


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SENATE
S. No. **2235**

RECEIVED 

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The environments in our homes and communities pose long-term risks to our health. Whether it be the location of a toxic waste dump, traffic patterns allowing diesel-powered trucks to rumble past a school, or cancer-causing formaldehyde in our homes and offices, the places we live and work in can cause real hazards to our health.

It is important for the government to provide support for efforts to improve community design and will issue grants to allow local governments and communities to address environmental health hazards in the grassroots level. It is also important to ensure that communities are involved in public health decisions that directly impact them.

This bill seeks to require government agencies to support health impact assessments and take other actions to improve health and the environmental quality of communities.¹


MIRIAM DEFENSOR SANTIAGO
act

¹ This bill was originally filed in the Thirteenth Congress, Third Regular Session.

10 AUG -2 12:10

SENATE
S. No. 2235

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

1 AN ACT
2 REQUIRING GOVERNMENT AGENCIES TO SUPPORT HEALTH IMPACT
3 ASSESSMENTS AND TAKE OTHER ACTIONS TO IMPROVE THE HEALTH AND THE
4 ENVIRONMENTAL QUALITY OF COMMUNITIES

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

5 SECTION 1. *Short Title.* -This Act shall be known as the "Healthy Places Act."

6 SECTION 2. *Declaration of Policy.* - It is the policy of the State to protect and advance
7 the right of the people to a balanced and healthful ecology in accord with the rhythm and
8 harmony of nature. Pursuant to this policy, this Act shall require government agencies to support
9 health impact assessments and take other actions to improve the health and the environmental
10 quality of communities.

11 SECTION 3. *Definition of Terms* -For purposes of this Act, the term:

12 (A) "Built environment" means an environment consisting of all buildings, spaces, and
13 products that are created or modified by people, including homes, schools, workplaces, parks and
14 recreation areas, greenways, business areas, and transportation systems; electric transmission
15 lines; waste disposal sites; and land use planning and policies that impact urban, rural, and
16 suburban communities;

17 (B) "Environmental health" means the health and well-being of a population as affected
18 by the direct pathological effects of chemicals, radiation, and some biological agents; and the
19 effects of the broad physical, psychological, social, and aesthetic environment;

1 (C) "Eligible entity" means any unit of the national government or local governments the
2 jurisdiction of which includes individuals or populations the health of which are or will be
3 affected by an activity or a proposed activity.

4 The term shall also mean a local community that bears a disproportionate burden of
5 exposure to environmental health hazards; has established a coalition with not less than one (1)
6 community-based organization; and with not less than one (1) public health entity; health care
7 provider organization; or academic institution; ensures planned activities and funding streams are
8 coordinated to improve community health; and submits an application;

9 (D) "Eligible institution" means a public or private nonprofit institution that submits to
10 the Secretary of Health an application for a grant under the grant program at such time, in such
11 manner, and containing such agreements, assurances, and information as the Secretary may
12 require;

13 (E) "Health" means, but is not limited to, levels of physical activity; consumption of
14 nutritional foods; rates of crime; air, water, and soil quality; risk of injury; accessibility to
15 healthcare services; and other indicators as determined appropriate by the Secretary or Health;
16 and

17 (F) "Health impact assessment" means any combination of procedures, methods, tools,
18 and means used under section 4 to analyze the actual or potential effects of a policy, program, or
19 project on the health of a population, including the distribution of those effects within the
20 population.

21 SECTION 4. *Inter-Agency Working Group on Environmental Health.* - The Secretary of
22 Health, in coordination with the Secretary of Environment and Natural Resources, shall establish
23 an Inter-Agency Working Group to discuss environmental health concerns, particularly concerns
24 disproportionately affecting disadvantaged populations.

25 The Inter-Agency Working Group shall be composed of a representative from each
26 department or government agency, as appointed by the head of the department or government
27 agency, that has jurisdiction over, or is affected by, environmental policies and projects,
28 including the

- 1 (A) Department of Agriculture;
- 2 (B) Department of Trade and Industry;
- 3 (C) Department of National Defense;
- 4 (D) Department of Education;
- 5 (E) Department of Energy;
- 6 (F) Department of Health;
- 7 (G) Department of Interior and Local Government;
- 8 (H) Department of Labor and Employment;
- 9 (I) Department of Department of Transportation and Communications;
- 10 (J) Department of Environment and Natural Resources; and
- 11 (K) Such other government agencies as the Secretary of Health and the Secretary
12 of Environment and Natural Resources shall jointly determine to be appropriate.

