

FOURTEENTH CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
First Regular Session)

8 MAR 14 1976

SENATE
S. No. 2104

RECEIVED

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

It is indisputable that the country's economic productivity is considerably affected by the health status of its labor force. In the same vein, the learning capacities of students including their acquisition of knowledge and skills that are essential in the production of goods and services are likewise greatly influenced by the health condition of the learners. Thus, the Constitution under section 15 of Article II mandates the State "to protect and promote the right to health of the people and instill health consciousness among them." The injunction aims to develop an integrated, responsive and efficacious health care system that can enhance national development.

It is urgent that health consciousness be instilled among Filipinos. Needless to stress, the school plays a vital role in making the people aware of the importance of health care. Toward this end, government commits to "fully integrate our health care system with the school system, with preventive health care, personal hygiene, and nutrition education being pursued as active programs in basic education." To make this possible, this bill seeks to modernize and upgrade the School Health and Nutrition Program (SHNP) of the Department of Education, which is designed to promote, protect and maintain the health and nutritional well-being of the various sectors of elementary and secondary educational institutions, to maximize its contribution to quality basic education.

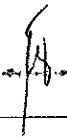
This is a Senate counterpart bill to one filed in the House of Representatives by Rep. Edcel C. Lagman.


MIRIAM DEFENSOR SANTIAGO

FOURTEENTH CONGRESS OF THE REPUBLIC)
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S. No. **2104**

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1 AN ACT
2 PROVIDING FOR THE MODERNIZATION OF THE SCHOOL HEALTH AND NUTRITION
3 PROGRAM (SHNP) OF THE DEPARTMENT OF EDUCATION, CULTURE AND SPORTS,
4 AND AUTHORIZING THE APPROPRIATION OF FUNDS THEREFOR

5 *Be it enacted by the Senate and House of Representatives of the Philippines in Congress*
6 *assembled:*

7 SECTION 1. *Short Title.* – This Act shall be known as the “School Health and Nutrition
8 Modernization Act of 2008.”

9 SECTION 2. *Declaration of Policy.* – It is hereby declared the policy of the State to
10 promote, maintain and protect the health and nutritional well-being of the school population
11 through the delivery of preventive health care to the students, teachers and school administrators
12 in the elementary and high school levels and to the non-teaching personnel. Toward this end, the
13 School Health and Nutrition Program of the Department of Education, shall be modernized and
14 upgraded to ensure the attainment of a health status that can enhance the active learning
15 capacities of the children and for the teachers and other personnel to function more effectively,
16 thus, enabling the achievement of the goals of quality basic education.

17 It is likewise declared the policy of the State to pursue the modernization program under
18 this Act through:

19 (A) The development of an efficient and effective health care delivery system in the
20 schools;

21 (B) The development, evaluation and application of appropriate methods and procedures
22 in preventive health care;

23 (C) The development of reforms in the management of human and material resources;
24 and

25 (D) The acquisition and upgrading of appropriate equipment and technology.

1 SECTION 3. *Definition of Terms.* – For the purposes of this Act, the term:

2 (A) “Department” means the Department of Education.

3 (B) “School Health and Nutrition Program” (SHNP) means a comprehensive education
4 and service package, delivered to the schools, eventually to the homes and communities, in order
5 to improve the health and nutritional status of the total school population, with the elementary
6 grades children as its priority group.

7 (C) “Public Health” means the science and the art of preventing disease, prolonging life,
8 and promoting physical and mental health and efficiency through organized community efforts.

9 (D) “Preventive Health Care” means the systematic organization of all the personal
10 services necessary to prevent disease and attain the highest level of health.

11 (E) “Health and Nutrition Center” means the agency that takes charge of the overall
12 management of the integrated SHNP.

13 (F) “Basic Education” means the six years elementary and four years secondary
14 education. Basic education is that which brings the child to a point where he can be an
15 autonomous learner, one who is self-reliant and creative.

16 (G) “Health Education” means the teaching and counseling on healthy living, including
17 hygiene, nutrition, sex education, alcohol and drug abuse, smoking and other threats to health.

18 (H) “Quality Education” means the appropriateness, relevance and excellence of the
19 education given to the individual in meeting his/her needs and aspirations and those of society.

