Republic of the Philippines
QUEZON CITY COUNCIL
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ORDINANCE NO. SP-3126, S-2021

AN ORDINANCE PROVIDING FOR THE QUEZON CITY COMPREHENSIVE STI, HIV, AND AIDS PREVENTION AND CONTROL PROGRAM AND APPROPRIATING FUNDS THEREFOR.

Introduced by Councilors LENA MARIE P. JUICO, DONATO "Donny" C. MATIAS, NOE DELA FUENTE, DOROTHY A. DELARMENTE, M.D., IRENE R. BELMONTE, JORGE L. BANAL, SR., WENCEROM BENEDICT C. LAGUMBAY and DIORELLA MARIA G. SOTTO-ANTONIO.

Co-Introduced by Councilors Bernard R. Herrera, Tany Joe "TJ" L. Calalay, Nicole Ella V. Crisologo, Victor V. Ferrer, Jr., 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, Hero M. Bautista, Patrick Michael Vargas, Ram V. Medalla, Marivic Co Pilar, Melencio "Bobby" T. Castelo, Jr., Rogelio "Roger" P. Juan, Eric Z. Medina and Freddy S. Roxas.

WHEREAS, everyday, more than 1 million sexually transmitted infections (STIs) are acquired across the world, with an estimated 376 million new infections in 2016;

WHEREAS, there were approximately 37.9 million people living with human immunodeficiency virus (HIV) across the world by 2018. Of these, 1.7 million were newly-infected, while 770,000 people died from HIV-related causes;

WHEREAS, in the Philippines, the number of people living with STIs is unknown;

WHEREAS, the Philippines registered a 203% increase in new HIV infections between 2010 and 2018, with the number rising from 4,420 to 13,380, while majority of Asia-Pacific countries have significantly reduced the number of new infections;

WHEREAS, by the end of 2020, it is estimated that 105,000 Filipinos will be living with HIV, and, without intervention, it is estimated that 266,800 Filipinos will be living with HIV by 2030;

WHEREAS, despite the enactment of Ordinance No. SP-2504, S-2016, and other measures, the number of new infections in Quezon City remains high, with Quezon City posting the highest number in 2019, and contributing 22% to the total number of new infections in the National Capital Region;

WHEREAS, Goal 3 of the United Nations Sustainable Development Goals (SDGs) calls for collective action to ensure healthy lives and promote well-being for all at all ages. In line with this, UN Member States seek to end the STI and AIDS as a public health threat by 2030, by scaling up health services, eliminating new transmissions, and integrating HIV and sexual and reproductive health services, among others;

WHEREAS, in 2018, the National Government enacted Republic Act No. 11166 or the Philippine HIV and AIDS Policy Act of 2018;

WHEREAS, the Quezon City Government recognizes that STIs, HIV, and Acquired Immunodeficiency Syndrome (AIDS) are public health concerns that have wide-ranging social, political, and economic repercussions, and that responding to the City's STI, HIV and AIDS situation is imbued with public interest;

WHEREAS, the updated UNAIDS targets for 2025 aim for 95% of those living with HIV to know their status, 95% of those who know their status to be on treatment and 95% of those in treatment to be virally suppressed;

WHEREAS, in December 2019, the Quezon City Government announced its commitment to the Vision Zero by 2030, which envisions a Quezon City with zero new HIV infections, zero HIV- related deaths, and zero HIV-related discrimination so that people living with HIV are able to live long and healthy lives.

NOW, THEREFORE,

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

ARTICLE I. GENERAL PROVISIONS

SECTION 1. SHORT TITLE. - This Ordinance shall be known as the "Comprehensive Quezon City STI, HIV, and AIDS Prevention and Control Ordinance of 2021."

SECTION 2. DECLARATION OF POLICIES. - The City recognizes that the enjoyment of the highest attainable standard of health is one of the fundamental human rights of every being without distinction as to race, religion, political belief, economic or social condition. In upholding this right, the City declares as its policy that:

a. *Sexually Transmitted Infections (STIs), Human Immunodeficiency Virus (HIV), and Acquired Immunodeficiency Syndrome (AIDS) are public health concerns that have wide-ranging social, political, and economic repercussions. Responding to the country's STI, HIV, and AIDS situation is imbued with public interest;*

b. *The City's response to the STI, HIV, and AIDS situation shall be anchored on principles of human rights, upholding human dignity. The City shall respect, protect, and promote human rights as the cornerstone of an effective response to the City's STI, HIV, and AIDS situation;*

c. *The City recognizes that the right to health includes the right to have access to sexual and reproductive information and services, that is free from violence and discrimination;*

d. *The meaningful inclusion and participation of persons directly and indirectly affected by STI, HIV, and AIDS, especially persons living with STI or HIV, are crucial in eliminating the infection/virus. Policies and practices that discriminate based on perceived or actual STI or HIV status, sex, gender, sexual orientation, gender identity, age, economic status, disability, and ethnicity hamper the enjoyment of basic human rights and freedoms guaranteed by the Constitution and are inimical to the City's interests. Towards this end, the City ensures the delivery of non-discriminatory STI, HIV, and AIDS services by the government and private sector;*

e. *Everyone has the right to privacy and to be treated with respect and dignity. Unless otherwise provided in this Ordinance, no person shall be required to undergo testing or treatment without informed consent, and the confidentiality of health records shall be maintained;*

f. *The City recognizes that meaningful progress can only be achieved by addressing other socioeconomic factors that aggravate the spread of STIs and HIV infection, such as poverty, gender inequality, access to education, and marginalization. As such, the City shall adopt a health-in-all approach to policymaking, by considering at all times the health impact of policies it adopts.*

SECTION 3. DEFINITION OF TERMS. -

a. *Acquired Immunodeficiency Syndrome (AIDS) - a health condition where there is a deficiency of the immune system that stems from infection with the Human Immunodeficiency Virus or HIV, making an individual susceptible to opportunistic infections.*

b. *Antiretroviral (ARV) - the treatment that stops or suppresses viral replication or replications of a retrovirus like HIV thereby slowing down the progression of infection.*

c. *Bullying - any severe or repeated use by one or more persons of a written, verbal or electronic expression, or a physical act or gesture, or any combination hereof, directed at another person that has the effect of actually causing or placing the latter in reasonable fear of physical or emotional harm or damage to one's property; creating a hostile environment for the other person; infringing on the rights of another person; or materially and substantially disrupting the processes or orderly operation of an institution or organization.*

d. *Civil Society Organizations - groups of non-governmental and non- commercial individuals or legal entities that are engaged in non-coerced collective action around shared interests, purpose and values.*

e. *Community-Based STI/HIV Screening - voluntary testing for STI or HIV infection made available at the community level, which may be conducted through the initiatives of community-based peer educators or counselors.*

f. *Comprehensive Health Intervention for Key Populations - evidence-based policies, programs and approaches that aim to reduce transmission of HIV and its harmful consequences on health, social relations and economic conditions.*

g. *Compulsory STI or HIV Testing - HIV testing imposed upon an individual characterized by lack of consent, use of force or intimidation, the use of testing as a prerequisite for employment or other purposes, and other circumstances where informed choice is absent.*

h. *Confidentiality of STI or HIV Status - the relationship of trust and confidence created or existing between a patient or a person living with HIV and his attending physician, consulting medical specialist, nurse, medical technologist and all other health workers or personnel involved in any counseling, testing or professional care of the former. It also applies to any person who, in any official capacity, has acquired or may have acquired such confidential information, such as peer educators, community-based counselors, school counselors, etc.*

i. *Discrimination - unfair or unjust treatment that distinguishes, excludes, restricts, or shows preferences based on any ground such as sex, gender, age, sexual orientation, gender identity, economic status, disability, ethnicity, and STI/HIV status, whether actual or perceived, and which has the purpose or effect of nullifying or impairing the recognition, enjoyment or exercise by all persons similarly situated, of all rights and freedoms. This definition shall include discrimination against individuals undergoing STI/HIV related tests regardless of the outcome of the test(s).*

j. Entertainer - a person who is employed or working in the entertainment establishments who render entertainment services to and/or directly interacts with customers, such as Guest Relations Officer (GRO), dancers, masseuses, masseurs, cocktail waitress and other similar occupations. The term "entertainers" for the purposes of this ordinance, includes both registered and non-registered entertainers.

k. Entertainment Establishments - any establishment/businesses that employs people who render entertainment services to and/or directly interacts with customers, such as Guest Relations Officer (GRO), dancers, masseuses, masseurs, cocktail waitress and other similar occupations.