13 The Inter-Agency Working Group shall

14 (A) Facilitate communication and partnership on environmental health-related
15 projects and policies to generate a better understanding of the interactions between policy
16 areas; and to raise awareness of the relevance of health across policy areas to ensure that
17 the potential positive and negative health consequences of decisions are not overlooked;

18 (B) Serve as a centralized mechanism to coordinate a national effort to discuss
19 and evaluate evidence and knowledge on the relationship between the general
20 environment and the health of the population of the Philippines; determine the range of
21 effective, feasible, and comprehensive actions to improve environmental health; and
22 examine and better address the influence of social and environmental determinants of
23 health;

24 (C) Survey departments and government agencies to determine which policies are
25 effective in encouraging, and how best to facilitate outreach without duplicating, efforts
26 relating to environmental health promotion;

27 (D) Establish specific goals within and across departments and government
28 agencies for environmental health promotion, including determinations of accountability
29 for reaching those goals;

1 (E) Develop a strategy for allocating responsibilities and ensuring participation in
2 environmental health promotions, particularly in the case of competing agency priorities;

3 (F) Coordinate plans to communicate research results relating to environmental
4 health to enable reporting and outreach activities to produce more useful and timely
5 information;

6 (G) Establish an interdisciplinary committee to continue research efforts to further
7 understand the relationship between the built environment and health factors, including
8 air quality, physical activity levels, housing quality, access to primary health care
9 practitioners and health care facilities, injury risk, and availability of nutritional, fresh
10 food, that coordinates the expertise of the public health, urban planning, and
11 transportation communities;

12 (H) Develop an appropriate research agenda for departments and government
13 agencies to support longitudinal studies; rapid-response capability to evaluate natural
14 conditions and occurrences and extensions of national databases; and to review
15 evaluation and economic data relating to the impact of government interventions on the
16 prevention of environmental health concerns;

17 (I) Initiate environmental health impact demonstration projects to develop
18 integrated place-based models for addressing community quality-of-life issues;

19 (J) Provide a description of evidence-based best practices, model programs,
20 effective guidelines, and other strategies for promoting environmental health;

21 (K) Make recommendations to improve government efforts relating to
22 environmental health promotion and to ensure government efforts are consistent with
23 available standards and evidence and other programs in existence as of the date of
24 enactment of this Act;

25 (L) Monitor government progress in meeting specific environmental health
26 promotion goals;

27 (M) Assist in ensuring, to the maximum extent practicable, integration of the
28 impact of environmental policies, programs, and activities of the government;

1 (N) Assist in the expansion of national public health and travel surveys to provide
2 more detailed information about the connection between the built environment and
3 health;

4 (O) Assist in the development of interdisciplinary education programs to train
5 professionals in conducting recommended research; and to prepare practitioners with
6 appropriate skills at the intersection of physical activity, public health, transportation, and
7 urban planning; and

8 (P) Assist the Secretary of Health with the development of guidance for the
9 assessment of the potential health effects of land use, housing, and transportation policy
10 and plans.

11 The Inter-Agency Working Group shall meet at least three (3) times each year. The
12 Secretary of Health shall sponsor an annual conference on environmental health and health
13 disparities to enhance coordination, build partnerships, and share best practices in environmental
14 health data collection, analysis, and reporting.

15 SECTION 5. *Health Impact Assessments.* - The Secretary of Health shall establish a
16 program focused on advancing the field of health impact assessment, including collecting and
17 disseminating best practices; administering capacity building grants; providing technical
18 assistance and training; conducting evaluations; awarding competitive extramural research
19 grants. He shall likewise develop guidance for the conduct health impact assessments and
20 establish a grant program to allow eligible entities to conduct health impact assessments.

21 The Secretary of Health, in collaboration with the Inter-Agency Working Group, shall
22 develop guidance for the assessment of the potential health effects of land use, housing, and
23 transportation policy and plans, including background on international efforts to bridge urban
24 planning and public health institutions and disciplines, including a review of health impact
25 assessment best practices internationally; evidence-based causal pathways that link urban
26 planning, transportation, and housing policy and objectives to human health objectives; data
27 resources and quantitative and qualitative forecasting methods to evaluate both the status of

1 health determinants and health effects; and best practices for inclusive public involvement in
2 planning decision-making.

3 'The Secretary of Health, shall establish a program under which the Secretary shall
4 provide funding and technical assistance to eligible entities to prepare health impact assessments
5 to ensure that appropriate health factors are taken into consideration as early as practicable
6 during any planning, review, or decision-making process; and to evaluate the effect on the health
7 of individuals and populations, and on social and economic development, of decisions made
8 outside of the health sector that result in modifications of a physical or social environment.

9 To receive a grant under this section, an eligible entity shall submit to the Secretary of
10 Health an application in accordance with this subsection, in such time, in such manner, and
11 containing such additional information as the Secretary may require.

12 An application under this Section shall include an assessment by the eligible entity of the
13 probability that an applicable activity or proposed activity will have at least 1 significant, adverse
14 health effect on an individual or population in the jurisdiction of the eligible entity, based on the
15 criteria described in subparagraph.

