



Republic of the Philippines
QUEZON CITY COUNCIL

Quezon City
21st City Council

PO21CC-427

80th Regular Session

ORDINANCE NO. SP- 3128, S-2021

AN ORDINANCE PROVIDING FOR THE PREVENTION PROGRAMS TO ADDRESS THE INCREASING ADOLESCENT PREGNANCY WITHIN THE TERRITORIAL JURISDICTION OF QUEZON CITY AND PROVIDING FUNDS THEREOF.

Introduced by Councilors LENA MARIE P. JUICO, SHAIRA L. LIBAN, NOE DELA FUENTE, IRENE R. BELMONTE, DOROTHY A. DELARMENTE, M.D., WENCEROM BENEDICT C. LAGUMBAY and JORGE L. BANAL, SR.

Co-Introduced by Councilors Bernard R. Herrera, Tany Joe "TJ" L. Calalay, Nicole Ella V. Crisologo, Winston "Winnie" T. Castelo, Atty. Bong Liban, Eden Delilah "Candy" A. Medina, Ramon P. Medalla, Mikey F. Belmonte, Estrella C. Valmocina, Franz S. Pumaren, Kate Galang-Coseteng, Matias John T. Defensor, Peachy V. De Leon, Imee A. Rillo, Marra C. Suntay, Resty B. Malañgen, Ivy L. Lagman, Hero M. Bautista, Jose A. Visaya, Karl Castelo, Patrick Michael Vargas, Ram V. Medalla, Allan Butch T. Francisco, Rogelio "Roger" P. Juan, Diorella Maria G. Sotto-Antonio, Donato "Donny" C. Matias, Eric Z. Medina and Freddy S. Roxas.

WHEREAS, Section 13, Article II of 1987 Philippine Constitution provides that: "The State recognizes the vital role of the youth in nation-building and shall promote and protect their physical, moral, spiritual, intellectual, and social well-being. It shall inculcate in the youth patriotism and nationalism, and encourage their involvement in public and civic affairs;

WHEREAS, the United Nations Convention on the Rights of the Child guarantees the right to education, health, and autonomy. Adolescent pregnancy undermines these rights. For some girls, early pregnancy results in death - an ultimate violation of her right. Upholding these rights help eliminate conditions that contribute to adolescent pregnancy and can help break the cycle of intergenerational poverty, allowing her to contribute meaningfully to her household and her community;

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WHEREAS, on June 25, 2021, President Rodrigo R. Duterte issued Executive Order No. 141, entitled as: "ADOPTING AS A NATIONAL PRIORITY THE IMPLEMENTATION OF MEASURES TO ADDRESS THE ROOT CAUSES OF THE RISING NUMBER OF TEENAGE PREGNANCIES, AND MOBILIZING GOVERNMENT AGENCIES FOR THE PURPOSE", providing the instructions to all levels of government to assist in addressing the issues related to the increasing number of adolescent pregnancies in the country;

WHEREAS, adolescent pregnancy is intertwined with issues of human rights. The future of an adolescent pregnant girl changes radically, and rarely, for the better. Adolescent girls will be forced to drop out of school, thus, denying her the right to an education. This will further limit her job prospects exposing her to vulnerabilities and further intergenerational poverty;

WHEREAS, maternal mortality and morbidity directly impair a woman's right to life, to be equal in dignity, to education, to her role in nation-building, and to enjoy the highest attainable standard of physical and mental health, including sexual and reproductive health and rights. For adolescent pregnant mothers, these also impair their vital role in nation-building both as women and as young Filipinos;

WHEREAS, the focus should be on transformative interventions anchored on the empowerment of adolescents and the pursuit of their rights to health and development, thus, building and supporting a girl's agency; providing access to comprehensive reproductive health services and information; and removing the stigma on adolescent sex and pregnancy by providing psychosocial and community support, among others;

WHEREAS, there is a need to establish a local policy that addresses adolescents' sexual and reproductive health needs and reduces the adolescent birth rate significantly through institutionalizing social protection programs for all adolescents (pregnant or non-pregnant). Hence, the passage of this local ordinance is earnestly sought.

NOW, THEREFORE,

BE IT ORDAINED BY THE CITY COUNCIL OF QUEZON CITY IN REGULAR SESSION ASSEMBLED:

SECTION 1. SHORT TITLE. - This Ordinance shall be known as the "Quezon City Ordinance on the Prevention of Adolescent Pregnancy."

