming from poor families in the city during summer and/or Christmas vacation as provided under RA 7523 and its implementing rules, to enable them to pursue education.

**Target Beneficiaries:** High School graduates and College level students

**Implementing Office/Agency:** Public Employment Service Division

**Schedule of Implementation:**
- **Starting Date:** April
- **Completion Date:** June

**Expected Outputs:**
- No. of students registered
- No. of vacancies referred
- No. of students placed

**Funding:** 1,880,000.00
- Gen. Fund
- Local Tax Revenue
- PESOs
- Appropriation

#### Disabled Person Affairs Division

**Reference Code:** 70-1034

**Program/Project/Activity Description:**

1. Education
   - Evaluation of the present educational system (Spcial School, Therapy and Early Intervention) for Children with Disability
   - Institutionalization of formal and non-formal programs to uplift the educational capability of Person with Disability
   - Development of different seminars/ forum and symposia in the city and in the different barangays regarding the rights and services of PWDs

2. Advocacy
   - Advocacy and lobbying for City Council’s support and ordinances/resolution for the sector
   - Development of Barangay Based Coordinator that will serve as the focal person in their respective areas that will coordinate with our office regarding programs and services for PWDs

**Target Beneficiaries:**
- CWDS
- Other PWDs

**Implementing Office/Agency:**
- Disabled Person Affairs Division

**Schedule of Implementation:**
- **Starting Date:** January
- **Completion Date:** December

**Expected Outputs:**
- 100% of PWD clients provided with appropriate social services

**Funding:** 2,140,000.00
- Gen. Fund
- Local Tax Revenue
- DPAD
- Appropriation
### DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR

**City of Mandaluyong**

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<tr>
<td></td>
<td></td>
<td>CWOS and other PWDs</td>
<td>Disabled Person Affairs Division</td>
<td>January to December</td>
<td>Implemented and monitored accessibility law</td>
<td></td>
</tr>
</tbody>
</table>
| **Persons Affairs Division** 70-1034 | C. Accessibility  
1. Establishment of task forces to monitor the implementation of the Accessibility Law and the BP-344 and the Magna Carta for Disabled Persons  
2. Monitoring on proper implementation of Transport and Building Accessibility | Disabled Person Affairs Division |                 |                       |                  |                     |
|                    | D. Community Based Program and Organization  
1. Support in the establishment of different organizations for disabled persons in the city  
2. Establishment of the Community Based Rehabilitation Program  
3. Supervise and Monitors the establishment Community Base Rehabilitation centers in partnership with other institutions  
4. Establishment of the Community Based Program for the Elderly with Disabilities | CWOS and other PWDs | Disabled Person Affairs Division | January to December | Established and monitored community based program organization |                     |
|                    | E. Sports and Socio-Cultural Program  
1. Development of sports training for disabled persons  
2. Participation of disabled persons in local and national events  
3. Institutionalization of the different sporting events  
4. Development of theater groups for disabled persons | CWOS and other PWDs | Disabled Person Affairs Division | January to December | 100% active participation of PWDs in this activity |                     |

### DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR

**City of Mandaluyong**

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<tr>
<td></td>
<td></td>
<td>CWOS and other PWDs</td>
<td>Disabled Person Affairs Division</td>
<td>January to December</td>
<td>100% of WPD clients provided with employment livelihood entrepreneurial service</td>
<td></td>
</tr>
</tbody>
</table>
| **Disabled Person Affairs Division** 70-1034 | F. Employment-Livelihood Entrepreneurial Service Program  
1. Development of employment program that will lobby to different companies and establishment to include PWDs in their work force  
2. Establish different cooperative livelihood organization for the PWDs, parents, caregivers and volunteer in the City of Mandaluyong | Disabled Person Affairs Division |                 |                       |                  |                     |
## DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR

### City of Mandaluyong

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</tbody>
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### DETAILED PROGRAMS/PROJECT/ACTIVITY by SECTOR

#### City of Mandaluyong

<table>
<thead>
<tr>
<th>AIP Reference Code</th>
<th>Program/Project/Activity Description</th>
<th>Target Beneficiaries</th>
<th>Implementing Office/Agency</th>
<th>Schedule of Implementation</th>
<th>Expected Outputs</th>
<th>Funding</th>
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<tbody>
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</table>
### Detailed Programs/Project/Activity by Sector

**City of Mandaluyong**

#### Budget Year 2013

<table>
<thead>
<tr>
<th>AIP Reference Code</th>
<th>Program/Project/Activity Description</th>
<th>Target Beneficiaries</th>
<th>Implementing Office/Agency</th>
<th>Schedule of Implementation</th>
<th>Expected Outputs</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Local population and needs</td>
<td>Social Welfare and Development Department</td>
<td>January</td>
<td>December</td>
<td>Provided assistance to individuals in crisis situation</td>
</tr>
<tr>
<td></td>
<td>E. Assistance to Individuals in Crisis Situation (AICS)</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>1. Daily Services to Walk-in-Clients</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>F. Trainings/Seminars</td>
<td>ECCD workers and client children</td>
<td>Social Welfare and Development Department</td>
<td>January</td>
<td>December</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Disaster Management Seminar</td>
<td></td>
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<tr>
<td></td>
<td>2. Barangay Council for the Protection of Children (BCPC)</td>
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<tr>
<td></td>
<td>3. Psychosocial Intervention for Street Children / youth</td>
<td></td>
<td></td>
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<td></td>
<td>4. Skills Training for Livelihood Assistance</td>
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<td>5. Waste Management</td>
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<tr>
<td></td>
<td>6. Gender Sensitivity</td>
<td></td>
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<tr>
<td></td>
<td>7. Parent Effectiveness Service- PES</td>
<td></td>
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<tr>
<td></td>
<td>8. Pre-Marriage Counseling</td>
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</tr>
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<td></td>
<td>9. Staff Development</td>
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<tr>
<td></td>
<td>10. Basic Business Management Training - BMMT</td>
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<table>
<thead>
<tr>
<th>AIP Reference Code</th>
<th>Program/Project/Activity Description</th>
<th>Target Beneficiaries</th>
<th>Implementing Office/Agency</th>
<th>Schedule of Implementation</th>
<th>Expected Outputs</th>
<th>Funding</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Construction of:</td>
<td>Local residents/constituents</td>
<td>Engineering Department</td>
<td>January</td>
<td>December</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Maternity Hospital</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Martinez St., Brgy. Addition Hills</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Cemetery</td>
<td>Local residents/constituents</td>
<td>Engineering Department</td>
<td>January</td>
<td>December</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Environmental Sanitation Services</td>
<td>Local constituents, children and their families</td>
<td>Environmental Sanitation Services</td>
<td>January</td>
<td>December</td>
<td>Greening and Beautification in the city is maintained. Urban Forestry Parks and Playground</td>
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<tr>
<td></td>
<td>60-0521</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>1. Landscape in all target area</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>2. Keep Greening and Beautification of the Mandaluyong City</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>3. Provide Nursery in Mandaluyong Greening and Beautification Program</td>
<td></td>
<td></td>
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</tbody>
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**Note:**
- The Funding column includes the total cost and the source of funding.
- The sources include General Fund, Local Tax Revenue, and Engineering Dept. Appropriation.
<table>
<thead>
<tr>
<th>AIP REFERENCE CODE</th>
<th>PROGRAM/PROJECT/ACTIVITY DESCRIPTION</th>
<th>TARGET BENEFICIARIES</th>
<th>IMPLEMENTING OFFICE/AGENCY</th>
<th>SCHEDULE OF IMPLEMENTATION</th>
<th>EXPECTED OUTPUTS</th>
<th>FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandaluyong Housing and Development Board 80 6511</td>
<td>Landed Estate Project</td>
<td>Local constituents, children and their families</td>
<td>MHDB</td>
<td>January</td>
<td>December</td>
<td>Land for the landless constituency in all Brgy of this city</td>
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<tr>
<td></td>
<td>Medium Rise Condominium Units Project</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Information Technology Division 10-1012</td>
<td>E2G2 PROJECT</td>
<td>Local constituents, Information Technology Division</td>
<td></td>
<td>January</td>
<td>December</td>
<td>City Private Network accessible via wireless using smart gadgets or personal computers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>20,000,000.00 Gen. Fund Local Tax Revenue ITD Appropriation</td>
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### PROGRAMS FOR CHILDREN