l. Evolving Capacities of the Child - the concept enshrined in Article 5 of the Convention on the Rights of the Child recognizing the developmental changes and the corresponding progress in cognitive abilities and capacity for self-determination undergone by children as they grow up, thus requiring parents and others charged with the responsibility for the child to provide varying degrees of protection and to allow their participation in opportunities for autonomous decision-making in different contexts and across different areas of decision-making.

m. Gender Identity - each person's deeply felt internal and individual experience of gender that may or may not correspond with the sex assigned at birth, including the person's sense of the body, which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical and other means, and other expressions of gender, including dress, speech, and mannerisms.

n. Gender-Responsive - the ability to substantively address gender issues identified through gender analysis of sex-disaggregated data and gender-related information.

o. Gender-Sensitive - the ability to recognize and acknowledge the differences in roles, needs, and perspectives of women and men, possible asymmetries in their relationship, and the possibility that actions or interventions will have different effects on, and results for, women and men based on their gender, but do not actively seek to address these issues.

p. Harm Reduction - evidence-based policies, programs and approaches that aim to reduce transmission of STI or HIV and its harmful consequences on health, social relations and economic conditions; such policies or programs shall be harmonized and coordinated with policies and actions of pertinent agencies who implement related mandates whether local or national when actions are required to be undertaken in Quezon City.

q. *High-Risk Behavior - a person's frequent involvement in activities that increase the risk of transmitting or acquiring STI or HIV.*

r. *HIV Negative - the absence of HIV or HIV antibodies upon testing.*

s. *HIV Positive - the presence of HIV infection as documented by the presence of HIV or HIV antibodies in the sample being tested.*

t. *HIV Testing - a facility-based, mobile medical procedure that is conducted to determine the presence or absence of HIV anti-bodies in a person's body. HIV testing is confidential, voluntary in nature and must be accompanied by counseling prior to, and after the testing, and conducted only with the informed consent of the person.*

u. *HIV Transmission - the transfer of HIV from one infected person to an uninfected individual, through unprotected sexual intercourse, blood transfusion, sharing of contaminated intravenous needles, or which may occur during pregnancy, delivery, and breastfeeding.*

v. *Human Immuno-Deficiency Virus (HIV) - the virus, of the type called retrovirus, which infects cells of the human immune system, and destroys or impairs the cells' function. Infection with HIV without treatment results in the progressive deterioration of the immune system, leading to immune deficiency.*

w. *Informed Consent - the voluntary agreement of a person to undergo or be subjected to a procedure based on full information, whether such permission is written or conveyed verbally.*

x. *Key Affected Populations or Key Population - those groups or persons at higher risk of HIV exposure or affected populations whose behavior make them more likely to be exposed to HIV or to transmit the virus.*

y. *Minor - a person who is below 18 years of age.*

z. *MSM - male persons who engage in sexual activity with members of the same sex, regardless of their gender identity.*

aa. *Mature Minor Doctrine - the legal principle that recognizes the capacity of some minors to consent independently to medical procedures, if they have been assessed by qualified health professionals to understand the nature of procedures and their consequences, and to make a decision on their own.*

bb. *Operator - the person who exercises direct control and supervision over employees in an entertainment establishment, regardless of who is named in the business permit or license to operate.*

cc. *Outpatient HIV and AIDS Treatment (OHAT) - the benefit package for outpatient treatment of HIV and AIDS offered by PhilHealth.*

dd. *Owner of Entertainment Establishment - the person or juridical entity who is registered as the owner of the establishment in the business permit or license to operate.*

ee. *Partner Notification - the process by which the "index client", "source" or "patient", who has a sexually transmitted infection (STI) including HIV, is given support in informing and advising the partner(s) who have been exposed to infection. Support includes giving the index client a mechanism to encourage the client's partner to attend counseling, testing and other prevention and treatment services. Confidentiality shall be observed in the entire process.*

ff. *Peer Educator - a person trained by an accredited institution who, belonging to the same community, gives support and education to co-workers and friends and to others with their same peer group.*

gg. *Person Living with HIV (PLHIV) - an individual diagnosed to be infected with HIV.*

hh. *Persons with Disabilities (PWDs) - those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.*

ii. *Pre-Exposure Prophylaxis - the use of prescription drugs as a strategy for the prevention of HIV infection by people who do not have HIV and AIDS. It is an optional treatment which may be taken by people who are HIV-negative but who have substantial, higher -than-average risk of contracting HIV infection.*

jj. *Pre-Test Counseling - the process of providing an individual with information on biomedical aspects of STI, HIV and AIDS and emotional and psychosocial support for implications of undergoing STI and HIV testing and the test result itself, before the individual is subjected to the test.*

kk. *Post-Exposure Prophylaxis - preventive medical treatment started immediately after exposure to a pathogen (HIV) in order to prevent infection by the pathogen and the development of the disease.*

ll. *Prophylactic - any agent or device used to prevent the transmission of an infection.*

mm. Quezon City STI, HIV, and AIDS Council (QCSAC) - a multisectoral organization committed to unify responsive effort on the prevention, care, and control of STI, HIV and AIDS among the general population especially the marginalized groups and reduction of its impact on the community.

nn. Quezon City STI, HIV, and AIDS Prevention and Control Action Plan (Action Plan) - a five (5) year action and investment plan which includes the City's (1) strategies, activities, and targets in addressing its STI, HIV and AIDS situation; (2) the budgetary requirement, source of funding and investment plan for each strategy/activity; and (3) the responsible department, office, or agency for the implementation of said strategies and activities.

oo. Reproductive Health and Wellness Clinics - primary providers of STI, HIV, and AIDS Prevention and Control, and other reproductive health and wellness services.

pp. Service Delivery Network - the network of health facilities and other service providers within Quezon City, offering preventive care services, treatment, and other support services in an integrated and coordinated manner.

qq. Sexual Orientation - each person's capacity for profound, emotional, affectional, and sexual attraction to and intimate and sexual relations with, individuals of a different gender, or the same gender, or more than one gender.

rr. Sexually Transmitted Infections (STI) - infections that are spread through the transfer of organisms from one person to another as a result of sexual contact.

ss. Social Hygiene Clinics - the primary providers of STI, HIV, and AIDS Prevention and Control Services under QC Ordinance No. SP-2506, S-2016. As provided under this Ordinance, Social Hygiene Clinics are hereby renamed to Reproductive Health and Wellness Clinics.

tt. STI, HIV, AIDS Counseling - the interpersonal and dynamic communication process between a client and a trained counselor, who is bound by a Code of Ethics and practice, to resolve personal, social, or psychological problems and difficulties, whose objective in counseling, in the context of STI or HIV diagnosis, is to encourage the client or explore important personal issues, identify ways of coping with anxiety and stress, and plan for the future (keeping healthy, adhering to treatment, and preventing transmission); and in the context of negative STI or HIV result, to encourage the client to explore motivations, options and skills to stay HIV-negative.

uu. STI, HIV, AIDS Counselor - any individual trained by an institution or organization accredited by the Department of Health or QC Health Department to provide counseling services on STI, HIV, or AIDS.

vv. STI, HIV, and AIDS Monitoring and Surveillance - the documentation and analysis of the number of STI, HIV, and AIDS infections and the pattern of its spread.

ww. STI/HIV Testing Facility - any DOH-accredited on-site or mobile testing center, hospital, clinic, laboratory, and other facility that has the capacity to conduct voluntary STI or HIV counselling and testing.

xx. STI Testing - any facility-based, mobile medical procedure, or community- based screening modalities that are conducted to determine the presence or absence of STIs. STI Testing is confidential, voluntary in nature, must be accompanied by counselling prior to and after the testing, and conducted only with the informed consent of the person.

yy. STI Transmission - the transfer of STI from one infected person to an uninfected individual, through unprotected sexual intercourse.

zz. Stigma - the dynamic devaluation and dehumanization of an individual in the eyes of others, which may be based on attributes that are arbitrarily defined by others as discreditable or unworthy and which results in discrimination when acted upon.

aaa. Sundown Clinic - any QC Health Facility, including Reproductive Health and Wellness clinics providing STI, HIV, and AIDS health care services, with operational hours extending up to 12 midnight.

bbb. Treatment Hubs - private and public hospitals or medical establishments accredited by the DOH to have the capacity and facility to provide treatment and care services to PLHIV.

ccc. Voluntary STI/HIV Testing - STI or HIV testing done on an individual who consents to the test, after having undergone pre-test counselling.

ddd. Vulnerable Communities - communities and groups suffering from vulnerabilities, such as unequal opportunities, social exclusion, poverty, unemployment, and other similar social, economic, cultural, and political conditions, making them more susceptible to STI or HIV infection, and to developing AIDS.

eee. Workplace - the office, premise, or work site where workers are habitually employed and shall include the office or place where workers, with no fixed or definite work site, regularly report for assignment in the course of their employment.