20 SECTION 4. *Objectives of the SHNP.* – The SHNP modernization shall be implemented
21 in accordance with the following objectives:

22 (A) To provide a comprehensive preventive health care to school children and teachers in
23 the elementary and secondary levels of education and to the non-teaching personnel of the
24 Department;

25 (B) To inculcate health and nutrition values and behavior and encourage healthy lifestyles
26 among the school populace;

27 (C) To encourage parents to provide their children with proper health care and to perform
28 effective parenting to prevent drug abuse;

1 (D) To develop effective linkages between the school and community for better school
2 health;

3 (E) To strengthen the Health and Nutrition Center in the management of the Program;
4 and

5 (F) To establish and maintain adequate health and sanitation facilities like school clinics,
6 canteens, water supply, sanitary toilets and garbage disposal in the schools.

7 SECTION 5. *Components of the SHNP Modernization.* – The modernization program
8 shall consist of the following components:

9 (A) *Organizational Development.* – To carry out effectively their functions, it is
10 necessary to restructure, expand and upgrade the staff and personnel of the Regional Health and
11 Nutrition Units and the Division Health and Nutrition Sections including the creation of nurse
12 supervisor positions to oversee nursing care of the school children: Provided, That in the
13 upgrading of plantilla positions, the compensation and benefits shall be at par with those of
14 health and nutrition personnel in other government agencies in accordance with existing laws,
15 rules and regulations.

16 (B) *Human Resources Development.* – This component pertains to programs and
17 educational activities of health and nutrition personnel to enhance their skills and competencies
18 through workshops, conferences and in-service trainings relative to the delivery of health care,
19 and on mobilization as well as administrative responsibilities.

20 A continuing health resource development program shall be implemented.

21 (C) *Infrastructure Development.* – This component consists of the construction of
22 physical plants and facilities such as sanitary toilets, facilities for washing hands, water system,
23 school clinics and feeding centers/canteens in the public elementary schools to ensure health and
24 nutritional needs in public elementary schools including suitable sites for the Alay-Tanim Tree
25 Planting program.

26 (D) *Information and Systems Organization.* – This component consists of the acquisition
27 and development of an extensive computer network for health and nutrition care; the upgrading

1 of methods and procedures in preventive health care; monitoring and evaluation; and research in
2 support of the total program.

3 The Department Secretary in coordination with the Secretary of Health shall formulate
4 guidelines to implement this section in accordance with the objectives of the modernization
5 program enumerated in the preceding section.

6 SECTION 6. *Priority Programs for SHNP Modernization.* – For a more effective
7 implementation of the objectives of the SHNP and consistent with the mandate of the
8 Constitution relative to health care, the following program/activities shall be given priority
9 consideration:

10 (A) Recruitment of school health and nutrition personnel to attain the ratio of one (1)
11 personnel to two thousand (2,000) pupils/teachers over a five (5) year period;

12 (B) Upgrading of the salary of health and nutrition personnel to be at par With
13 counterparts in other Departments and full implementation of the benefits of the Magna Carta for
14 Public Health Workers;

15 (C) Provision of equipment, medical and dental supplies and medicines;

16 (D) Health examination of all Grade 1 entrants and provision of supplementary feeding
17 (breakfast and/or milk) to Grade 1 pupils and nutritionally deprived school children;

18 SECTION 7. *Period of Implementation.* – The Modernization Program under this Act
19 shall be implemented over a period of five (5) years from the year this Act is promulgated.

20 SECTION 8. *Appropriations.* – To effectively carry out the objectives of this Act, the
21 initial amount of Two Hundred Million Pesos (P200,000,000.00) is hereby authorized to be
22 appropriated out of any funds in the National Treasury not otherwise appropriated, and from the
23 funds of the Bases Conversion and Development Authority. Thereafter, such funds as are
24 necessary shall be included in the Annual General Appropriations Act.

25 SECTION 9. *Separability Clause.* – If any part hereof, is held invalid or unconstitutional,
26 the remainder of the provision not otherwise affected shall remain valid and subsisting.

1 SECTION 10. *Repealing Clause.* – Any law, presidential decree or issuance, executive
2 order, letter of instruction, administrative order, rule or regulation contrary to or inconsistent
3 with, the provisions of this Act is hereby repealed, modified or amended accordingly.

4 SECTION 11. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its
5 publication in at least two (2) newspapers of general circulation.

6 Approved,