**SUMMARY**

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
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<tbody>
<tr>
<td>General Fund</td>
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</tr>
<tr>
<td>A. GENERAL PUBLIC SERVICE</td>
<td>P/ 214,507,982.00</td>
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<tr>
<td>B. SOCIAL SERVICES</td>
<td>1,082,647,111.00</td>
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<tr>
<td>Sub-Total</td>
<td>1,297,155,093.00</td>
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<tr>
<td>Special Education Fund SOCIAL SERVICES</td>
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<td>290,541,515.00</td>
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<tr>
<td>Total</td>
<td>P 1,587,696,608.00</td>
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Prepared by: Engr. ARMAN COMANDAO City Planning and Dev't Coordinator

Prepared by: Ms. CORAZON DG RODRIGO City Budget Officer

Approved: Hon. BENJAMIN C. ABALOS, JR City Mayor
ANNEX E: Children’s Code of Mandaluyong

Republic of the Philippines
SA NGUNIANG PANLUNGSOD
City of Mandaluyong

CERTIFIED TRUE COPY

ORDINANCE NO. 405, S-2008
AN ORDINANCE CREATING A
MANDALUYONG CITY CHILDREN’S CODE
SA NGUNIANG PANLUNGSOD
CITY OF MANDALUYONG

BE IT ORDAINED, by the Sangguniang Panlungsod of Mandaluyong, in session assembled that:

CHAPTER I
GENERAL PROVISIONS

SECTION 1. TITLE. This Ordinance shall be known as the “Mandaluyong City Children’s Code”.

SECTION 2. DECLARATION OF POLICY. The Mandaluyong City Government hereby adopts and imposes policies and strategies that would establish and protect the rights of children. Their survival, protection, participation and development are given preferential consideration in all of its government programs. The City Government shall also endeavor to propagate the role of the family as the basic unit of society. It shall likewise work and establish strong partnerships with various private, non-government and people’s organizations that are genuinely concerned, willing and capable to work for the welfare of the children.

SECTION 3. COVERAGE. The provisions of this Ordinance shall govern all institutions, departments, offices and agencies that are under the supervision of the City Government of Mandaluyong. It shall also govern, without prejudice to existing laws, all persons, entities, private, non-government and people’s organizations that deal with children, their rights and any undertaking relative to a child’s development, survival, protection and participation.


SECTION 4. DEFINITION OF TERMS.

a. CHILDREN — shall refer to persons aged below eighteen (18) years or those over but not able to fully take care of themselves or protect themselves from abuse, neglect, cruelty, exploitation, or discrimination because of a physical or mental disability or condition;

b. SURVIVAL RIGHTS — pertain to the rights of children to adequate living standard and access to basic health services and social security;

c. DEVELOPMENT RIGHTS — pertain to the access of a child to education opportunities, access to relevant information, play, leisure, cultural activities and the right to freedom of thought and religion,
d. PROTECTION RIGHTS — pertain to the right to be free and protected from all forms of child abuse, exploitation, and discrimination;

e. PARTICIPATION RIGHTS — pertain to the child’s freedom to express himself in matters affecting his/her life as part of preparation for becoming a responsible citizen;

f. CHILD ABUSE — refers to maltreatment of the child, whether habitual or not which includes any of the following:

I. Psychologically and physical abuse, such as neglect, cruelty, abandonment and other forms of abuses;

II. Any act by deed or word which degrades, degrades, damages the intrinsic worth and dignity of a child as a human being;

III. Unreasonable deprivation of lesser basic needs of survival such as food and shelter;

IV. Failure to immediately give medical treatment to an injured child resulting to serious impairment of lesser growth and development or permanent incapacity or death.

g. Circumstances which gravely threaten or endanger the survival and normal development of children which include but not limited to the following:

I. Working under conditions hazardous to life, safety and morals which unduly interfere with their normal development or working without provision for their education;

II. Living in or finding themselves on the streets of urban and rural areas without the care of parents or guardian or any adult supervision needed for their welfare;

III. Living under conditions of extreme poverty or in an area which is undeveloped and/or lacks or has inadequate access to basic services needed for a good quality of life;

IV. Being with family members or guardians having grave psychological problems enough for them to commit incest, sibling rape, patricide acts and other forms of physical and mental abuse;

V. Being a victim of ease—made, or natural disaster or calamity;

VI. Being a victim of an illegal transnational or crime trafficking;

VII. Circumstances analogous to those above—stated which endanger the life, safety or normal development of children.

k. COMPREHENSIVE CHILDREN’S SUPPORT SYSTEMS ON CHILD ABUSE EXPLOITATION AND DISCRIMINATION — refers to the coordinated program of services facilities to protect children against child prostitution and other sexual abuses; child trafficking; disabilities; publications and indecent shows; other acts of abuse; and circumstances which threaten or endanger the survival and normal development of children or as prescribed by the UN Convention on the Rights of the Child;

l. ANTI-SOCIAL RELATED ACTIVITIES — are those acts against poverty, chrest and persons which include, but are not limited to the following:
I. Petty crimes such as snatching, shoplifting, misrepresentations;
II. Using and possessing prohibited drugs and other habit forming substances, selling illegal or low quality materials;
III. Prostitution for sexual perversion, doing or participating in obscene shows or performances;
IV. Gambling in any form;
V. page and trick; and
VI. Any other circumstances which are defined under other existing laws.