ARTICLE II. QUEZON CITY STI, HIV, AND AIDS PREVENTION AND CONTROL KEY ACTORS AND ORGANIZATIONS

SECTION 1. QUEZON CITY STI, HIV, AND AIDS COUNCIL (QCSAC).

a. Membership and Composition - The Quezon City STI, HIV, and AIDS Council created under QC Ordinance No. SP-838, S-1999 is hereby reorganized with the following members:

i. Office of the City Mayor - Chairperson

ii. Office of the City Vice Mayor - Vice-chairperson

iii. Quezon City Health Department - Secretariat

iv. Sangguniang Committee on Health Chairperson

v. Division of City Schools

vi. Department of Public Order and Safety

vii. Social Services Development Department

viii. Liga ng mga Barangay

ix. City Legal Department

x. City Planning and Development Department

xi. Gender and Development Council

xii. Public Employment Service Office

xiii. Business Permits and Licensing Department

xiv. Barangay and Community Relations Department

xv. Quezon City Youth Development Office

xvi. Quezon City Police District

xvii. Department of the Interior and Local Government - NCR

xviii. Department of Health - NCR

xix. Two (2) representatives from organizations of PLHIVs

xx. One (1) representative from the QC Pride Council;

xxi. One (1) representative from a private organization or NGO with expertise in standard setting and service delivery;

xxii. Six (6) representatives from different NGOs working for the welfare of identified key populations.

The QCSAC 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 its functions under this Ordinance.

NGOs and CSOs shall be accredited in accordance with existing rules and regulations of Quezon City. The City Mayor shall issue guidelines on the qualifications, nomination, and selection of NGO or CSO representatives to the QCSAC.

b. Functions and Responsibilities - The QCSAC shall be responsible for the following:

i. Develop, cost and regularly review a Quezon City STI, HIV, and AIDS Prevention and Control Action Plan, in collaboration with relevant government agencies, CSOs, the PLHIV community, and other stakeholders.

ii. Ensure the operationalization and implementation of the Action Plan.

iii. Strengthen collaboration between government agencies and CSOs involved in the implementation of the Quezon City STI, HIV, and AIDS, Prevention and Control Program under this Ordinance and Action Plan, including the delivery of HIV and AIDS related services.

iv. Develop and ensure implementation of guidelines and policies necessary for the implementation of this Ordinance.

v. Monitor the progress of the response to the City's STI, HIV, and AIDS situation and actively seek good practices from all stakeholders.

vi. Monitor the implementation of the QC STI, HIV, and AIDS Prevention and Control Action Plan, undertake mid-term assessments, including spending assessments, and evaluate its impact every five (5) years.

vii. Mobilize sources of funds for the implementation and evaluation of the Action Plan.

viii. Direct and require members to conduct monitoring and evaluation in all of the HIV-related programs, policies, and services, undertaken within their respective mandates, and to submit an annual report.

ix. Coordinate, organize, and work in partnership with foreign and international organizations regarding funding, data collection, research, and prevention and treatment modalities on STI, HIV and AIDS, and ensure that foreign-funded programs are aligned to the national plan and response.

x. Advocate for policy reforms to Congress, PNAC, and the QC Council and other government agencies or departments to strengthen the City's response to the STI, HIV and AIDS situation.

xi. Submit an annual accomplishment/progress report on the accomplishments under the Action Plan to the Office of the Mayor, City Council, and members of the QCSAC and PNAC.

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. Recommend policies and programs that will institutionalize or continue the interventions required in addressing the gaps identified in the City's response to the STI, HIV, and AIDS situation.

xiv. Ensure that all members of the QCSAC have developed and are implementing individual STI, HIV, and AIDS Control work plans, which are anchored on, and contribute to the Action Plan.

c. Meetings and Quorum - The QCSAC 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.

The presence of the Chairperson, Co-Chairperson or Vice Chairperson and at least ten (10) permanent members of the QCSAC shall constitute a quorum to do business, and a majority vote of those present shall be sufficient to render decisions.

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

SECTION 2. QC STI, HIV, AIDS, PREVENTION AND CONTROL ACTION PLAN. - Within six (6) months from the effectivity of this Ordinance and every five (5) years thereafter, the QCSAC shall develop a QC STI, HIV, AIDS Prevention and Control Action Plan.

a. *Content. The Action Plan shall be oriented towards the City's Vision of zero deaths, transmissions, and discrimination and shall include:*

   i. *Interim targets;*

   ii. *Strategies;*

   iii. *Activities;*

   iv. *Projected outcomes;*

   v. *Expected outputs;*

   vi. *Estimated budget and funding source;*

   vii. *Responsible office, person, or organization;*

   viii. *Monitoring and evaluation plan; and*

   ix. *Timeline.*

b. *Evaluation - The QCSAC shall evaluate the Action Plan every three (3) years and update the same as needed. The QCSAC shall, within six (6) months after the termination of the current Action Plan, submit a written report on the implementation of the Action Plan to the City Mayor and City Council.*

c. *Local Health Investment Plan - The QCSAC shall ensure that the Action Plan is aligned and integrated in the City's Local Health Investment Plan.*

SECTION 3. LEAD AGENCY. - The Quezon City Health Department shall be the agency primarily responsible for the implementation of this Ordinance and the City's STI, HIV, AIDS prevention and control program.

SECTION 4. QC STI, HIV, AIDS, WORKING GROUP. Within thirty (30) days from the effectivity of this Ordinance and every month thereafter, the Quezon City STI, HIV, AIDS Working Group shall be convened to coordinate the implementation of this Ordinance and the Action Plan.

a. *Mandate - The QC STI, HIV, AIDS, Working Group shall be responsible for ensuring the implementation of the Action Plan.*

The QC STI, HIV, AIDS Working Group shall be responsible for reporting any bottlenecks in the Service Delivery Network, operational challenges, and recommended strategies, to the QCSAC for appropriate action. Such report shall also include reports of inaction of members of the QC STI, HIV, AIDS Working Group or any other department or agency within Quezon City, responsible for implementing any aspect of this Ordinance or the Action Plan.

b. *Composition - The QC STI, HIV, AIDS Working Group shall be composed of the following:*

   i. *Quezon City Health Department - Chairperson*

   ii. *Gender and Development Council Office - Vice Chairperson*

   iii. *Social Services Development Department*

   iv. *Barangay and Community Relations Department*

   v. *City Budget Department*

   vi. *City Accounting Department*

   vii. *Other offices that may be identified by the QCSAC.*

   The QC STI, HIV, AIDS Working Group may, when necessary for the efficient implementation of the QC STI, HIV, AIDS Prevention and Control Program and Action Plan, call on the participation of other offices, NGOs, experts and private entities with respect to technical matters within their expertise.

c. *Coordination. The QC STI, HIV, AIDS Working Group shall meet every month. Within fifteen (15) days from the effectivity of this ordinance, members of the working group shall submit to the QCHD the names of one (1) permanent member and two (2) alternate representatives, who shall be responsible for participating in all meetings of the working group on behalf of their department or office.*

SECTION 5. SERVICE DELIVERY NETWORK. - The Lead Agency, through the QC STI, HIV, and AIDS Working Group, shall be responsible for establishing and expanding an integrated, efficient and functioning STI, HIV and AIDS Service Delivery Network, to enable access to health services, health insurance, social services and livelihood assistance, legal services, and other services to ensure the well-being of PLHIVs, affected families, intimate partners and their children, key affected populations and vulnerable communities.

a. *Coverage - The Service Delivery Network shall include, but shall not be limited to:*

   i. *Health services such as STI and HIV Testing Facilities, Reproductive Health and Wellness Clinics, Treatment Hubs, STI and HIV Counselling/Counsellors;*

   ii. *Legal services such as the Public Attorney's Office, Integrated Bar of the Philippines, and other Legal Aid Clinics;*

   iii. *Dispute Resolution and Mediation Services;*

   iv. *Law Enforcement Services such as the QC Department of Public Order and Safety and the QC Police Department;*

   v. *Mental health services such as psychiatric facilities, peer educators and institutional counselors; and*

   vi. *Social Services such as care and support hotlines, support groups, livelihood assistance, housing assistance, burial assistance, etc.*

b. *Accreditation and Registration - The QCSAC shall issue guidelines and standards on the accreditation of public and private HIV testing facilities, peer educators, institutions and organizations conducting training of peer educators and counselors, provided that, facilities, peer educators, institutions and organizations accredited by the DOH, and those accredited under Ordinance No. SP-2504, S-2016, shall be recognized in Quezon City without need of new accreditation.*

c. *Process Mapping - Within six (6) months from the effectivity of this Ordinance and every year thereafter, the QC STI, HIV, AIDS Working Group shall develop a process map of all services available within the Service Delivery Network and access thereto, ensuring that the processes for accessing such services are clear and free of unnecessary or burdensome requirements.*

d. *Directory - Within one (1) year from the effectivity of this Ordinance, the Lead Agency shall issue and distribute a directory of the entire SDN, and make the same available through the QC Government website.*

SECTION 6. BUSINESS CONTINUITY AND DISASTER RESILIENCY. - The QCSAC shall establish a business continuity and disaster resiliency plan to ensure the continuity of services during national or local emergencies or calamities. The business continuity and disaster resiliency plan shall include the creation of a rapid response task force, rapid response service delivery network, and other mechanisms to ensure the continuity of prevention, treatment, care and other support services. It must be aligned and incorporated in the Minimum Intervention Package of the Disaster and Risk Reduction Management for Health (DRRM-H) Plan.

