



Annual Report

MATERNAL & CHILD HEALTH PROJECT

2006

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Foreword

Greetings of Peace and Love!

We are now in this momentous age of pushing for a healthy society by advancing gender equity and equality across the nation. One important step towards realizing this goal of having gender-responsive and healthy communities is through recognizing women's rights, particularly their reproductive health rights. We must be aware of women's equal role in the development of the Filipino society.

The Department of Health is a major advocate in this campaign to advance the welfare and rights of women. Accordingly, it has established the Women's Health and Safe Motherhood Program which addresses their health needs.

To further realize its aims, the DOH, in partnership with the Japan International Cooperation Agency, has created the Maternal and Child Health (MCH) Project. This project has been designed to achieve the Millenium Development Goal of reducing maternal and child mortality, specifically in its two selected target areas, namely the Provinces of Ifugao and Biliran.

The Project has recently completed its first year of implementation. However, the efforts of carrying out the project's long-term goal do not end here. Four more years of the project life shall be committed in supporting various communities in attaining a healthy and responsive environment for its mothers and children, including strengthening the capacity of health workers in providing quality maternal and newborn services.

This First Annual Project Report will present the initial accomplishments of the MCH Project which started its implementation in March of 2006. We expect that through its publication, we would be able to appreciate and realize the gains that the project has attained and identify the gaps that have yet to be resolved in terms of health service delivery.

In closing, we also hope that through this Project, we would be able to raise the awareness of the community members, especially the local chief executives, regarding the importance of establishing and maintaining a collective commitment in addressing and managing the maternal and child health of the country.

In the service of the Filipino nation,



Ethelyn P. Nieto, MD, MPH, MHA, CESO III

Undersecretary
Department of Health



Message

The Japan-Philippines relation is both long-standing and strong, particularly in the area of development. Since the 1960s, Japan International Cooperation Agency (JICA) has been providing aid to Filipinos and still growing in the recent years.

In 2005, the Japanese Government adopted the Millennium Development Declaration and committed to support in achieving the Philippine goal which emphasizes the core principle of “human security”. One of these supports is the maternal and child health project, which is developed in consultations between the two countries. This project is aimed at reducing maternal mortality and infant death in the Philippines.

I am certain that the goodwill engendered through the continuing development partnership will remain an important part of Japan-Philippine relationship.

As this report reflects, we are pleased to share all the activities and accomplishments of the project which were and still are being implemented in the provinces of Ifugao (CAR) and Biliran (Region VIII). Most of these were initiatives by our implementer, the rural health managers, which are essential in improving the service delivery for pregnant women and newborns.

Moreover, many real challenges must still be overcome. But they are not insurmountable. With 3 more years to implement this project, a surge of political will and a groundswell of public demand for quality health service, the project objectives can play a critical role in focusing attention to the communities.



Shozo Matsuura
Resident Representative
Japan International Cooperation Agency
Philippine Office



Acknowledgements

To the health care workers from the communities, to the health facility-based workers, as well as the other institutions and individuals who passionately offer their full commitment to further improve, protect and promote the health of Filipino women and children.

PROJECT COUNTERPARTS

Department of Health

Secretary of Health Francisco T. Duque III, *MD, MSC*
 Undersecretary Ethelyn P. Nieto, *MD, MPH, MHA, CESO III*
 NCDPC Director Yolanda E. Oliveros, *MD, MPH*
 the entire staff of the NCDPC
 the entire staff of the Join Coordination Committee of the MCH Project

Ifugao and Biliran

Provincial Governors of Ifugao and Biliran
 Municipal Mayors of Mayoyao, Aguinaldo and Alfonso Lista, IFUGAO
 Municipal Mayors of Almeria, Biliran, Culaba, Caibiran, Cabugcayan, Maripipi, Naval and Kawayan, BILIRAN
 Provincial Health Officer Dr. Mary Jo Dulawan (Ifugao)
 Provincial Health Officer Dr. Alfonso Veneracion (Biliran)
 the entire staff of the Provincial Health Office
 the entire staff of the Rural Health Units
 the entire staff of the Municipal Health Office
 all the members of the Women's Health Teams
 Directors for Center for Health Development –Dr. Myrna Cabotaje and Dr. Benita Pastor
 the entire staff of the Center for Health Development – CAR & Region VIII
 DOH Representatives/Provincial Health Teams
 PhilHealth

Development Partners

United Nations Children's Fund (UNICEF)
 United Nations Population Fund (UNFPA)
 World Health Organization (WHO)
 European Union (EU)
 German Technical Cooperation (GTZ)
 Asian Development Bank (ADB)
 World Bank (WB)
 Plan International

