

SIXTEENTH CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
Second Regular Session)



15 JUN -8 P4:16

SENATE
S. No. 2806

RECEIVED BY: *J*

Introduced by Senator Miriam Defensor Santiago

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

EXPLANATORY NOTE

The Constitution, Article 2, Section 15 provides:

Section 15. The State shall protect and promote the right to health of the people and instill health consciousness among them.

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


MIRIAM DEFENSOR SANTIAGO
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¹ This bill was originally filed during the Thirteenth Congress, Third Regular Session.

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

1 SECTION 1. *Short Title.* – This Act shall be known as “Community Health
2 Workers Act.”

3 SECTION 2. *Definition of Terms.* – For purposes of this Act, the term:

4 (1) “Community health worker” means an individual who promotes health or
5 nutrition within the community in which the individual resides—

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

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

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

10 (D) by providing culturally and linguistically appropriate health or nutrition
11 education;

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

13 and

14 (F) by providing referral and follow-up services.

15 (2) “Community setting” means a home or a Community organization located in
16 the neighborhood in which a participant resides.

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

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

6 SECTION 3. *Grants Authorized.* –

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

11 (b) Use of Funds. – Grants awarded pursuant to Section 3(a) may be used to
12 support community health workers –

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

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

17 (A) poor nutrition;

18 (B) physical inactivity;

19 (C) being overweight or obese;

20 (D) tobacco use;

21 (E) alcohol and substance use;

22 (F) injury and violence;

23 (G) risky sexual behavior; and

24 (H) mental health problems;

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

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

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

5 SECTION 4. *Application.* –

6 (a) In General. – Each local health center unit that desires to receive a grant under
7 Section 3(a) shall submit an application to the Secretary, at such time, in such manner,
8 and accompanied by such additional information as the Secretary may require.

9 (b) Contents. – Each application submitted pursuant to Section 4(a) shall:

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

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

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

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

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

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

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

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

3 (c) Priority. – In awarding grants under Section 3(a), the Secretary shall give
4 priority to those applicants:

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

7 (2) with documented community activity and experience with community
8 health workers.

9 (d) Quality Assurance and Cost-Effectiveness. – The Secretary shall establish
10 guidelines for assuring the quality of the training and supervision of community health
11 workers under the programs funded under this section and for assuring the cost-
12 effectiveness of such programs.

13 (e) Monitoring. – The Secretary shall monitor community health worker programs
14 identified in approved applications and shall determine whether such programs are in
15 compliance with the guidelines established under Section 3(b).

16 (f) Technical Assistance. – The Secretary may provide technical assistance to
17 community health worker programs identified in approved applications with respect to
18 planning, developing, and operating programs under the grant.

19 SECTION 5. *Separability Clause.* – If any provision of this Act is declared
20 unconstitutional or invalid, the remainder of the Act which is not affected thereby shall
21 continue to be in full force and effect.

22 SECTION 6. *Appropriations.* – To carry out the provisions of this Act, such
23 amount as may be necessary is hereby authorized to be appropriated from the
24 National Treasury. Thereafter, the amount necessary for the continuous operation of this
25 program shall be included in the annual appropriation of the Department of Health.

1 SECTION 7. *Separability Clause.* – If any provision or part thereof, is held invalid
2 or unconstitutional, the remainder of the law or the provision not otherwise affected shall
3 remain valid and subsisting.

4 SECTION 8. *Repealing Clause.* – Any law, presidential decree or issuance,
5 executive order, letter of instruction, administrative order, rule or regulation contrary to,
6 or inconsistent with the provisions of this Act is hereby repealed, modified or amended
7 accordingly.

8 SECTION 9. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after
9 its publication in at least two (2) newspapers of general circulation.

Approved,

/apm5June2015