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City of Manila

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ORDINANCE NO. 8355

**AN ORDINANCE CREATING A COMPREHENSIVE ANTI-DENGUE
ORDINANCE OF MANILA**

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PREAMBLE

WHEREAS, it is the policy of the City of Manila to promote the health and welfare of its constituents, as well as to perform its constitutional obligation to protect and promote the right to health of the people and instill health consciousness among them;

WHEREAS, it has been universally recognized that dengue remains a public health concern of major importance. It has now become a deadly mosquito-borne viral disease globally. It affects young and old, rich and poor alike especially those living in densely populated urban areas throughout the tropics;

WHEREAS, despite wide scale implementation of several strategies and interventions, dengue is a great threat to mankind and people tend to underestimate the health risks of dengue infections;

WHEREAS, dengue prevention and control program is a community-based program;

WHEREAS, in addition to the mandate of the Sangguniang Panlungsod, the City of Manila, through the provisions set forth in this Ordinance hereby further adopts appropriate measures that will enhance the general welfare of its residents and inhabitants as it is duly empowered to do so by the Local Government Code of 1991;

WHEREAS, recognizing the hazards associated with dengue infections, the City of Manila intends, by the enactment of this Ordinance, to protect present generation in the City of Manila from the devastating and pernicious health and socio-economic consequences of the disease, it is the purpose of this Ordinance to reduce continually and substantially, if not completely eliminating, the prevalence of dengue in the City of Manila;

WHEREAS, there is a need for concerted efforts to fight dengue with the active participation of the City Government, barangays, school authorities, NGOs, POs and constituents concerned: NOW, THEREFORE,

Be it ordained by the City Council of Manila, in session assembled, *THAT*:

Article I
GENERAL PROVISION

SECTION 1. Title. - This Ordinance shall be known as the "Anti-Dengue Ordinance of Manila".

SEC. 2. Definition of Terms. - As used in this Ordinance, the following terms shall have meanings ascribed to them in this section, unless the context of their usage indicates otherwise:

- a. **Dengue Infection** - is a viral disease which causes a sudden onset of fever with headache, muscle and joint pains and which may vary from a simple Dengue Fever (DF) to a more serious Dengue Hemorrhagic Fever (DHF) and its subsequent fatal form, the Dengue Shock Syndrome (DSS).
- b. **Vector** - serves as the vehicle that transmits the disease and which itself is not affected by it.
- c. **Entomology** - branch of medical science concerned with the causes and origins of the disease.
- d. **Flavivirus** - a genus of virus that includes both mosquito-borne agents and some agents with recognized vectors.
- e. **Mode of Transmission** - an act or process of transmitting the disease.
- f. **Morbidity** - the condition or state of being sick.
- g. **Mortality** - the state of death.
- h. **Serotypes** - a group of intimately related organisms distinguished by a common set of antigen.
- i. **Cross-immunity** - resistance to infection due to protection by another serotype.
- j. **Platelet** - microscopic circular or oval disk found in the blood of mammals concerned in coagulation of the blood and contraction of the clot.

SEC. 3. Etiology. - Dengue is caused by any of the four (4) serotype of flavivirus: DEN-1, DEN-2, DEN-3 and DEN-4. All the four (4) serotypes have been isolated in the country. Hence, a person can get a Dengue Infection four (4) times at most of his/her lifetime. There is no cross-immunity between serotypes; however, there is lifetime immunity if affected by specific serotypes.

SEC 4. Mode of Transmission. - Dengue is transmitted by the bite of an infective female *Aedes* mosquito. Two *Aedes* species are known disease vectors in the Philippines: *Aedes aegypti*, the primary vector and predominant in urban areas and *Aedes albopictus*, the secondary vector and common in rural areas. The disease is directly transmitted from person to person. The person is usually infective to the mosquitoes a day before the occurrence of the fever up to the last day of fever or an average of about five (5) days.

SEC. 5. Epidemiologic Pattern. –

A. Seasonal Trend:

Dengue cases are observed to increase during rainy season. A rise in the number of cases usually starts in July or few days after the onset of the rainy season and peaks in October and November or two (2) months after the peak of rainfall. A plateau, however, is noted when wet season extends up to December or even the first quarter of the following year.

During the rainy months, water collects in containers which serve as breeding places for the mosquito vectors.

B. Age and Sex Distribution:

All ages are at risk of having Dengue Fever/Dengue Hemorrhagic Fever but children in the 0-9 year age group are commonly affected.

No appreciable difference is observed between sexes. Both are equally affected with slight increase among males during the past five (5) years.

**Article II
MISCELLANEOUS PROVISIONS**

SEC. 6. Implementing Rules. - The Manila Health Department assisted by the City Legal Office shall formulate the implementing rules of this Ordinance “as soon as there is practicable time from effectivity of this Ordinance.”

SEC. 7. Assisted by Barangay, School authorities, NGOs and POs. The Manila Health Department shall have initiative information drive and execute programs against dengue with the active participation of Barangays, NGOs and POs.

