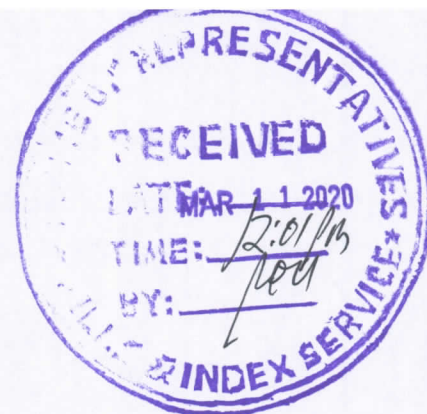


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
First Regular Session

HOUSE BILL No. 6562



Introduced by

BAYAN MUNA Representatives FERDINAND R. GAITE,
CARLOS ISAGANI T. ZARATE and EUFEMIA C. CULLAMAT,
ACT TEACHERS Party-List Representative FRANCE L. CASTRO,
GABRIELA Women's Party Representative ARLENE D. BROSAS
and KABATAAN Party-List Representative SARAH JANE I. ELAGO

AN ACT
MANDATING THE APPOINTMENT OF BARANGAY HEALTH WORKERS,
PROVIDING FOR THEIR EDUCATION AND TRAINING,
DUTIES AND RESPONSIBILITIES,
COMPENSATION AND BENEFITS, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

The State has the primary responsibility for people's right to health. This is guaranteed in the Philippine Constitution provision that "the state shall protect and promote the right to health of the people and instill health consciousness among them" and shall "adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost. There shall be priority for the needs of the under-privileged, sick, elderly, disabled, women, and children. The State shall also endeavor to provide free medical care to paupers."²

In the Philippines, even before the 1978 Alma Ata Primary Health Care Declaration, many non-government organizations (NGOs), had taken the lead in training community health workers and providing health services in the communities. The government later on joined the bandwagon to train barangay health workers (BHWs).³

Community health workers and/or BHWs are integral part of health service provision at the community level as they provide basic health care services to the community. They provide first aid, collect vital statistics, maintain records, and make reports; participate in community meetings; provide assistance to health center activities like nutrition education, monitoring and feeding; immunization education, monitoring, and dispensing family planning services, sanitation and

¹ Philippine Constitution, Article II, Section 15

² Philippine Constitution, Article XIII, Section 11

³ <https://opinion.inquirer.net/120569/health-for-all-replay>

1 hygiene promotion and education, and disaster relief and rehabilitation, among others.

2
3 BHWs are among the front-liners in primary health care as they provide assistance and support to
4 physicians, dentists, nutritionists, public health nurses, and midwives. Their role is indispensable
5 to community health and wellness.

6
7 Recognizing the important role of BHWs in primary health care, Republic Act 7883 Barangay
8 Health Workers' Benefits and Incentives Act of 1995 was passed into law granting benefits and
9 incentives to accredited barangay health workers.

10
11 RA 7883 provided incentives and benefits to BHWs including hazard allowance, subsistence
12 allowance, training and education and career enrichment programs, Civil service eligibility, Free
13 legal services, and preferential access to loan.

14
15 Despite the passage into law of RA 7883, the issues and concerns besetting the BHWs and the
16 barangay level health care persisted.

17
18 The country still do not have enough BHWs. The Department of Health (DOH) admitted in 2019
19 that the present number of BHWs at 207,392 are not enough for the needs of the people and that
20 we need 802,422 more. DOH-Bureau of Local Health Systems and Development Maria Lourdes
21 Gajitos claimed that it is not easy to fill the discrepancy because BHW work is "voluntary".⁴

22
23 But this "voluntary" nature of BHWs is used as pretext to exploit them and grossly take them for
24 granted.

25
26 Like most of the barangay folks they serve, BHWs suffer from poor economic conditions,
27 inadequate health services and facilities, and being subjected to political maneuverings of local
28 politicians.

29
30 Many BHWs have no regular jobs, and rely on their allowances as BHW. But their allowances vary
31 significantly, ranging from P300 to P6,000 per month depending on the LGU.

32
33 Some barangay health workers need to slog through the fields just to conduct house-to-house
34 visits in some areas, many have to shell out their own money for food, travel and reproduction of
35 forms; some are exposed to many health and hazard risks while doing their tasks, and some lack
36 up to date awareness on emerging health issues. Their services need not be at the expense of the
37 depreciation of their labor for our poor communities.

