

Leptospirosis

Recommendations on training

1. The primary role of BHW is to encourage its community members to avoid getting in contact with flood water.
2. BHWs should have guidance from the health center if doxycycline will be distributed to the community members.
3. Maintaining cleanliness in the community to avoid rat infestation, especially in urban areas, may be highlighted during the training.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang leptospirosis?

Ang leptospirosis ay isang sakit na dulot ng Leptospira na bacteria mula sa ihi ng daga o hayop na may impeksyon. Kadalasang nakukuha ito ng isang tao kapag nagkaroon ng contact ang virus sa balat, lalo na kapag may baha. Ang leptospirosis ay maaaring mabilis na makasira ng bato na pwedeng humantong sa pagda-dialysis o kamatayan.

Anu-anong mga sintomas at senyales ng leptospirosis?

- Nagkaroon ng contact sa baha
- Lagnat
- Pangininginig
- Pananakit ng kalamnan lalo na sa binti
- Pamumula ng mata na walang pamamaga
- Mas madalang o mas kaunting pag-ihi

Papaano maiwasan ang leptospirosis?

Iwasan lumusong sa bahang lugar.

Kung hindi maiwasan, gumamit ng bota upang mapanatiling tuyo ang paa.

Kung nagkaroon ng contact sa baha, hugasan agad ang paa gamit ang sabon at tubig.

Itanong sa health center kung kailangang uminom ng gamot bilang pangontra sa leptospirosis.

References and suggested readings:

- Department of Health. undated. Leptospirosis. Accessible at: <https://doh.gov.ph/Health-Advisory/Leptospirosis>
- DOH Memorandum No. 2009-0250. Interim Guidelines on the Prevention of Leptospirosis through the Use of Prophylaxis in Areas affected By Floods. Accessible at: <https://www.officialgazette.gov.ph/2009/10/16/department-of-health-memorandum-no-2009-0250-s-2009/>
- Department of Health Department Circular 2022-0344. Dissemination of the Omnibus Health Guidelines per Lifestage. Available at <https://dmas.doh.gov.ph:8083/Rest/GetFile?id=719750>

COVID-19

Recommendations on training

1. Training may center on the response in the event of the presence of COVID-19 case in the community. The trainer is advised to check the latest guidance from DOH on how to respond to the disease.
2. Promote public health measures in preventing the spread of COVID-19. These are promoting good air quality through ventilation, use of face masks, physical distancing, avoiding crowded places, and getting vaccinated.
3. Because the understanding about the disease is evolving, the trainer may use the latest DOH promotion materials about COVID-19. For example, BIDA Plus acronym may be used, but it does not capture good air ventilation, which was later promoted by DOH in its BIDA campaign.
4. Common misinformation and disinformation about COVID-19 and vaccines against it should be addressed in the training.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang COVID-19?

Ang COVID-19 ay dulot ng virus na SARS-CoV-2 na naipapasa mula hinining ng isang taong maysakit nito. Kadalasang walang sintomas ang sakit, ngunit maaaring magdulot ito ng pagkahospital at pagkamatay lalo na sa mga matatanda at sa mga taong may ibang sakit gaya ng diabetes at high blood.

Anu-anong mga sintomas ng COVID-19?

Maaaring walang sintomas ang isang taong may COVID-19.

Maaari ding magkaroon ang isang taong may COVID-19 ng mga sumusunod:

- Lagnat
- Ubo
- Panandaliang pagkawala ng pang-amoy at panlasa
- Pamumula ng mata
- Pananakit ng lalamunan
- Pananakit ng ulo
- Pananakit ng kalamnan
- Diarrhea

Paano maiiwasan na magkaroon ng COVID-19?

Magpabakuna kontra COVID-19.

Panatilihin ang magandang bentilasyon sa bahay o sa mga pinupuntahan. Iwasan ang mga lugar na kulob ang hangin.

Iwasan ang mga lugar na madaming tao.

Gumamit ng face mask (at face shield kung kailangan).

Regular na maghugas ng kamay.

Ihiwalay sa ibang tao ang isang maysakit ng COVID-19, habang pinapanatili ang respeto at dignidad nito.

MGA POSIBLENG TANONG**SAGOT**

Ligtas ba ang mga bakuna kontra COVID-19?

Oo. Lahat ng bakuna ay dumaan sa mabilis na pag-aaral upang masigurado ang kaligtasan ng mga ito. Ang mga bakuna na ibinibigay ng DOH at health center ay dumaan sa masusing pagkilatis bago inaprubahang gamitin ng mga tao.

Ano ang dapat gawin kung may posibilidad na may COVID-19 ang isang tao?

Sabihin ang pasyente na umiwas agad sa pakikisalamuha sa ibang tao.

Gumamit ng face mask.

Dalasan ang paghuhugas ng kamay.

Panatilihin ang magandang bentilasyon sa bahay o sa lugar na pagtitigilan.

Huwag mahiya o matakot na makipag-ugnayan sa BHERTS para sa suporta at karagdagang payo base sa pinakahuling polisiya ng gobyerno sa COVID-19.

References and suggested readings:

- COVID-19 FAQs. Department of Health. Accessible at: <https://doh.gov.ph/COVID-19/FAQs>
- COVID-19 Health Advisories. Department of Health. Accessible at: <https://doh.gov.ph/covid-19/infographics/health-advisories>

Iba Pang Nakakahawang Sakit

Recommendations on training

1. The topics included here - typhoid fever, malaria, leprosy, filariasis, and schistosomiasis - may be included in the BHW training in areas where these diseases are endemic or where it is relevant.
2. Except on leprosy, the focus of the discussions should be on prevention of the disease.
3. For leprosy, the focus of discussion may be on early detection.
4. Photos showing signs and symptoms of these diseases may be presented.
5. The BHW role as disease reporting advocate may also be introduced.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang typhoid fever?

Ang typhoid fever ay sakit na dulot ng bacteria na *Salmonella typhi* na nakukuha kapag ang dumi mula sa taong maysakit ay napunta sa pagkain. Ang taong may typhoid fever ay nakakaramdam ng pagtatae na may dugo, panghihina, at lagnat.

Ano ang dapat gawin upang maiwasan ang typhoid fever?

Laging hugasan ng maayos ang kamay pagkatapos gumamit ng palikuran, o bago maghanda ng pagkain.
Ireport sa midwife o health center kung may mga kaso ng pagtatae sa komunidad.

Ano ang malaria?

Sakit na nakukuha sa kagat ng lamok na Anopheles na nangangagat sa gabi. Ang mga taong may malaria ay may mataas na lagnat, sakit ng ulo, at pananakit ng kalamnan. May mga piling lugar sa bansa kung saan may mga kaso pa din ng malaria.

Papaano maiwasan ang malaria?

Gawin ang 4S Strategy (tingnan sa section ng Dengue).
Gumamit ng kulambo kapag matutulog.

Ano ang leprosy?

Ang leprosy o ketong ay sakit sa balat na nakukuha kapag nakalanghap ng mikrobyo na *Mycobacterium leprae* mula sa taong maysakit. Nagsisimula ito bilang mga puting patse sa katawan na walang pakiramdam. Kapag napabayaan, nagkakaroon ng pagkasira ng hitsura ng daliri sa kamay at paa, at pakiramdam na mahapdi ang isang taong may leprosy.

Ano ang dapat gawin ng BHW para maiwasan ang leprosy sa komunidad?

Ireport agad sa midwife o health center kung may mapansin na taong may mga puting patse sa katawan na walang pakiramdam.

MGA POSIBLENG TANONG**SAGOT**

Ano ang filariasis at elephantiasis?

Ang filariasis ay sakit na nakukuha sa kagat ng lamok sa mga lugar na may mga kaso. Kapag napabayaan, ang mga parasite ay bumabara sa daluyan ng mga kulani, na nagiging dahilan ng paglaki ng ilang parte ng katawan gaya ng binti (elephantiasis) at itlog ng lalaki (hydrocoele).

Papaano maiiwasan ang filariasis?

Isagawa ang 4S Strategy sa komunidad.

Gumamit ng kulambo kung matutulog sa gabi.

Uminom ng gamot na ipinamimigay tuwing may mass drug administration sa komunidad, kahit walang sintomas o nararamdamahan.

Ano ang schistosomiasis?

Ang schistosomiasis ay sakit na dulot ng isang parasite mula sa isang uri ng maliit na kuhol, na pumapasok sa balat ng taong nagkaroon ng contact sa mga batis, sapa, o sa matutubig na lugar. Ang parasite na ito ay dumadami sa katawan at bumabalik sa tubig kapag umihi o dumumi ang pasyente. Kadalaan na lumalaki ang tiyan ng taong may schistosomiasis. Kapag napabayaan, nasisira ang atay, bituka, at baga ng pasyente.

Paano maiiwasan ang schistosomiasis?

Iwasan ang contact sa mga batis o sapa sa mga lugar na may kumpirmadong kaso ng schistosomiasis.

Magsuot ng bota kung kakailanganing lumusong sa batis o sapa.

Siguraduhing sa toilet o palikuran at hindi sa batis o sapa dumudumi o umiihi ang mga tao sa komunidad.

References and suggested readings:

- Department of Health. 2014. Manual of Procedures of the Philippine Integrated Disease Surveillance and Response. Available at https://doh.gov.ph/sites/default/files/publications/PIDSRMOP3ED_VOL1_2014.pdf
- Department of Health Department Circular 2022-0344. Dissemination of the Omnibus Health Guidelines per Lifestage. Available at <https://dmas.doh.gov.ph:8083/Rest/GetFile?id=719750>
- Typhoid. World Health Organization (WHO). Accessible at: <https://www.who.int/news-room/fact-sheets/detail/typhoid>
- Malaria Control and Elimination Program. Department of Health. Accessible at: <https://doh.gov.ph/malaria-control-program>
- Malaria. World Health Organization. Accessible at: <https://www.who.int/news-room/fact-sheets/detail/malaria>
- Leprosy. Department of Health. Accessible at: <https://doh.gov.ph/Health-Advisory/Leprosy>
- National Leprosy Control Program. Department of Health. Accessible at: <https://doh.gov.ph/leprosy-control-program>
- Leprosy. World Health Organization. Accessible at: <https://www.who.int/news-room/fact-sheets/detail/leprosy>
- Filariasis Elimination Program. Department of Health. Accessible at: <https://doh.gov.ph/national-filariasis-elimination-program>
- Schistosomiasis. World Health Organization. Accessible at: <https://www.who.int/news-room/fact-sheets/detail/schistosomiasis>

PRIORITY AREA 3: GET VACCINATED

Main Message:

Immunization provides opportunities for Filipinos to live long healthy lives.
Magpabakuna na para sa Healthy Pilipinas!

