

10 Jul -6 11:24

SENATE

S. NO. 340

RECEIVED

Introduced by Senator Antonio "Sonny" F. Trillanes IV

EXPLANATORY NOTE

One of the most important indicators of development is the survival of children beyond the years that they are most likely to succumb to disease and illness. Proper interventions introduced by the government, if implemented well, may reduce a large fraction of childhood deaths.

The Philippines has achieved modest gains in reducing infant mortality. In 2005, it was recorded that 25 deaths occurred per 1,000 live births in the country. Currently, it was reduced to 21.45 per 1,000 live births.¹ Although the country was able to reduce infant mortality, it was able to do so at a very slow pace.

This bill seeks to rapidly decrease the incidence of infant mortality in the country by requiring DOH, the local government, state universities and colleges, and civil society to work together in determining certain criteria in fighting infant mortality.

In view of the foregoing, immediate approval of this measure is earnestly sought.


ANTONIO "SONNY" F. TRILLANES IV
Senator

¹ Data retrieved from <https://www.cia.gov/library/publications/the-world-factbook/rankorder/2091rank.html> on July 15, 2008; data was last updated on 19 June 2008

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

DECEMBER 2010

NOV 16 2010

SENATE

S. NO. 340

DECEMBER 16 2010

Introduced by Senator Antonio "Sonny" F. Trillanes IV

AN ACT
TO ESTABLISH AN INFANT MORTALITY PROGRAM TO REDUCE THE
RATE OF INFANT MORTALITY IN THE COUNTRY PROVIDING FUNDS
THEREFOR AND FOR OTHER PURPOSES

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

1 **Section 1. *Short Title.*** - This Act shall be known as the "Infant Mortality
2 Initiative Act of 2010"

3
4 **Sec. 2. *Declaration of Policy.*** - It is the policy of the State to protect and promote
5 the right of health of the people, including the rights of children to survival, and to
6 develop healthy and fully as individuals.

7
8 **Sec. 3. *Definition of Terms.*** - As used in this section, the term -

- 9 (1) "Coalition" means a national or local health coalition or consortium;
10 (2) "Department" means the Department of Health;
11 (3) "FIMR" means a fetal and infant mortality review committee;
12 (4) "Infant mortality" means the death of a live-born infant within 364 days
13 after the infant's birth;
14 (5) "Infant mortality rate" means the number of infant deaths per 1,000 annual
15 live births.

1 **Sec. 4. Objectives of this Act.** – The objectives of this Act include:

- 2 (1) Determining the significant social, economic, cultural, safety, and health
3 system factors that exist in communities all over the country related to
4 infant mortality through a practice collaborative approach using perinatal;
5 (2) Developing a series of interventions and policies that address these factors
6 to improve the service systems and community resources;
7 (3) Participating in the implementation of community-based interventions and
8 policies that address problems in infant mortality rates;
9 (4) Assessing the progress of interventions.

10
11 **Sec. 5. Administration of the Infant Mortality Initiative.** – The Infant Mortality
12 Initiative shall be administered through a collaboration among the Department of Health,
13 which shall act as the lead agency in implementing this Act, the Dept. of Interior and
14 Local Government, Local Government Units and their respective local health coalitions,
15 and public universities or colleges having expertise in public health. A local community
16 shall develop an interdisciplinary team to serve as part of a local-wide practice
17 collaborative. Both perinatal periods of risk and fetal infant mortality reviews may be
18 used. A case review shall be conducted by each participating coalition using professional
19 in-house staff or through contracts with an outside professional. Public universities or
20 colleges having expertise in public health shall provide technical assistance in developing
21 a standard research methodology based on the fetal and infant mortality review method.
22 Public universities or colleges having expertise in public health shall assist each
23 participating coalition in determining the selection of comparison groups, identifying data
24 collection and housing issues, and presenting findings and recommendations. A single
25 methodology for the reviews conducted through the initiative shall be used by each
26 participating coalition. The department shall distribute funding to each coalition that
27 participates in the initiative through annual grants that are subject to specific
28 appropriations by the Legislature.

29
30 **Sec. 6. Functions of the Infant Mortality Initiative.** – Each participating coalition
31 shall:

- 32 (1) Develop an interdisciplinary team to oversee the process in its local
33 Community.
34 (2) Use perinatal periods of risk methodology when appropriate to examine
35 infant deaths in its community.

- 1 (3) Use a modified FIMR approach to examine infant deaths in its community
2 by:
- 3 (a) Creating a case review FIMR team that may include obstetricians,
4 neonatologists, perinatologists, pathologists, registered nurses, social
5 workers, hospital and clinic administrators, social service agencies,
6 researchers, citizens and consumers, and other experts considered
7 necessary to conduct a standardized review of infant mortality.
- 8 (b) Hiring or contracting with professional staff that may include licensed
9 nurses and social workers to abstract and present individual case reviews
10 that omit identifying information regarding infant deaths compared to
11 live births to the case review team.
- 12 (c) Developing abstracts of sample infant mortalities and comparative live
13 births that omit identifying information and that identify social,
14 economic, cultural, safety, and health system factors that are associated
15 with infant mortality rates in each community. The number of abstracted
16 cases that must be conducted by each participating coalition shall be
17 determined by a standard research methodology developed in
18 conjunction with a public university or college having expertise in
19 public health.
- 20 (d) Presenting abstracts that omit identifying information to its case review
21 team at least quarterly for their review and discussion.
- 22 (4) Develop findings and recommendations for interventions and policy
23 changes to reduce racial disparities in infant mortality.
- 24

25 **Sec. 7. Grant Awards.** – The department shall award annual grants, subject to
26 specific appropriations by the Legislature. The department shall award at least one grant
27 to a coalition representing urban communities and at least one grant to a coalition
28 representing rural communities. Grant awards shall be given to those coalitions
29 representing communities with the least infant mortality rates.

30

31 **Sec. 8. Evaluation and Reports.** - The department shall conduct an annual
32 evaluation of the implementation of the initiative describing which areas are participating
33 in the initiative, the number of reviews conducted by each participating coalition, grant
34 balances, and recommendations for modifying the initiative. All participating coalitions
35 shall produce a report on their collective findings and recommendations by January 1,

1 2010, to the President of the Senate, the Speaker of the House of Representatives, and the
2 Secretary of Health.

3
4 **Sec. 9. Immunity.** – Each participating coalition, its case review team members,
5 and professional staff are immune from liability pursuant to this Act.

6
7 **Sec. 10. Implementing Rules.** - The Department of Health shall develop the
8 implementing rules and regulations necessary to effectively implement the provisions of
9 this Act, in collaboration with other concerned agencies of the government, thirty (30)
10 days after the effectivity of this Act.

11
12 **Sec. 11. Authorization of Appropriation.** – For the purposes of this Act, the sum
13 of Twenty Million Pesos (P20,000,000) for the current fiscal year shall be allotted to the
14 Department of Health for the proper carrying out of this Act, and such other sums as may
15 be necessary for each succeeding fiscal year.

16
17 **Sec. 12. Separability Clause.** - If any provision of this Act is declared
18 unconstitutional or invalid, the remainder thereof not affected thereby shall continue to be
19 in full force and effect.

20
21 **Sec. 13. Repealing Clause.** - All laws, decrees, orders, rules and regulations or
22 other issuance or parts thereof inconsistent with the provision of this Act are hereby
23 repealed, amended or modified accordingly.

24
25 **Sec. 14. Effectivity.** - This Act shall take effect fifteen (15) days after its
26 publication in at least two (2) newspapers of general circulation.

Approved,