38
39 Since BHWs are accredited, registered and maintained by local health boards, they are at the mercy
40 of LGUs. Some "lucky" BHWs get more allowances and benefits and given all the support by their
41 LGUs. Yet some others get inadequate allowances and support, and worse removed or forced to
42 resign if another local official is elected. BHWs are being used by many local executives for their
43 political and electoral campaigns.

44
45 If not for the strong spirit of volunteerism and patriotism of many BHWs, many would have left
46 this voluntary work. Yet for all their willingness to help and serve, they are calling for recognition,
47 and support from the government.

48

⁴ https://www.doh.gov.ph/sites/default/files/news_clips/042119-0002.pdf

1 This bill, seeks to give our Barangay Health Workers the due recognition that they deserve by
2 granting them a compensation and benefits package, as well as security of tenure and free education
3 and training programs for barangay health workers.

4
5 Such would not only encourage more people to become BHWs but would also contribute to the
6 improvement of community health services and better people's health.

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8 The immediate passage of this bill, thus, is earnestly sought.

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11 *Approved,*

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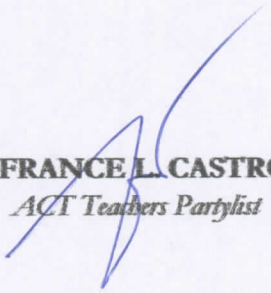


REP. FERDINAND R. GAITE
Bayan Muna Partylist

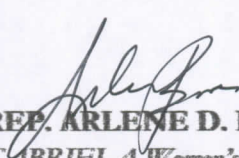


REP. CARLOS ISAGANI T. ZARATE
Bayan Muna Partylist

REP. EUFEMIA C. CULLAMAT
Bayan Muna Partylist



REP. FRANCE L. CASTRO
ACT Teachers Partylist



REP. ARLENE D. BROSAS
GABRIELA Women's Party



REP. SARAH JANE I. ELAGO
Kabataan Partylist

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HOUSE BILL No. 6562

Introduced by

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

SECTION 1. Short Title. — This Act shall be known as the "Barangay Health Workers Act of 2020."

SECTION 2. Statement of Policy.— The State shall protect and promote the right to health of the people and to provide conditions for health empowerment, where each individual has access to information and services that will bring about health and well-being. The Primary Health Care Approach is recognized as the major strategy towards health empowerment, emphasizing the need to provide accessible and acceptable health services through participatory strategies such as health education, training of barangay health workers, community building and organizing.

The State recognizes the rights and vital role of barangay health workers (BHW) who are among the frontliners in primary health care to organize themselves, to strengthen and systematize their services and the importance of providing them just compensation, consistent with the principle of equal pay for equal work and work of equal value.

SECTION 3. Definition of Terms. — AS used in this Act:

- a) Barangay Health Worker (BHW) shall refer to a person who is appointed to act as a health worker in a barangay unit in accordance with Section 4 hereof;
- b) Magna Carta for Public Health Workers shall refer to Republic Act No. 7305; and
- c) Public Health Worker (PHW) shall be as defined in Section 3 of the Magna Carta for Public Health Workers as referring to all persons who are engaged in health and health-related work, all persons employed in all hospitals, sanitaria, health

infirmaries, health centers, rural health units, barangay health stations, clinics and other health-related establishments owned and operated by the Government or its political subdivisions with original charters and shall include medical, allied health professional, administrative and support personnel employed regardless of their employment status.

SECTION 4. Appointment of Barangay Health Workers. — There shall be appointed in each barangay such number of BHWs as the Department of Health (DOH) shall determine and recommend in consideration of the number of households in a barangay; Provided, That the total number of BHWs per barangay shall not be less than three (3), nor more than one percent (1%) of the barangay's total population.

The DOH shall appoint the BHWs in each barangay.

All active and existing barangay health workers accredited by the local health board under Republic Act No. 7883 shall be given preference in the appointment of BHWs pursuant to this Act.