Key Messages:

1. Vaccines are safe and effective and will provide protection throughout all ages.
2. A community, whose members are vaccinated, will enjoy the perks of longer, healthier, and happier lives.
3. Having longer and healthier lives is possible by availing free health services. Vaccines are free and available at your primary care providers.

Under this priority areas are the following program and activities:

- National Immunization Program
- COVID-19 vaccination
- HPV Vaccination
- Flu vaccination
- Pneumococcal vaccine

National Immunization Program (NIP)

Recommendations on training

1. The BHWs should know all the vaccines needed by an infant in its first year of life, and that BHWs are also responsible in ensuring that these babies complete their vaccinations.
2. BHWs should also understand the diseases prevented by vaccines.
3. BHWs should reassure the parents of babies that vaccines save lives, and vaccines are safe.
4. Local schedules and policies on vaccination may be presented during training.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang vaccines/bakuna?

Ang bakuna ay isang isang uri ng gamot na nagbibigay ng resistansya laban sa mga nakakahawang sakit. Nagtaglay ito ng patay, pinahina, o parte ng mikrobyo na dahilan ng sakit, na nagti-trigger ng paggawa ng antibodies ng katawan ng tao, na nagging pangontra sa mga impeksyon.

Ano ang magandang naiidulot ng pagpapabakuna sa mga bata?

Dahil sa bakuna, maiwasan na magkaroon ng nakakahawang sakit ang mga bata na maaaring maging dahilan ng komplikasyon o pagkamatay. Dahil naiwasan ang pagkakasakit, nagkaroon ng mas maayos na paglaki ang isa ng bata.

Anu-anong ibinibigay na bakuna sa isang sanggol, at sa anu-anong mga sakit naprotektahan nito ang bata?

BCG (Bacillus – Calmette Guerin) para sa TB
 Hepatitis B vaccine para sa Hepatitis
 Pentavalent vaccine para sa diphtheria, tetanus, hepatitis B, pertussis, at Haemophilus influenzae type B (Hib).
 Oral (OPV) o inactivated (IPV) polio vaccine para sa polio
 Pneumococcal conjugate vaccine (PCV) para sa pneumonia at meningitis
 Measles, mumps, and rubella (MMR) vaccine para sa tigdas, beke, at rubella.

Ilang bakuna ang dapat matanggap ng isang bata bago siya maituring na fully immunized child?

Ang isang bata ay maituturing na fully immunized kung ang mga bakunang ito ay naibigay sa unang taon ng bata:

1. 1 dose ng BCG vaccine
2. 3 doses ng Pentavalent vaccine
3. 3 doses ng oral polio vaccine (OPV)
4. 2 doses ng measles, mumps, and rubella (MMR) vaccine

Delikado ba kung magkalagnat ang isang bata pagkatapos mabakunahan?

Normal na magkalagnat ang isang bata pagkatapos mabakunahan. Maaari ding may kaunting pamamaga sa parte ng katawan na binigyan ng bakuna.

Pagpapabakuna ng mga Adults at Nakatatanda

Recommendations on training

1. This section can be discussed as a whole, or can be integrated in other sections of the BHW Manual (HPV vaccines in cervical cancer and STI, COVID-19 vaccines in COVID-19, rabies vaccine in rabies).
2. BHWs may also need community organizing skills in gathering the senior citizens in the community for pneumococcal and flu vaccinations.
3. Vaccine hesitancy due to misinformation and disinformation should be addressed in BHW trainings.
4. BHW should know the nearest animal bite treatment center where rabies vaccine is available.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Para saan ang pneumococcal vaccine?	Ang pneumococcal vaccine ay ibinibigay para magkaroon ng proteksyon laban sa uri ng pneumonia na dulot ng bacteria na Streptococcus pneumoniae. Ang pneumonia na ito ay kadalasang delikado sa mga nakatatanda at sa mga mahihina ang resistensya.
Gaano katagal ang pagitan sa bawat dose ng pneumococcal vaccine?	Ang pneumococcal vaccine ay ibinibigay kada 5 taon.
Bakit taun-taon ibinibigay ang flu vaccine?	Nagbabagu-bago ang komposisyon ng influenza virus, kaya dapat na i-update ang bakuna laban sa flu taun-taon.
Para saan ang HPV vaccine?	Ang HPV vaccine ay para labanan ang impeksyon ng ilang klase ng human papillomavirus (HPV), isang virus na nakukuha sa pagtatalik. Ang impeksyon ng HPV ang dahilan ng pagkakaroon ng cervical cancer (cancer sa kuwelyo ng matris) na isa sa mga pinakakaraniwang nakakamatay na cancer sa kababaihan.
Sino ang binibigyan ng HPV vaccine? Ilang dose mayroon ang HPV vaccine?	Ang libreng HPV vaccine ay ibinibigay sa mga batang babae sa eskwelahan, edad 9 o 10 taong gulang. May dalawang dose ang vaccine. Ang ikalawang dose ay ibinibigay anim na buwan pagkatapos ng unang dose. Para sa ibang babae, maaaring magtanong sa health center o sa sariling doktor upang mabigyan ng HPV vaccine.
Ano ang pinakamabisa at pinakaligtas na klase ng COVID-19 vaccine?	Lahat ng klase at brand ng COVID-19 vaccine ay ligtas at epektibo. Lahat ay dumaan sa masusing pag-aaral at pagsusuri. Ang anumang side effect pagkatapos mabakunahan (lagnat, mabigat na kalamnan) ay normal na mararamdaman.
Kailan ibinibigay ang tetanus vaccine?	Ibinibigay ang tetanus vaccine kapag nagkasugat ang isang pasyente dahil sa isang maduming bagay o kung naaksidente. Ibinibigay ito kung 5-10 taon na ang nakakaraan mula ng huling mabigyan ng tetanus vaccine. Ibinibigay din ito sa mga buntis.

References and suggested readings:

- Department of Health. 2021. Philippine Guidelines on Periodic Health Examination Phase 1.
- National Immunization Program. Manual of Operations. Booklet 1. Department of Health. Accessible at:
<https://doh.gov.ph/sites/default/files/publications/NIP-MOP-Booklet%201.pdf>

PRIORITY AREA 4: DON'T SMOKE, AVOID ALCOHOL, SAY NO TO DRUGS

Main Message:

A substance-free lifestyle provides a longer, healthier, and happier life. Everyone should not start the use of substance, or quit its use, which are detrimental to one's health. Don't smoke, avoid alcohol, say no to drugs!

Key Messages:

1. A substance-free lifestyle makes a person live his/her life to the fullest.
2. Use of substances like tobacco, alcohol, and illicit drugs are detrimental to one's well being and can be fatal.
3. There are doable ways and interventions to prevent one from starting or quitting the use of harmful substances.

Under this section are the programs on tobacco control, alcohol dependency, and substance abuse.

Tobacco Control

Recommendations on training

1. BHWs must be equipped with knowledge on the harmful effects of smoking.
2. BHWs should also know the different policies on selling and advertising tobacco and smoking products in the community.
3. Development of the barangay policy on tobacco control can be part of the training.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Anu-anong masamang dulot ng paninigarilyo sa katawan?	Mas mataas na tyansa na magkaroon ng cardiovascular diseases, diabetes, cancer, at chronic respiratory diseases.
Ano ang vapes at electronic cigarette?	Ang electronic cigarette at vape ay parehong mga ginagamit umano bilang kapalit ng sigarilyo. Ang electronic cigarette ay mga device na kamukha ng isang sigarilyo, samantalang ang vape naman ay mga device na may maliit na tangke na pinaglalagyan ng kemikal.
Nakakapagpabawas ba o nakakapagpatigil ng paninigarilyo ang paggamit ng vape o electronic cigarette?	Hindi. Base sa mga pag-aaral, mas naninigarilyo ang mga taong gumagamit ng vape o electronic cigarette. Ang mga device na ito ay naglalabas din ng mga kemikal sa katawan na maaaring magdulot ng mga problemang pangkalusugan.
Ano ang edad na pinapayagan bumili at gumamit ng sigarilyo?	Edad 18 taon sa pagbili ng sigarilyo. Edad 21 taon sa pagbili ng vapes o electronic cigarette.
Gaano kalayo dapat sa paaralan ang mga advertisements tungkol sa sigarilyo?	Mas malayo sa 100 metro.
Tama o mali. Kailangan ng permit mula sa city/municipal local government kapag magbebenta ng sigarilyo.	Tama.

References and suggested readings:

- Department of Health. Health Promotion Playbook on Smoking Cessation, unpublished.

Disorders Due to Substance Use

Recommendations on training

1. Difference between “abuse” and “dependence” may be emphasized.
2. The two most commonly abused substances - methamphetamine and marijuana - may be discussed in detail.
3. The effects on health may be discussed and emphasized during the training.
4. BHWs must understand that substance or drug abuse and dependence are of public health concerns that can be addressed by interventions that observe the rights of the patients.
5. It is also important to focus on the reason of drug use rather than on the drug use itself. Promoting open communication is key to preventing substance use.
6. Aside from methamphetamine and marijuana, the trainer may also discuss cocaine and solvents.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Ano ang pinagkaiba ng substance abuse at substance dependence?	Ang “abuse” ay ang paggamit ng illegal, at kahit legal, na mga kemikal para magkaroon ng magandang pakiramdam ngunit may masamang epekto sa katawan. Kapag napabayaan, ang “abuse” ay maaaring maging “dependence”, o ang kawalan ng kakayanan na itigil ang paggamit ng kemikal kahit na nakakaramdam na ng masamag epekto sa katawan.
Ano ang mga pinakakaraniwang dahilan kung bakit sumusubok ng ilegal na gamot ang mga tao sa komunidad?	Anxiety o pagkabalisa. Depression o pagkalungkot. Peer pressure o pressure mula sa mga kaibigan.
Ano ang dalawang pinakakaraniwang ilegal na gamot na ginagamit ng mga Filipino sa komunidad?	Methamphetamine o shabu Marijuana

References and suggested readings:

- 2019 National Household Survey on the Patterns and Trends of Drug Abuse. Philippine Anti-Illegal Drugs Strategy (PADS). Accessible at https://www.ddb.gov.ph/images/downloads/2019_Drug_Survey_Report.pdf
- Substance Abuse Beat. Department of Health. Accessible at: <https://doh.gov.ph/sites/default/files/publications/Substance-Abuse-Beat-10-12-21.pdf>
- United Nations Office of Drugs and Crime. 2016. Guidance for Community-Based Treatment and Care Services for People Affected by Drug Use and Dependence in the Philippines. Available at https://www.ddb.gov.ph/images/unodc_publications/CBT_Guidance_Doc_Philippines_Final.pdf