SECTION 7. REPRODUCTIVE HEALTH AND WELLNESS CLINICS. - Quezon City's Social Hygiene Clinics are hereby renamed Reproductive Health and Wellness Clinics.

a. *Services - RHWCs shall provide the following services:*

   i. *VD general consultation;*

   ii. *STI diagnosis and treatment;*

   iii. *HIV counselling and testing;*

   iv. *STI, HIV, AIDS education;*

   v. *Demonstration of proper condom use;*

   vi. *Distribution of condoms and lubricants;*

   vii. *Hepatitis B testing and treatment;*

   viii. *Vaccinations (Hepatitis B, flu and pneumonia);*

   ix. *Anti-Retro Viral therapy;*

   x. *Laboratory Services:*

      (a) Gram stain

      (b) Rapid plasma

      (c) Treponema Pallidum Hemagglutination Assay

      (d) HIV rapid testing

      (e) HBSg screening

      (f) Wet mounts

      (g) KOH mounts

      (h) Urinalysis

      (i) CBC

      (j) CD4

      (k) DSSM/ Gene expert

      (l) Rapid HIV diagnostic algorithm

(m) Viral load; and

xi. Other services as may be specified by the Lead Agency.

In line with the foregoing, the Lead Agency shall develop a new manual of operations to reflect the processes of all available services in RHWCs.

b. Equipment - The Lead Agency shall procure equipment necessary to ensure that RHWCs are able to provide a comprehensive package of interventions for STI, HIV, AIDS Control, Prevention, and Treatment. The Lead Agency shall ensure that all equipment in RHWCs are complete and up to date.

c. Staffing of RHWCs - Within six (6) months, the QCHD, subject to the approval of QCSAC, shall submit a staffing rationalization plan for RHWCs and sundown clinics to the Quezon City Council.

d. Contractual Workers - When the demand for services necessitates, the RHWC may request for additional contract workers who shall be hired only on a temporary basis, for the purpose of meeting the increase in demand as a result of the enactment and implementation of this Ordinance. The QCSAC shall issue guidelines on the hiring of additional contract workers and their regularization when needed.

e. Establishment of New RHWCs - In order to ensure access to information, services and support, it is hereby established two (2) additional RHWCs in Barangay Libis in District III and Barangay Tandang Sora in District VI.

SECTION 8. DATA COLLECTION, EVALUATION AND MONITORING, AND RESEARCH. - The Lead Agency shall maintain a comprehensive STI, HIV, and AIDS monitoring and evaluation program.

a. Data Collection - The Lead Agency shall receive, collate, process, and evaluate all medical reports related to STI, HIV, and AIDS from all hospitals, clinics, laboratories, and testing centers, including STI and HIV-related deaths and relevant data from public and private hospitals, various databanks or information systems, within Quezon City, while observing a coding system to ensure anonymity and confidentiality of information.

b. Monitoring and Evaluation Team - The Lead Agency, in coordination with the QC Civil Registrar and the DOH Epidemiology Bureau, shall determine and monitor the magnitude and progression of STI, HIV, and AIDS in Quezon City, to help the City evaluate the adequacy and efficacy of STI, HIV, and AIDS Prevention, Control, and Treatment Programs being employed, and to monitor performance of RHWC clinics, accredited treatment hubs, and other institutions involved in the SDN.

c. *Research - The QCSAC shall initiate research in order to measure the impact of interventions, establish the evidence for proposed interventions, or identify other potential interventions.*

SECTION 9. CAPABILITY BUILDING, INSTITUTIONAL DEVELOPMENT, AND STRESS MANAGEMENT. - All offices within the Quezon City Department are mandated to develop and implement capability building, institutional development activities on STI, HIV, AIDS Prevention and Control. In addition, offices providing STI, HIV, and AIDS services shall provide legal literacy training, sensitivity training for dealing with minors and key affected populations, and stress management activities for its frontline service providers.

SECTION 10. PARTNERSHIP BUILDING WITH CIVIL SOCIETY ORGANIZATIONS AND THE PRIVATE SECTOR. - The QCSAC shall engage civil society organizations and the private sector in developing and implementing the City's STI, HIV, and AIDS Action Plan to ensure their meaningful participation, and efficient utilization of resources. QCSAC shall likewise establish mechanisms to enable the City Government and private sector to partner with civil society organizations, especially organizations representing KAPs and vulnerable communities, to enable their sustained participation in STI, HIV, AIDS Prevention and Control.

SECTION 11. APPROPRIATION. - An initial fund of Twelve Million Pesos (Php12,000,000.00) shall be allocated for the implementation of this Ordinance under the Quezon City Health Department. Succeeding appropriations shall be included in the general appropriations of the QC Government annually. Quezon City Gender and Development Council, as well as other offices, departments or agency of the City may appropriate funds in support for the implementation of STI, HIV and AIDS programs.

SECTION 12. STI, HIV, AND AIDS PREVENTION AND CONTROL TRUST FUND. - An STI, HIV, and AIDS Prevention and Control Trust Fund is hereby created. All fees and charges collected by Reproductive Health and Wellness Clinics, including PhilHealth reimbursements for STI, HIV, and AIDS treatment and services, as well as fines collected under Article VII of this Ordinance shall be held in favor of and deposited to said trust fund account, and shall be used exclusively for the implementation of the City's STI, HIV, and AIDS Prevention and Control Program.

ARTICLE III. BEST PRACTICES

SECTION 1. HUMAN RIGHTS AND EVIDENCE BASED BEST PRACTICES. - The City Government shall develop, promote, and adopt a range of measures and interventions that aim to prevent, halt, or control the spread of STI and HIV in the general population, especially among the key populations and vulnerable communities. In so doing, all departments, offices, and personnel shall observe the following in promoting and adopting STI, HIV, and AIDS Prevention and Control strategies:

a. *Protection of human rights - The City's response to the STI, HIV and AIDS situation shall be anchored on the principles of human rights and human dignity. All measures and interventions adopted shall be aligned with internationally-recognized human rights and standards.*

b. *Right to information - Access to up-to-date, accurate, and science-based information on STI, HIV, and AIDS is deemed part of the constitutional right to health.*

c. *Non-discrimination - The City Government shall ensure the delivery of non-discriminatory STI, HIV and AIDS Prevention and Control services.*

d. *Evidence-Based Decision-Making - The City Government shall ensure that policies and interventions adopted to respond to the STI, HIV, and AIDS situation shall be evidence-based. Where necessary, the City shall endeavor to conduct research in order to assess proposed interventions, or evaluate existing interventions.*

SECTION 2. AWARDS AND RECOGNITION. - The City Government shall establish or include in the existing award and recognition system the best practices and initiatives of the Barangays, the Sangguniang Kabataan, and the Private Institutions on STI, HIV and AIDS Prevention and Control program and the City's Vision Zero goal such as, but not limited to, the Barangay Seal of Good Housekeeping, the SK Seal of Good Youth Governance and the Manuel Luis Quezon Gawad Parangal.

