

SEVENTEENTH CONGRESS
CONGRESS OF THE PHILIPPINES
First Regular Session
HOUSE OF REPRESENTATIVES

House Bill No. **1179**

Introduced by REPRESENTATIVE PIA S. CAYETANO



EXPLANATORY NOTE

According to the World Health Organization, about 830 women died every day in 2015 due to complications of pregnancy and childbirth. Almost all of these deaths occurred in low-resource settings, and most could have been prevented.¹

To address this global problem, the United Nations adopted the Millennium Development Goals (MDGs), which intend to eradicate poverty and improve the social and economic conditions in the world's poorest countries. In 2015, nations all over the world, including the Philippines, renewed this agenda through the Sustainable Development Goals (SDGs). The SDGs continue to include targets of reducing maternal mortality, neonatal mortality, and under-5 mortality.²

Health workers play a vital role in lowering maternal mortality rate in the country. Unfortunately, there is a lack of access to professional health care practitioners all over the country. Healthcare professionals are sorely lacking and unequally distributed in rural and urban areas. Most of our healthcare professionals, especially doctors and nurses, have left the country in search for greener pastures abroad. Given this problem, health experts recommend that the gap on the delivery of maternal and infant healthcare services be covered by the appointment of midwives who are trained to provide healthcare services, especially maternal and infant healthcare.

Midwives constitute a large segment of the health personnel sector, comprising 65% of the public health workforce. In rural areas, they are the first point of contact for patients coming into the health system, and in fact, they implement public health programs in these areas.³ With the great potential and significant contribution of midwives in augmenting the presence of professional healthcare practitioners in rural areas, the increased community presence of midwives is necessary.

This bill thus mandates to provide one midwife in each barangay. Recognizing the importance of primary healthcare and the presence of midwives in the country, especially in the rural areas, the bill further seeks to increase the number of midwives in a barangay where there is a population of more than 5,000. This will enable the midwives to provide quality and efficient health care services.

Indeed, the midwifery profession is central to the delivery of effective health service, particularly in rural areas. In view of the foregoing, approval of this bill is earnestly sought.

Pia S. Cayetano
PIA S. CAYETANO

¹ http://www.who.int/gho/maternal_health/mortality/maternal_mortality_text/en/

² <http://www.un.org/sustainabledevelopment/health/>

³ http://www.ucc.edu.ph/onlineresources/Midwifery/_Midwifery_in_the_Philippines_.PDF

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AN ACT
MANDATING THE APPOINTMENT OF ONE MIDWIFE FOR EACH BARANGAY,
AND FOR OTHER PURPOSES

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 the "*Midwife to the Barangay*
2 *Act.*"

3
4 **SEC. 2. Statement of Policy.** - It is the policy of the State to protect and promote the
5 right to health of the people. The State shall provide appropriate programs and
6 measures to provide access to affordable and quality health and social services,
7 especially in rural areas. The services of midwives, as front liners in the country's
8 health care delivery system, are essential in achieving the State's health policy,
9 especially with regard to pre-natal and post natal maternal, and newborn, care.
10 Toward this end, this Act shall mandate the appointment of midwives for each
11 barangay to increase access to health care services for the people, especially the
12 underprivileged.

13
14 **SEC. 3. Ratio of Midwives to the Barangay.** - All barangays shall be equipped with
15 one (1) midwife; *Provided*, That if the population of a barangay exceeds five
16 thousand (5,000), the number of midwives shall be increased, as determined by the
17 Department of Health (DOH).

18
19 **SEC. 4. Role of Midwives to the Barangay.** - All Midwives to the Barangay are
20 mandated to ensure that mothers and infants, in their respective jurisdictions, are
21 given quality and essential health care services, including, but not limited to, pre-
22 natal and post natal care, breastfeeding support, providing information on the
23 importance of immunization and ensuring that infants are given the proper vaccines
24 as provided in the DOH Expanded Program on Immunization, and proper care and
25 nutrition of both the mothers and the infants.

26
27 **SEC. 5. Appointment of Midwives to the Barangay.** - The DOH, through its Center
28 for Health Development, is mandated to appoint the Midwife to the Barangay. It shall
29 immediately determine which areas are in need of midwives. Priority in appointments
30 shall be given to remote areas where there are no existing healthcare professionals
31 providing for the healthcare services of the population and areas which have high
32 maternal mortality rate.

1 **SEC. 6. *Qualifications of Midwives to the Barangay.*** – The DOH shall provide for the
2 qualifications of the Midwife to the Barangay, who shall, as much as possible, come
3 from the same barangay or municipality where he or she will be appointed.
4

5 **SEC. 7. *Basic Emergency Obstetric Care*** – The DOH shall ensure that the midwives
6 are equipped with Basic Emergency Obstetric Care. It shall also determine, subject
7 to guidelines that it may issue, the need to further provide these midwives with
8 training on Comprehensive Emergency Obstetric Care.
9

10 **SEC. 8. *Compensation and Benefits.*** - All Midwives to the Barangay shall be
11 appropriately compensated by the DOH and shall be entitled to all the benefits
12 provided in Republic Act No. 7305, otherwise known as the "Magna Carta of Public
13 Health Workers."
14

15 **SEC. 9. *Implementing Rules and Regulation.*** - The DOH, in cooperation with the
16 Department of Interior and Local Government, the Civil Service Commission, and
17 other concerned government agencies and non-government organizations, shall
18 formulate and promulgate, within ninety days (90) from its effectivity, the rules and
19 regulations necessary to implement this Act.
20

21 **SEC. 10. *Appropriations.*** – For a period of five (5) years from the passage of this
22 Act, the amount necessary to implement the provisions of this Act shall be charged
23 against the appropriations of the DOH. Thereafter, such funds as may be necessary
24 for the continued implementation of this Act shall be included in the appropriations of
25 the respective Local Government Units.
26

27 **SEC. 11. *Separability Clause.*** - If any part or provision of this Act shall be held
28 unconstitutional or invalid, other provisions thereof which are not affected thereby
29 shall continue to be in full force and effect.
30

31 **SEC. 12. *Repealing Clause.*** - All laws, decrees, executive orders, and other
32 presidential issuances which are inconsistent with this Act are hereby repealed,
33 amended or modified accordingly.
34

35 **SEC. 13. *Effectivity.*** - This Act takes effect immediately after its publication in at least
36 two (2) national newspapers of general circulation.

Approved.