Alcohol and Alcohol Use Disorder

Recommendations on training

1. Define alcohol abuse, and describe its health implications.
2. Present pictures of signs and symptoms of alcoholic liver disease. The trainer may also opt to explain why liver disease manifests with the signs, symptoms, and complications associated with it.
3. Present the available facilities that can handle patients with alcohol use disorder, as well as the process of referral.
4. Demonstrate putting a person, especially a drunk person, in recovery position to avoid choking when vomiting occurs.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Ano ang alcohol use disorder?	Sobrang pag-inom ng alak kahit na may napapansin nang epekto hindi lang sa kalusugan kundi pati na din sa hanapbhay at sa pakikitungo sa ibang tao.
Ano ang mga posibleng epekto sa kalusugan ng sobrang pag-inom ng alak?	Ang pagkalasing ang pinakanangungunang dahilan ng aksidente sa sasakyang, at sya ding dahilan ng maagang pagkamatay ng mga adult. Nakakasira ng atay na maaaring humantong sa liver cirrhosis at kanser. Bilang isa sa mga tagalinis ng dumi sa katawan ng tao, ang pagkasira ng atay ay maaaring magdulot ng pagkaipon ng maduduming kemikal sa katawan ng tao, na maaaring magdulot ng encephalopathy at pagkamatay.
Bakit nasisira ang atay sa sobrang pag-inom ng alak?	Ang atay ang taga-sira ng sobrang alcohol sa katawan. Kapag sobra-sobra ang alcohol, nahihirapang gawin ng atay ang trabaho nito, na nagiging dahilan ng unti-unting pagkasira.
Kailan dapat irefer sa health center ang isang taong may posibleng alcohol use disorder?	<ul style="list-style-type: none"> • Kapag madalas na nangangamoy alak • Kapag nagkakaroon ng epekto sa pansariling kalinisan at hitsura ng pasyente • Kapag nakakasakit na ng ibang tao.

PRIORITY AREA 5: CARE FOR YOURSELF, CARE FOR OTHERS

Main Message:

Optimal mental wellbeing can be achieved through the actions of everyone: people taking care of themselves, people supporting others, and the leaders making mental health possible in the community.

Care for Yourself, Care for Others para sa Healthy Pilipinas!

Key Messages:

1. Self-care helps keep your mind working at its best. It's important to take time for yourself so that you can be better for yourself and others.
2. Let's be there for each other! Supporting each other brings our experiences together and allows us to be heard, accepted, and understood.
3. It takes a community to raise mentally resilient individuals. Instilling systems that are supportive of mental health enables the community to be healthier.

Mental Health and MHPSS

Recommendations on training

1. Since mental health is explicitly included in the definition of “health”, a significant portion of training hours must be devoted to this topic.
2. The competencies in mental health of a general health worker are:
 - a. Knowledge and basic understanding of mental health conditions
 - b. Basic psychosocial intervention skills appropriate for BHW
 - c. Positive attitude towards anything “mental”
3. BHWs must also discuss their own stigma and discrimination on patients with mental health conditions. BHWs may define stigma and discrimination, and may discuss their own acts of discrimination on patients with mental health conditions.
4. Misconceptions on mental health must be discussed and addressed.
5. Repetitively define mental health, with its four components.
6. Present the different signs and symptoms of mental health conditions, as well as the signs of conditions requiring emergency consultation.
7. Describe the common mental health conditions that may be encountered in the community. Ask the BHWs to check their household catchment areas and identify community members who have confirmed or suspected mental health conditions and refer them to the health center.
8. The trainer may also introduce again the concept of MHPSS and demonstrate how to provide psychological first aid. MHPSS is also tackled under the Community Risk Reduction and Management topic in the BHW Manual.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang mental health?

A state of well-being in which every individual:

- realizes his or her own potential
- can cope with the normal stresses of life
- can work productively, and
- able to make a contribution to the community.

Bakit mahalaga ang mental health?

Sabi ng WHO, ang health ay hindi lamang kalusugang pisikal kundi kasama na din ang kalusugan sa pag-iisip. Walang health kung walang mental health.

Anu-ano ang mga dahilan ng pagkakaroon ng problem sa pag-iisip?

- Biological
- Psychological
- Social or environmental

Kasama ba ang epilepsy at iba pang neurologic conditions sa programa ng mental health sa Pilipinas?

Oo.

Ano ang stigma at ano ang diskriminasyon?

Ang stigma ay ang mga negatibong pananaw at paniniwala ng mga tao tungkol sa isang tao o sakit.

Ang stigma ang dahilan kung bakit nagkakaroon ng diskriminasyon. Ang diskriminasyon ay ang negatibong pakikipagtuno, sinasadya o hindi sinasadya, sa mga pasyente o tao dahil sa kanilang kalagayan o estado.

MGA POSIBLENG TANONG**SAGOT**

Anu-anong mga senyales na makikita sa mga taong may mental health conditions?

See the table on signs and symptoms in the BHW Manual.

Anu-anong mga pangkaraniwang mental health conditions na maaaring makita sa komunidad?

Depression
Psychosis
Epilepsy
Child and Adolescent Mental and Behavioral Disorders
Dementia
Self-harm or suicide
Substance or alcohol abuse

Ano ang MHPSS?

Ang MHPSS, o ang mental health and psychosocial support during emergencies and disaster, ay mga aktibidad na ibinibigay sa mga taong naapektuhan ng kalamidad o disaster.

Bakit binibigyan ng MHPSS ang mga taong nasalanta ng kalamidad o disaster?

Naaapektuhan ng kalamidad o disaster ang normal na pamumuhay ng mga tao at ang mga existing protective mechanisms. Mas pinapalabas din nito ang mga problemang psychosocial ng mga tao.

Layunin ng MHPSS na makatulong sa recovery ng mental health ng isang taong naapektuhan ng disaster.

References and suggested readings:

- Framework for Community Based Mental Health Programs in the Philippines - A Guidebook. Department of Health. Unpublished.
- Chapter IV, Section 15 of RA 11036 or the Mental Health Act, which mandates the implementation of mental health services at the community level.

PRIORITY AREA 6: PRACTICE SAFE SEX

Main Message:

Practicing safe and healthy sexual and reproductive health behaviors allows Filipinos to make comfortable, pleasurable, and well-informed choices for themselves and their family. #AwraSafely, Practice Safe Sex for a Healthy Pilipinas!

Key Messages:

1. Opening to the topic of sex will increase Filipinos' level of health literacy and health information-seeking behaviors to practice safe and pleasurable sex.
2. Sexually active individuals can make healthy choices on sexual and reproductive health through accurate information and services on infection prevention.
3. Filipino couples can choose their desired family size and be empowered to practice family planning based on their health, social, and economic statuses.

This priority area covers the following topics:

- Adolescent sexual and reproductive health (ASRH)
- Sexually transmitted infections (STI)
- Family Planning (FP)
- Safe Motherhood Program
- Newborn health

Adolescent Sexual and Reproductive Health (ASRH) and Sexually Transmitted Infections (STI)

Recommendations on training

1. Emphasize that BHWs should not be the barriers to sexual and reproductive health information and services, especially to the adolescents. This must be emphasized and practiced during the training.
2. BHWs may be asked to have a role in providing advice to adolescents regarding the following:
 - a. family planning
 - b. how to use a condom
 - c. inquiries on pregnancy
 - d. possible signs and symptoms of sexually transmitted infections
3. Enumerate and describe each of the common sexually transmitted infection encountered in the communities.
4. Enumerate the possible signs and symptoms of a sexually transmitted infection.
5. Describe the possible consequences of teenage pregnancy.
6. Include in the lecture the ways the parents can be encouraged to get involved in discussing sexual and reproductive health to their adolescent children. Role playing may be done to demonstrate the concept.
7. Present the key population and other target clients who should be offered with HIV testing.
8. Emphasize the confidentiality needed in dealing with HIV-related services.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Bakit mataas ang tyansa na magkaroon ng problema sa kanilang sexual at reproductive health ang mga kabataan?

- Increased exploration of their sexuality as well as a lack of adequate knowledge and skills for protection places them at a higher risk of STI or HIV infection;
- Early sexual initiation and unwanted pregnancy;
- Sexual, physical, or emotional abuse by people known to and trusted by adolescents, the prevalence of which is alarmingly high for adolescents.

Anu-ano ang mga posibleng senyales ng sexually transmitted infection?

- Hapdi kapag umiihi
- Hindi pangkaraniwang lumalabas na likido sa ari
- Pangangati o pamamaga sa ari
- Hindi pangkaraniwang bukol o singaw sa ari

Anu-ano ang mga pangkaraniwang sexually transmitted infections na maaaring makasalamuha ng isang BHW sa kanyang komunidad?

- Human Immunodeficiency virus (HIV)
- Gonorrhea (tulo sa lalake)
- Syphilis
- Genital warts / kulugo sa ari
- Hepatitis B at Hepatitis C

MGA POSIBLENG TANONG

SAGOT

Tama o mali. Ang mga adolescents o kabataan ay kayang magdesisyon tungkol sa kanilang pansariling sexual and reproductive health.

Tama.

Ano ang HIV?

Ang HIV, o Human Immunodeficiency Virus, ay isang virus na madalas na nakukuha sa hindi protektadong pakikipagtalik sa isang taong may impeksyon nito. Inaatake nito ang immune system o resistensya ng isang tao, na syang dahilan ng mas mataas na tyansa na magkasakit mula sa ibang impeksyon.

Ano ang AIDS?

Ang AIDS, o acquired immunodeficiency syndrome, ay isang kondisyon kung saan mahina ang resistensya ng isang tao dahil sa impeksyon ng HIV. Ang taong may AIDS ay mas madaling magkaroon ng impeksyon mula sa ibang sakit na kadalasang hindi nakakaapekto sa ibang tao.

Sinu-sino ang mga key population na kailangang maofferan ng HIV testing?

- Male having sex with male
- People who inject drugs
- Sex workers
- Transgender men and women

References:

- 7 Most Common Sexually Transmitted Infections in the Philippines. Makati Medical Center. Accessible at: <https://www.makatimed.net.ph/news-and-exhibits/news/7-most-common-sexually-transmittedinfections-in-the-philippines>
- Department of Health Administrative Order 2013 - 0013. National Policy and Strategic Framework on Adolescent Health and Development
- Department of Health Administrative Order 2017-0019: Policies and Guidelines in the Conduct of Human immunodeficiency Virus (HIV) Testing Services (HTS) in Health Facilities
- Department of Health. 2017. Adolescent Health and Development Program - Manual of Operations. Accessible at: https://doh.gov.ph/sites/default/files/publications/WHO_DOH_2017_12082017_full.pdf
- Department of Health. 2020. Philippine Health Sector HIV Strategic Plan 2020-2022.
- Department of Health, 2022. Omnibus Health Guidelines per Lifestage. Available at <https://doh.gov.ph/dpcb/omnibus-health-guidelines>
- DOH Health Promotion Bureau - Playbook on Priority Area 6.

