

Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

EIGHTEENTH CONGRESS
First Regular Session

House Bill Number 6103



Introduced by Representative **MARISSA LOURDES M. ANDAYA**

EXPLANATORY NOTE

The Philippines has been identified by the World Health Organization (WHO) as among those countries that account for 90% of under-five mortality worldwide. In its 2013 statistical report, WHO reported that a total of 82,000 Filipino children under 5 years old die every year. In 2012, newborns account for 48% of children who die under the age of five in the Philippines, and of this figure, 39% die of preterm complications. It has also been found out that newborns may die due to lack of access to newborn care.

To abate this disturbing trend in neonatal mortality, the Department of Health (DOH), launched in 2009 the Unang Yakap campaign which advocates the Essential Intrapartum Newborn Care (EINC), a concept fully supported by WHO. DOH describes EINC as a series of time-bound and evidence-based interventions in caring for newborn babies and their mothers. Through the EINC protocol, there is a potential to decrease newborn death by at least half.

The Unang Yakap campaign is a non-costly way that has the potential of saving newborn babies from dying. It involves simple steps to improve health care services for babies during the first critical hours:

1. **Immediate and thorough drying of the newborn** – Immediate and thorough drying for 30 seconds to one-minute warms the newborn and stimulates breathing.
2. **Early skin-to-skin contact between mother and newborn** – Early skin to skin contact between mother and newborn, and delayed washing for at least 6 hours prevents hypothermia, infection, and hypoglycemia.
3. **Properly-timed cord clamping and cutting** – Properly-timed cord clamping and cutting prevents anemia and protects against brain hemorrhage in

premature newborns. Properly timed cord-clamping means waiting for the cord pulsations to stop (between 1-3 minutes).

4. Non-separation of newborn and mother for early breastfeeding –

Continuous non-separation of newborn and mother for early breastfeeding protects infants from dying from infection. The first feed provides colostrum, a substance equivalent to the babies' first immunization in its protective properties. Evidence shows that breastfeeding in the first hour of life prevents about 19% of newborn deaths.

In spite of DOH's strong advocacy of the Unang Yakap campaign through its implementation of Administrative Order 2009-0025, not all health practitioners and providers adopt this protocol, particularly the timely manner by which it should be implemented. Worse, expectant mothers are not informed about this protocol that can potentially save their infants.

This measure aims to strengthen said AO 2009-0025 and institutionalize this very important campaign in order to save thousands of newborn lives.

This bill also aims to train frontline maternal and newborn healthcare practitioners in order to strengthen their skills, engaging both public and private healthcare facilities. It also aims to educate pregnant women of the importance of observing the Unang Yakap protocol.

Immediate passage of this bill is earnestly requested.


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**AN ACT INSTITUTIONALIZING THE UNANG YAKAP CAMPAIGN, ADOPTING
THE PROTOCOL ON ESSENTIAL NEWBORN CARE**

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

Section 1. Short Title. – This Act shall be known as the “**Unang Yakap Act of 2020**”.

Sec. 2. Declaration of Policy. – It is the policy of the State to adopt measures that will ensure the provision of globally-accepted evidence-based essential newborn care that focuses on the first week of the newborn's life.

Towards this end, the State shall endeavor to guarantee that quality time-bound interventions are provided to newborns to ensure that newborn morbidity and mortality are significantly reduced through the following:

- a. providing guidelines to health workers and medical practitioners in providing evidence-based essential newborn care;
- b. defining the roles and responsibilities of the Department of Health (DOH), healthcare facilities and practitioners in the implementation of the Newborn Protocol

Sec. 3. Coverage – This Act shall include all healthcare practitioners involved in the provision of maternal and newborn care and all healthcare facilities nationwide, both private and public.

Sec. 4. Interventions. – The DOH shall adopt guidelines to ensure that:

- a. quality provision of time-bound newborn care and interventions are implemented, such as:

- i. Immediate and thorough drying of the newborn;
 - ii. Early skin-to-skin contact between mother and newborn;
 - iii. Properly-timed cord clamping and cutting;
 - iv. Non-separation of newborn and mother for early breastfeeding.
- b. non-immediate interventions and unnecessary procedures are delayed until after the newborn has initiated breastfeeding, unless the newborn or the mother are in need of immediate medical attention;
- c. ensure the provision of maternal care.

SEC. 5. Continuing Education, Re-education and Training of Health Workers and Health Institutions. – The Department of Health with the assistance of other government agencies, professional and nongovernmental organizations shall conduct continuing information, education, re-education, and training programs for physicians, nurses, midwives, nutritionist-dietitians, community health workers and traditional birth attendants (TBAs) and other health workers on the Unang Yakap Protocol or immediate Essential Newborn Care.

Information materials shall be given to all health workers involved in maternal and infant care health institutions.

Sec. 6. Information Dissemination and Educational Programs of Pregnant Women and Women of Reproductive Age. – To immediately and continuously educate women and expectant mothers on current and updated newborn protocols and infant care and to distribute written information materials on such matters free of charge during the prenatal and perinatal consultations and/or confinements in health institutions.

Sec. 7. Implementing Agency. – The Department of Health shall be principally responsible for the implementation and enforcement of the provisions of this Act.

Sec. 8. Sanctions. – Any healthcare or birthing facility which unjustifiably refuses or fails to comply with the provisions of this Act shall be imposed a fine of not less than Fifty thousand pesos (Php50,000.00) but not more than Two hundred thousand pesos (Php200,000.00) on the first offense.

On the second offense, a fine of not less than Two hundred thousand pesos (Php200,000.00) but not more than Five hundred thousand pesos (Php500,000.00).

On the third offense, a fine of not less than Five hundred thousand pesos (Php500,000.00) but not more than One million pesos (Php1,000,000.00) and the cancellation or revocation of the business permits or licenses to operate.

In addition, the Secretary of Health is hereby empowered to impose sanctions on health institution for the violation of this Act and the rules issued thereunder. Such sanctions may be in the form of reprimand or censure and in case of repeated willful violations, suspension of the permit to operate of the erring health institution.

Heads, officials and employees of government health institutions with birthing facilities who violate this Act shall further be subject to the following administrative penalties:

1. First offense – Reprimand;
2. Second offense – Suspension for one (1) to thirty (30) days; and
3. Third offense – Dismissal.

This shall be without prejudice to other liabilities applicable under civil service law and rules.

Section 9. *Rules and Regulations.* – The Department of Health shall issue within one hundred and twenty (120) days upon its effectivity the rules and regulations necessary to carry out the provisions of this Act.

Section 10. *Separability Clause.* – If any clause, sentence, paragraph or part of this Act shall be declared to be invalid, the remainder of this Act or any provision not affected thereby shall remain in force and effect.

Section 11. *Repealing Clause.* – All laws, presidential decrees, executive orders, rules and regulations or parts thereof which are not consistent with this Act are hereby repealed, amended or modified accordingly.

Section 12. *Effectivity Clause.* – 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, whichever comes earlier.

Approved,