SECTION 5. Six-Month Education and Training Program for Barangay Health Workers. — The Department of Health (DOH), in coordination with the University of the Philippines, shall develop a competency-based education and training curriculum for all barangay health workers. The curriculum shall train the community health workers as healthcare provider, community organizer, health service manager, trainer and educator, and researcher. It shall include basic orientation and training on health programs and institutionalized health service delivery system, primary healthcare, basic community organizing, local health research, social health insurance navigation, basic local resource generation and mobilization, training needs analysis, basic report writing and communication skills, and program planning and development. Courses on basic dental care, reproductive health, STI and HIV/AIDS prevention, nutrition, physical therapy, traditional and herbal medicine and reflexology shall be offered.

SECTION 6. Accreditation and Competency Assessment. — The Department of Health, in coordination with local governments and the Civil Service Commission, shall conduct a competency assessment test upon completion of the Education and Training Program, provided that this requirement shall be waived for those who have served as Barangay Health Workers for five (5) or more years. Only those who have passed the assessment test or have served as BHWs for five years or more will be accredited. The Provincial Health Board, with the participation of TESDA, PhilHealth, and accredited training NGOs, is hereby mandated to carry out the accreditation of Barangay Health Workers.

SECTION 7. Program Cost and Cost Sharing for Local Government Units. The basic Education and Training Program shall be offered free of charge. Local governments shall adopt a cost-sharing financing scheme with the National Government through the DOH for the implementation of the basic course on Barangay Health Work depending on the income level of the concerned local government units.

SECTION 8. Duties and Responsibilities. — The BHWS shall perform in their respective barangays the followings duties and responsibilities:

- a) Those which the DOH, or the city, municipal or barangay sanggunian shall provide by ordinance, subject to the guidelines to be promulgated jointly by the DOH and Department of Interior and Local Government (DILG), in connection with the

1 delivery of basic and primary health care services, the implementation of family
2 planning, feeding and nutrition, and immunization programs, disaster response and
3 mitigation, sanitation programs, and anti-drug abuse rehabilitation and information
4 campaigns, and the establishment of national or local health management
5 information systems;

6
7 b) Provide assistance to physicians, dentists, nurses, nutritionists, or midwives who are
8 employed, stationed, or are otherwise providing services at the barangay health
9 center, daycare center or birthing center;

10
11 c) Administer first-aid, home remedies, provide health education, and respond in natural
12 calamities and disaster; and

13
14 d) Gather data about the health profile of the barangay, incidence of communicable or
15 chronic diseases, environmental or health hazards in the barangay, and other public
16 health-relevant event or information, and report the same to the local health board.

17
18 Provided that, all the necessary equipment and supplies needed by the BHWs in the performance
19 of their roles shall be provided for by the LGUs through the local health board.

20
21 Provided, further, that no BHW shall be made to perform or be involved in any partisan political
22 activity.

23
24 **SECTION 9. Compensation and Benefits.** — The entry pay level of a BHW shall be the
25 prevailing rate equivalent to Salary Grade 1 (SG 1).

26
27 BHWs shall also be entitled to the following standards, incentives, and benefits
28 provided for Public Health Workers under the Magna Carta for Public Health Workers:

- 29
30 a) Normal hours of work;
31 b) Overtime pay for overtime work;
32 c) Rest day;
33 d) Night—shift differential;
34 e) Hazard allowance;
35 f) Subsistence allowance;
36 g) Longevity pay;
37 h) Free medical examination;
38 i) Compensation for injuries;
39 j) Leave benefits;
40 k) Retirement pay; and
41 l) Right to self-organization.

42
43 Further, BHWs shall be covered by the existing statutory benefits such as GSIS,
44 Philhealth, and Pag-IBIG, as such, the total number of years served as barangay health
45 worker shall be credited to his/her service in computing retirement benefits. BHWs shall be
46 entitled to the following additional benefits:

- 47
48 a) Free Legal Services— Legal representation and consultation services for barangay
49 health workers shall be immediately provided by the Public Attorneys' Office in
50 cases of coercion, interference, and in other civil and criminal cases filed by or
51 against barangay health workers arising out of or in connection with the

performance of their duties as such.

b) **Preferential Access to Loans.**— The DOH in coordination with other concerned government agencies shall provide a mechanism for access to loan services by organized barangay health workers. The agencies providing loan services will set aside one percent (1%) of their loanable funds for organized barangay health worker groups that have community-based income generating projects in support of health programs or activities.

c) **Civil Service Eligibility.**— A second grade eligibility shall be granted to barangay health workers who have rendered six (6) months continuous service.