Family Planning

Recommendations on training

1. Family planning, along with safe motherhood program and childhood vaccinations, is the public health program accessed by the community members through their initial contacts with BHWs, and therefore it is important that this is well-understood by them.
2. Discuss the objectives of family planning.
3. Training may include demonstrations on family planning counseling with mothers or teenagers.
4. Demonstration on accomplishing the Master List of Women of Reproductive Age (WRA) and Adolescent Women may be included in the training as a refresher.
5. During the discussion on different family planning methods, actual samples may be presented to the BHWs.
6. BHWs should advocate for the long-term contraceptive methods over the short-term ones, but should also respect the choice or decision of the individual/couple.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Ano ang family planning?	Ang family planning ay ang mga paraan na nagbibigay kakayaan sa mag-asawa at mga indibidwal na malaya at responsableng magdesisyon sa kanilang gustong bilang ng anak at espasyo sa pagitan ng pagbubuntis. Ito ay nagagawa sa pamamagitan ng pagbibigay ng mga ligtas at epektibong mga paraan sa pagpaplanu ng pagbubuntis.
Ang mga family planning methods ba ay nakakapagpalaglag ng bata mula sa sinapupunan?	Hindi. Ang mga family planning methods ay ligtas at hindi abortifacients.
Anu-anong mga delikadong pagbubuntis na maaaring matulungan ng family planning methods?	<ul style="list-style-type: none"> • masyadong bata (mas bata sa 18 taon) • masyadong dikit ang pagitan ng pagbubuntis (3 taon o mas mababa) • may edad na para magbuntis (edad 35 taon o higit pa) • nanay na ilang beses nang nagbuntis (apat o higit pa) • may malubhang karamdaman
Anu-anong iba't ibang paraan ng family planning, at gaano katagal ang pagiging epektibo ng mga ito?	<p><i>Permanenteng paraan</i></p> <ul style="list-style-type: none"> • ligation (bilateral tubal ligation) • vasectomy para sa lalaki <p><i>Pangmatagalang paraan</i></p> <ul style="list-style-type: none"> • IUD o intrauterine device sa matriz (hanggang 12 taon) • Implant sa ilalim ng balat sa braso (hanggang 3 taon) <p><i>Saglit na paraan</i></p> <ul style="list-style-type: none"> • Injectables gaya ng DMPA o Lyndavel (hanggang 3 buwan) • Pills (kailangang inumin araw-araw) <p><i>Barrier method</i></p> <ul style="list-style-type: none"> • Condom <p><i>Modern natural family planning</i></p> <ul style="list-style-type: none"> • Lactation amenorrhea, o pagpapasuso sa sanggol sa unang 6 na buwan (ito ay nakakapagpapigil ng pagbubuntis) • Calendar method (pagbibilang at pagtatantya ng araw na maaaring hindi mabuntis depende sa lapot ng mucus o sa schedule ng regla.)

References:

- Department of Health, 2022. Omnibus Health Guidelines per Lifestage. Available at <https://doh.gov.ph/dpcb/omnibus-health-guidelines>
- Family Planning Competency-Based Training - Basic Course Handbook for Service Providers. Department of Health. Accessible at: https://doh.gov.ph/sites/default/files/publications/FPCBT_Level_1_for_participants.pdf

Safe Motherhood Program

Recommendations on training

BHWs provide existing community health platforms that are strategic in facilitating the delivery of health and nutrition services, and are expected to be very well-versed in those in the safe motherhood program, given their contribution in its implementation.

1. Aside from the key messages, the key roles of BHWs must be emphasized. These include:
 - a. identifying, tracking and reporting on the pregnant and postpartum women with their infants in the community
 - b. home visitation to the pregnant and postpartum women with their infants
 - c. counseling on promotive and preventive care such as prenatal and postpartum check ups, birth and emergency planning, danger signs, health and nutrition, Unang Yakap, exclusive breastfeeding, routine newborn care services including immunization, family planning
 - d. assisting the midwife in outreach activities
 - e. helping the pregnant or postpartum women with their infants to seek or access care in the health facility
2. The local referral system can be presented during the training.
3. The topics may be divided into the following:
 - a. Prenatal care
 - b. Intrapartum care
 - c. Postnatal care
4. BHWs must be taught how to compute for estimated date of confinement (EDC) based on last menstrual period (LMP)

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ilang beses dapat magpa-check up sa doktor o midwife ang isang buntis?

Kinakailangan ng buntis na magkaroon ng minimum na walo (8) na prenatal check-up. Dapat magkaroon ng unang contact o check-up ang isang buntis sa unang 12 linggo ng pagbubuntis, at susundan sa ika-20, 26, 30, 34, 36, 38, at 40 linggo ng pagbubuntis.

Anu-anong mga importanteng vitamins at minerals para sa mga buntis o planong magbuntis?

Iron
Folic acid
Calcium

Gaano kalaki ang normal na pagtaas ng timbang ng isang buntis?

11-15 kg na pagtaas ng timbang sa ikalawa hanggang ikatlong trimester

Ano ang mga senyales na maaaring buntis ang isang babae?

- pagka-miss ng regla
- morning sickness (pagsusuka at pagduduwal sa umaga)
- pamamaga o pananakit ng mga suso

Kailan ang EDC ng isang babaeng ang unang araw ng huling regla ay noong Abril 16, 2022?

EDC
 $= (\text{months minus 3 months}) + (\text{year plus one year}) + (\text{days plus seven days})$
 $= (\text{Abril minus 3 months}) + (2022 \text{ plus one year}) + (16 \text{ plus 7 days})$
 $= \text{January 23, 2023}$

Anu-anong mga danger signs sa pagbubuntis?

- Vaginal spotting/bleeding
- Fever
- Severe headache
- Abdominal pain
- Paleness or pallor
- Convulsions/loss of consciousness
- Vomiting
- Blurring or loss of vision
- Difficulty of breathing
- Chest pain
- Comorbidities (e.g., hypertension, diabetes mellitus, asthma)

Ano ang intrapartum period?

Mula sa pagle-labor hanggang sa anim na oras matapos ipinanganak ang kanyang sanggol.

Ano ang mga senyales na magsisimula na ang labor?

- Increased urgency to urinate or defecate. A possible sign that the baby has already positioned itself for delivery.
- Bloody Show. Presence of blood-tinged or brownish discharge from the cervix which can occur days before or at the onset of labor.
- Ruptured Membranes. It presents as fluid gushing or leaking from the vagina. This condition increases the chances of intrauterine infection, hence, should be referred to immediately.

Anu-anong mga senyales na nasa active labor na ang buntis?

- Regular uterine contractions at intervals <10 minutes
- Shortened intervals between contractions
- Increasing intensity of the contractions

Ano ang Unang Yakap?

Ito ang tinatayang pinakamainam na pamamaraan ng pangangalaga sa mag-iná mula sa pagle-labor hanggang sa postpartum period. Kasama dito ang respectful maternal care at para kay baby pagkapanganak - *immediate and thorough drying, early skin to skin contact, properly timed cord clamping, non-separation of mother from newborn for early initiation of breastfeeding.*

MGA POSIBLENG TANONG**SAGOT**

Ano ang period na kinokonsidera na postpartum period?

Anim na oras hanggang anim na linggo matapos na manganak ang nanay.

Bakit kailangang imonitor pa din ang nanay sa postpartum period?

Tuloy ang pagsubaybay dahil may tsansa pa rin na magkaroon ng komplikasyon tulad ng impeksyon, pagdurugo, at altapresyon na maaaring maging sanhi ng pagkamatay ng isang buntis.

Kailan dapat dumalaw ang nanganak na babae sa health center para sa kanyang postpartum consult?

Tatlong beses matapos ang panganganak: Sa ikatlong araw, mula unang linggo (7 araw) hanggang ika-dalawang linggo, sa ika-anim na linggo.

Anu-anong mga nangungunang dahilan ng pagkamatay ng mga buntis?

Pagdurugo, impeksyon, hypertension o mataas na BP na senyales ng pagkakaroon ng preeclampsia o eclampsia.

References:

- Department of Health, 2022. Omnibus Health Guidelines per Lifestage. Available at <https://doh.gov.ph/dpcb/omnibus-health-guidelines>
- Department of Health. Safe Motherhood Program. Accessible at: <https://doh.gov.ph/health-programs/safe-motherhood-program/types-of-service>
- Republic Act 11148. Kalusugan at Nutrisyon ng Mag-Nanay Act of 2018.
- World Health Organization, 2016. “New guidelines on antenatal care for a positive pregnancy experience”. Available at <https://www.who.int/news/item/07-11-2016-new-guidelines-on-antenatal-care-for-a-positive-pregnancy-experience>

Newborn Health

Recommendations on training

1. This section focuses on the first 28 days of life of a baby.
2. Demonstration of the essential intrapartum newborn care may be conducted.
3. Enumerate the danger signs that must be watched out for in a neonate.
4. Provide orientation on the benefits of newborn screening.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Anu-anong four core steps ng Unang Yakap para sa sanggol?	<ul style="list-style-type: none"> • Immediate and thorough drying • Early skin-to-skin contact • Properly timed cord clamping • Non-separation of baby from mother for initiation of early breastfeeding
Dapat bang paliguan agad ang bagong silang na sanggol?	Hindi. Ang pagpapaligo agad ay maaaring magdulot sa pagkalamig ng sanggol. Ang pagpapaligo ay maaaring ipagpalibutan hanggang makaraan ang unang araw ni beybi mula pagkapanganak.
Pwede bang ihiwalay ang sanggol agad sa kanyang nanay pagkatapos ipanganak?	Mananatiling magkasama ang mga mag-iná. Mangyayaring sila ay magkahiwalay sa pagkakataon na kung kinakailangan ng agarang atensyong medikal ang nanay o ang sanggol.
Anu-anong mga danger signs ang sanggol?	<ul style="list-style-type: none"> • mahinang pagsuso, pag-iyak, o • walang kusang paggalaw • kumbulsyon • paninilaw ng mata at balat sa unang 24 oras mula pagkapanganak o paninilaw hanggang palad o talampakan sa kahit anong edad • mabilis na paghinga (higit sa 60 hinga kada minuto) • hirap sa paghinga na may kapansin-pansin na pag-angat ng dibdib at paglubog ng tiyan • lagnat ($T=/> 37.5C$) • pagkalamig ($T < 35.5C$)
Ano ang newborn screening?	Ang newborn screening ay paraan ng pag-alam kung may posibilidad na may congenital na sakit ang isang bata. Mahalagang malaman ng maaga ito upang mabigyan ng karampatang lunas ang sanggol.
Kailan ginagawa ang newborn screening?	Magandang gawin ang newborn screening matapos ang unang 24 oras ng sanggol, ngunit hindi dapat lalampas sa ikatlong araw ng buhay.