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SECTION 2. DECLARATION OF POLICY. - *It shall be the policy of the Quezon City Government to:*

- (a) *Recognize, promote, and strengthen the role of adolescents and young people in the overall human and socio-economic development of the City;*
- (b) *Pursue sustainable and genuine human development that values the dignity of the total human person and afford full protection to people's rights, especially of adolescent women and men and their families;*
- (c) *Promote and protect the human rights of all individuals including adolescents particularly in their exercise of their rights to sexual and reproductive health, equality and equity before the law, the right to development, the right to education, freedom of expression, the right to participate in decision-making, and the right to choose and make responsible decisions for themselves;*
- (d) *Pursue an adolescent pregnancy reduction strategy that is anchored on the empowerment of adolescents and their rights to health and development; that is cognizant of the structural barriers, including, but not limited to, gender, poverty, age, ethnicity, and disability, that lead to adolescent pregnancy; and that is based on adolescents' needs and preferences;*
- (e) *Provide full and comprehensive information to adolescents to help them prevent early and unintended pregnancies and their lifelong consequences;*
- (f) *Provide safe, quality, and respectful maternal health care, including antenatal, delivery, and postnatal care, to adolescent women and enable their access to these services;*
- (g) *Ensure corresponding interventions that could respond to the socio-economic, health and emotional needs of adolescents and youth, especially young women, with due regard for their own creative capabilities, for social, family and community support, employment opportunities, participation in the political process, and access to education, health, counseling, and high quality reproductive health services;*

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- (h) *Encourage and enable adolescent mothers and fathers to continue and finish their education in order to equip them for a better life, to increase their human potential, to help prevent early marriages, high-risk child-bearing and repealed pregnancy, and to reduce associated mortality and morbidity through comprehensive social protection interventions; and*
- (i) *Recognize and promote the rights, duties, and responsibilities of parents, teachers, health professionals, and other persons legally responsible for the growth of adolescents to provide in a manner consistent with the evolving capacities of adolescent, appropriate direction and guidance in sexual and reproductive matters.*

SECTION 3. DEFINITION OF TERMS. - *For purposes of this Ordinance, the following terms shall be defined and used as follows:*

- (a) *Adolescents - refers to the population between the ages of 10 and 19.*
- (b) *Adolescent Sexual and Reproductive Health (ASRH) Care - refers to the access to a full range of methods, techniques, and services that contribute to reproductive health and well-being of young people by preventing and solving reproductive health-related problems. Following the WHO's definition of sexual health, ASRH is a state of complete physical, mental and social well-being, and not merely the absence of disease and infirmity, in all matters relating to the sexual and reproductive system and to its functions and processes, in individuals aged 10 to 19.*
- (c) *Adolescent Sexuality - adapted from the World Health Organization's definition of sexuality, adolescent sexuality is a central aspect of being human throughout life, which encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction of individuals aged 10 to 19. It is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles and relationships; and is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.*

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- (d) *Comprehensive Sexual Education (CSE) - is a package of teaching and imparting information on cognitive, emotional, physical and social aspects of gender, sexuality and adolescent reproductive health. It aims to equip children and young people with age-appropriate knowledge, skills, attitudes and values that will empower them to realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives. It is a rights-based, gender-focused approach to adolescent health education taught over several years with progressive appropriateness based on age-appropriate information consistent with the evolving capacities of young people and adolescents.*
- (e) *Harm-reduction principle - refers to interventions aimed at reducing negative effects of behaviors. The goal is to address risk behaviors that occur alongside the harms of pregnancy to adolescent bodies.*
- (f) *Information and Service Delivery Network for Adolescent Health Development (ISDN) - refers to the network of facilities, institutions, and providers within the city with health and social system that offers information, training, and core packages of health and social care services in an integrated and coordinated manner.*
- (g) *Quezon City Youth Development Council (QCYDC) - refers to the local body to be created based on Republic Act No. 10742 (SK Reform Law) which is composed of representatives of youth and youth-serving organizations in the provincial, city, and municipal level with the primary function of assisting in the planning and execution of projects and programs of the Sangguniang Kabataan, and the Pederasyon ng Sangguniang Kabataan in all levels. For this purpose, the city established the Quezon City Youth Development Office (QCYDO), formerly the Scholarship and Youth Development Program (SYDP), which was designated as the secretariat of the QCYDC.*
- (h) *Male involvement and participation - refers to the involvement, participation, commitment of and joint responsibility of men with women in all areas of sexual and reproductive health, as well as reproductive health concerns specific to men.*