ARTICLE IV. STI, HIV, AND AIDS PREVENTION AND CONTROL

SECTION 1. INFORMATION, EDUCATION, COMMUNICATION AND OTHER COMMUNITY-BASED INTERVENTIONS. -

a. *Social Marketing on STI and HIV Prevention and Control and Government Services - The Lead Agency, in coordination with other relevant departments within the City Government, CSOs, and other stakeholders, shall develop an STI, HIV, and AIDS information, education, and communication campaign, with the goal of encouraging safer sex practices, reducing risky behavior, lowering vulnerabilities, eliminating stigma and discrimination, and promoting human rights of PLHIVs. The campaign shall include a social marketing campaign intended to raise awareness among the general public, and a social marketing campaign that considers the specific needs of key affected populations and vulnerable communities.*

b. *Peer Education and Counselling - The Lead Agency shall establish a Peer Education Program as a strategy to effect behavior change and empower communities and key affected populations to adopt changes that support risk reduction, prevent HIV transmission, and increase uptake of services among key populations including those in close settings.*

   i. *Government peer educators - The Lead Agency shall ensure that there are peer educators available or accessible in all Reproductive Health and Wellness Clinics, and STI and HIV Testing Facilities and Treatment Hubs and Barangays.*

   ii. *Training for institutional peer educators and volunteers - The Lead Agency, in coordination with CSOs, shall provide free accreditation training for institutional peer educators provided under Article IV, Section I, and other volunteer peer educators.*

c. *Institutional Participation in STI, HIV and AIDS Prevention and Control -*

   i. *Barangays - All Barangays within Quezon City are mandated to develop and implement an STI, HIV, and AIDS Prevention and Control Policy which shall include, among others:*

      (a) *The designation of a QCHD-trained peer educator or focal person who may be a Barangay Health Worker, GAD focal person, or such other official of the Barangay designated to provide counseling and facilitate access to STI, HIV and AIDS services;*

      (b) *The establishment of condom access points;*

      (c) *Accessible and visible IEC on STI, HIV, and AIDS Awareness; and*

      (d) *Mandatory sensitization training for all officials and employees of the Barangay.*

      The Barangay shall include its STI, HIV, and AIDS Prevention and Control Policy in its Barangay Development Plan and annual budget.

   ii. *Schools, Colleges, and Universities - All schools, colleges, and universities within Quezon City are mandated to develop and implement an STI, HIV, and AIDS Prevention and Control Policy, which shall include, among others:*

      (a) *Age-appropriate, culture-sensitive, and gender-responsive comprehensive sexuality education, with modules on STI, HIV, and AIDS Prevention and Control;*

(b) STI, HIV, and AIDS Awareness and sensitization training for all school officials, professors, teachers, employees, administrators and student government, and parent-teacher associations;

(c) The designation of a QCHD-trained peer educator and/or counselor who shall provide counseling and facilitate access to STI, HIV, and AIDS services;

(d) Establishment of condom access points, with due regard for the need for parent or guardian consent for minors, appropriate information and counseling on STI, HIV, and AIDS Prevention and Control;

(e) Accessible and visible IEC on STI, HIV, and AIDS Awareness; and

(f) Parent counseling on STI, HIV, and AIDS Prevention and Control, and Government Services.

Provided that, if development and implementation of STI, HIV and AIDS Prevention and Control Policy is not appropriate or feasible, a special design module on STI, HIV, and AIDS Prevention Control Policy shall be made. Flexibility in the formulation and adoption of appropriate course content, scope and methodology in each educational level or group shall be allowed after due consultations with Parent-Teachers and Community Associations (PTCAs), Private Schools Associations, school officials and other interest groups.

iii. Workplaces - All businesses within Quezon City, regardless of the number of employees, shall develop and implement, subject to the approval of the Lead Agency, an STI, HIV, and AIDS Prevention and Control Policy. Failure to submit an approved STI, HIV, and AIDS Policy within six (6) months from the date of issuance of the Business Permit shall be ground for denial, suspension or revocation of the business permit. The Policy shall include, among others:

(a) Designation of a QCHD-trained peer educator and/or counselor;

(b) STI, HIV, and AIDS Prevention and Control training for all employees;

(c) Establishment of condom-access points for businesses with more than 100 employees;

(d) Accessible and visible IEC on STI, HIV, and AIDS Awareness;

(e) *Annual STI, HIV, and AIDS sensitization training for officers and upper management; and*

(f) *Anti-discrimination policies and redress mechanisms.*

Micro, Small and Medium Enterprises (MSMEs) including Barangay Micro Business Enterprises shall be assisted by the QCSAC and the BPLD in the development of their STI, HIV, and AIDS Prevention and Control Policy, subject to the implementing guidelines to be crafted by the QCSAC and/or BPLD pertaining to this provision.

iv. *Government Offices - The QCHD shall develop and implement an STI, HIV, and AIDS Prevention and Control Policy to be implemented in all departments and offices of the Quezon City Government. The Policy shall include, among others:*

(a) *Designation of a QCHD-trained peer educator for each department or office;*

(b) *STI, HIV, and AIDS Prevention and Control training for all employees;*

(c) *Accessible and visible IEC on STI, HIV, and AIDS Awareness;*

(d) *Establishment of condom access points within the City Government; and*

(e) *Anti-discrimination policies and redress mechanisms.*

QC Government Office shall include its STI, HIV, and AIDS Policy in its Annual Budget.

v. *Hotels, Motels, and Transient Houses - In addition to the requirements under Section 2(c)(iii), all hotels, motels, and transient houses, shall include condoms in the free toiletry kits provided to guests. In cases where the hotel, motel or transient house does not provide free toiletries, it shall ensure that there is a condom-access point within its premises and that its location is made known to the guest.*

vi. *Entertainment Establishment - In addition to the requirements under Section 2(c)(iii), all entertainment establishments shall have condom access points within its premises, regardless of the number of employees, and shall make information on STI, HIV and AIDS accessible and visible to its workers.*

vii. Prisons and Other Closed Settings - In addition to the requirements under Section(c)(iv), prisons, rehabilitation centers, and other closed-setting institutions within Quezon City shall require all its officers and employees to undergo sensitization training and training on risk or health condition assessment. Prisons, rehabilitation centers and other closed-setting institutions shall also ensure that condom access points are established and known within the premises.

viii. Manpower, Recruitment and Placement Agencies - In addition to the requirements under Section 2(c)(iii), all Manpower, Recruitment and Placement Agencies operating within Quezon City shall provide an STI, HIV, and AIDS Prevention and Control seminar for all overseas workers prior to deployment, at no cost to the worker.

ix. Department of Public Order and Safety, QCPD, and other Law Enforcement Agencies operating in Quezon City - In addition to the requirements under Section I (iv), the QC DPOS, QCPD, and other Law Enforcement Agencies operating in Quezon City shall require all its enforcers to undergo sensitization training and training on risk or health condition assessment.

The QCSAC shall develop guidelines for the referral of detained PLHIVs to ensure continuation of treatment.

All STI, HIV, and AIDS Prevention and Control Policies required in this provision shall be submitted to the Lead Agency for approval.

The QCSAC shall develop model policies to assist the aforementioned institutions in adopting an effective and appropriate STI, HIV, and AIDS Prevention and Control Policies. The QCSAC through the QC Health Department may also adopt the learning of the COVID-19 response strategy particularly on disease surveillance, early detection and contact tracing in the STI, HIV, and AIDS Prevention and Control Policies.

The QCSAC shall likewise develop standardized and key messages, standard curriculums and modules, as part of institutional information, education and communication activities on STI, HIV and AIDS Prevention and Control.

The QCSAC shall also develop and/or recommend incentives to recognize institutions that contribute to the City's Vision Zero goal. These incentives may include opening business one stop shops or satellite registration sites at the workplace, seal of excellence, and tax rebates.