References and suggested readings:

- Department of Health, 2022. Omnibus Health Guidelines per Lifestage. Available at <https://doh.gov.ph/dpcb/omnibus-health-guidelines>
- Department of Health. Safe Motherhood Program. Accessible at: <https://doh.gov.ph/health-programs/safe-motherhood-program/types-of-service>

PRIORITY AREA 7: DO NO HARM, PUT SAFETY FIRST

Main Message:

Violence and injury are preventable if putting safety first, daily and seasonal activities can be done in an equally enjoyable and healthy way. Do no Harm, Put Safety First para sa Healthy Pilipinas!

Key Messages:

1. Practice personal safety behaviors and advocate for safe environments to prevent the occurrence of violence and injury.
2. Know and avoid the activities that could harm you and others.
3. In case of untoward incidents, be prepared to do initial interventions to minimize harm and injury.

This priority area covers gender-based violence and care for senior citizens.

Recommendations on training

1. This section focuses on gender-based violence.
 - a. Lectures on different types of violence
 - b. Health consequences of gender-based violence
 - c. Presentation of contact details of offices that tackle gender-based violence, including the Violence Against Women (VAW) Desk in the barangay
2. For the senior citizen care, the following may be included in the training:
 - a. Lectures on the different benefits of senior citizens
 - b. Pinggang Pinoy for older persons can also be discussed.
3. Additional topics or training that can be provided to BHWs under this priority area are the following:
 - a. Drowning
 - b. Fireworks-related injury
 - c. Road safety
 - d. Occupational (workplace) safety and health (OSH)
 - e. Safe kids
 - f. Disability prevention and rehabilitation

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Ano ang gender-based violence?	Ito ay tumutukoy sa lahat ng uri ng pang-aabuso sa isang babae o bata.
Anu-ano ang iba't ibang uri ng violence?	<p>• Physical violence - violence in the form of bodily or physical harm.</p> <p>• Sexual violence - violence that is sexual in nature, including but not limited to rape, harassment, treating woman as a sex object, sexually suggestive remarks, prostitution</p> <p>• Psychological violence - which refers to the mental and emotional suffering caused by intimidation, harassment, stalking, public ridicule or humiliation, verbal abuse, and marital infidelity</p> <p>• Acts of withdrawing financial support to children or preventing women from engaging in a legitimate profession is considered an economic abuse which is also a form of violence against women.</p>
Sino ang madalas na nagiging dahilan ng violence laban sa babae at bata?	Kasama nila sa bahay.
Paano maiwasan ang violence sa bata?	<p>Magkaroon ng positive at nonviolent na paraan ng pagigingmagulang sa bata.</p> <p>Pag-iwas sa mga parusang pisikal.</p>
Sa anong batas nakasaad ang mga benepisyo ng mga senior citizens?	Expanded Senior Citizen Act of 2010
Anu-ano ang mga benepisyon natatanggap ng mga senior citizen?	<p>The senior citizens are granted a 20% percent discount and exemption of value-added tax (VAT) on health-related goods and services:</p> <ol style="list-style-type: none"> Medical and dental services, including influenza and pneumococcal vaccines and other essential medical supplies Diagnostic and laboratory services (e.g., x-rays, CT scan, blood tests, hemodialysis) Professional fees of attending physicians and other health professionals confined in pay sections provided the confinement is in accordance with available clinical practice guidelines or hospital treatment protocols. All medical devices (e.g., supplies, kits used or consumed during check-up or confinement) regardless of the number of days. All medical devices to be used during the recovery at home, or for monitoring of a particular ailment or disease (e.g., glucometer set including lancets and test strips, insulin syringe, and needle, blood pressure apparatus, wheelchair) provided that the prescription for the use of a particular medical device shall be provided by the physician Local land, air, and sea transportation services Utilization of services in hotels, restaurants, theaters, cinemas, and other establishments Funeral and burial services

References and suggested readings:

- DOH Health Promotion Bureau - Playbook on Priority Area 7.
- Republic Act No. 9994 or the Expanded Senior Citizen Act of 2010. Accessible at: <https://www.officialgazette.gov.ph/2010/02/15/republic-act-no-9994/>
- Department of Health Administrative Order 2005-0009. National Policy on the Health and Wellness Program for Senior Citizens
- Food and Nutrition Research Institute. 2016. Pinggang Pinoy for Older Persons. Available at <https://www.fnri.dost.gov.ph/images/sources/PP-Older.pdf>

Monitoring ng Health Status ng mga Miyembro ng Komunidad

Recommendations on training

1. In the BHW Manual, the core competency “Monitor health status of household members in the area of service coverage” covers the following topics:
 - a. Vital signs
 - b. Height and weight
 - c. Growth monitoring
2. This core competency requires at least **72 hours**, or 9 full days, of training.
3. As per TESDA Training Regulations on BHS NCII, the following are the expected learning outcomes from this competency training:
 - a. Assist during the consultation.
 - b. Update client’s record.
 - c. Refer symptomatic/asymptomatic clients for appropriate medical treatment.
4. Materials needed for the training are:
 - a. aneroid sphygmomanometer (preferably one per BHW)
 - b. thermometer
 - c. watch
 - d. mid-upper arm circumference tape
 - e. calculator
 - f. growth monitoring chart
5. The suggested duration of each training is as follows:

TOPIC	RECOMMENDED NUMBER OF TRAINING HOURS	RECOMMENDED ACTIVITIES
Lectures on: • Vital signs • Height and weight • Growth monitoring	8 (1 day of training)	Lectures on how to measure the vital signs, height and weight. Lectures on how to do growth monitoring.
Return demonstration on: • Vital signs • Height and weight • Growth monitoring • Body mass index • Mid-Upper Arm Circumference	16 (2 days of training)	Return demonstration with the trainer on: • Vital signs • Height and weight • Growth monitoring
Community profiling on: • Vital signs • Height and weight • Growth monitoring	48 (6 days of training)	Community profiling of: • Vital signs • Height and weight • Growth monitoring Doing BP diary for hypertensive patients in the community. BHW to assist during consultation to demonstrate taking of vital signs.

Suggested review questions

MGA POSIBLENG TANONG	SAGOT
Anu-anong apat na vital signs?	<ul style="list-style-type: none"> • Blood pressure • Temperature • Respiratory rate • Heart (o pulse) rate
Ano ang normal na BP ng isang adult?	120/80 at pababa
Kailan masasabing "high blood" ang isang adult?	Kung ang BP nya ay 140/90 o higit pa.
Ano ang normal na heart rate o pulse rate para sa isang adult?	60-100 beats per minute
Ano ang normal na respiratory rate para sa isang adult?	12-20 kada minuto
Sa anong temperatura masasabing may lagnat ang isang tao?	Kapag ang temperatura nya ay 37.5 degrees Celsius o higit pa.
Kailan masasabi na ang isang bata ay "stunted"?	Kapag ang kanyang tangkad ay mas maikli kaysa norma na tangkad ayon sa kanyang edad sa growth chart.
Ano ang BMI ng mga ito?	<ul style="list-style-type: none"> • Height 160 cm, Weight 85 kg $(85) / (1.60 \times 1.60) = 33.20$ (obese II) • Height 162 cm, Weight 76 kg $(76) / (1.62 \times 1.62) = 28.96$ (obese I) • Height 150 cm, Weight 65 kg $(65) / (1.50 \times 1.50) = 28.89$ (obese I) • Height 151 cm, Weight 77 kg $(77) / (1.51 \times 1.51) = 33.77$ (obese II) • Height 169 cm, Weight 61 kg $(61) / (1.69 \times 1.69) = 21.36$ (normal)

References:

- Department of Health, 2022. Omnibus Health Guidelines per Lifestage. Available at <https://doh.gov.ph/dpcb/omnibus-health-guidelines>
- Normal BMI values are from The Philippine Association for the Study of Overweight and Obesity, available at <https://obesity.org.ph/know-your-bmi/>
- World Health Organization, 2006. WHO child growth standards: length/height-for-age, weight-for-age, weight-for-length, weight-for-height and body mass index-for-age: methods and development. Available at <https://www.who.int/publications/i/item/924154693X>

Household Profiling at Master Listing ng Target Clients

Recommendations on training

1. The topic satisfies the core competency “Maintain updated list/records of health activities.”
2. This core competency requires at least **96 hours**, or 12 full days, of training.
3. As per TESDA Training Regulations on BHS NCII, the following are the expected learning outcomes from this competency training:
 - a. Assist clients to communicate with service providers
 - b. Explain to service providers for better understanding of client and community needs.
 - c. Give support to clients when accessing health services.
 - d. Update lists/records of health workers
4. For this core competency, training for BHWs based fully on the **Field Health Services Information System (FHSIS) version 2018 Manual** of the Department of Health may be provided.
5. The BHWs may be reminded of the basic competency of interpersonal communication,
6. The suggested training for this competency is as follows:

TOPIC	RECOMMENDED NUMBER OF TRAINING HOURS	RECOMMENDED ACTIVITIES
Individual Treatment Records Household Profiling Master Listing of Target Clients	24 (3 days of training)	Lectures on each record and forms. Orientation on local template of individual treatment records. Orientation on different concepts in master listing. Initial demonstration of filling out the forms.
<i>Actual demonstration of accomplishing:</i> · individual treatment records · household profile · master list of target clients	72 (9 days of training)	Actual household profiling and master listing of members of the community in the BHW's catchment area.

Suggested review questions

MGA POSIBLENG TANONG

SAGOT

Ano ang isang "household"?

Ayon sa Philippine Statistical Authority, maituturing na isang household ang mga sumusunod:

- isang tao na mag-isang namumuhay
- isang grupo ng mga tao na sama-samang nakatira sa isang bahay AT sama-samang naghahanda at kumakain ng kanilang pagkain

Ang isang bahay ay maaaring may mahigit sa isang household kung magkakahiwalay kumakain ang mga nakatira dito.

Kailan dapat gawin at tapusin ang household profiling?

Sa simula ng taon (Enero).

Ano ang ipinagkaiba ng mga sumusunod?

- newborn
- infant
- under-five children
- school-aged children
- adolescent

- newborn - edad 0-28 araw
- infant - edad 29 araw hanggang 11 buwan
- under-five children - edad 1-4 na taon (12-59 buwan)
- school-aged children - edad 5-9 taon
- adolescent - edad 10-19 taon

Kailan dapat may baguhin sa household profile?