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- (i) *Normal Schools or Teachers College - refers to the learning institutions training or educating teachers.*
- (j) *Public-Private Partnership (PPP) - is a cooperative arrangement between one or more public and private sectors, typically of a long-term nature, for various development programs or projects.*
- (k) *Reproductive Health - refers to a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity in all matters relating to the reproductive system and to its functions and processes.*
- (l) *Risky Behaviors - refers to ill-advised practices and actions that are potentially detrimental to a person's health or general well-being.*
- (m) *Social Protection - consists of policies and programs designed to reduce poverty and vulnerability by promoting efficient labor markets, diminishing people's exposure to risks, and enhancing their capacity to manage economic and social risks, such as unemployment, exclusion, sickness, disability and old age.*
- (n) *Teen Educator (Peer Educator) – refers to a young person, aged 18-30 years old, trained and qualified by the Quezon City Health Department on various Teen Educator modules, who shall assist the health care provider in delivering health services to the adolescents in the community.*
- (o) *Quezon City Adolescent Pregnancy Prevention Council (QCAPPC) - hereafter referred to as the Council, is an inter-agency and inter-sectoral council that shall be formed through this Ordinance and serve as its implementing body.*

SECTION 4. ADOLESCENT PREGNANCY PREVENTION COUNCIL.

a. *Membership and Composition. The Quezon City Adolescent Pregnancy Prevention Council (QCAPPC) is hereby organized with the following members:*

- i. *Office of the City Mayor - Chairperson*
- ii. *Office of the City Vice Mayor - Vice-Chairperson*

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- iii. *Quezon City Youth Development Office - Secretariat*
- iv. *Sangguniang Committee on Health Chairperson*
- v. *Sangguniang Committee on Women, Family Relations and Gender Equality Chairperson*
- vi. *Sangguniang Committee on Children Chairperson*
- vii. *Sangguniang Kabataan Federation*
- viii. *Liga ng mga Barangay*
- ix. *City Health Department*
- x. *Quezon City General Hospital*
- xi. *Rosario Maclang Bautista General Hospital*
- xii. *Novaliches District Hospital*
- xiii. *Social Services Development Department*
- xiv. *City Legal Department*
- xv. *City Planning Department*
- xvi. *Quezon City Women's Protection Center*
- xvii. *Public Employment Service Office*
- xviii. *Public Affairs and Information Services Department*
- xix. *Quezon City Police District*
- xx. *Division of City Schools*
- xxi. *Department of the Interior and Local Government - Quezon City*
- xxii. *Six (6) representatives from different NGOs working for the welfare of identified key populations*

Regular Experts Panel/Resource Persons

- xxiii. *Department of Health - NCR*

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xxiv. Commission on Population - NCR

xxv. National Youth Commission

xxvi. TESDA - NCR

The QCAPPC may, as necessary, invite to its meetings and activities, other government agencies, NGOs, and experts, who have relevant expertise that may be useful to accomplish the functions of this Ordinance.

b. *Functions and Responsibilities.* The QCAPPC shall be responsible for the following:

- i. *Identify factors contributing to the increase of Adolescent Pregnancy and map out of areas of concern in the city where the identified factors are concentrated.*
- ii. *Develop, cost and regularly review a Quezon City Program of Action and Investment Plan for the Prevention of Adolescent Pregnancy (QCPAIP-PAP), in collaboration with relevant government agencies, NGOs and CSOs, and other stakeholders.*
- iii. *Ensure the operationalization and implementation of the Action Plan.*
- iv. *Strengthen collaboration between government agencies and CSOs involved in the implementation of the Quezon City Prevention of Adolescent Pregnancy Program under this Ordinance and Action Plan, including the delivery of related services.*
- v. *Develop and ensure implementation of guidelines and policies necessary for the implementation of this Ordinance.*
- vi. *Monitor the progress of the response to the City's Teenage/ Adolescent Pregnancy situation and actively seek good practices from all stakeholders.*
- vii. *Monitor the implementation of the QCPAIP-PAP, undertake mid-term assessments, including spending assessments, and evaluate its impact, every year for the first 3 years and every 3 years, thereafter.*

