Republic of the Philippines
Province of Oriental Mindoro
MUNICIPALITY OF ROXAS

OFFICE OF THE SANGGUNIANG BAYAN

EXCERPTS FROM THE JOURNAL OF THE 31ST REGULAR SESSION OF THE 12TH SANGGUNIANG BAYAN OF ROXAS, ORIENTAL MINDORO HELD ON 09 FEBRUARY 2026, 1:30 P.M. AT THE SANGGUNIANG BAYAN SESSION HALL

Present:

Municipal Vice Mayor Robert S. Quiatchon	- Presiding Officer
Councilor Lucille T. Bacay	- Member
Councilor Marietta R. Pajila	- Member
Councilor David D. De La Cruz	- Member
Councilor Michael O. Pongyan	- Member
Councilor King Philip B. Dimapilis	- Member
Councilor Christopher Y. Carvajal	- Member
Councilor Gualberto V. Magno	- Member
Councilor Robert A. Baticos	- Member
Councilor Hermis S. Catapang	- President, Liga ng Barangay
Councilor Sheikinah Grace C. Sanz	- Member, MSKF President

Absent:

NONE

MUNICIPAL ORDINANCE NO. 13
Series of 2026

AN ORDINANCE PROVIDING FOR A COMMUNITY BASED MENTAL HEALTH PROGRAM AND DELIVERY SYSTEM IN THE MUNICIPALITY OF ROXAS, ESTABLISING MECHANISMS AND GUIDELINES FOR ITS IMPLEMENTATION AND APPROPRIATING NECESSARY FUNDS THEREOF

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Councilor **MICHAEL O. PONGYAN**
Councilor **KING PHILIP B. DIMAPILIS**
Councilor **CHRISTOPHER Y. CARVAJAL**
Councilor **GUALBERTO V. MAGNO**
Councilor **ROBERT A. BATICOS**
Councilor **HERMIS S. CATAPANG**
Councilor **SHEIKINAH GRACE C. SANZ**

WHEREAS, under Section 15, Article II of 1987 Constitution provides, it is the policy of the State to protect and promote the right to health of the people and to instill health consciousness among them.

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WHEREAS, Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) recognizes the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

WHEREAS, the World Health Organization (WHO) defines mental health as "a state of well-being in which the individual realizes his or her own abilities can cope with normal stresses of life", can work productively and fruitfully, and is able to make a contribution to his or her community And it also calls attention of the public that mental health is more than just the presence of a psychiatric disorder or sickness but, more importantly, also redounds to a positive condition of one's mental well-being.

WHEREAS, mental health is a vital part of a person's total health and that the problems on mental health contain not just the traditional mental disorders but the issues of target populations susceptible to psychosocial risks caused by extreme life experiences such as disasters, near-death experiences, heinous and violent crimes, internal displacement brought by religious and civil unrests as well as the psychosocial matters of daily living like preserving a sense of well-being in these complicated times.

WHEREAS, under Republic Act No. 7277, as amended otherwise known as the "Magna Carta for Disabled Person", there is a need to include mental health in the public health and hospital system in order to render available, accessible, affordable and equitable mental health care and services to our constituents, especially the poor, underserved and high-risk population,

WHEREAS, Republic Act No. 11036 (RA No. 11036) mandates the Local Government Units (LGU's) to review, formulate, and develop regulations and guidelines necessary to implement effective mental health care and wellness policy within their respective territorial jurisdictions, including passage of local ordinance on the subject of mental health, consistent with existing relevant national policies and guidelines

I PRELIMINARIES

Section 1. SHORT TITLE- This Ordinance shall be known as the **"Mental Health Care Ordinance of Roxas"**

Section 2. DECLARATION OF POLICY, The Municipality of Roxas affirms the basic right of all Filipinos to mental health as well as the fundamental rights of people who require mental health services. It is hereby declared the policy of the Municipality to uphold the right of the people to mental health and encourage mental health consciousness among them towards this end, the Municipality shall adopt an integrated and comprehensive approach to the development of the Municipal Mental Health Care Delivery System to deliver appropriate services and interventions including provision of mental health protection, care treatment, and other essential services to those with mental health condition or disability.