1. Kapag may pagbabago sa klasipikasyon ng miyembro ng isang household (halimbawa, kung ang babae sa household ay nabuntis, o ang isang newborn ay maikokonsidera nang isang infant).
2. Kapag may umalis o namatay sa komunidad.
3. Kapag may bagong residente sa komunidad.

Ano ang ibig sabihin kung ang isang babae ay "fecund"?

Ang fecund ay alinman sa mga sumusunod:

- kasalukuyang buntis
- nanganak sa nakalipas na 6 na buwan
- nalaglagan ng dinadaland sanggol sa sinapupunan sa nakaraang 2 linggo
- hindi infecund (balo, babaeng naalisan ng obaryo o matris sa operasyon, o hindi nabuntis sa nakaraang 5 taon kahit may kinakasamang lalaki)

Ano ang traditional at ano ang modern methods ng family planning?

Ang withdrawal, o ang paghugot ng ari ng lalake sa ari ng babae kapag may lalabas na na semilya, ay itinuturing na "traditional" family method.

Ang ibang paraan ng family planning, gaya ng pills, injectable, implant, at iba pa, ay itinuturing na "modern" family planning methods.

Ano ang ibig sabihin kung ang isang babae ay may unmet need sa family planning?

Ang isang babae ay maituturing na may unmet need kapag sya ay:

- 15-49 taong gulang
- kasal o may kinakasamang lalaki
- fecund
- nagnanais na may espasyo sa bawat pagbubuntis, at
- walang ginagamit na anumang family planning method

MGA POSIBLENG TANONG**SAGOT**

Anu-anong parte ng Master List of Households on Environmental Health and Sanitation?

- **Part 1.** Household's Access to Basic Safe Water Supply and Use of Safely Managed Drinking-Water Services
- **Part 2.** Household's Status on Sanitation Facility and Use of Safely Managed Sanitation Services
- **Part 3.** Household's Solid Waste Management
- **Part 4.** Household's Status on Complete Sanitation Facilities

Anu-anong iba't ibang uri ng pinanggagalingan ng tubig?

- Level I: deep well, manual water pump, rainwater, streams, river
- Level II: shared piped water source
- Level III: household has its own supply from a piped water source

Reference and suggested reading:

- Department of Health. 2018. Field Health Services Information System (FHSIS) version 2018 Manual.

PANGANGALAGA SA MGA KAGAMITAN, MEDICAL SUPPLIES, AT HEALTH RECORDS

Recommendations on training

1. In the BHW Manual, the core competency “ensure safekeeping of equipment, medical supplies, materials, and health records In health station” covers the following topics:
 - a. The barangay health station
 - b. Equipment in the barangay health station
 - c. Inventory of BHS equipment
 - d. Maintaining the aneroid sphygmomanometer
 - e. Managing supplies of medicine
2. This core competency requires at least **72 hours**, or 9 full days, of training.
3. The suggested duration of training for each topic are as follows:

TOPIC	RECOMMENDED NUMBER OF TRAINING HOURS	RECOMMENDED ACTIVITIES
The barangay health station (BHS)	8 (1 day of training)	Lectures on the services provided in a barangay health station. Preparation of checklist of services in the BHS.
Equipment in the BHS	8 (1 day of training)	Lecture on the equipment needed in a BHS Preparation of the checklist of needed equipment in the BHS Planning on how to complete the equipment
Inventory of BHS Equipment	24 (3 days of training)	Lecture on basic inventory Inventory of all equipment in the BHS
Maintaining the aneroid sphygmomanometer	8 (1 day of training)	Lecture Demonstration and return demonstration on how to clean and fix an aneroid sphygmomanometer
Maintaining the aneroid sphygmomanometer	24 (3 days of training)	Lecture Preparation of stock cards of all medicine in the BHS. Organizing the medicine room in the BHS.
TOTAL	72 (9 days of training)	

References:

- Department of Health, 2020. Department Memorandum 2020-0186: Interim Guidelines on the Operations of Converted Public and Private Spaces into Temporary Treatment and Monitoring Facilities for COVID-19. Available at <https://doh.gov.ph/sites/default/files/health-update/dm2020-0186.pdf>
- Forschen, S. 2021. How to disinfect a blood pressure cuff. Wikihow.com Accessed on December 27, 2021 at <https://www.wikihow.com/Disinfect-a-Blood-Pressure-Cuff>
- Medical supplies and equipment for primary health care A practical resource for procurement and management <https://www.who.int/management/resources/procurement/MedicalSuppliesforPHC-Introduction.pdf?ua=1>
- Practical pharmacy for developing countries. Issue 21: January 2010. Available at <https://www.who.int/management/resources/drugs/practicalpharmacy21b.pdf>
- Training Manual on Pharmaceutical Supply Chain Management for Local Government Facilities (Barangay Health Stations) <https://drive.google.com/file/d/1p5nacu1WAfyNH8CqcjJGtDFKBb3lOwej/view>

Annexes

Annex I. Equipment Needed in the BHS

EQUIPMENT	QUANTITY
1. Autoclave, 20 L	1 piece
2. BP apparatus, non-mercurial, with adult and pediatric cuff, desk type a. Aneroid b. Digital	1 set 1 piece 2 pieces
3. Cervical inspection set or vaginal speculum set a. Small b. Medium c. Large	1 set 2 pieces 2 pieces 2 pieces
4. Dressing set or minor surgery set a. Surgical scissors, straight b. Surgical scissors, curved c. Bandage scissors d. Pick-up or ovum forceps e. Mosquito forceps f. Tissue forceps with teeth g. Tissue forceps without teeth h. Suture removal scissors	1 set 2 pieces 2 pieces 2 pieces 2 pieces 4 pieces 4 pieces 4 pieces 2 pieces
5. Vaccine carrier with cold dog	1 piece
6. Vaccine carrier thermometer	1 piece
7. Digital thermometer, non-contact	3 pieces
8. Digital thermometer	3 pieces
9. Examining light	1 piece
10. Examining table	1 piece
11. Glucometer, with needle and 100 strips, with expiration of at least 1 year	3 pieces
12. Cholesterol meter	1 piece
13. Instrument table	1 piece
14. IUD insertion set	1 piece
15. Uterine sound a. Tenaculum forceps b. Ovum forceps	1 piece 1 piece 1 piece
16. Nebulizer	1 piece
17. Oxygen tank, portable	1 set
18. Oxygen tank with regulator	1 piece
19. Vaccine refrigerator	1 piece
20. Revolving stool	1 piece

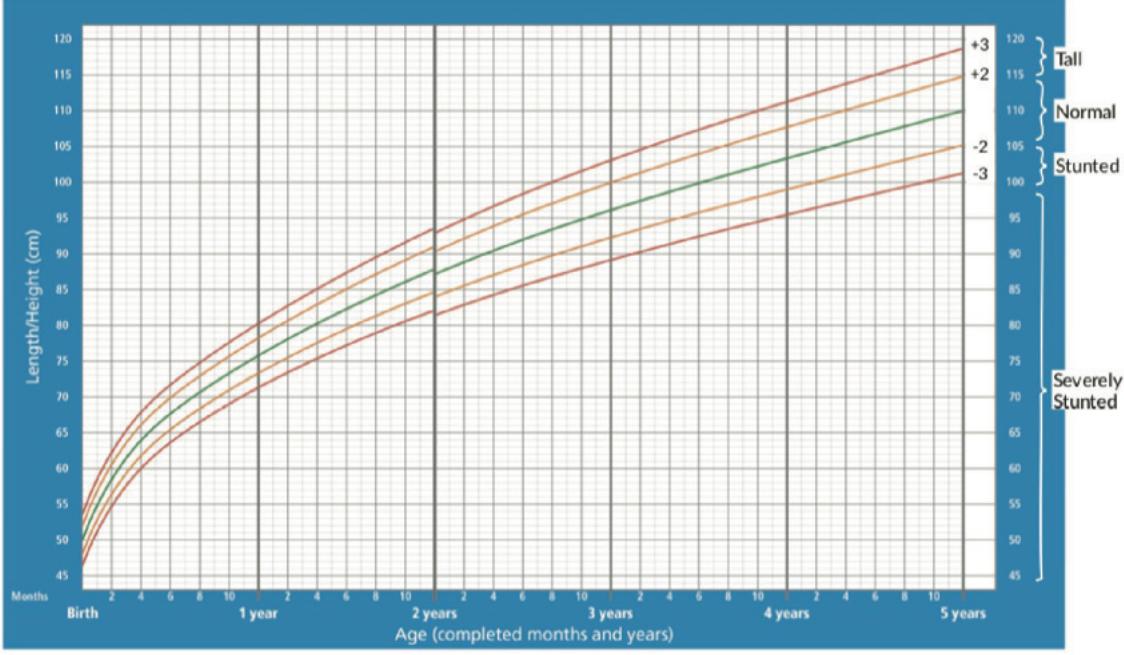
EQUIPMENT	QUANTITY
21. Salter scale	1 piece
22. Sharp waste disposal unit	1 piece
23. Safety collector box	1 piece
24. Stethoscope, adult	1 piece
25. Stretcher	1 piece
26. Tape measure	2 pieces
27. Weighing scale with height measuring stick, adult	1 piece
28. Wheelchair	1 piece
Others	
29. Electronic medical record system	
30. Computer or laptop with internet connection	1 set
31. Printer	1 piece
32. Mobile phone	1 piece
33. Fire extinguisher	1 piece
34. Generator set, 50 KVA	1 set
35. Wall clock	1 piece
36. White board with pens	1 set
Transport	
37. Patient transport vehicle (shall be utilized during emergency and referral of patients to other facilities; may be procured by the facility or may be acquired through a contracting agreement with a private service provider)	1 unit

Reference: Department of Health, 2020 Manual of Standards for Primary Care Facilities