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- viii. Mobilize sources of funds for the implementation and evaluation of the Action Plan.
 - ix. Direct and require members to conduct monitoring and evaluation of all programs, policies, and services, undertaken within their respective mandates, and to submit an annual report.
 - x. Advocate and recommend for policy reforms to the QC Council, Congress, and other government agencies or departments to strengthen the City's response that will institutionalize or continue the interventions required in addressing the gaps to the Teenage Pregnancy situation.
 - xi. Organize and operationalize (monitor, supervise and evaluate) an Information and Service Delivery Network for Adolescent Health Development (ISDN for AHD) which shall consist of different government and non-government organizations, institutions, and facilities disseminating information and services to adolescents.
 - xii. Identify gaps in the City's response on the part of government agencies and its partners from the civil society and international organizations in order to develop and implement the initial interventions required to address such gaps.
 - xiii. Submit an annual accomplishment/progress report on the accomplishments under the QCPAIP-PAP to the Office of the Mayor, City Council, and as needed, to the related national government agencies.
- c. Meetings and Quorums. The QCAPPC shall meet at least once every quarter, at any venue, the notice of the meeting, including the agenda, shall be sent to members at least one (1) month before the scheduled meeting, except in case of emergencies, in which case, a 48-hour notice shall be sufficient.
- i. The presence of the Chairperson or the Vice Chairperson and at least ten (10) permanent members of the QCAPPC shall constitute a quorum to do business, and a majority vote of those present shall be sufficient to render decisions.

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- d. *Secretariat. The QCAPPC shall be supported by QCYDO, serving as secretariat, members of which shall be appointed by the Department Head.*

SECTION 5. DEVELOPMENT OF QUEZON CITY PROGRAM OF ACTION AND INVESTMENT PLAN FOR THE PREVENTION OF ADOLESCENT PREGNANCY (QCPAIP-PAP). - The QCAPPC, in collaboration with other relevant government agencies and local civil society organizations, shall develop an evidence-based Local Program of Action and Investment Plan. This plan shall serve as the local framework for inter-agency and inter-sectoral collaboration at all levels to address the various health, cultural, socio-economic and institutional determinants of teenage pregnancy.

The initial QCPAIP-PAP shall be developed within sixty (60) days upon approval of this Ordinance and shall be reviewed annually. The QCAPPC shall monitor the implementation of the QCPAIP-PAP, undertake mid-term assessments, including spending assessments, and evaluate its impact, every year for the first 3 years and every 3 years, thereafter.

SECTION 6. INFORMATION AND SERVICE DELIVERY NETWORK FOR ADOLESCENT HEALTH DEVELOPMENT (ISDN FOR AHD). - Within six (6) months upon approval of this Ordinance, the QCAPPC, as coordinated by the QC Health Department, together with QCYDO, as Secretariat, and the Sangguniang Kabataan Federation, shall organize and operationalize an ISDN for AHD consisting of different government and non-government organizations, institutions, and facilities disseminating information and services to adolescents. The ISDN for AHD shall provide health services that are sensitive to the particular needs and human rights of all adolescents to enable them to deal in a positive and responsible way with their reproductive health and sexuality.

The ISDN, in particular, shall perform the following tasks:

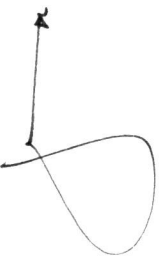
- (a) Assist the QCAPPC in mapping and analyzing the various factors contributing to pregnancies among adolescents;*
- (b) Identify and map different facilities which are providing information and services, and harmonize and coordinate these with the City interventions to address the various issues related to teenage pregnancies;*
- (c) Provide, in collaboration with concerned Departments, needed information and services for adolescent development;*

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- (d) *Generate or share resources in the implementation of the joint strategic plan of the ISDN for AHD; and*
- (e) *Monitor and evaluate effectiveness of coordinative and referral systems and other interagency interventions jointly implemented by the ISDN.*

QCAPPC shall provide for the capacity-building of the ISDN for AHD members, in collaboration with relevant government agencies, to ensure quality information and services are provided to the adolescents.

SECTION 7. CULTURALLY-SENSITIVE, AGE AND DEVELOPMENT-APPROPRIATE COMPREHENSIVE SEXUALITY EDUCATION (CSE). - The Council, through the Division of City Schools and the Public Affairs and Information Services Department, and in collaboration with relevant government agencies and civil society organizations, shall develop and promote localized messaging and educational information that promotes adolescent reproductive health in schools, communities and other youth institutions. The Council shall ensure that the messaging produced are included in local materials and that they are culturally-sensitive, age and development-appropriate and has included adolescent and youth groups in the consultation for the development of messaging and information, as well as elders and leaders of the various religious sectors.

The messaging and information shall be made compulsorily carried in city-based education messaging, and must be integrated at all levels of learning with the end goal of normalizing the discussion of sex and gender, adolescent sexuality, reproductive health, and to remove stigma on the discussion of these topics.