Section 3. DEFINITION OF TERMS. - As defined in this Ordinance, the following terms are defined as follows:

a) **Allied professionals** – refer to any trained or certified non-psychiatric physician, social worker, nurse, occupational therapist, counselor, priest, minister, pastor, nun, trained or certified non-psychiatric individual or non-physician.

b) **Confidentiality** – refers to ensuring that all relevant information related to persons with psychiatric, neurologic, and psychological health needs is kept safe from access or use by, or disclosure to, persons or entities who are not authorized to access, use, or possess such information.

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c) **Discrimination** – refers to any distinction, exclusion or restriction which has the purpose or effect of nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic social cultural, civil or any other field. It includes all forms of discrimination including denial of reasonable accommodation. Special measure solely to protect the rights or secure the advancement of persons with decision making impairment capacity shall not be deemed to be discriminatory.

d) **Drug Rehabilitation** – refers to the processes of medical or psychotherapeutic treatment of dependency on psychoactive substances such as alcohol, prescription drugs, and other dangerous drugs pursuant to Republic Act, 9165, otherwise known as the "Comprehensive Dangerous Drugs Act of 2002". Rehabilitation process may also be applicable to diagnosed behavioral addictions such as gambling, internet and sexual addictions. The general intent is to enable the patient to confront the psychological, legal, financial social and physical consequences. Treatment includes medication for co-morbid psychiatric or other medical disorders, counseling by experts and sharing of experience with other addicted individuals.

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

f) **Mental Disability** – refers to impairments in activity limitations and individual and participatory restrictions denoting the negative aspects of interaction between an individual and his/her environment. This results from organic syndromes such as mental retardation and acquired lesions of the central nervous system, dementia and psychotic and non-psychotic disorders.

g) **Mental Health** – refers to a state of well-being in which the individual realizes one's own abilities and potentials, scopes adequately with the normal stresses of life, displays resilience in the face of extreme life events, works productively and fruitfully, and is able to make a positive contribution to the community.

h) **Mental Health Condition** – refers to a neurologic or psychiatric condition characterized by the existence of a recognizable, clinically-significant disturbance in an individual's cognition, emotional regulation, or behavioral that reflects a genetic or acquired dysfunction in the neurological, psychosocial, or developmental process underlying mental functioning. The determination of neurologic and psychiatric conditions shall be based on scientifically-accepted medical nomenclature and best available scientific and medical evidence.

i) **Mental Health Facility** – refers to any establishment, or any unit of an establishment, which has, as its primary function, the provision of mental health services.

j) **Mental Health Professional** – refers to a medical doctor, psychologist, nurse social worker or any other appropriately trained and qualified person with specific skill relevant to the provision of mental health services.

k) **Mental Health Service Provider** – refers to an entity or individual providing mental health services as defined in this Ordinance, whether public or private including, but not limited to mental health professionals and workers, social workers and counselors, informal community caregivers, mental health advocates and their organizations, personal ombudsmen, and persons or entities offering nonmedical alternative therapies.

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l) **Mental Health Service** – refers to psychosocial psychiatric or neurologic activities and programs along the whole range of the mental health support services including promotion, prevention, treatment, and aftercare, which are provided by mental health facilities and mental health professionals.

m) **Mental Health Worker –** refers to a trained person, volunteer or advocate engaged in mental health promotion, providing support services under the supervision of a mental health professional.

n) **Mental illness** – refers to a mental or psychiatric disorder characterized by the existence of recognizable changes in the thoughts, feelings and general behavior of an individual brought about by neurobiological causes manifested by genetic of biochemical abnormalities and associated medical conditions which include distress, personality disorder, substance use dependence and mental retardation.

o) **Psychiatric or Neurologic Emergency** – refers to a condition presenting a serious
and immediate threat to the health and well-being of a service user or any other person affected by a mental health facilities and mental health condition, or any other person affected by a metal condition, or to the health or well-being of others, requiring immediate medical intervention:

p) **Psychosocial Problem** – refers to a condition that indicates the existence of recognizable changes in the individual's behavior, thoughts and feelings brought about and closely related to sudden, extreme and prolonged stress in the physical or social environment, and

q) **Service User** –refers to a person with lived experience of any mental health condition including persons who require or are undergoing psychiatric neurologic or psychosocial care.