Annex II. Growth Charts

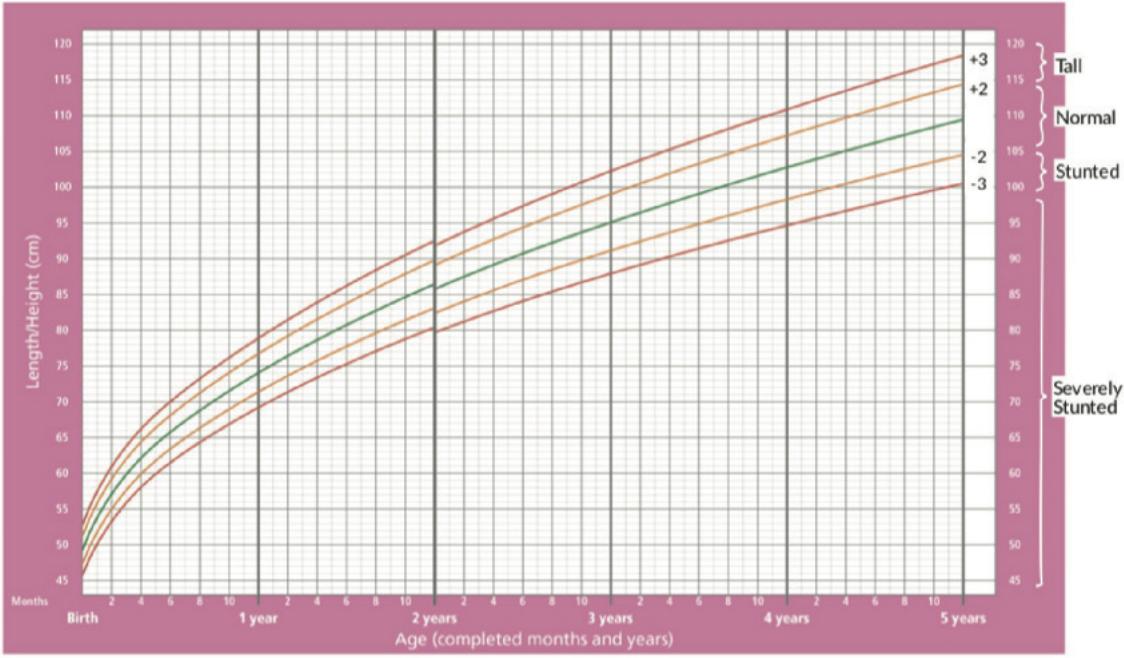
Length/height-for-age BOYS

Birth to 5 years (percentiles)



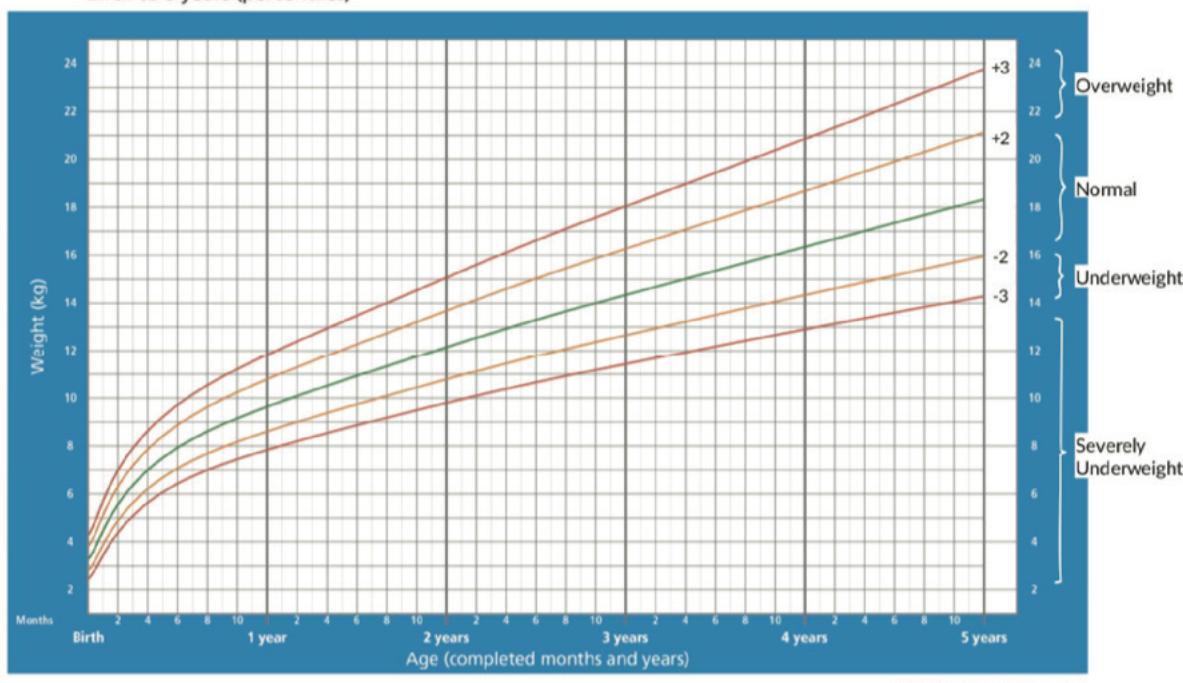
Length/height-for-age GIRLS

Birth to 5 years (percentiles)



Weight-for-age BOYS

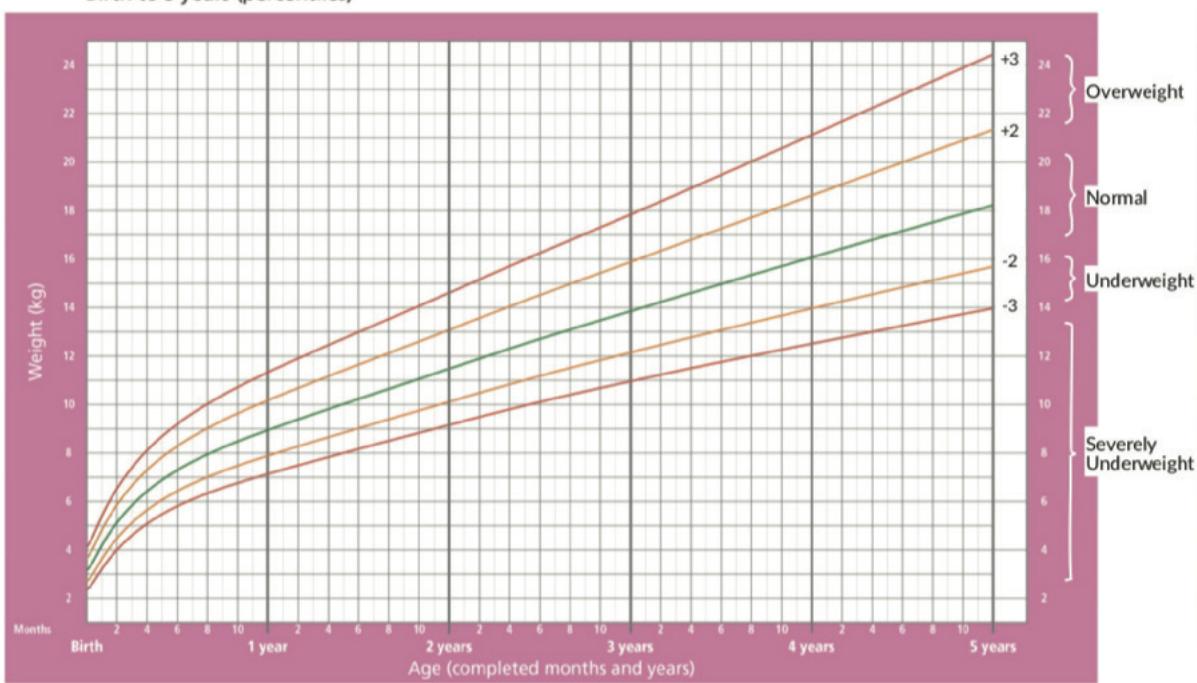
Birth to 5 years (percentiles)



WHO Child Growth Standards

Weight-for-age GIRLS

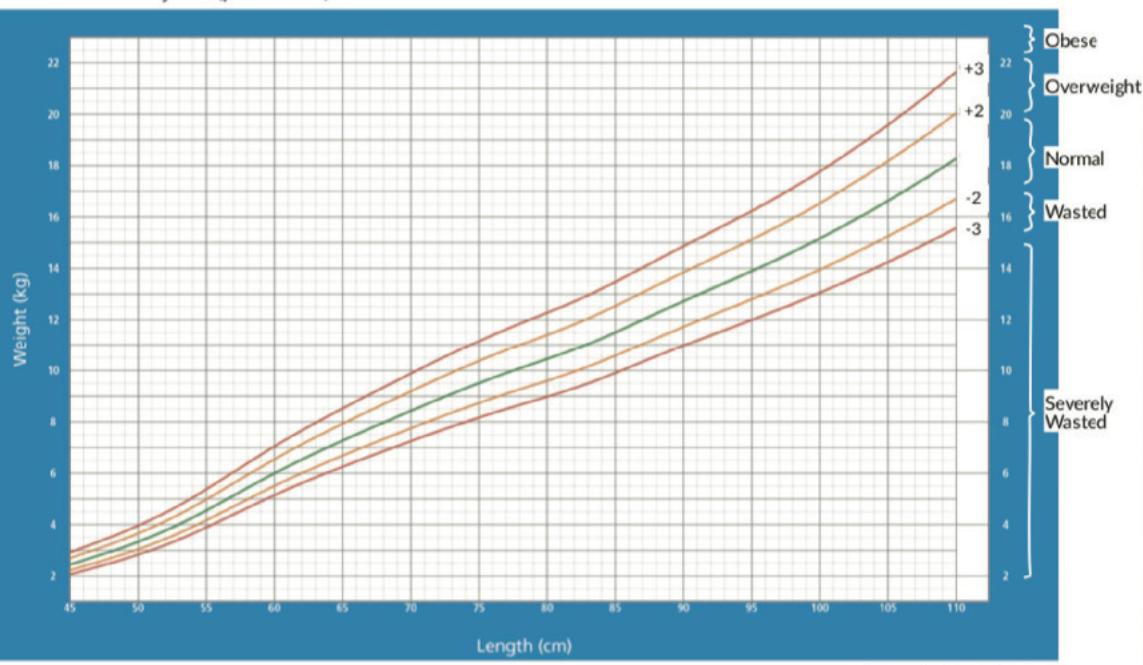
Birth to 5 years (percentiles)