1. CHILDREN IN CONFLICT WITH THE LAW - is a youthful offender who is over fifteen (15) years but under eighteen (18) years of age and acting with discretion at the time of the commission of the offense as provided under Republic Act 9344.

k. HAZING - an initiation rite being conducted as a pre-requisite for admission as member is a fraternity, sorority or organization by placing the recruit, neophyte or applicant in an embarrassing or humiliating situation such as forcing him/her to do mental or physical or other similar tasks or activities or otherwise subjecting him/her to physical or psychological suffering or injury;

l. SCHOOL HOURS - refers to the time where elementary and high school pupils and students are supposed to be inside school premises;

m. LOITERING - staying in a particular place or commercial establishments like food chain, malls, etc. more than the usual or regular time needed to stay in such places during school hours;

n. ORGANIZATION, FRATERNITY, CONORDY, GANG ASSOCIATION - shall be defined as an organization which engages in hazing as initiation rites which inflict physical, psychological or mental harm to its members or others as a condition for acceptance in such an organization.

CHAPTER II
PROTECTION RIGHTS OF CHILDREN

SECTION 5. PROTECTION AGAINST CHILD PROSTITUTION AND OTHER SEXUAL ABUSE. Any person, group or syndicate who, for money, profit or any other consideration shall coerce or influence children to indulge in sexual activities are considered engaged in exploitation of children through prostitution and other sexual abuses. The following shall be deemed engaged in exploitation of children through prostitution and other sexual abuses, and shall be penalized accordingly:

a. Those who engage in or promote, facilitate or induce child prostitution in the City of Mandaluyong which includes, but are not limited to the following shall be imposed with the penalty prescribed in Section 5 of Republic Act 7610:

1. Acting as a procurer of a child prostitute by means of written or oral advertisements or other similar means;

2. Inducing a person to be a client of a child prostitute by means of written or oral advertisements or other similar means;
III. Entering into a relationship with or taking advantage of a child as a prostitute;

IV. Threatening or using violence towards a child to engage him/her as a prostitute or a participant in indecent acts;

V. Giving monetary consideration, goods or other pecuniary benefit to a child with the intent to engage such child in prostitution.

b. Those who derive profit or advantage therefrom, whether as manager or owner of the establishment where the prostitution takes place, or of the name, disco bar, place of entertainment or establishment serving as a cover or which engages in prostitution in addition to the activity for which the license has been issued for said establishment.

c. Those who commit the act of sexual intercourse or lascivious conduct with a child exploited in prostitution or subject to sexual abuse. Provided that when the victim is under twelve (12) years of age, the offender shall be prosecuted under Article 295 of the Revised Penal Code as amended by Republic Act 8353, for the crime of rape.

d. Those who shall hire, employ, use, persuade, induce or coerce a child to perform in obscene exhibitions and indecent shows, whether live or in video, pass or model in obscene publications or pornographic materials or to sell or distribute the said materials shall suffer the penalty provided under Section 9 of Republic Act 7610 (as amended “Special Protection against Child Abuse, Exploitation and Discrimination Act”).

e. Ascendant, guardian or person entrust in any capacity with care of a child who shall cause and/or allow such child to be employed or to participate in an obscene play, scene, act, movies or show or in any other obscene act shall be penalized in accordance with Section 9 of Republic Act 7610.

SECTION 6. PROTECTION AGAINST CHILD TRAFFICKING. Any person who shall engage in trading and dealing with children including, but not limited to, the act of buying and selling of a child for money, or for any other consideration, or for barter, shall suffer the penalty as prescribed in Article IV of Republic Act 7610.

An attempt to engage in Child Trafficking is committed under the guise of the following circumstances and situations and shall be punished accordingly:

a. When a pregnant mother, father or guardian executes an affidavit of consent for adoption for a consideration or in any manner that causes the registration of the birth of such child in the name of another with or without consideration;

b. Person, agency, establishment or child-caring institution recruits women or couples to bear children for the purpose of child trafficking;

c. When a doctor, hospital or clinic official or employee, nurse, midwife, local civil registrar or any other person simulates birth for the purpose of child trafficking;

d. When a person, authority, agency or institution witnesses but fails or refuses to report any transactions or acts to circumstances in child trafficking;

e. When a person engages in the act of finding children among low-income families, hospitals, clinics, nurseries, day care centers or other child caring institutions for the purpose of child trafficking.
SECTION 7. OBSCENE PUBLICATIONS, INDECENT SHOWS AND X-RATED OR LEWD SHOWS. Persons who hire, employ, use, persuade or coerce a child to perform in obscene exhibitions and indecent shows, whether live or in video, post or model in obscene publications or pornographic materials shall suffer the penalty as prescribed in Section 9 of Republic Act 7610.

SECTION 8. OTHER ACTS/FORMS OF CHILD ABUSE, NEGLECT, CRUELTY OR EXPLOITATION AND OTHER CONDITIONS PREJUDICIAL TO A CHILD’S DEVELOPMENT.

a. Any person who shall commit any other acts of child abuse, cruelty or exploitation or be responsible for other conditions prejudicial to the child’s development including those covered by Article 59 of P.D. 603 as amended but not covered by the Revised Penal Code, as amended, shall suffer the penalty provided under Section 7 of Republic Act 7610.

b. Any person who shall use, coerce, force or intimidate a street child or any other child to conduct any illegal activities shall suffer the penalty provided under Section 10 (g) of Republic Act 7610. The victim of the acts committed under this section shall be entrusted to the care of the local OWWA Officer.

c. Any forms of brutality committed against children by police authorities shall be penalized under the provisions of the Revised Penal Code, Republic Act 7610, and other existing laws without prejudice to the filing of complaint before the People’s Law Enforcement Board (PLEB).