16 The criteria referred to in the preceding paragraph include, with respect to the applicable
17 activity or proposed activity any

18 (A) Substantial adverse effect on existing air quality, ground or surface water
19 quality or quantity, or traffic or noise levels; a significant habitat area; physical activity;
20 injury; mental health; social capital; accessibility; the character or quality of an important
21 historical, archeological, architectural, or aesthetic resource (including neighborhood
22 character) of the community of the eligible entity or any other natural resource;

23 (B) Increase in solid waste production; or problems relating to erosion, flooding,
24 leaching, or drainage; any requirement that a large quantity of vegetation or fauna be
25 removed or destroyed; and

26 (C) Conflict with the plans or goals of the community of the eligible entity;

27 (D) Major change in the quantity or type of energy used by the community of the
28 eligible entity;

29 (E) Hazard presented to human health;

1 (F) Substantial change in the use, or intensity of use, of land in the jurisdiction of
2 the eligible entity, including agricultural, open space, and recreational uses;

3 (G) Probability that the activity or proposed activity will result in an increase in
4 tourism in the jurisdiction of the eligible entity;

5 (H) Substantial, adverse aggregate impact on environmental health resulting from
6 changes caused by the activity or proposed activity to two (2) or more elements of the
7 environment; or two (2) or more related actions carried out under the activity or proposed
8 activity; and

9 (I) Other significant change of concern, as determined by the eligible entity.

10 In making an assessment under this Section, an eligible entity may take into consideration
11 any reasonable, direct, indirect, or cumulative effect relating to the applicable activity or
12 proposed activity, including the effect of any action that is included in the long-range plan
13 relating to the activity or proposed activity; likely to be carried out in coordination with the
14 activity or proposed activity; dependent on the occurrence of the activity or proposed activity; o
15 likely to have a disproportionate impact on disadvantaged populations.

16 In preparing a health impact assessment under this subsection, an eligible entity shall
17 follow guidelines developed by the Secretary of Health, in collaboration with the Inter-Agency
18 Working Group, that will be established not later than 1 year after the date of enactment of this
19 Act; and will be made publicly available at the annual conference described in Section 3(d)(2);
20 and may establish a balance, as the eligible entity determines to be appropriate, between the use
21 of rigorous methods requiring special skills or increased use of resources; and expedient, cost
22 effective measures.

23 Before preparing and submitting to the Secretary of Health a final health impact
24 assessment, an eligible entity shall request and take into consideration public and agency
25 comments, in accordance with this Section.

26 Not later than thirty (30) days after the date on which a draft health impact assessment is
27 completed, an eligible entity shall submit the draft health impact assessment to each department
28 and government agency, and local government, that has jurisdiction with respect to the activity
29 or proposed activity to which the health impact assessment applies; has special knowledge with

1 respect to an environmental or health impact of the activity or proposed activity; or is authorized
2 to develop or enforce any environmental standard relating to the activity or proposed activity.

3 SECTION 6. *Health Impact Assessment Database.* - The Secretary, shall establish and
4 maintain a health impact assessment database, including a catalog of health impact assessments
5 received under this Section; an inventory of tools used by eligible entities to prepare draft and
6 final health impact assessments; and guidance for eligible entities with respect to the selection of
7 appropriate tools.

8 SECTION 7. *Grant Program.* - The Secretary of Health shall establish a grant program
9 under which eligible entities shall receive grants to conduct environmental health improvement
10 activities.

11 To receive a grant under this section, an eligible entity shall submit an application to the
12 Secretary of Health at such time, in such manner, and accompanied by such information as the
13 Secretary may require. An eligible entity may use a grant under this Section to promote
14 environmental health; and to address environmental health disparities.

15 SECTION 8. *Additional Research on the Relationship Between the Built Environment*
16 *and the Health of Community Residents.* - The Secretary shall provide grants to eligible
17 institutions to conduct and coordinate research on the built environment and its influence on
18 individual and population-based health. He or she shall support research that investigates and
19 defines the causal links between all aspects of the built environment and the health of residents;
20 examines the extent of the impact of the built environment (including the various characteristics
21 of the built environment) on the health of residents; the variance in the health of residents by
22 location such as inner cities, inner suburbs, and outer suburbs; and population subgroup (such as
23 children, the elderly, the disadvantaged); or the importance of the built environment to the total
24 health of residents, which is the primary variable of interest from a public health perspective;
25 distinguishes carefully between personal attitudes and choices and external influences on
26 observed behavior to determine how much an observed association between the built
27 environment and the health of residents, versus the lifestyle preferences of the people that choose

1 to live in the neighborhood, reflects the physical characteristics of the neighborhood; identifies or
2 develops effective intervention strategies to promote better health among residents with a focus
3 on behavioral interventions and enhancements of the built environment that promote increased
4 use by residents; and in developing the intervention strategies which will reach out to high-risk
5 populations, including low-income urban and rural communities.

6 In providing assistance under the grant program under this Section, the Secretary of
7 Health shall give priority to research that incorporates interdisciplinary approaches; or the
8 expertise of the public health, physical activity, urban planning, and transportation research
9 communities in the United States and abroad.

10 SECTION 9. *Separability Clause.* - In any provision, or part hereof, is held invalid or
11 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
12 valid and subsisting.

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

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

Approved,

/ptmt01july2010