The materials and modules developed must be evidence-based, medically-accurate, rights-based, culturally-sensitive and non-discriminatory towards adolescents of different sexual orientation, gender identity, and gender expression.

In coordination with the Department of Education, through the Division of City Schools, the current curricula, including books and modules, shall be regularly reviewed, updated and broadened with a view to ensuring adequate coverage of concerns such as gender sensitivity, sexual consent, reproductive health choices and responsibilities, and sexually transmitted diseases, including HIV/AIDS. This curriculum shall be designed to strengthen respect for human rights and fundamental freedoms, including those related to reproductive health, sexuality, population and development. The materials shall be complementary to the Responsible Parenthood and Reproductive Law, and should be based on the need for responsible human sexuality and must reflect the realities of current sexual behavior.

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The Council, through the Public Affairs and Information Services Department, shall optimize the social media and other online platforms to reach adolescent netizens with accurate information and messages on adolescent sexual and reproductive health (ASRH) concerns. The PAISD shall ensure that local issues on adolescent reproductive health are covered and widely disseminated as well as advocate for the teenage pregnancy prevention through provided regular reports on the trend and incidence rates of teenage pregnancy in the City and to provide regular reports on the trend and incidence rates of teenage pregnancies in the country and to provide the public with information, resources and healthy practices for ASRH, among others.

SECTION 8. ADOLESCENT SEXUALITY AND REPRODUCTIVE HEALTH (ASRH) TRAINING FOR POLICY-MAKERS. - For the City-level, the Office of the Vice Mayor (OVM), together with the Chairperson of the Committee on Women, Family Relations and Gender Equality, for the Barangay Level, the Liga ng mga Barangay President, and for the Sangguniang Kabataan-level, the SK Federation President, shall be responsible for disseminating guidelines and providing training programs for policy-makers to enable a better understanding of ASRH as well as policies and practices to promote it. The guidelines shall be framed from a lens of gender equality and women's human rights and shall be made in consultation with academic institutions and civil society organizations focused on gender and women's human rights. The said offices shall ensure that sufficient funding is allocated in the City, barangay and SK annual budget for the training of policy-makers.

SECTION 9. TRAINING OF TEACHERS, GUIDANCE COUNSELORS, SCHOOL SUPERVISORS AND SCHOOL NURSES ON ADOLESCENT REPRODUCTIVE HEALTH CURRICULUM. - The QCAPPC, in coordination with DepEd, TESDA, and CHED, shall allocate for the program training in the Quezon City Annual Budget, in order to ensure that teachers, guidance counselors, instructors, and school nurses are properly trained on adolescent health and development to effectively educate or guide adolescents in dealing with their sexuality-related concerns. The training must introduce and improve the delivery of the current service so as to promote greater responsibility and awareness on the interrelationships between adolescent health issues, including sexual and reproductive health and gender equity.

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SECTION 10. CSE FOR OUT-OF-SCHOOL ADOLESCENTS AND THOSE WITH SPECIAL CONCERNS. - The QCAPPC, through the Social Services Development Office, City Health Department, the Sangguniang Kabataan Federation, and QC Youth Development Office, shall collaborate to intensify and institutionalize interactive learning methodologies for CSE among out-of-school adolescents in the communities and workplaces as well as unsuitably housed youth. Provided, that the needs of indigenous, working persons-with-disabilities, and adolescents in social institutions are considered in the design and promotion of sexuality education among adolescents.

Provided that, the Division of City Schools shall ensure that the delivery of CSE in a non-formal education setting through their Alternative Learning System by carrying localized messaging on adolescent health.

Provided further that, the community youth leaders, through the SK and the Barangay, shall invest in a concentrated effort in reaching these groups and encourage them to undergo peer education training. Volunteer groups and interested civil society organizations (CSOs) and non-government organizations (NGOs) shall be recognized for supplemental support to the local ISDNs.

SECTION 11. DESIGNATED DAY FOR ADOLESCENT HEALTH AND DEVELOPMENT. - During the initial phase of implementation, in order to encourage adolescents to access health services, a designated day per week is assigned to ensure confidentiality and stigma-free provision of services. Community-based centers and barangay health centers shall designate a day per week dedicated to adolescent health care. Designated days for Adolescent Health and Development is for provision of convergence services for the services of the ISDN for AHD members as provided in this Ordinance. This assigned day is when adolescents and the youth can access appropriate information and services on ASRH and other concerns relevant to their holistic development. Services should include, but not limited to, issues on adolescent reproductive health, mental health, drugs and alcohol. This should include programs and information for adolescent health and development and shall include counselling and treatment for adolescents in crisis or victims of abuse and violence.

