

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

House Bill No. 8160



Introduced by Representative Camille Villar

EXPLANATORY NOTE

Reducing maternal deaths is part of the Sustainable Development Goals (SDGs) under Goal 3 which is to ensure healthy lives and promoting the well-being of all at all ages. But with only a decade left to meet the SDGs, the data from the Philippine Statistics Authority (PSA) indicated that the number of women dying from childbirth in the country is increasing.

The PSA defined ‘maternal death’ as “the death of a woman while pregnant, or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to, or aggravated by the pregnancy, or its management, but not from accidental or incidental causes.” This is based on the definition set by the World Health Organization (WHO).

Consider the following:

- The PSA data showed maternal deaths increased to 1,616 in 2018 compared to 1,484 in 2017, or a two year high when maternal deaths reached 1,721 in 2015.
- Based on the SDGs, countries must bring down the number of maternal deaths to 70 per 100,000 live births. In the Philippine Development Plan (PDP), the Duterte administration aims to bring down its maternal mortality ratio to 90 by 2022.
- PSA data showed Calabarzon recorded the most number of maternal deaths with 245, or 15.2 percent, of the total. Unfortunately, this represented a 10.36- percent increase from the 222 posted in 2017.
- Other regions that accounted for a large share of maternal deaths in 2018 were Region 7 (Central Visayas) and Metro Manila with 230 and 195 deaths, respectively.
- Maternal deaths in Region 7 accounted for 14.2 percent in 2018. However, this represented a 40.24-percent increase from 164 deaths in 2017.

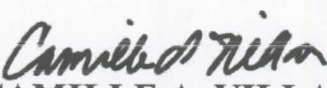
This legislation is highlighted by the following points:

1. The local government units are mandated to upgrade and improve devolved health services and medical facilities to provide quality EMOC.

2. The LGUs shall encourage facility-based delivery among all women and shall retain health workers, e.g., medical doctors, nurses, and midwives, who deliver these health services. For the purpose, the local health clinics and health offices as well as the satellite offices of the Department of Health are hereby mandated to be of 24-hour assistance to Filipino mothers.

3. The local government units are empowered to provide and formulate programs that will promote the increase in salaries and incentives of health workers.

Early cognizance of this bill is earnestly sought.


CAMILLE A. VILLAR

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

House Bill No. 8160

Introduced by Representative Camille Villar

AN ACT
SAFEGUARDING THE HEALTH OF FILIPINO MOTHERS AT THE
TIME OF THEIR CHILDBIRTH, PROVIDING PROTECTIVE
MECHANISMS THEREFOR AND FOR OTHER PURPOSES

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

SECTION 1. Consistent with the State policy that the State shall protect and promote the right to health of the people and instill health consciousness among them and the constitutional declaration that the State shall enhance the welfare and safety of women, it is hereby declared to be the policy of the State to provide maximum safeguarding of Filipino mothers at the time of their childbirths.

SECTION 2. No maternity hospital, clinic, health center, lying-in, midwifery facilities or similar center, public or private, shall deny or refuse to assist, admit or entry of a mother at the time of childbirth. They shall ensure the highest safety mechanism to prevent child switching, child trafficking or the commission of any crime that may lead to the endangering of the lives of both mother and child.

SECTION 3. The respective local government units (LGUs) in cooperation with the Department of Health (DOH) are mandated to upgrade and improve devolved health services and medical facilities to provide quality emergency obstetric care (EMOC). every barangay in the country should have a birthing facility to help reduce the risk of maternal and infant deaths.

SECTION 4. The local government units (LGUs) shall encourage facility-based delivery among all women and shall retain health workers, e.g., medical doctors, nurses, and midwives, who deliver these health services.

The local health clinics and health offices as well as the satellite offices of the Department of Health are hereby encouraged to be of 24-hour assistance to Filipino mothers.

The local government units are empowered to provide and formulate programs that will promote the increase in salaries and incentives of health workers.

SECTION 5. To complement the provisions of this Act, the Department of Health in coordination with the Professional Regulation Commission (PRC) and the relevant organization of midwives shall professionalize further the practice of midwifery in the country and empower them to be key health care professionals in providing care to mothers and newborns and reducing maternal mortality and newborn mortality rates.

SECTION 6. The Department of Health shall issue the necessary rules and regulations to implement the provisions of this Act.

SECTION 7. This Act shall take effect fifteen (15) days after its complete publication in the Official Gazette or in at least two newspapers of general circulation, whichever comes earlier.

Approved,