SECTION 9. SANCTIONS ON ESTABLISHMENTS OR ENTERPRISES WHICH PROMOTE, FACILITATE, OR CONDUCT ACTIVITIES CONSTITUTING CHILD PROSTITUTION AND OTHER SEXUAL ABUSE, CHILD TRAFFICKING, OBSCENE PUBLICATIONS AND INDECENT SHOWS. All establishments or enterprises which promote, facilitate, or conduct activities constituting child prostitution and sexual abuse, child trafficking, obscene publications and indecent shows and other acts of abuse shall be immediately closed/paused and their authority or license to operate shall be cancelled, without prejudice to the owner and/or manager thereof being prosecuted under existing laws.

Any persons or and/or business establishments or even owners of private dwellings that sell, facilitate, promote, publish, show or exhibit, manufacture or reproduce adult/pornographic pictures, magazines, books and any form of publications, videos (DSS, VCDs, VHS Cassette tapes), illicit and lewd/obscene shows and/or x-rated movies to minors shall be subjected to confiscation of obscene materials and closure of establishment, without prejudice to their prosecution under other existing laws.

SECTION 10. EMPLOYMENT OF CHILDREN.

1. Employment of children below fifteen (15) years of age shall not be allowed in the City of Mandaluyong except:

a. When a child works directly under the sole responsibility of his parents or legal guardian and when only members of the employer’s family are employed. Provided, however, that his employment neither endangers his life, safety, health and morals, nor impedes his normal development; Provided, further, that the parent or legal guardian shall provide the said minor child with the prescribed primary and/or secondary education; or
b. Where a child’s employment or participation in public entertainment or information through cinema, theater, radio or television is essential. Provided that employment contract is concluded by the child’s parents or legal guardian with the express agreement of the child concerned, if possible, and the approval of the Department of Labor and Employment; and Provided that the following requirements in all instances are strictly complied with:

I. The employer shall ensure the protection, health, safety, morals and normal development of the child;

II. The employer shall institute measures to prevent the child’s exploitation or discrimination taking into account system and level of remuneration and the duration and arrangement of working time; and

III. The employer shall formulate and implement, subject to the approval and supervision of competent authorities, a continuing program for training and skills acquisition of the child.

c. The employer shall register the child employee with the Mandaluyong Council for the Welfare of Children and Family Concerns and shall seek the approval of the DSWD and the local DSWD Officer to ensure that the benefits and protection measures shall be accorded to the child.

2. No person or operator of transportation vehicle such as triecikas, jepney, pedicabs and taxis shall employ or allow minors as driver thereof. Those who will violate this provision shall suffer the penalty under existing laws and cancellation of the Certificate of Public Convenience (taxi hack) to operate public transportation.

3. No person shall employ a child to model in all forms of commercial or advertisements promoting alcoholic beverages, intoxicating drinks, tobacco and its by-product, junk foods and violence. Any person who shall violate any provision of this Section shall suffer the penalty prescribed in Republic Act 7840.

4. Persons who hire, employ, use, persuade or coerce a child to perform in obscene exhibitions and indecent shows, whether live or in video, pose or model in obscene publications or pornographic materials shall suffer the penalty as prescribed in Section 9 of Republic Act 7840.

5. Any persons who shall use, coerce, or force or intimidate a street child or any other child to beg or use begging as a means of living shall be penalized under Section 10 (a) of Republic Act 7840. Children found to be begging shall be rescued and brought to the custody of the City Department of Social Welfare and Development Office for proper treatment and care while parents of these children will undergo counseling and responsible parenting formation.

CHAPTER III
PROTECTION MEASURES ON MINORS

SECTION 11. CURFEW ON MINORS. For the protection of minors, they are prohibited from tolerating in public places or moving outside their residences between the hours of 10:00 o'clock in the evening and 6:00 o'clock in the morning. Should there be a necessity for them to be outside their residences during curfew hours, they should be accompanied by their parents, responsible elders or guardians, otherwise, they shall secure a curfew pass as prescribed by Section 8 of the City Ordinance No. 034, S-2009.
Offenders found to be under the influence of liquor or illegal drugs and/or is causing harm, alarm and terror to himself or others shall be temporarily held under the custody of the Barangay until the child offender is sober, calms down and ready to be sent home. Concerned parent or guardians of the minor shall be immediately summoned before the Barangay Council for the Protection of Children (BPC) for orientation and counseling.

EIGHT (8) hours of community service with two (2) hours of lecture and counseling on parents effectiveness shall be imposed on the child’s parent/guardian found to have violated this City Ordinance No. 264, 6-2006.

SECTION 12. LOITERING DURING SCHOOL HOURS. Students or school children are banned from loitering in public places outside their school grounds/campus during school hours unless they are accompanied by their parent/legal guardian or are attending an official school function or activity. Students and/or school children who will be caught loitering in public places outside their school grounds/campus during school hours shall be sanctioned as follows:

a. 72 hours of orientation on social concerns and community service and counseling.

b. Concerned parent or guardian shall be notified and be required to attend parent’s orientation seminar and community service for 72 hours in their respective barangays.

c. Concerned schools of students found loitering shall be immediately notified by the aprehending officers for its information and appropriate action.

Commercial Establishments which offer and promote vices such as but not limited to video arcades, bars, amusement centers and gambling places to school children during school hours shall be subjected to closure/revocation of business permit and confiscation of black gadgets, equipment, machines and other paraphernalia.

SECTION 13. FRATERNITIES AND GANGS. No person shall force, cause, bully or deceive any juvenile into joining any organization, fraternity, sorority, gang or association involved in unlawful activities or any deviant activities such as but not limited to vandalism, violence and sexual perversion. Any person who shall force, cause, bully or deceive any minor/juvenile into joining any organization, fraternity, sorority or gang within the campus or outside the school grounds shall be sanctioned with one (1) month of community service or twelve (12) months imprisonment or both without prejudice to his/her/their prosecution under Republic Act 8049.

Failing or initiation rites are discouraged. If not regularized, conforming with Republic Act 8049, an “Act Regulating Hazing and Other Forms of Initiation Rites in Fraternities, Sororities and Other Organizations and providing Penalties Therefor”.