Provided, that such designated day for AHD services shall not prevent the community-based centers and barangay health centers from providing AHD services daily.

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Services shall be managed and operated by the City Health Department through its Health Centers. Upon proper training, SK members, youth volunteers and workers and other organized adolescent youth groups, NGOs and youth-serving professional including the civil society organizations (CSOs) may be tasked to assist. The establishment and operationalization of designated Adolescent Health and Development Days shall be initially funded using the 10% SK fund and other relevant budget sources.

SECTION 12. MEDIA PARTICIPATION IN CSE PROMOTION. - The City Mayor is hereby authorized to enter into a public-private partnership agreement in mobilizing private media networks and companies in promoting CSE through media messaging. An incentive mechanism for media companies shall be developed and implemented by concerned agencies to recognize private participation in promoting CSE and adolescent youth health-seeking behavior, positive attitude towards sex, sexual relations and sexuality, etc.

An incentive scheme for adolescent-friendly radio or online-based programs shall likewise be developed and implemented to encourage media to produce materials and programs that promote responsible sexuality among adolescents.

SECTION 13. ACCESS TO REPRODUCTIVE HEALTH SERVICES. - Pursuant to existing ordinance and related laws, the City shall continue to provide to family planning information, counseling and services.

The City government shall ensure that all minors shall be given access to family planning methods information and services, with the consent of their parents or guardians, and after counselling.

The aforementioned counseling is carried out with the end in view of ensuring healthy practices through the promotion of optimal health outcomes and protecting minors, especially those in vulnerable circumstances, from possible predatory and sexually exploitative practices.

For this purpose, the City Health Department shall ensure that all health service providers in all health facilities shall be trained on providing adolescent-friendly and responsive information and services. It is the duty of health service providers to provide complete and medically-correct information on possible reproductive health services including the right to informed choice and access to legal, medically-safe and effective family planning methods with proper consent from their parents or guardians for minors.

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Provided, that within three (3) years of the implementation of this Ordinance, all city health facilities, such as, but not limited to, health centers and city-run hospitals, shall establish Adolescent Friendly Health Clinic or existing facilities shall be enhanced to become an adolescent-friendly facility by ensuring confidentiality, availability of information and services, non-judgmental, stigma-free and gender responsive health service providers.

The Council, through the City Health Department and the Social Services Development Department, shall ensure that ASRH training is integrated in the pre-service curriculum training of Barangay Health Workers (BHWs), front-line health care providers, and social workers. The said training shall include topics such as, but not limited to: consent, adolescent sexual and reproductive health, effective contraception use, disease prevention, HIV/AIDS and the more common STIs, hygiene, healthy lifestyles, and prevention of gender and sexual violence. Linkages and referral systems shall be established in educational institutions in order to bridge gaps in between information and access to ASRH services for in-school adolescents. For Out-of-School Youths (OSYs) and other groups, a community peer educator could be chosen to advocate accessing ASRH services and distribution of commodities.

In cases of pregnant adolescents, a wider spectrum of Maternal and Neonatal care services shall be made available to them spanning the pre-natal, antenatal, and post-natal stages of pregnancy and its respective health care requirements. Provision of reproductive health services to adolescents shall be based on the principles of non-discrimination and confidentiality, the rights of adolescents, their evolving capacities, and as a life-saving intervention. Provided further that, it shall be ensured that adolescents are not denied the information and services needed to prevent future unintended adolescent pregnancies and are able to access treatment and care services without fear of stigmatization, discrimination and violence.

SECTION 14. SOCIAL PROTECTION FOR ADOLESCENT MOTHERS OR PARENTS. - *In accordance with the Reproductive Health Law, a comprehensive social protection service shall be provided to adolescents who are currently pregnant and their partners in order to prevent repeat pregnancies and to ensure their well-being while assuming the responsibilities of being young parents.*

Such services shall include the following:

- (a) *Maternal health services including pre-natal, ante-natal, and post-natal check-ups and facility-based delivery;*

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- (b) *Post-natal family planning counseling and services for either or both teenage parents;*
- (c) *Personal PhilHealth coverage, making mandatory enrollment and membership of indigent teenage mothers;*
- (d) *Training, skills development, and support to livelihood programs for the household of the teenage parents especially for the indigents;*
- (e) *Continuing CSE for teenage parents;*
- (f) *Couples counseling on parenting, and positive discipline for the impending parents; and*
- (g) *Psychosocial support and mental health services for teen mothers.*

Suspension, forced resignation, and other discriminatory acts in the workplace against pregnant girls and adolescent fathers are prohibited and shall be penalized according to existing laws and ordinances.