SECTION 10. Security of Tenure. — All duly appointed BHWs shall not be terminated except for cause provided under existing civil service rules and regulations, and only after notice and hearing; Provided, that if a BHW is found by the Civil Service Commission to be unjustly dismissed from work, he/she shall be entitled to reinstatement without loss of seniority rights and to his/her back wages with twelve percent (12%) interest computed from the time his/her compensation was withheld from his/her up to time of reinstatement. The Civil Service Commission shall resolve termination cases against BHWs judiciously not later than ninety (90) days from the receipt of a complaint.

SECTION 11. Protection Against Discrimination. — A barangay health worker shall not be discriminated against with regard to gender, civil status, creed, religious or political beliefs and affiliation and ethnic groupings in the exercise of their functions

SECTION 12. Right to Self-Organization. — Barangay health workers have the right and be encouraged to freely form, join or assist organizations and to obtain redress of their grievances through peaceful concerted activities for purposes not contrary to law, and with utmost regard to service to patients and the continuous operation of barangay health services in the interest of public health, safety or survival of patients.

SECTION 13. Representation in the Local Health Board and Health Care Provider Network. — The president of the municipal or city association of BHWs shall be a member of the municipal or city local health board. The Presidents of each component city and municipality of a province shall elect among themselves the BHW representative to the provincial health board

The BHWs shall also form part of the Health Care Provider Network as may be determined by the DOH and LGUs concerned in the implementation of primary health care programs and services.

SECTION 14. Local Health Plan. —The BHWs shall actively take part in the formulation, implementation, monitoring and evaluation of the health plans insofar as primary health care programs, projects and activities are concerned.

SECTION 15. Mandatory Continuing Community-Based Health Education. — The DOH, in cooperation with TESDA, will formulate a module for Mandatory Continuing Community-based Health Education (MCCHE). Each accredited BHW will be required to undergo an MCCHE at least every three (3) years of active service, or as warranted by the DOH.

SECTION 16. Non-diminution of benefits. — Nothing in this Act shall be construed to eliminate or in any way diminish entitlements, or other benefits being provided to or enjoyed by BHWs under Republic Act No. 7883 or other laws and issuances.

SECTION 17. Funding. — Funds for the benefits and incentives of barangay health workers and for the implementation of local health programs, projects and activities, shall be allocated from the following sources:

1. Ten percent (10%) of the internal revenue allotment (IRA) for LGUs;
2. Ten percent (10%) of the LGUs share in the national wealth;
3. Ten percent (10%) of the tobacco excise tax;
4. At least ten percent (10%) of the LGUs' incomes derived from local economic enterprises (LEE); and,
5. Ten percent (10%) of the LGUs' incomes derived from the LGUs' own sources of revenue and local taxes in accordance with the Local Government Code.

Provided, that the LGUs concerned shall first fulfill the benefits and incentives due for BHWs in accordance with this Act. Provided further, that any expenditure by the LGUs for the benefits and incentives of BHWs shall be exempt from the forty-five percent (45%) limit on allocation for personal services of LGUs in the case of first to third class LGUs, and fifty-five percent (55%) in the case of fourth class or lower class LGUs.

SECTION 18. Penalty Clause. - Any local government official concerned who violates any provision of this Act may be administratively charged in accordance with law.

SECTION 19. Rules and Regulation. - The Department of Health, the Department of Interior and Local Government, Civil Service Commission, the Government Service Insurance System, with the participation of various health union representatives and other concerned government agencies and non-governmental organizations, shall formulate, not later than one hundred eighty days (180) from the effectivity of this Act, the rules and regulations necessary for its effective implementation.

SECTION 20. Separability Clause. - If any provision of this Act is declared invalid, the remainder of any provision hereof not affected thereby shall remain in force and effect.

SECTION 21. Repealing Clause. - Republic Act No. 7883 is hereby repealed. All laws, decrees, executive orders, and other presidential issuances which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

SECTION 22. Effectivity. - This Act shall take effect fifteen days (15) after its publication in the Official Gazette or in any newspaper of general circulation.

Approved,