SECTION 14. SMOKING BAN ON MINORS. It shall be unlawful for any person or establishment to sell cigarettes, other tobacco products to minors within the City of Mandaluyong. Violators shall be penalized as follows:

<table>
<thead>
<tr>
<th>Type of Offense</th>
<th>Fine</th>
</tr>
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<tbody>
<tr>
<td>First offense</td>
<td>P200.00</td>
</tr>
<tr>
<td>Second offense</td>
<td>P500.00</td>
</tr>
<tr>
<td>Third and succeeding offenses</td>
<td>P2,000.00 and closure of business establishment and revocation of business permit</td>
</tr>
</tbody>
</table>
SECTION 15. MINORS ARE BANNED FROM BUYING VOLATILE SUBSTANCE SUCH AS RUGBY (TOLENE) AND OTHER SIMILAR SUBSTANCES DEFINED AND ENUMERATED UNDER SECTION 1 OF P.D. 1619. Any person who sells or allows the selling of rugby (Tolene) and other habit inducing solvents to minors shall be penalized under Section 3 of P.D. 1619 and closure of the establishment selling the aforesaid substances to minors and revocation of its business permit.

SECTION 16. MINORS ARE BANNED FROM ENGAGING IN ANY FORM OF GAMBLING. Any person or establishment who allows minors to engage in any form of gambling shall be penalized by revocation of their permit to operate without prejudice to their being prosecuted under P.D. 1606 as amended by Republic Act 8207.

Establishments authorized to operate lottery such as lotto and other games such as Bingo and Horse Racing (off-track) betting stations are prohibited from accepting bets from minors. Violators shall be punished by closure of the establishment plus revocation of its business permit.

SECTION 17. PROHIBITION ON TRICYCLE AND PEDICAB OVERLOADING UTILIZED AS SCHOOL SERVICE FOR CHILDREN. As child's welfare and safety are the primary objectives of this ordinance, it is hereby prohibited the overloading of children passengers in tricycles and pedicabs or utilize such as school service for children. This practice endangers the lives of the students, the driver as well as ordinary passers-by. The said prohibited act shall be penalized accordingly by regulations set forth by the Tricycle Regulation Office and Traffic and Parking Management Office.

CHAPTER IV
SURVIVAL AND DEVELOPMENT RIGHTS OF CHILDREN

SECTION 18. EARLY CHILDHOOD PROGRAM FRAMEWORKS. The Local City Government of Mandaluyong shall ensure up to the maximum extent possible the survival and development of the child. The program on survival and development shall include the following:

a. Monitoring of registration of births and completion of the immunization series for prevention of tuberculosis, diphtheria, pertussis, tetanus, measles, polio myelitis and such other diseases for which vaccines have been developed for administration to children up to six (6) years of age;

b. Growth and nutritional monitoring with nutritional feeding and supervision of nutritional intake through community visitations of Barangay Nutrition Council (BNC) and Barangay Health Workers (BHIs);

c. Material and network of surrogate parents—teachers who will provide intellectual and mental stimulation to children, as well as supervised wholesome recreation, with a balanced program of supervised play, mentally-stimulating activities, and group activities with peers;

d. Working closely with non-government organizations (NGOs) and private institutions which can provide or serve a sanctuary for abused, neglected or exploited children which will take in children in urgent need of protection due to a situation which endangers the child or which has exposed the child to cruelty and abuse.
e. A Reproductive Health Care Center for pregnant mothers for prenatal and neominal care and, in the proper case, for delivery of the infant under conditions which will remove or minimize the risk to the mother and child.

f. Day Care Centers with adequate facilities shall be established in every Barangay. A Barangay-level network of assistance from the nurses of the Barangays for the total development and protection of children shall assist the social workers and Day Care Center teachers in implementing the programs for the children.

SECTION 19. PROMOTION OF PRIMARY HEALTH CARE PROGRAM. The Barangay Health Centers shall implement the primary health program. Each Barangay Health Center shall have a Barangay Child Health Officer tasked to monitor child health in the Barangay level with a salary commensurate to the task assigned and in accordance with the standards of the Civil Service Commission.

The City Health Officer of Mandaluyong shall take the following appropriate measures:

a. To combat diseases and malnutrition within the framework of primary health care;

b. To establish a Comprehensive Parental Orientation Development Program which includes courses on reproductive health, child health and child rearing practices, and family planning in the context of the Filipino psychology and culture;

c. To monitor the full implementation of Executive Order 51 or the Milk Code of the Philippines and advocate the prosecution of milk firms which violate the same;

d. To conduct massive information and education on breast feeding, utilizing existing materials for effective breast feeding education program;

e. The City shall advocate for the implementation of Nursing Station within the workplace for both private and government establishments;

f. All health practitioners dealing with child health in government and private hospitals and other institutions shall be required to complete a Comprehensive Training Course in Child Health Care.

SECTION 20. PROMOTION OF NEW BORN SCREENING PROGRAM. The City shall implement a new born screening program to ensure that every newborn has access to new born screening for certain inborn condition that can result to mental handicap, serious health complications or death if left undetected and untreated. In conformity with the provisions of Republic Act 7653 or the New Born Screening Act of 2004. This program on newborn screening shall include the following:

a. All children born in public and private lying-in clinics, public and private hospitals and homes must undergo newborn screening test within the first eight (8) hours after birth, but not later than three (3) days from the complete delivery of the newborn.

b. The administration of the New Born Screening Test to babies whose parents are indigent residents of the City and born at the Mandaluyong City Medical Center (MCOC), in any lying-in and health centers of the City shall be given free, upon presentation of a Family Access Card or a Certification from the Local DSWD of their indigency.
4. A Reproductive Health Care Center for pregnant mothers for prenatal and neonatal care and, in the proper case, for delivery of the infant under conditions which will remove or minimize the risk to the mother and child;

5. Day Care Centres with adequate facilities shall be established in every Barangay. A Barangay-level network of assistance from the adults of the Barangay for the total development and protection of children shall assist the social workers and Day Care Center teachers in implementing the programs for the children.

SECTION 19. PROMOTION OF PRIMARY HEALTH CARE PROGRAM. The Barangay Health Centres shall implement the primary health program. Each Barangay Health Center shall have a Barangay Child Health Officer tasked to monitor child health in the Barangay level with a salary commensurate to the task assigned and in accordance with the standards of the Civil Service Commission.