The Council, through the Social Service and Development Department and the QC Youth Development Office, shall implement a continuing CSE program for teenage mothers and fathers with technical assistance from the Council.

The services provided herein must safeguard the rights of the adolescents to privacy, confidentiality, respect, and informed consent, respecting cultural values and beliefs.

SECTION 15. SOCIAL PROTECTION IN CASES OF SEXUAL VIOLENCE. - *The Council shall ensure that a strengthened social protection mechanisms against violence for adolescents, especially for girls, is provided. Through the Quezon City Women's Protection Center, Social Services and Development Department, and the City Legal Department, expectant and current mothers whose pregnancies were the result of sexual violence shall be given access and support to legal, medical, and psychosocial services. Furthermore, the Council shall reinforce the capacities of health facilities in providing comprehensive care for adolescents in case of sexual violence.*

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Health service providers, particularly the BHWs, other primary health care providers, and local population officers must ensure utmost confidentiality in handling cases of sexual exploitation and abuse. They shall be trained and be given confidentiality and safeguarding guidelines and tools for spotting sexual exploitation and abuse of adolescents. A referral pathway shall be created by the Council, through the assistance of the Quezon City Women's Protection Center, to ensure that identified sexual abuse and exploitation survivors are assisted and properly handled in reference to the existing protocol for handling violence against women and gender-based violence.

SECTION 16. SOCIAL PROTECTION IN CASES OF HUMANITARIAN, ARMED CONFLICT AND EMERGENCY SITUATIONS. - The Council and the ISDN shall be bolstered in the events of humanitarian crises, armed conflict or emergency situations. They shall ensure swift and efficient delivery of ASRH services to vulnerable adolescents and young pregnant girls. Increased vigilance shall be practiced in cases of gender violence, sexual assault, and exploitation in these situations. All incidences of the aforementioned situations shall be immediately addressed through appropriate channels.

Special attention shall be given to young mothers who are at the late stages of pregnancy in case of (premature) labor. In order to ensure delivery of health services to adolescents and adolescent expectant parents, the city shall incorporate ASRH-specific content and safeguards in their City Disaster Risk Reduction and Management Plans.

SECTION 17. CARE AND MANAGEMENT FOR FIRST TIME PARENTS. - All pregnant teens, especially the poor and hard-to-reach groups shall have access to skilled care throughout their pregnancy, delivery, and postnatal periods. Health Care providers shall strive to provide teenage mothers with their birth plans that detail their intended place of childbirth delivery, availability of transport to these health care institutions, and respective costs. Special attention shall be given to younger pregnant mothers during obstetric care.

Workshops, classes, and seminars for first-time parents shall be provided with ante and postnatal education. These classes shall include topics such as, but not limited to: infant feeding and care, positive discipline, responsible parenthood, and safe sex practices. These classes shall be made available free of charge and at times most convenient for the teen parents.

Educational institutions shall be encouraged to develop and establish support mechanisms that will encourage the return of teen parents (especially teen mothers), for instance: in-school day-care and breastfeeding stations.

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SECTION 18. ENCOURAGING MALE INVOLVEMENT. - *The Council, through the QC Youth Development Office and the Sangguniang Kabataan Federation, shall develop programs that will promote male involvement in the prevention of early and unintended pregnancies. These programs shall include topics such as, but not limited to: responsible fatherhood, couples counseling, avoiding gender violence, life-skills, and co-parenting strategies. These programs shall emphasize the roles and responsibilities of being a father and promote their active involvement. These programs shall also serve as an avenue to encourage the uptake of ASRH services and information of boys and young men.*

SECTION 19. INTEGRATION OF LOCAL PROGRAM FOR THE PREVENTION OF TEENAGE PREGNANCY IN SK PROGRAMS. - *Strategies and programs which aim to prevent the incidence of teenage pregnancies shall be integrated into the SK programs at the local and community level using the ten percent (10%) SK funds. In the absence of the SK, the Barangay Council shall undertake the responsibility of integrating teenage pregnancy prevention programs in the barangay council's activities. The Council shall issue guidelines to ensure the implementation of this provision.*

The SK and/or Barangay Council shall likewise implement programs and activities that aim to develop the potential and skills of adolescents to make them more productive members of society. The topics of the said programs and activities are inclusive of, but are not limited to: leadership training and life skills seminars that can be done together by the teens and their families together. They shall encourage youth participation in these activities as a means of diverting the focus and potentials of adolescents into more meaningful and productive endeavors.