SECTION 2. SCREENING AND TESTING. - The City Government shall make free STI and HIV Screening and Testing available and accessible within the City. It shall be accessible and available in all Quezon City Health Centers.

a. *Voluntary Testing - The City shall encourage voluntary STI and HIV testing. The written consent of the person taking the test must be obtained before HIV testing, and only upon conducting pre-test counseling.*

   i. *Voluntary testing of minors -*

      (a) *In keeping with the principle of the evolving capacities of the child, if the person is fifteen (15) to below eighteen (18) years of age, consent to voluntary testing shall be obtained from the child without the need for the consent of a parent or guardian.*

      (b) *In keeping with the mature minor doctrine, any young person age below fifteen (15) years, who is pregnant or engaged in high-risk behavior, shall be eligible for STI or HIV testing and counseling with the assistance of a licensed social worker or health worker. Consent to voluntary STI or HIV testing shall be obtained from the child without the need for the consent of a parent or guardian, upon proper counselling conducted by a social worker, health care provider, or health care professional accredited by the DOH or DSWD.*

      (c) *In all other cases not covered by paragraph (b) above, consent to voluntary STI or HIV testing shall be obtained from the child's parents or legal guardian if the person is below fifteen (15) years of age or is mentally incapacitated. In cases when the child's parents or legal guardian cannot be located despite reasonable efforts, or if the child's parents or legal guardian refuse to give consent, it shall be obtained from the licensed social worker or health worker. To protect the best interest of the child, the assent of the minor shall also be required prior to STI or HIV testing, upon proper counseling conducted by a social worker, healthcare provider, or health care professionals accredited by the DOH or the DSWD.*

   ii. *Community-based STI and HIV screening and Rapid HIV Diagnostic Algorithm - The QCSAC shall develop and issue guidelines on free access to community-based HIV screening, facility-based HIV Screening, Rapid HIV Diagnostic Algorithm, and Rapid HIV Testing.*

   iii. *STI and HIV Testing for Pregnant Women - A health care provider who offers pre-natal medical care shall offer STI and HIV testing for pregnant women as part of the pre-natal testing package. The health care provider shall provide pre-test counseling, and, shall withhold testing only at the request of the pregnant woman.*

In the event that the pregnant woman undergoing testing has given birth before testing results are available, and said woman is determined to be at high-risk of STI or HIV infection, the health worker providing counseling shall encourage the pregnant woman to avail of the services of the Quezon City Milk Bank, and make the necessary referral.

The Quezon City Milk Bank shall endeavor to prioritize pregnant women suspected of or confirmed positive for STI or HIV infection, as referred by a licensed health worker.

b. *Compulsory HIV Testing - HIV Testing shall be compulsory only in the following instances, and shall at all times be conducted only upon proper counselling by an accredited social worker, health care provider, or health care professional, and with information on the basis of compulsory testing:*

   i. *When it is necessary to test a person who is charged with any of the offenses punishable under Articles 264, 266, 335 and 338 of the "Revised Penal Code," as amended by Republic Act No. 8353 otherwise known as the "Anti-Rape Law" of 1997;*

   ii. *When it is necessary to resolve relevant issues under Executive Order No. 209, otherwise known as "Family Code of the Philippines"; specifically, Art, 45 (6) and Art 46(3);*

   iii. *As a prerequisite in the donation of blood in compliance with the provisions of Republic Act No. 7170, otherwise known as the "Organ Donation Act" and Republic Act No. 7719, otherwise known as the "National Blood Services Act." Provided that, a second testing may be demanded as a matter of right by the blood, tissue, or organ recipient, or his/her immediate relatives before transfusion or transplant, except during emergency cases. For transfusion, a second testing must only be done in selected designated DOH-licensed Blood Service Facilities.*

c. *Release of STI or HIV-related Test Results - The result of STI tests or HIV confirmatory tests shall only be released to the individual who submitted to the test, by a trained health worker who shall provide post-test counseling. If the patient is a minor, an orphan, or is mentally incapacitated, the result may be released to either of the patient's parents, legal guardian, or a duly assigned licensed social worker, whichever is applicable, in accordance with Section 2(a)(i) of this Article. If the parents of the minor refused consent but the test is nevertheless continued, the results will be released to the minor with the assistance of an accredited health worker or social worker who shall ensure that post-test counselling is provided to the said minor.*

d. Referral to Care - Private diagnostic clinics shall ensure that all reactive or STI or HIV positive clients shall be referred to the nearest RHWC, sundown clinic, treatment hub or case manager, and advised of available treatment, care, and support services.

SECTION 3. PARTNER NOTIFICATION AND CONTACT TRACING. - Any person who, after having been tested is found to be infected with STI or HIV is strongly encouraged to disclose this health condition to the spouse, sexual partners, and/or any person prior to engaging in penetrative sex or any potential exposure to STI or HIV.

The Lead Agency shall be responsible for creating an enabling environment to encourage partner identification and notification. The Lead Agency shall establish and implement rights-based mechanisms to promote identification and STI or HIV status disclosure and to strongly encourage newly-tested STI or HIV positive individuals to notify their spouse, sexual partners, and/or any person prior to engaging in penetrative sex or any potential exposure to STI or HIV of their status. Such mechanisms shall include, but not be limited to, regular psychosocial counseling for the PLHIV or person with STI and marriage or partner counseling for the couples, the creation of support groups for couples, and provision of biomedical interventions.

SECTION 4. PREVENTION PROGRAMS FOR KEY AFFECTED POPULATIONS AND VULNERABLE COMMUNITIES. - The QCSAC shall identify key affected populations based on available data, and shall develop and implement a comprehensive, rights and evidence based STI, HIV, and AIDS Prevention and Control Program for key affected populations and vulnerable communities.

SECTION 5. STIGMA AND DISCRIMINATION REDUCTION. - The Lead Agency in coordination with relevant departments, shall adopt differentiated approaches to stigma and discrimination reduction.

a. Protection of Confidentiality - The confidentiality and privacy of any individual who has been tested for, exposed to, found positive for STI, HIV, or AIDS-related illnesses, or was treated for AIDS-related illnesses, or has obtained STI, HIV and AIDS preventive, treatment, care or support services shall be guaranteed. The following acts violate confidentiality and privacy and are punishable under this Ordinance:

i. Disclosure of Confidential STI, HIV, and AIDS Information - It shall be unlawful to disclose, without written consent, information that a person has STI, HIV or AIDS, has undergone STI or HIV test or related test, has STI or HIV infection or HIV related illnesses, or has been exposed to STI or HIV. It shall also be unlawful to disclose, without written consent, information that a person has accessed STI, HIV, or AIDS preventive, treatment, care, and support services.

The prohibition shall apply to any person, natural or juridical, including those whose work or function involves the implementation of this ordinance or the delivery of STI or HIV-related services, including those who handle or have access to personal data or information in the workplace, and other institutions named in Article IV, Section 1(c) of this Ordinance, and who, pursuant to the receipt of the required written consent from the subject of confidential STI, HIV and AIDS information, have been subsequently granted access to the same.

ii. *Media Disclosure - It shall be unlawful for any editor, publisher, reporter or columnist in case of printed materials, or any announcer or producer in case of television and radio broadcasting, or any producer or director of films in case of the movie industry, or any other individual or organization in case of social media, to disclose the name, picture, or any information that would reasonably identify persons living with STI, HIV and AIDS or any confidential STI, HIV and AIDS information without the prior written consent of their subjects. The provision shall likewise apply to online and/or social media disclosures.*

EXCEPTIONS: - Confidential STI, HIV and AIDS information may be released by testing facilities without consent of their subjects, only in the following instances:

a. *When complying with reportorial requirements of the national active passive surveillance system of the DOH; Provided that, the information related to a person's identity shall remain confidential;*

b. *When informing other health workers directly involved in the treatment or care of a PLHIV; Provided that, such worker shall be required to perform the duty of shared medical confidentiality; and*

c. *When responding to a subpoena duces tecum and subpoena ad testificandum issued by a competent court with jurisdiction over a legal proceeding where the main issue is the STI, HIV and AIDS status of the individual; Provided that, the confidential medical record, after having been verified for accuracy by the head of the office or department, shall remain anonymous and unlinked, and shall be properly sealed by its lawful custodian, and delivered to the court, and personally opened by the judge; Provided further that, the judicial proceedings be held in executive session pursuant to Section 45 of Republic Act No. 11166 or the "Philippine HIV and AIDS Policy Act".*

b. *Protection Against Discriminatory Acts and Practices - The following discriminatory acts and practices shall be prohibited:*

i. *Discrimination in the Workplace - Rejection of job application, termination of employment, or other discriminatory policies in hiring, provision of employment and other related benefits, denial of promotion or assignment of an individual solely or partially on the basis of actual, perceived, or suspected STI or HIV status;*

ii. *Discrimination in Learning Institutions - Refusal of admission, segregation, imposition of harsher disciplinary actions, or denial of benefits or services of a student or a prospective student solely or partially on the basis of an actual, perceived, or suspected STI or HIV status;*

iii. *Restriction on Travel and Habitation - Restrictions on travel within Quezon City, refusal of lawful entry into Quezon City, or the quarantine or enforced isolation of travelers solely or partially on account of actual, perceived, or suspected STI or HIV status;*

iv. *Restrictions on Shelter - Restrictions on housing or lodging, whether permanent or temporary, solely or partially on the basis of actual, perceived, or suspected STI or HIV status;*

v. *Prohibition from Public Participation - Prohibition on the right to seek an elective or appointive office, or from voting, solely or partially on the basis of actual, perceived, or suspected HIV status;*