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SECTION 20. PROMOTION OF NEW BORN SCREENING PROGRAM. The City shall implement a new born screening program to ensure that every newborn has access to newborn screening for certain inborn errors that can result to mental-handicap, serious health complications or death if left undetected and untreated in conformity with the provisions of Republic Act 9888 of the New Born Screening Act of 2004. The program on newborn screening shall include the following:

a. All children born in public and private lying-in clinics, public and private hospitals and homes must undergo newborn screening test within the first forty-eight (48) hours after birth, but not later than three (3) days from the complete delivery of the newborn;

b. The administration of the New Born Screening Test to babies whose parents are indigent residents of the City and born at the Mandaluyong City Medical Center (MAMC), or in any lying-in and health centers of the City shall be given for free, upon presentation of a Family Access Card or a Certification from the Local DSWD of their indigency.
c. All children of Mandaluyong residents who are born outside of the City must also undergo a newborn screening test.

d. Any health practitioner in the City of Mandaluyong who delivers and assists in the delivery, or a new born shall, prior to deliver, inform the parents or legal guardian of the newborn of the availability, nature and benefits of newborn screening.

e. The City Health Department shall conduct continuing information, education re-education and training program for health personnel on the rationale, benefits, procedures of newborn screening.

f. Any parent or legal guardian who refuse to subject their newborn to a screening on a valid or religious grounds and believes that refusal for testing will prevent early detection of the child's disability that may manifest on onset of the developmental age of the child. A copy of this refusal documentation shall be made part of the newborn's medical record and said refusal shall be indicated in the national newborn screening database.

g. The amount of Three Million Five Hundred Thousands Pesos ($3,500,000.00) shall be set aside in the Budget Appropriation of the City annually to be spent in the program of the newborn screening.

SECTION 21. CHILD-FRIENDLY HOSPITALS/CLINICS IN MANDALUYONG CITY. All hospitals in Mandaluyong City shall set up child-friendly units to include rooming-in facilities and pediatrics-appropriate mechanisms and gadgets accessible and affordable to poor families.

Hospitals, clinics and other health-related institutions providing health treatments shall, within forty-eight (48) hours from knowledge of any case of child maltreatment, abuse or exploitation, submit a report in writing to the City Department of Social Welfare and Development (DSWD) Office and the Women and Children’s Desk of the Mandaluyong Police. These agencies are required to conduct an investigation and appropriate action necessary to protect the child from maltreatment, abuse and exploitation.

SECTION 22. INFANT AND YOUNG CHILD FEEDING (YCF) PRACTICES. In support to the ‘Bright Child’ Program pursuant to Executive Order 266 and in actively implementing its programs, the City hereby strengthens every health service provider in its implementation of the Infant and Young Child Feeding practices covering the whole health sector, whether government or private, including professional groups and private sectors. Every health service providers shall implement the following objectives of Infant and Young Child Feeding (YCF):

a. To improve the survival of infants (aged 0-11 months) and young children (1 year up to 3 years old) by improving their national status, growth and development through optimal feeding through early initiation of breast feeding, exclusive breast feeding for six (6) months, and extended breast feeding up to two (2) years and beyond.

b. That all infants are given timely, adequate and safe complementary foods, micronutrient supplementation, implementation of salt iodization and food fortification.

c. To strengthen and support health service providers in providing support systems to make all means necessary available to mothers who breast feed their young under difficult circumstances such as, but not limited to, natural human induced calamities, mothers with malnourished infants with low birth weight, mothers with transmissible diseases such as HIV and others.
d. To advocate continued training for promoting, protecting, support and improving infant and young feeding in all aspects of human life.

CHAPTER V
PARTICIPATION RIGHTS OF CHILDREN

SECTION 23. PARTICIPATION OF CHILDREN IN DECISION-MAKING PROCESSES.
Article 12 of the Convention on the Rights of the Child states that children have the right to participate in decision-making processes that may be relevant in their lives and to influence decisions taken in their regard—within the family, the school or the community. It shall be the responsibility of adults especially that in the local government to provide opportunities and venues for children to express their views or ideas on matters concerning their development and welfare. In this regard, the local government offices involved in policy formulation are mandated to ensure that the children sectors are properly represented during deliberations, consultations, and formulation of policies relevant to children’s development and welfare.

SECTION 24. STATE OF THE CHILDREN’S REPORT. As embodied in Article 12 paragraph 2 of the Convention on the Rights of the Child, Children’s Congress or the State of the Children’s Report shall be an avenue for children to be heard and be assessed of all children-related policies and programs done by the City. Every NGO’s concerned with children shall be instrumental in the process of the preparation and evaluation of the Convention. It shall be held every October during the celebration of Children’s month.

CHAPTER VI
REHABILITATION AND SUPPORT SYSTEM

SECTION 25. INSTITUTIONALIZING THE “BAHAY TULIYAN” OR CRISIS CENTER FOR WOMEN AND CHILDREN WHO ARE VICTIMS OF DOMESTIC VIOLENCE AND ABUSE. The “Bahay Tulayen”, established and existing since 2002, shall serve as crisis center for women and children who are victims of domestic violence. It shall be tasked to provide the following:

a. To provide temporary shelter and basic services to abused children and women;
b. To network with non-government organizations and government agencies for the provision of the needed medical, psycho-social, and legal services necessary in restoring/building the self-esteem of its clients;
c. To encourage and build the capacities of abused children and women to come into the open and pursue cases in court whenever they are ready;
d. To provide life skills and livelihood training to abused children and women while in the center to enable them to be productive and as a form of therapy;
e. To provide livelihood assistance and placement to abused children and women who are ready to be reintegrated with their families and communities;
f. To conduct a province-wide education and advocacy program aimed at raising public awareness on the evils of child abuse and domestic violence, and a massive information dissemination on the rights of children and women.
SECTION 26. SUPERVISION AND FUNDING. The said center shall be under the supervision and operation of the Department of Social Welfare and Development of the City of Mandaluyong and to the Gender and Development Fund where it derives its support, operational needs and other budgetary requirements.

SECTION 27. PROGRAMS FOR DIFFERENTIALLY-ABLED CHILDREN. The local City Government of Mandaluyong shall institutionalize and strengthen the programs of Project T.E.A.C.H. which aims to give focus and priority to the various needs of children with disabilities. The Disabled Persons Affairs Division with the help of the OSWD shall likewise make a periodic comprehensive survey on the differently-abled children in the City and shall implement a program for them that is child-focused and appropriate for children with special needs.