They shall enlist the support and participation of the local barangay council, the local Council for the Protection of Children, and the barangay health center to be able to provide a more complete array of services, activities, and programs.

SECTION 20. RESIDENTIAL CARE FACILITIES FOR DISADVANTAGED WOMEN. - *The existing residential care facilities for disadvantaged women such as, but not limited to, the Quezon City Protection Center, the Quezon City TAHANAN Center, and QC Bahay Kanlungan, shall be capacitated to accommodate the needs of pregnant girls. The management of the said facilities shall be trained to provide ASRH information and services to their residents and may also coordinate with their respective ISDN in providing information and services. In order to effectively serve their pregnant teen residents, these centers shall get support from the nearest Health Center in relation to health personnel such as on-call barangay health workers, on-call midwives and on-call physicians.*

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Within a year after the establishment of this Ordinance, the QCAPPC must revisit the rate of teen pregnancy and identify whether there is a demand and need for a residential care facility for disadvantaged pregnant adolescents.

SECTION 21. APPROPRIATION. - An initial fund of One Million Seven Hundred Thousand Pesos (Php1,700,000.00) shall be allocated for the implementation of this Ordinance. Succeeding appropriations shall be included in the General Appropriations of the Quezon City Government annually.

SECTION 22. FINE AND PENALTIES FOR PROHIBITED ACTS. - Without prejudice to prosecution under existing laws and ordinances, the following fines and penalties shall be imposed on a person who commits the following prohibited acts under this Ordinance:

- a. *Violation of Confidentiality* – A person who violates confidentiality of the client-beneficiary adolescent/s under this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.
- b. *Discriminatory Acts and Practices* – A person who commits any of the discriminatory acts and practices to the client-beneficiary adolescent/s under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.
- c. *Misinformation* – A person who provides false information under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.

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d. *Denial of Adolescent Health Information and Services including Maternal and Child Health Services – A person who denies Information and Services to the client-beneficiary adolescent/s under this Ordinance shall, upon conviction, suffer the penalty of a fine in the amount of Php5,000.00, and imprisonment of one (1) to two (2) months, without prejudice to the filing of an action to suspend or revoke his/her professional license (if any) in the appropriate administrative proceeding.*

Provided that, for violation of any of the prohibited acts, in cases that involves a juridical person, the foregoing fines and penalties shall be imposed on the directors and officers of the juridical person committing the prohibited act and, after due process, their license or permit to operate or conduct business in the City may be perpetually revoked, and the fine of five thousand pesos (P5,000.00) shall be imposed.

Provided further that, if the offender of any of the above-mentioned prohibited acts is a public officer, elected or appointed, he/she shall also suffer the penalty of suspension not exceeding one (1) year or removal and forfeiture of retirement benefits depending on the gravity of the offense after due notice and hearing by the appropriate body or agency.

Provided finally that, if the offender of any of the above-mentioned prohibited acts is an alien, he/she shall, after service of sentence, be deported immediately without further proceedings by the Bureau of Immigration.

SECTION 23. IMPLEMENTING RULES. - *All provisions of this Ordinance which are executory in nature, shall be immediately implemented. The Quezon City Adolescent Pregnancy Prevention Council (QCAPPC) shall promulgate additional and clarificatory rules and regulations for the proper implementation of this Ordinance.*

SECTION 24. REPEALING CLAUSE. - *All ordinances, resolutions, executive issuances, or rules and regulations, or parts thereof, whose provisions are inconsistent with or contrary to the provisions of this Ordinance, are hereby deemed repealed, amended, or modified accordingly.*

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SECTION 25. SEPARABILITY CLAUSE. - If, for any reason, any section or provision of this Ordinance is held unconstitutional or invalid, the other sections or provisions hereof shall not be affected thereby.


SECTION 26. EFFECTIVITY CLAUSE. - This Ordinance shall take effect immediately upon its approval.

ENACTED: October 18, 2021.




GIAN G. SOTTO
City Vice Mayor
Presiding Officer

ATTESTED:



Atty. JOHN THOMAS S. ALFEROS III
City Government Dept. Head III

APPROVED: APR 15 2022



MA. JOSEFINA G. BELMONTE
City Mayor

CERTIFICATION

This is to certify that this Ordinance was APPROVED by the City Council on Second Reading on October 18, 2021 and was PASSED on Third/Final Reading under Suspended Rules on the same date.



Atty. JOHN THOMAS S. ALFEROS III
City Government Dept. Head III

