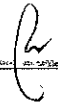


SENATE  
S. No. 2239

RECEIVED BY: 

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Introduced by Senator Miriam Defensor Santiago

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EXPLANATORY NOTE

Chronic diseases, defined as any condition that requires regular medical attention or medication, are the leading causes of death and disability for women in the country. According to the 2003 Health Statistics from the Department of Health (DOH), the five leading causes of death among Filipina women are heart disease, cancer, diabetes, pneumonia and unintentional injuries. Poor diet, physical inactivity, tobacco use, and alcohol abuse are the health risk behaviors that most often lead to disease, premature death, and disability, and are particularly prevalent among women. High poverty rates coupled with barriers to health preventive services and medical care contribute to disparities in health factors.

There is increasing evidence that early life experiences are associated with adult chronic disease and that prevention and intervention services provided within the community and the home may lessen the impact of chronic outcomes, while strengthening families and communities. Community health workers, who are primarily women, can be a critical component in conducting health promotion and disease prevention efforts in medically underserved populations.

Recognizing the difficult barriers confronting medically underserved communities (poverty, geographic isolation, language and cultural differences, lack of transportation, low literacy, and lack of access to services), community health workers are in a unique position to reduce preventable morbidity and mortality, improve the quality of life, and increase the utilization of available preventive health services for community members. Thus, there is a need

to provide grants to community health workers to empower them in promoting positive health behaviors among women and children.<sup>1</sup>

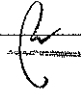
*Miriam Defensor Santiago*  
MIRIAM DEFENSOR SANTIAGO  
*acs*

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<sup>1</sup> This bill was originally filed in the Thirteenth Congress, Third Regular Session.

10 AUG -2 P2:15

SENATE  
S. No. **2239**

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

1 AN ACT  
2 PROVIDING GRANTS TO COMMUNITY HEALTH WORKERS IN ORDER TO  
3 PROMOTE POSITIVE HEALTH BEHAVIORS IN WOMEN AND CHILDREN

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

4 SECTION 1. *Short Title.* - This Act shall be known as the "Community Health Workers  
5 Act."

6 SECTION 2. *Definition of Terms.* - The following terms as used in this Act shall be  
7 defined as follows:

8 (1) Community health worker - means an individual who promotes health or nutrition  
9 within the community in which the individual resides--

10 (A) by serving as a liaison between communities and health care agencies;

11 (B) by providing guidance and social assistance to community residents;

12 (C) by enhancing community residents' ability to effectively communicate with  
13 health care providers;

14 (D) by providing culturally and linguistically appropriate health or nutrition  
15 education;

16 (E) by advocating for individual and community health or nutrition needs; and

17 (F) by providing referral and follow-up services,

18 (2) Community setting - means a home or a Community organization located in the  
19 neighborhood in which a participant resides.

1 (3) Support - means the provision of training, supervision, and materials needed to  
2 effectively deliver the services described in subsection (b), reimbursement for services, and other  
3 benefits.

4 (4) Target population - means women of reproductive age, regardless of their current  
5 childbearing status and children under 21 years of age.

6 SECTION 3. *Grants Authorized* -

7 (a) IN GENERAL - The Secretary of Health, in collaboration with the Director, is  
8 authorized to award grants to local health center units, to promote positive health behaviors for  
9 women and children in target populations, especially in indigenous communities.

10 (b) USE OF FUNDS- Grants awarded pursuant to subsection (a) may be used to support  
11 community health workers -

12 (1) to educate, guide, and provide outreach in a community setting regarding  
13 health problems prevalent among women and children;

14 (2) to educate, guide, and provide experiential learning opportunities that target  
15 behavioral risk factors including---

16 (A) poor nutrition;

17 (B) physical inactivity;

18 (C) being overweight or obese;

19 (D) tobacco use;

20 (E) alcohol and substance use;

21 (F) injury and violence;

22 (G) risky sexual behavior; and

23 (H) mental health problems;

24 (3) to educate and guide regarding effective strategies to promote positive health  
25 behaviors within the family;

26 (4) to promote community wellness and awareness; and

1 (5) to educate and refer target populations to appropriate health care agencies and  
2 community-based programs and organizations in order to increase access to quality  
3 health care services, including preventive health services.

4 SECTION 4. *Application* -

5 (a) IN GENERAL- Each local health center unit that desires to receive a grant under  
6 subsection (a) shall submit an application to the Secretary, at such time, in such manner, and  
7 accompanied by such additional information as the Secretary may require.

8 (b) CONTENTS- Each application submitted pursuant to paragraph (a) shall--

9 (1) describe the activities for which assistance under this section is sought;

10 (2) contain an assurance that with respect to each community health worker  
11 program receiving funds under the grant awarded, such program provides training and  
12 supervision to community health workers to enable such workers to provide authorized  
13 program services;

14 (3) contain an assurance that the applicant will evaluate the effectiveness of  
15 community health worker programs receiving funds under the grant;

16 (4) contain an assurance that each community health worker program receiving  
17 funds under the grant will provide services in the cultural context most appropriate for the  
18 individuals served by the program;

19 (5) contain a plan to document and disseminate project description and results to  
20 other health center and organizations as identified by the Secretary; and

21 (6) describe plans to enhance the capacity of individuals to utilize health services  
22 and health-related social by-

23 (i) assisting individuals in establishing eligibility under the programs and  
24 in receiving the services or other benefits of the programs; and

25 (ii) providing other services as the Secretary determines to be appropriate,  
26 that may include transportation and translation services.

27 (c) PRIORITY- In awarding grants under subsection (a), the Secretary shall give priority  
28 to those applicants--

1 (1) with experience in providing health or health -related social services to  
2 individuals who are underserved with respect to such services; and

3 (2) with documented community activity and experience with community health  
4 workers.

5 (d) QUALITY ASSURANCE AND COST-EFFECTIVENESS - The Secretary shall  
6 establish guidelines for assuring the quality of the training and supervision of community health  
7 workers under the programs funded under this section and for assuring the cost-effectiveness of  
8 such programs.

9 (e) MONITORING- The Secretary shall monitor community health worker programs  
10 identified in approved applications and shall determine whether such programs are in compliance  
11 with the guidelines established under subsection (b).

12 (f) TECHNICAL ASSISTANCE- The Secretary may provide technical assistance to  
13 community health worker programs identified in approved applications with respect to planning,  
14 developing, and operating programs under the grant.

15 SECTION 5. *Separability Clause.* - If any provision of this Act is held invalid or  
16 unconstitutional, the remainder of the Act or the provision not otherwise affected shall remain  
17 valid and subsisting.

18 SECTION 6. *Repealing Clause.* - Any law, presidential decree or issuance, executive  
19 order, letter of instruction, administrative rule or regulation contrary to or inconsistent with the  
20 provisions of this Act is hereby repealed, modified or amended accordingly.

21 SECTION 7. *Effectivity Clause.* - This Act shall take effect fifteen (15) days after its  
22 publication in at least two (2) newspapers of general circulation.

Approved,