II. MUNICIPAL MENTAL HEALTH BOARD

Section 4. MUNICIPAL MENTAL HEALTH BOARD. - The Municipal Mental Health Board is hereby established under the Municipal Health Office, to provide for a consistent, rational and unified response to mental health problems, concerns and efforts through the formulation and implementation of the Municipal Mental Health Care Delivery System For purposes of this ordinance, the Municipal Mental Health Care Delivery System shall constitute a quality mental health care program through the development of efficient and effective structures, systems and mechanisms that will ensure fair, accessible, affordable, appropriate, efficient and effective delivery of mental health care to all its stakeholders by qualified, competent, compassionate and ethical mental health professionals and mental health workers.

Section 5. COMPOSITION OF THE BOARD. - The Board shall be composed of the following:

Chairperson: Municipal Mayor
Vice-Chairperson: Municipal Health Officer

Members:
Chairman, SB Committee on Health
Chairman, SB Committee on Women and Family relation
Chairman, SB Committee on Education
Chairman, SB Committee on Barangay Affairs
Chairman, SB Committee on Persons with Disability
Head, Municipal Social Welfare and Development Office

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Representative, Public Hospitals within the territorial jurisdiction of the municipality
Representative, DepEd Schools District Office
Two Representatives from civil society organizations involved in mental health issues

Section 6. DUTIES AND FUNCTIONS OF THE BOARD. The Board shall exercise the following duties and functions:

a) Review the existing systems, policies and guidelines on mental health services that are implemented by different offices of the Municipal Government;
b) Develop program for intervention designed to promote and upscale the approaches for mental health awareness for educational institutions, public and private workplaces, among others;
c) Recommend intensified psychosocial activities with special focus on addressing effects of calamities and/or disasters and other traumatic events, including on-line consultations and discussions, in close coordination with the different guidance counselors of various schools in the municipality;
d) Establish mechanisms of hotline, online, and face-to-face consultations handled by trained professionals to counsel and cater cases that include, but not limited to, anxiety, stress, suicide, and self-harm and other preventable cases;
e) Plan necessary capacity building, reorientation, and training programs for mental health professionals, mental health workers, and allied professional;
f) Assist Barangay, as well as Educational, training, and work institutions in the establishment of their respective mental health care system;
g) Promulgate protocols and guidelines to facilitate inter-LGU and NGA referral system, including access of individuals with mental health conditions to treatment and psychosocial support;
h) Develop plans, programs and activities for the observation of Mental Health Month in the Municipality;
i) Review all related laws and regulations related to mental health and recommend further appropriate legislation to the Sanggunian in order to sustain and strengthen programs, services, and other mental health initiatives;
j) Create such inter-agency committees, project task forces, and other groups necessary to implement the policy and program framework of this Ordinance;
k) In close coordination with the municipal office, to monitor mental health cases and incidents in barangays, and educational, training and work institutions, and other sectors and organizations, and
l) Perform such other duties and functions necessary in carrying the purposes of this Ordinance.

Section 7. MEETINGS. The Board shall meet at least once a month or as frequently as necessary to discharge its duties and functions. It may be convened by the Chairperson, or upon written request of at least three (3) members.

The Board shall invite in the said meeting representatives from civil society organizations of different sectors such as, but not limited to, children, women, persons with disability, elderly. youth, labor (both public and private), LGBTQA, and indigenous people.

Section 8. QUORUM. The presence of a majority of the members of the Board shall constitute a quorum.

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