

REPUBLIC OF THE PHILIPPINES  
HOUSE OF REPRESENTATIVES  
Quezon City

EIGHTEENTH CONGRESS  
First Regular Session

House Bill No. 1659



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Introduced by **MAGDALO Party-List Representative**  
**HON. MANUEL DG. CABOCHAN III**

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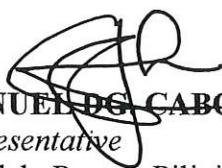
**EXPLANATORY NOTE**

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 2013, it was recorded that 18.19 deaths occurred per 1,000 live births in the country. In 2014, it was reduced to 21.45 per 1,000 live births. 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 the Department of Health (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.

  
**MANUEL DG. CABOCHAN III**  
*Representative*  
Magdalo Para sa Pilipino Party-List

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**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"*.

3  
4        **Sec. 2. Declaration of Policy.** - It is the policy of the State to protect and promote the  
5 right of health of the people, including the rights of children to survival, and to develop  
6 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; and  
14        (5) *"Infant mortality rate"* means the number of infant deaths per 1,000 annual  
15            live births.

16  
17        **Sec. 4. Objectives of this Act.** - The objectives of this Act includes:

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

26  
27        **Sec. 5. Administration of the Infant Mortality Initiative.** - The Infant Mortality  
28 Initiative shall be administered through a collaboration among the Department of Health,

1 which shall act as the lead agency in implementing this Act, the Dept. of Interior and Local  
2 Government, Local Government Units and their respective local health coalitions, and public  
3 universities or colleges having expertise in public health. A local community shall develop  
4 an interdisciplinary team to serve as part of a local-wide practice collaborative. Both  
5 perinatal periods of risk and fetal infant mortality reviews may be used. A case review shall  
6 be conducted by each participating coalition using professional in-house staff or through  
7 contracts with an outside professional Public universities or colleges having expertise in  
8 public health shall provide technical assistance in developing a standard research  
9 methodology based on the fetal and infant mortality review method. Public universities or  
10 colleges having expertise in public health shall assist each participating coalition in  
11 determining the selection of comparison groups, identifying data collection and housing  
12 issues, and presenting findings and recommendations. A single methodology for the reviews  
13 conducted through the initiative shall be used by each participating coalition. The department  
14 shall distribute funding to each coalition that participates in the initiative through annual  
15 grants that are subject to specific appropriations by the Legislature.

16  
17 **Sec. 6. *Functions of the Infant Mortality Initiative.*** - Each participating coalition  
18 shall:

- 19 (1) Develop an interdisciplinary team to oversee the process in its  
20 local  
21 Community;
- 22 (2) Use perinatal periods of risk methodology when appropriate to  
23 examine  
24 infant deaths in its community; or
- 25 (3) Use a modified FIMR approach to examine infant deaths in its community  
26 by:
  - 27 (a) Creating a case review FIMR team that may include  
28 obstetricians, neonatologists, perinatologists, pathologists,  
29 registered nurses, social workers, hospital and clinic  
30 administrators, social service agencies, researchers, citizens and  
31 consumers, and other experts considered necessary to conduct a  
32 standardized review of infant mortality;
  - 33
  - 34 (b) Hiring or contracting with professional staff that may include  
35 licensed nurses and social workers to abstract and present  
36 individual case reviews that omit identifying information regarding  
37 infant deaths compared to live births to the case review team;
  - 38
  - 39 (c) Developing abstracts of sample infant mortalities and comparative  
40 live births that omit identifying information and that identify  
41 social, economic, cultural, safety, and health system factors that  
42 are associated with infant mortality rates in each community. The  
43 number of abstracted cases that must be conducted by each  
44 participating coalition shall be determined by a standard research  
45 methodology developed in conjunction with a public  
46 university or college having expertise in public health; and  
47

(d) Presenting abstracts that omit identifying information to its case review team at least quarterly for their review and discussion.

- 4) Develop findings and recommendations for interventions and policy changes to reduce racial disparities in infant mortality.

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

**Sec. 8. Evaluation and Reports.** - The Department shall conduct an annual evaluation of the implementation of the initiative describing which areas are participating in the initiative, the number of reviews conducted by each participating coalition, grant balances, and recommendations for modifying the initiative. All participating coalitions shall produce a report on their collective findings and recommendations by January 1, 2010, to the President of the Senate, the Speaker of the House of Representatives, and the Secretary of Health.

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

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

**Sec. 11. Authorization of Appropriation.** - For the purposes of this Act, the sum of Twenty Million Pesos (P 20,000,000) for the current fiscal year shall be allotted to the Department of Health for the proper carrying out of this Act, and such other sums as may be necessary for each succeeding fiscal year.

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

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

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

*Approved,*