

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

Seventeenth Congress
First Regular Session

HOUSE OF REPRESENTATIVES
H.B. No. **5862**



Introduced by Representative H. Harry L. Roque Jr.

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

EXPLANATORY NOTE

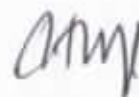
The Constitution, Article 2, Section 15 provides:

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



H. HARRY L. ROQUE JR.

¹ This bill was originally filed by Senator Miriam Defensor Santiago during the Sixteenth Congress, Second 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
7 agencies;

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

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

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

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

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

4 (2) "Community setting" means a home or a Community organization located
5 in the neighborhood in which a participant resides.

6 (3) "Support" means the provision of training, supervision, and materials
7 needed to effectively deliver the services described in Section 3(b), reimbursement for
8 services, and other benefits.

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

11 SECTION 3. *Grants Authorized.* –

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

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

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

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

22 (A) poor nutrition;

23 (B) physical inactivity;

1 (C) being overweight or obese;

2 (D) tobacco use;

3 (E) alcohol and substance use;

4 (F) injury and violence;

5 (G) risky sexual behavior; and

6 (H) mental health problems;

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

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

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

13 SECTION 4. *Application.* –

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

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

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

21 (2) contain an assurance that with respect to each community health
22 worker program receiving funds under the grant awarded, such program

1 provides training and supervision to community health workers to enable such
2 workers to provide authorized program services;

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

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

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

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

13 (i) assisting individuals in establishing eligibility under the
14 programs and in receiving the services or other benefits of the programs;
15 and

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

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

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

22 (2) with documented community activity and experience with
23 community health workers.

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

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

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

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

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

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

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

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

Approved,