SECTION 28. MONITORING, EVALUATION AND ASSISTING PROGRAMS FOR CHILDREN AND OUT-OF-SCHOOL YOUTHS. Monitoring and Evaluation is essential for program and goal setting towards children welfare. This shall be the basis of fund allocation and further improvement of a particular program. Programs for early childhood stage and youth are as follows:

a. The City Government of Mandaluyong shall endeavor to utilize and avail of alternative education program sponsored by the Bureau of Alternative Learning System of the Department of Education (Deped). Likewise, it shall pursue tie-ups and partnerships with other private institutions that can and are willing to provide trainings, scholarship grants and other programs for the well-being of the out-of-school youths of Mandaluyong, including livelihood programs that will help them secure part-time employment or allow them to venture into part-time businesses which can help them sustain their education on their own.

b. Subject to existing national laws governing education, labor and employment, the City Government of Mandaluyong shall endeavor to constitute laws and decrees that will allow flexibility to working out-of-school youth (OSY) and provide a "work and study" environment conducive to the continuance of their education.

c. Conduct of a yearly census shall monitor the decrease or increase of the number of out-of-school youths (OSY) in the communities, and shall serve as data-basis to determine appropriate programs that would harm them out.

d. To avoid further incidence of unregistered births, the Civil Registry of the City of Mandaluyong shall conduct a community outreach program or any activity at least twice a year to all barangays to inform, monitor and register all unregistered births of every child.

e. Through the collective efforts of the Nutrition Council and City Health Office, to conduct the necessary programs and activities such as computerized data-banking, group-counselling, house to house interviews and the likes, in order to monitor and make sure that all children below 6 years of age are properly immunized and health records are well-kept and organized for future health reference of the child.
SECTION 29. CREATION OF THE LOCAL COUNCIL FOR THE PROTECTION OF CHILDREN (LPC). The City shall create a Local Council for the Protection of Children and coordinate with the barangays in the creation and organization of the Barangay Council for the Protection of Children (BCPC) at the barangay level. This is in keeping with the mandate of the LGU to coordinate the formulation, implementation and enforcement of all policies, programs, and projects relative to the survival, development and protection of children of the City Council.


It shall plan and implement programs and services for children by virtue of the LGU's power and authority to plan and implement local social-economic development plans, policies, and programs.

SECTION 30. COMPOSITION AND FUNCTION OF THE LOCAL COUNCIL FOR THE PROTECTION OF CHILDREN.

a. Members of the Local Council for the Protection of Children (LPC) shall include the following agencies/units or offices, and other agencies it deems important depending on the current specific situation or problems of the locality:

1. The City Mayor;
2. The Chairperson of the Sangguniang Panlungsod Committee on Women, Men, Children, and Family Affairs;
3. The City Planning and Development Coordinator;
5. The City Health Officer;
6. The City Schools Division Superintendent;
7. The City Prosecutor or the City Public Attorney's Office;
8. The President of the City Federation of the Sangguniang Kabataan (SK);
9. Two (2) People's Council representatives;
10. One (1) child representative;
11. The President of the Liga ng mga Barangay (LMB);
12. A member of the Local Finance Committee;
13. A representative of the City Local Government Operations Officer of the Department of the Interior and Local Government (DILG);

b. The Local Council for the Protection of Children (LPC) shall have the following functions:

1. To formulate the city plan of action for children, incorporating projects and programs needing assistance submitted by their constituent barangays; and ensure the integration of these plans into the City Development Plan;
II. To review and integrate the city programs and projects needing assistance into the City Comprehensive Program for Children;

III. To monitor and evaluate the implementation of the barangay and city plans and programs;

IV. To submit quarterly status reports on the implementation of the City Comprehensive Program for Children through the City Development Council (CDC);

V. To recommend policies and programs to the CDC;

VI. To provide the necessary technical assistance to the city and barangay councils it called for;

VII. To advocate for the passage of relevant child and youth protective ordinances;

VIII. To advocate for increased support and resource allocation for children's programs and projects from city government and secure resources for the same from other sources;

IX. To provide technical assistance to the community-based frontline workers through the conduct of capability building and human resource development activities;

X. To prepare contingency measures to protect children and their families in crisis brought about by the natural and human-made calamities; and

XI. To identify and recommend programs and services to be contracted for implementation by NGOs and other entities in the implementation of this Code.

c. TECHNICAL WORKING GROUP. The Council shall act as the keystone of the Council in the data-gathering, monitoring, evaluation and coordination of programs to various related agencies and to the Members of the Council. It shall be headed by a Program Coordinator to be identified by the Council with the approval of the Chairman.

d. INTERNAL RULES AND REGULATION OF THE LOCAL COUNCIL FOR THE PROTECTION OF CHILDREN (LCPC). The Local Council for the Protection of Children (LCPC) shall adopt its own Internal Rules of Procedures and Regulations to serve as guidelines for the Members in the discharge of their official functions such as the organization's structure, parliamentary procedure, order of meeting and quorum, discipline and other rules the Council may adopt.

e. OPERATIONAL BUDGET. An operational budget for the Local Council for the Protection of Children (LCPC) shall be allocated from the Gender and Development Fund of the City as mandated by Republic Act 7165.

f. Secretariat support shall be provided by the Office of the City Social Welfare and Development or any appropriate office. The secretariat shall be responsible for the documentation of proceedings of meetings and preparation of the reports and other necessary documents as needed by the Council.

SECTION 31. THE BARANGAY AND THE BARANGAY COUNCIL FOR THE PROTECTION OF CHILDREN (BCPC). The Barangay Council shall create a Barangay Council for the Protection of Children (BCPC), the composition of which shall be determined by the former depending on the needs and circumstances in the area. The BCPC shall have the following functions:
a. The functionality of every Barangay Council for the Protection of Children (BCPC) in all Barangays shall be strengthened.

b. As spearheaded by the Barangay Council for the Protection of Children (BCPC), every barangay shall advocate, support and uphold every right of the child.

c. Shall allocate space for recreation and provide recreational facilities appropriate for children’s gender and age in every Barangay.

d. Every barangay shall establish a Women-Children’s Desk and appoint a qualified, child-friendly and gender-sensitive officer knowledgeable in handling cases involving children. The Women-Children’s Desk shall primarily, among any other, protect and assist abandoned, maltreated and abused children and facilitate their cases filed against child abusers.

e. In support of the socio-cultural development of children in Mandaluyong City, the Local Government shall invest in the protection of local children’s literature or other relevant materials. Hence, all barangays shall create their respective public libraries or computer rooms for research and learning purposes. This shall be spearheaded and funded by the Sanggunian Kabataan or may be sourced out from different NGOs.

f. To foster education and nutrition program for every child in the barangay.

g. To encourage the proper performance of the duties of parents and provide learning opportunities on the adequate raising of children and on positive parent-child relationships;

h. To advocate for the passage of child-friendly barangay ordinances in response to child-related issues and concerns;

i. To prepare the barangay plans of action for children which address the needs of children in the community and ensure their integration into the Barangay Development Plan and implementation by the Barangay.