vi. *Exclusion from Credit and Insurance Services - Exclusion from HMO, health, accident, or life insurance, or credit on loan services, including the extension of such loan or insurance facilities of an individual solely or partially on the basis of actual, perceived, or suspected STI or HIV status, or risk of exposure to STI or HIV, provided that, the PLHIV or person living with STI, has not concealed or misrepresented the fact to the insurance company or loan or credit service provider upon application;*

vii. *Discrimination in Hospitals and Health Institutions - Denial of health services, or being charged with a higher fee, on the basis of actual, perceived or suspected HIV status, or risk of exposure to STI or HIV;*

viii. *Denial of Burial Services - Denial of embalming and burial services of a deceased person who had STI, HIV and AIDS, or who was known, suspected, or perceived to be STI, or HIV-positive, or had high risk of exposure to STI or HIV;*

ix. *Act of Bullying - Bullying in all forms, including name-calling, upon a person based on actual, perceived, or suspected STI or HIV status, including bullying in social media and other online medium; and*

x. *Similar Discriminatory Acts - other similar or analogous acts which are intended, or have the effect of nullifying or impairing the recognition, enjoyment or exercise by all persons similarly situated, or all rights and freedoms, on the basis of actual, perceived, or suspected HIV status, or risk of exposure to STI or HIV, or acts intended to heighten stigma against PLHIV or persons living with STI, or key affected populations.*

c. *Redress Mechanisms for Discrimination, Bullying, and Violation of Confidentiality - The Lead Agency shall establish redress mechanisms for discrimination, bullying, and violation of confidentiality, which shall include, among others, a confidential hotline for reporting violations, investigation and mediation mechanisms, and access to free legal assistance, whenever appropriate.*

The Lead Agency, in coordination with the City Legal Department and relevant civil society organizations shall provide free legal literacy training on discrimination, bullying, violation of confidentiality and other legal rights and protections afforded to PLHIV and persons living with STI.

d. *Sensitization Program - Sensitization trainings designed to reduce stigma and discrimination shall be included in institutional STI, HIV, and AIDS Prevention and Control Policies mandated under Article IV Section 1(c) of this Ordinance.*

SECTION 6. BIOMEDICAL INTERVENTIONS FOR PREVENTION AND CONTROL. - The Lead Agency shall procure, distribute, and monitor the usage of a range of biomedical interventions for the prevention and control of STI, HIV, and AIDS, and ensure that supplies are sufficient to meet the demand based on current levels and projections of prevalence among the general and most at-risk populations. The QCSAC shall issue guidelines on the distribution of different biomedical interventions. The Lead Agency shall ensure that appropriate biomedical interventions are available and accessible. These biomedical interventions shall include:

a. *Condoms and Water-based Lubricants -*

i. *Government offices, and other public institutions - The Lead Agency shall ensure that free condoms and water-based lubricants are available and accessible in government offices, Barangays, public schools, colleges, or universities, prisons, and other closed settings, through designated condom access points. Provided that, distribution of condoms to minors shall be subject to parental consent.*

ii. *Private institutions - For private institutions, condom access shall be in accordance with the approved STI, HIV, and AIDS Prevention and Control Policy, provided that, entertainment establishments shall provide free condoms to its employees, and provided further, that, hotels, motels, and transient homes shall include the price of condoms, if not free, in its room charges.*

iii. *Retail Establishments - Retail establishments that offer condoms for sale are prohibited from refusing to sell said condoms on the ground of religion, age, gender, sexual orientation, marital status, or any other circumstance other than being of minor age, ability to pay or a legitimate suspicion of a violation of the Anti-Sexual Trafficking Law.*

b. *Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP) - The QCSAC shall issue guidelines on the sale and distribution of pre- and post-exposure prophylaxis. The QCSAC shall ensure that free PrEP and PEP are available for the most at-risk populations, including children born of PLHIV mothers, sex workers, and indigent MSM. The QCSAC shall likewise ensure that PrEP and PEP are available at treatment hubs, Reproductive Health and Wellness Centers, and other City-owned health facilities, and in private health facilities.*

c. *Emerging Technologies and Other Medications - The Lead Agency may, subject to the approval of QCSAC, request for the procurement of other biomedical interventions upon a determination that said intervention has been proven to be safe, effective, and efficient for STI, HIV, and AIDS Prevention and Control.*

ARTICLE V. STI, HIV, AND AIDS TREATMENT, CARE, AND SUPPORT

SECTION 1. INFORMATION, EDUCATION, AND COMMUNICATIONS CAMPAIGN ON STI, HIV, AND AIDS TREATMENT, AND OTHER SERVICES. - The Lead Agency shall develop and implement an IEC campaign to raise universal awareness of, and increase access to, available, medically-safe, legally affordable, effective and quality STI, HIV, and AIDS treatment, and care and support services. The IEC campaign shall include information on the processes and requirements for accessing services, as well as information on the rights and responsibilities of PLHIVs undergoing treatment.

SECTION 2. MISINFORMATION. - Any misinformation on STI, HIV and AIDS shall be strictly prohibited. Misinformation includes false and misleading advertising and claims in any form of media, including traditional media, internet and social platforms, and mobile applications; or the promotional marketing of drugs, devices, agents or procedures without prior approval from the DOH through the FDA and without the requisite medical and scientific basis, including markings and indications in drugs and devices or agents claiming to be a cure or fail-safe prophylactic for STI or HIV infection.

SECTION 3. STI, HIV, AND AIDS TREATMENT, CARE, AND SUPPORT. - The Lead Agency shall ensure that a comprehensive package of STI, HIV, and AIDS treatment, care, and support services are available and accessible.

a. *Treatment - The Lead Agency shall procure, distribute, and monitor the usage of a range of STI, HIV, and AIDS treatment modalities, and ensure that supplies are sufficient to meet the demand based on current levels and projections of prevalence among the general and most at-risk populations. These treatment modalities shall include, but shall not be limited to:*

   i. *Anti-Retroviral Therapy;*

   ii. *Medicines and vaccines for STI and other opportunistic infections, subject to OHAT limits;*

   iii. *CD4;*

   iv. *Viral load (HIV1RNA); and*

   v. *Viral load machines and cartridges.*

b. *Care and Support Services - The Lead Agency shall ensure and facilitate a comprehensive and differentiated package of STI, HIV, and AIDS care and support services, that is relevant, available, and accessible. These care and support services shall include, but shall not be limited to:*

   i. *Case management;*

   ii. *Regular counseling and check-up;*

   iii. *Legal assistance and mediation in case of discrimination, bullying, and other prohibited acts;*

   iv. *Psychosocial counseling and other mental health services;*

   v. *Temporary shelter for PLHIV;*

   vi. *Follow-up counselling in case of deferred enrollment;*

   vii. *Referral for transferees;*

   viii. *PLHIV or STI support groups and confidential support hotline; and*

   ix. *Other services.*

The Lead Agency may conduct research and testing of various care and support strategies to increase enrollment and adherence to treatment.

c. *Access to Treatment, Care, and Support Services - The Lead Agency shall endeavor to ensure that treatment, care, and support services are accessible, regardless of age, indigency, and other socio-economic circumstance that may prevent access.*

   i. *Free Services - The QCSAC shall develop and issue guidelines on access to free STI, HIV, and AIDS services, subject to OHAT limits. The Lead Agency shall ensure that persons seeking treatment are guided on all free treatment, care and support services that are available to them.*

   ii. *Paid Services - Private health facilities within the City shall provide STI, HIV, and AIDS treatment modalities, or establish mechanisms to ensure that persons seeking treatment are referred to other conveniently accessible health facilities. Private health facilities offering STI, HIV, and AIDS treatment shall ensure that indigent patients are properly referred to health facilities offering free services.*

   Health facilities are prohibited from denying access to available treatment or from refusing to make a referral to another health facility.

d. *Treatment, Care, and Support for Minors - Health workers and social workers dealing with a minor PLHIV shall provide counseling and psychosocial support to encourage the minor to disclose his/her HIV status to his/her parents, to seek the parents' or guardians' consent to, and support for treatment.*

   In the event that the parents refuse treatment despite exerting efforts to encourage treatment, or there is reasonable ground to believe that the minor, in seeking the parents' consent, will be placed in danger, the minor may be referred to the legal department for legal assistance in seeking emancipation, or change in guardianship.

e. *Treatment, Care, and Support Services for Persons Deprived of Liberty (PDL) in Prisons and Other Closed Settings - The QCSAC, in coordination with detention facilities, prisons, other closed settings within Quezon City shall develop guidelines to ensure that STI, HIV, and AIDS treatment is available to PDL.*

   The Lead Agency shall be responsible for providing training to law enforcement officers operating within Quezon City to ensure that PLHIV that are detained for any violation of law, are referred for continuity of treatment at all stages, from detention to imprisonment to release.