WHO Child Growth Standards

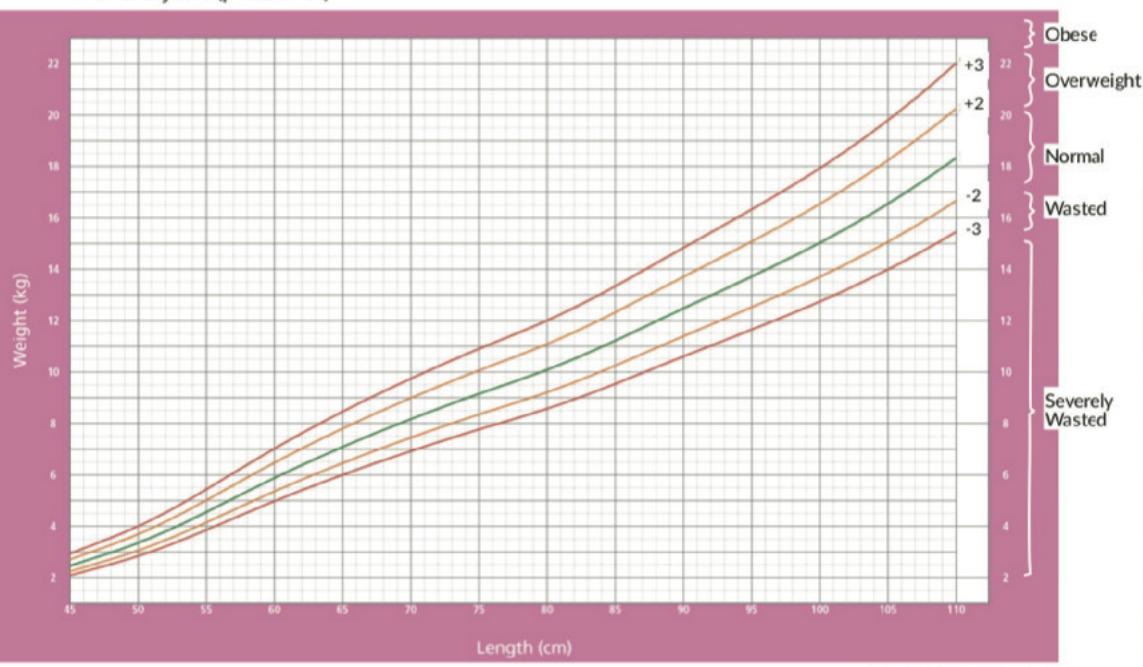
Weight-for-length BOYS

Birth to 2 years (percentiles)



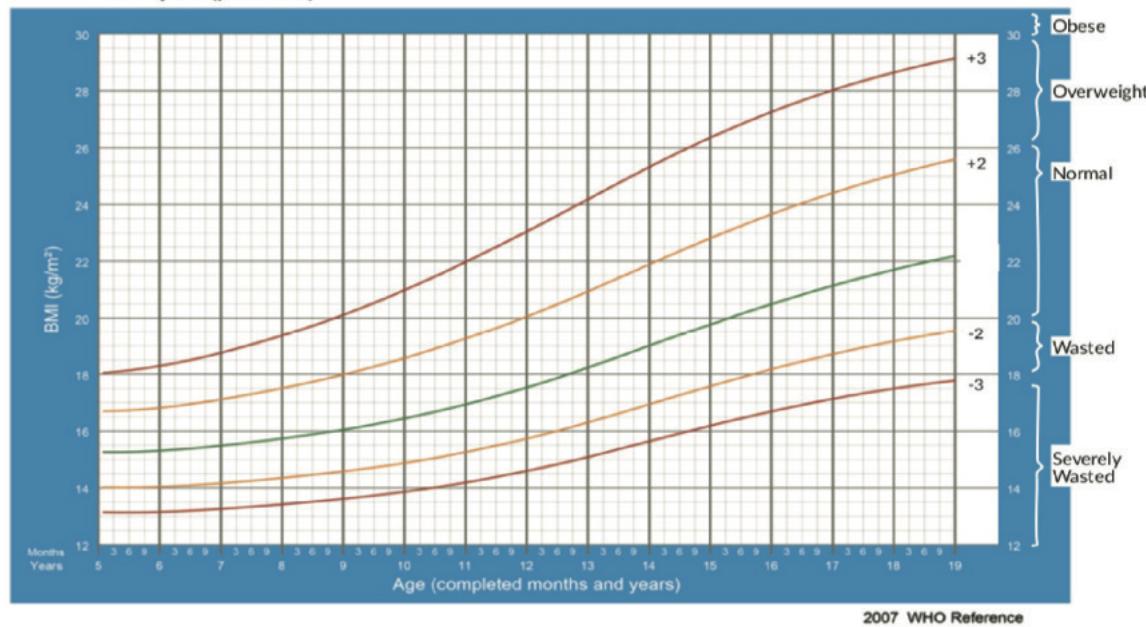
Weight-for-length GIRLS

Birth to 2 years (percentiles)



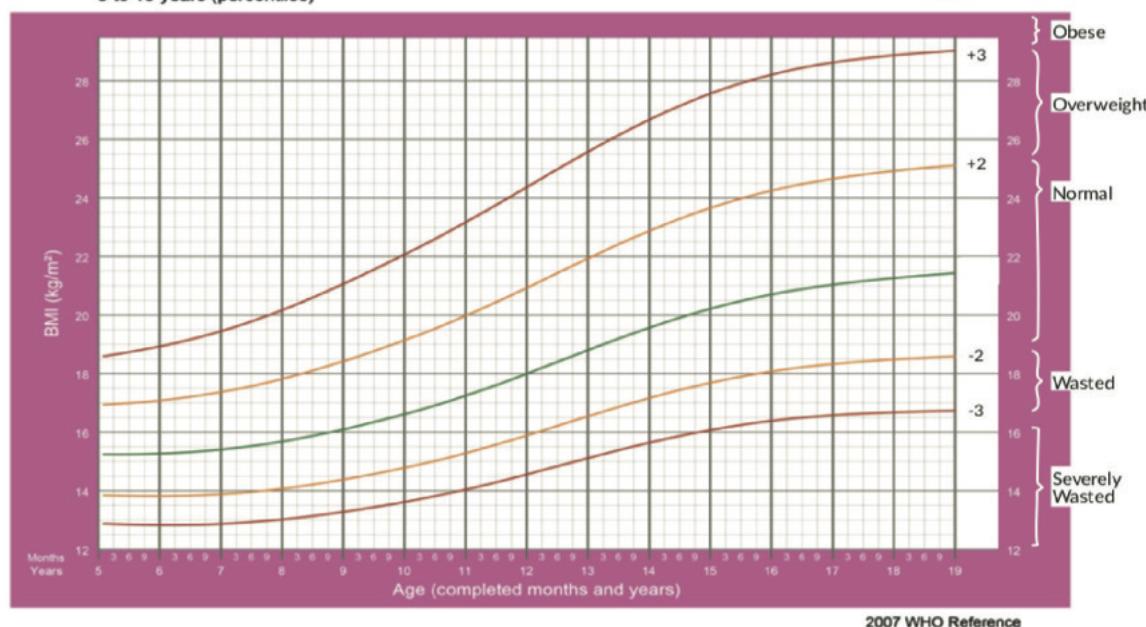
BMI-for-age BOYS

5 to 19 years (percentiles)



BMI-for-age GIRLS

5 to 19 years (percentiles)



Annex III. Master Lists of Target Clients (Blank Forms)

**Master List of Women of Reproductive Age and Adolescent Women for Family Planning Services
For the Quarter/Year:**

Barangay:

Name of BHs Midwife:

Date Prepared:

**National Safe Motherhood Program
PREGNANCY TRACKING**

Year: _____
 Region: _____
 Province: _____
 Municipality: _____
 Barangay: _____

No.	Name (LN, FN, MI)	Age	Gravidity	Parity	Expected Date of Delivery	Antenatal Care Check-Ups (Date)			Pregnancy Outcome (Place & check)			Mother and Child Postnatal Check-ups (Date)	Civil Registration (Date)		
						1st tri = up to 12 weeks and 6 days AOG	2nd tri = 13-27 weeks and 6 days AOG	3rd tri = 28 weeks and more	Live birth	Premat. Birth	Stillbirth	Abortion	Within 7 days after birth	Day of Discharge/ 24 hours after birth	Stillbirth
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															

Barangay Health Station: _____
 Rural Health Unit: _____

Name of BHW: _____
 Name of Midwife: _____

Master List of Newborns, Infants, Under-five Children, School-Aged Children and Adolescents

MASTER LIST OF ORAL HEALTH CARE CLIENTS

No.	Name (FN, MI, LN)	Address	Sex (M or F)	Age	Date of Birth (MM/DD/YYYY)	SE Status 1: NHITS 2: Non-NHITS
0-11 months old Infants						
1						
2						
3						
4						
5						
1-4 years old (12-59 months old) children						
1						
2						
3						
4						
5						
5-9 years old children						
1						
2						
3						
4						
5						
10-14 years old adolescents						
1						
2						
3						

No.	Name (FN, MI, LN)	Address	Sex (M or F)	Age	Date of Birth (MM/DD/YYYY)	SE Status 1: NHTS 2: Non-NHTS
3						
4						
5						
Pregnant women 15-19 years old						
1						
2						
3						
4						
5						
Pregnant women 20-49 years old						
1						
2						
3						
4						
5						

MASTER LIST OF ADULTS 20-59 YEARS OLD

No.	Family Serial No.	Name (FN, MI, LN)	Address	Age	Date of Birth (MM/DD/YYYY)	Sex (M or F)	SE Status
							1: NHTS 2: Non-NHTS
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

MASTER LIST OF SENIOR CITIZENS

No.	Family Serial No.	Name (FN, MI, LN)	Address	Sex (M or F)	Age	Date of Birth (MM/DD/YYYY)	SE Status 1: NHSS 2: Non-NHSS
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Master List of Households on Environmental Health and Sanitation

Barangay: _____

Quarter/Year:
Municipality: _____

Municipality: _____

Part 1. Access to Basic Safe Water Supply and Use of Safely Managed Drinking-Water Services

Master List of Households on Environmental Health and Sanitation

Quarter/Year:

Barangay:

Municipality:

Date ML Conducted/Completed:

Date ML Conducted/Completed: _____

Sample inventory of equipment in the BHS

REPORT ON THE PHYSICAL COUNT OF EQUIPMENT

Barangay Health Station: _____
 Municipality of _____
 As of Date: _____

ARTICLE	DESCRIPTION	PROPERTY NUMBER	UNIT OF MEASURE	UNIT VALUE	QUANTITY per PROPERTY CARD	QUANTITY per PHYSICAL COUNT	SHORTAGE/OVERAGE		REMARKS
							Quantity	Quantity	
Laptop	Acer Lot 4 Batch 44	BHS1-IT-1	Unit	36,600.00	1	1	0	0	functional, assigned to Ms.
Cabinet	Steel cabinet, 4 drawers	BHS1-Office-1	Unit	12000	1	1	0	0	in the BHS, slightly rusty
Table	Wooden office table, 3ft x 2ft	BHS1-Office-2	Unit	5000	1	1	0	0	good condition

Certified Correct by:

Signature over Printed Name of
BHW in charge

Approved by:

Signature over Printed Name of Barangay Captain

Verified by:

Signature over Printed Name of City /
Municipal Health Officer

Annex IV. Sample stock card for inventory of medicine in the BHS**A.1. Stock Card**Name of Drug (Generic name, dose, dosage form) (*ex. Paracetamol 500mg tab x 100tab/box*)

Manufactured by: _____ Lot/Batch No.: _____ Expiry Date: _____

Date	Beginning Balance	Quantity Received	Quantity Issued	Ending Balance	Signature

NOTES

NOTES