**Article III
ESTABLISHMENT OF BARANGAY WATCH TEAM AND DENGUE
TASK FORCE TEAM**

SEC. 8. Responsibilities/Roles of the Office of the Barangay:

1. The Barangay Watch Team is hereby established composing of the following members:

Chairman	-	Barangay Chairman or Chairman of the Committee on Health
Co-Chairman	-	The Chairman, Committee on Environmental and Sanitation
Members	-	Midwives
	-	Sanitation
	-	Barangay Health Workers
	-	Barangay Tanod

with the following duties and functions:

2. To monitor and enforce its constituents to adopt a regular source reduction and container management activities in their own houses and surroundings.
3. To organize a clean-up campaign two or more times a year to control larval habitats.
4. To change and encourage the private sector to participate in the beautification and sanitation improvements of the community as sponsors, emphasizing source reduction of dengue vector.
5. To mobilize improvement of service such as refuse collections, waste water disposal, drainage system, provision of potable water, etc., to reduce larval habitats of dengue vector.
6. To conduct larvae-trapping activities, a method for dengue vector surveillance during the first quarter of each year and every quarter thereafter; and after the institution of an intervention to determine the distribution, population density and major larval habitats of dengue vector.
7. To initiate chemical applications in identified high risk areas and during outbreaks as per approval by the Local Dengue Coordinating Committee.

SEC. 9. Responsibilities/ Roles of Public and Private Schools -

1. Creation of Dengue Task Force Team: (composed of the following trained and responsible members:

Chairman	-	Principal
Co-Chairman	-	Nurse/Science Teacher
Members	-	selected Grade IV and V pupils (for elementary)
	-	selected 2 nd year and 3 rd year students for high school PTA officers

with the following functions:

1. Conduct classroom information campaigns
2. Reproduce and distribute information materials
3. Intensify source reduction activities within the school premises

Article IV

RESPONSIBILITIES OF THE COMMUNITY AGAINST DENGUE

SEC. 10. The following responsibilities are hereby imposed to communities in the City of Manila:

1. Every household, industries and other establishment should be responsible in destroying or removing breeding sites as specified in the introductory statements (5th paragraph) in their own premises and surroundings.

2. Seek immediate medical treatment when fever occurs for more than 2 days.

Dengue is a sudden onset of high fever of 2 - 7 days duration with 2 or more symptoms like:

- a). Headache
- b). Pain in the eye
- c). Muscle/joint pain
- d). Nausea
- e). Loss of appetite
- f). Body weakness
- g). Skin rashes/petechiae
- h). Nose/gum bleeding
- i). Vomiting of coffee colored matter
- j). Dark colored stool

3. Patient should be brought to the hospital in case any danger signs exist: (specially during absence of fever).

- a) A spontaneous bleeding from the nose, mouth, genitalia, anus
- b) Sudden onset of abdominal pain
- c) Persistent vomiting
- d) Listlessness/restlessness
- e) Change in mental status
- f) Weak rapid pulse
- g) Cold clammy skin
- h) Difficulty in breathing
- i) Seizures/convulsion and
- j) Platelet count below 100,000/ul (mm³)

4. Notify health center of suspected and confirmed dengue cases.

Article V PROHIBITIONS

SEC. 11. Household, schools and other establishments are prohibited to have any of the following breed sites or habitat of aedes mosquitoes in their own premises and surroundings:

- a) uncovered water containers
- b) uncovered garbage cans
- c) earthen or clay jars
- d) discarded cans, bottles, plastic cups, or any containers potentially collect rain water
- e) old tires that accumulate water
- f) clogged roof gutter
- g) pit/digging/excavations

Article VI SANCTIONS

SEC. 12. Household, school premises and industries found to have one or more breeding sites or habitat of aedes mosquitoes in Article III hereof, shall be penalized by the following:

1 st Offense	-	Warning
2 nd Offense	-	PhP. 2,000.00
3 rd Offense	-	PhP. 4,000.00
		or imprisonment of not more than 6 months

Article VII APPROPRIATION OF FUNDS

SEC. 13. The amount of Two Million Pesos (PhP. 2,000,000.00) is hereby appropriated as an initial fund for the purpose of realizing the objectives hereof, without prejudice to appropriation of the same or higher amount as may be deemed found necessary by the Sanguniang Panlungsod for the succeeding year.

Article VIII SEPARABILITY CLAUSE

SEC. 14. If any provision of this Ordinance is declared unconstitutional or illegal, the same shall not affect the validity and effectivity of the other provisions hereof.

**Article IX
DISSEMINATION ORDINANCE**

SEC. 15. A copy of this Ordinance shall be furnished to the City Health Department, all the barangays, and all public places concerned in the anti-dengue campaign.

**Article X
REPEALING CLAUSE**


SEC. 16. All ordinances contrary to or inconsistent with this Ordinance are hereby repealed or modified accordingly.

**Article XI
EFFECTIVITY**


SEC. 17. This Ordinance shall take effect after Fifteen days (15) following its full publication in a newspaper of local circulation or posting in at least two (2) conspicuous places in the Manila City Hall.

This Ordinance was finally enacted by the City Council of Manila on August 12, 2014.


PRESIDED BY:


EDWARD V.P. MACEDA
President Pro-Tempore and
Acting Presiding Officer
City Council, Manila


ATTESTED:


LUCH R. GEMPIS, JR.
City Government Department Head III
(Secretary to the City Council)

APPROVED BY HIS HONOR, THE MAYOR, ON 10 September 2014.


JOSEPH EJERCITO ESTRADA
Mayor
City of Manila

ATTESTED:


EDWARD B. SERAPIO
City Government Department Head III
(Secretary to the Mayor)

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