SECTION 32. PARENTING-ORIENTATION COURSES. Marriage license applicants shall be required to participate in a Parenting Orientation Course I among other requirements, prior to the issuance of marriage license by the City Civil Registrar’s Office. This course becomes an integral part of existing Family Planning Seminar on Reproductive Health Course.

Parent applicants for birth certificate of the child shall also be required to participate in a Parenting Orientation Course II, as follow-up to the first course before issuance of Certificate of Live Birth by the Civil Registrar without prejudice to the early registration of birth requirements under existing laws. Modules on these courses shall be designed by the Mandaluyong City Council for the Protection of Children and the City Social Welfare and Development Office in close coordination with the City Health Office and any existing NGO engaged in child-focused programs.

SECTION 33. REFORMATION OF CHILDREN IN CONFLICT WITH THE LAWS. Children who are involved in anti-social or related activities shall be registered in a reform program that shall assist in rebuilding themselves and reintegration into the mainstream of society. Those programs shall include the following:

a. MONITORING OF SUSPENDED CASES OF CHILDREN AND APPROPRIATE ASSISTANCE. Application for suspension of sentences of children involved in anti-social activities shall be done by the Mandaluyong City Council for the Protection of Children. A special team
from said office shall monitor closely the cases involving children to adequately enforce the suspension of sentences. Appropriate and responsive rehabilitation program shall be afforded to them under the case of the Mandaluyong City Council for the Protection of Children. The framework of assistance shall be designed by the said Council in close coordination with NGOs and professionals with special interests in children’s rehabilitation.

d. APPOINTMENT OF WOMEN AND CHILDREN’S DESK OFFICER AND CHILD-FRIENDLY POLICE PROCEDURES. Each police precinct in Mandaluyong City shall have a Women and Children’s Desk Officer to handle cases involving children. Child-friendly police procedures shall be implemented as contained in the Police Handbook on the management of cases of children in especially difficult circumstances. Each PNP element shall be provided a copy of the said handbook.

e. SPECIAL COURSE FOR PNP. A special course for members of the Philippine National Police shall be designed to handle effectively children involved in anti-social activities. A team of PNP members shall take up the course-related section and other Child and Youth Relations Officers in each PNP detachment. Relevant activities shall be provided by the Mandaluyong City Council for the Welfare of Children and Family Concerns in close coordination with the Philippine National Police Child Protection Team.

The Mandaluyong City Bureau of Jail Management, Mandaluyong PNP and Penal, Jail Warden shall designate a Special Home-Like Facility Exclusive for Children in Conflict with the Law.

SECTION 34. OTHER REHABILITATION, SUPPORT AND DIVERSION PROGRAMS FOR CHILDREN IN CONFLICT WITH THE LAW.

a. The City shall create a Youth Home that will serve as a venue for counseling, educating, and other diversion programs for children who are in conflict with the law.

b. Reinforcing and strengthening the programs and activities of the DSWD and Mandaluyong Anti-Drug Abuse Council (MAADAC).

CHAPTER VII
DEVELOPMENT PLAN FOR CHILDREN

SECTION 35. The Mandaluyong Children's Development Plan was formulated through the collaborative involvements of major stakeholders in the City, from the City Government to sectoral representatives, non-governmental organizations and the youth with the vision of Mandaluyong as a child-friendly City. This Development Plan for Children shall serve as a guiding instrument for further development of the Code based on the varying needs and situation of children's condition in the City of Mandaluyong.

SECTION 36. INVESTMENT PLAN FOR CHILDREN. The investment plan for Children shall be indicative of its source funding. Concerned agencies shall source out funding either from the local, national or private funds so as to maintain sustainability of children's programs. Every year stakeholders shall undergo workshops and seminars to update the development plan with their corresponding funding need.
CHAPTER VIII
FINAL PROVISION

SECTION 37. RULES AND REGULATIONS. Unless otherwise provided in this Ordinance, the City Legal Office, in coordination with the Mandaluyong City Council for the Welfare of Children and Family Concerns shall promulgate rules and regulations for the effective implementation of this Ordinance.

Such rules and regulations shall take effect upon its publication in two (2) local newspapers of general circulation.

SECTION 38. APPROPRIATIONS. The amount necessary to carry out the provisions of this Ordinance shall be appropriated in the City Annual Budget under the General and Development Fund as mandated by Section 27 of the General Appropriations Act and Republic Act 7160, otherwise known as the Woman in Nation Building Act.

SECTION 39. SEPARABILITY CLAUSE. If, for any reason or reasons, any part or provision of this Ordinance shall be held to be unconstitutional or invalid, other parts or provisions hereof which are not affected thereby shall continue to be in full force and effect.

SECTION 40. APPLICABILITY CLAUSE. All other matters relating to the imposition or regulations provided in this Code shall be governed by the pertinent provisions of existing laws and other ordinances. This Code shall apply to all the people within the territorial jurisdiction of the City of Mandaluyong, and to all persons, who may be subject to the provisions of this Code.

SECTION 41. REPEALING CLAUSE. All ordinances, resolutions, executive orders and other issuances which are inconsistent with any of the provisions of this Code are hereby repealed or modified accordingly.

SECTION 42. EFFECTIVENESS CLAUSE. This Ordinance shall take effect fifteen (15) days after its approval and publication at least once in a newspaper of general circulation in Metro Manila and continuous display in the Bulletin Board of all the Barangays in the City of Mandaluyong.

ENACTED on the 4th day of August, 2008 in the City of Mandaluyong.

(Official Seal)

ATTESTED:

REINATO B. STA. MARIA
City Vice Mayor &
Presiding Officer

BENJAMIN D. ASALOS, JR.
City Mayor
Date: AUG 8 4 2008