ARTICLE VI. PROTECTION OF STI, HIV AND AIDS SERVICE PROVIDERS

SECTION 1. CARING FOR CARERS. - The QCSAC shall develop programs and policies to ensure that STI, HIV, AIDS Service Providers, especially health workers, social workers, case managers, and peer educators, are given adequate protection from mental and stress disorders brought about by their work.

SECTION 2. LEGAL LITERACY. - The Lead Agency, in coordination with the City Legal Department and CSOs, shall provide literacy training for STI, HIV, and AIDS Service Providers on their rights and duties as STI, HIV, and AIDS Service Providers, gender, human rights, and relevant laws, and on the various legal remedies and legal assistance services available to them to seek redress for violation of their rights.

SECTION 3. PROTECTION FROM HARASSMENT. - STI, HIV, and AIDS Service Providers, including peer educators, shall be protected from suit, arrest or prosecution for civil, criminal, or administrative liability on the basis of their delivery of services and the legitimate exercise of their functions under this Ordinance. The Lead Agency shall endeavor to provide STI, HIV, and AIDS Service Providers with legal assistance, through legal service providers in the SDN, for cases filed against them for the legitimate exercise of their duties. This legal assistance shall not be extended in case it is alleged and confirmed upon investigation that the STI, HIV, and AIDS Service Provider acted with gross negligence, or in violation of the Anti-Graft and Corrupt Practices Act, Republic Act No. 11166, or this Ordinance.

ARTICLE VII. FINES AND PENALTIES

SECTION 1. FINES AND PENALTIES FOR PROHIBITED ACTS. - Without prejudice to prosecution under Republic Act No. 11166, the following fines and penalties shall be imposed on a person who commits the following prohibited acts under this Ordinance:

a. *Compelling a person to submit to a test - A person who compels a person to a submit to an STI or HIV test, in violation of Article IV, Section 2(b), shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

b. *Release of STI or HIV Test to Unauthorized Persons - A person who releases the STI or HIV test results to a person other than those authorized under Article IV, Section 2(c) of this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

c. *Violation of Confidentiality - A person who violates confidentiality of a person's STI or HIV status as provided under Article IV, Section 5(a)(i) of this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

d. *Discriminatory Acts and Practices - A person who commits any of the discriminatory acts and practices under Article IV, Section 5(b) of this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

e. *Misinformation - A person who provides false information as provided under Article V, Section 2 of this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

f. *Denial of treatment - A person who denies treatment for STI or HIV infection or secure proper parental or guardian's consent under Article V, Section 3 of this Ordinance, shall upon conviction, suffer the penalty of a fine in the amount of Five Thousand Pesos (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 in the appropriate administrative proceeding.*

In case of a juridical person, the foregoing fines and penalties shall be imposed on the directors and officers of the juridical person committing the prohibited act.

The Lead Agency shall, at the request of the victim, refer the victim to legal services within the SDN for assistance in filing cases under Republic Act No. 11166.

SECTION 2. ADMINISTRATIVE FINES AND PENALTIES. -

a. *Administrative Fines for Juridical Persons for Prohibited Acts - The business permit of a corporation or business shall be revoked, and the business ordered closed:*

   i. *In case of failure of a corporation or business to remedy or act upon any of the violations committed under Section 1 of this Article;*

ii. *Upon a finding that a person committed a violation committed under Section 1 of this Article as a result of a policy, written or unwritten of the corporation or business where he/she is employed; or*

iii. *Upon a finding that the violation committed under Section 1 of this Article was committed at the instance of a director, officer, or stockholder of such corporation or business, and despite complaint, said business or corporation pursued the decision.*

b. *Administrative Fines for Failure to Provide Access to Condoms in Hotels, Motels, and Transient Houses and Entertainment Establishments - The following administrative fines shall be imposed upon the failure to Provide Access to Condoms in Hotels, Motels, and Transient Houses and Entertainment Establishments under Article IV, Section 6(c)(v)(vi) of this Ordinance:*

i. *First Offense - Warning and Citation ticket. A citation ticket/Ordinance Violation Receipt shall be issued. The establishment shall have fifteen (15) days to establish a condom access point system.*

ii. *Second Offense - Final Warning and Fine. A citation ticket/Ordinance Violation Receipt shall be issued with the fine in the amount of Three Thousand Pesos (Php3,000.00). The establishment shall have ten (10) days to establish a condom access point system.*

iii. *Third Offense - Revocation of Business Permit and a citation ticket/Ordinance Violation Receipt shall be issued with the fine in the amount of Five Thousand Pesos (Php5,000.00).*

c. *Administrative Fines for Failure to Develop and Implement an Approved STI, HIV, and AIDS Prevention and Control Policy - The following administrative fines shall be imposed upon the failure to develop and implement an approved STI, HIV, and AIDS Prevention and Control Policy under Article IV, Section 1 of this Ordinance.*

i. *Private Institutions - The business permit of a business or corporation required to develop, submit, and implement an STI, HIV, and AIDS Prevention and Control Policy under Article IV, Section 1(iii), (v), (vi), and (viii) shall be revoked or the application denied, in case of failure to submit such policy within six (6) months of the issuance of the business permit, or for failure to implement such policy; Provided that the BPLD may extend the submission of the policy beyond six (6) months and not more than a year from the issuance of the business permit, subject to compelling reasons or force majeur, which may be detailed in the IRR.*

ii. *Public Institutions, Government Offices, and Barangays - The failure to develop and implement an STI, HIV, and AIDS Prevention and Control Policy within Barangays, Government Offices, and Prisons and other Closed Institutions, as provided under Article IV, Section 1(i), (ii), (iv), (vi), and (ix) shall be ground for the filing of administrative cases for violation of Republic Act No. 6713 or the Code of Conduct and Ethical Standards for Public Officials and Employees, as appropriate.*

d. *Government Officials and Employees - A violation under Section 1 of this Article, committed by a Government official or employee shall be ground for the filing of administrative cases for violation of Republic Act No. 6713.*

e. *Administrative Fines for Refusal to Make a Referral - The following administrative fines shall be imposed upon a person who refuses to make a referral under Article IV, Section 2 (d) of this Ordinance:*

i. *Private Institutions - The business permit of a business or corporation that refuses to make a referral shall be revoked;*

ii. *Public Institutions, Government Offices and Barangays - The refusal to make a referral shall be ground for the filing of administrative cases for violation of Republic Act No. 6713 or the Code of Conduct and Ethical Standards for Public Officials and Employees, as appropriate.*

SECTION 3. TRANSITORY PERIOD. - The QCSAC shall ensure that sufficient information, education, and communications campaign has been conducted prior to the imposition of penalties under this Ordinance. Business Establishments shall have a period of three (3) years to comply with the provisions of this Ordinance. Within this transitory period, no penalties shall be imposed against businesses for failure to comply with the provisions of this Ordinance, provided that, the Office of the City Mayor is authorized to grant incentives to recognize businesses that comply with this Ordinance within this transitory period.

ARTICLE VIII. FINAL PROVISIONS

SECTION 1. REPEALING CLAUSE. - Ordinance No. SP-2504 and other ordinances, local issuances, or rules inconsistent with the provisions of this ordinance are hereby repealed or modified accordingly.

SECTION 2. TRANSITORY CLAUSE. - The Lead Agency shall ensure continuity of services in the implementation of this Ordinance.

The Quezon City Health Department shall ensure that the personnel of Social Hygiene Clinics in Quezon City will be absorbed as permanent personnel to fill the positions of the new Reproductive Health and Wellness Clinics in their proposed Rationalization Plan.

SECTION 3. SEPARABILITY CLAUSE. - If for any reason, any provision of this Ordinance is declared unconstitutional or invalid, the remaining provisions not affected thereby shall continue to be in full legal force and effect.

SECTION 4. IMPLEMENTING RULES AND REGULATIONS. - The QCSAC shall be responsible for issuing the guidelines and policies necessary for the implementation of this Ordinance. Other provisions of this ordinance not requiring additional implementing guidelines or policies shall take effect immediately.

SECTION 5. EFFECTIVITY CLAUSE. - This Ordinance shall take effect immediately upon approval.

ENACTED: December 1, 2021.

GIAN G. SOTTO
City Vice Mayor
Presiding Officer

ATTESTED:

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

APPROVED: APR 2 8 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 December 1, 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