Acronyms

AMADHS	Aguinaldo, Mayoyao Alfonso Lista District Health System
BEmOC	Basic Emergency Obstetric Care
BHS	Barangay Health Station
CAR	Cordillera Administrative Region
CHD	Center for Health Development
CMMNC	Community-Managed Maternal and Newborn Care
DOH	Department of Health
EC	Executive Committee
EmOC	Emergency Obstetric Care
F1	FourMula One
ILHZ	Inter-Local Health Zone
IMR	Infant Mortality Rate
JCC	Joint Coordination Committee
JICA	Japan International Cooperation Agency
MCH	Maternal and Child Health
MCP	Maternity Care Package
MDGs	Millennium Development Goals
MDR	Maternal Death Review
MMR	Maternal Mortality Ratio
NCDPC	National Center for Disease Prevention and Control
PDM	Project Design Matrix
PHIC	Philippine Health Insurance Corporation
PHIS	Philippine Health Information System
PHO	Provincial Health Office
PSWDO	Provincial Social Welfare and Development Office
RHU	Rural Health Unit
SBA	Skilled Birth Attendant
TBA	Traditional Birth Attendant
TOT	Training of Trainers
TWG	Technical Working Group
UNICEF	United Nations Children
UNFPA	United Nations Population Fund
WHT	Women's Health Team

Project Profile

INTRODUCTION

Since the 1970's, Japan's Official Development Assistance (ODA), through the Japan International Cooperation Agency (JICA), has been supporting the persistent need to improve the quality of services on Maternal and Child Health in reducing the maternal and child mortality in the Philippines.

The basic policy in providing Grant Aid or Technical Assistance for the Philippine Health Sector focused on "human security". For the past years, assistance for priority health issues has been carried out selectively with emphasis on the following;

1. Maternal and Child Health Programs
2. Infectious Diseases Control (improving program of Tuberculosis and Malaria control, improving Lab facilities for prevention of HIV/AIDS and other STIs, improving program of Schistosomiasis control, emergency countermeasures against SARS and other emerging infectious diseases, strengthening research functions for infectious diseases).
3. Local Health System Strengthening
4. Life-style Related Diseases

The Japanese Government's commitment to the Maternal and Child Health has started since 1967 through the following project-type technical cooperation; Poliomyelitis control (1967-1974), Family Planning (1974-1989), Maternal and Child Health and Family planning (1992-2002). Other assistance provided were grant aid project for measles control (2002) and UNFPA multi-bi cooperation's medical equipment supply in 1996-2003.

The Department of Health initiated the Maternal and Child Health Project (2006-2010) following the recommendations from the Project Formulation Study in the Health Sector conducted on September 2004. This is envisioned to support the Philippine Millennium Development Goals (MDGs) target to reduce the ratio of maternal deaths and decrease the mortality rate among children. Achieving these MDGs will only be realistic through the political will of the national and local governments, the commitment of health workers, and the concerted action of people in the communities, non-government organizations and development partners.

On March 16, 2006, an agreement has been signed between the Department of Health and JICA for technical assistance for the MCH Project of Ifugao and Biliran Province.

This Project's first annual report covers the period of March 2006 to March 2007. The first year's accomplishments will highlight several preliminary activities which signal the commencement of the project as well as the initiatives of Biliran and Ifugao Provinces in strengthening their Maternal and Child Health Programs.

Project Profile

THE PROJECT

BACKGROUND

Pregnancy and childbirth-related complications are the leading causes of death and disability among women of reproductive age. According to the UNFPA, the estimated Maternal Mortality Ratio in the Philippines as of 2006 is 200 per 10,000 live births. Furthermore, around 17 out of 1,000 babies die within their first 28 days of life.

The maternal and child health services in many rural areas like the provinces of Ifugao (CAR) and Biliran (Region VIII) have limited reach and low uptake. From 2003 to 2005, the DOH report shows that Ifugao has a consistently increasing MMR from 28 in 2003 to 53 in 2005 per 100,000 childbirths. Likewise, Biliran Province has reported an increasing trend in MMR from 200 to 289 per 100,000 childbirths from 2003 to 2005.

PROJECT DESIGN MATRIX (PDM)

In response to the above conditions, the Project aims to achieve the following as discussed and agreed upon by the DOH, the Provincial Government, Provincial Health Office (PHO), the Center for Health Development (CHD) of the target areas and other development project partners, in accordance with the Project Design Matrix (PDM).

Project Overall Goal

Maternal Mortality Ratio and Infant Mortality Rate in the target areas consisting of Ifugao Province and Biliran Province are reduced within the framework of National Goal of Improving Women and Child Health.

Project Purpose

Safe Motherhood and newborn care services to women of reproductive age in the target areas are strengthened through the approaches taken and lessons learned in the project which will contribute to the implementation of the above framework.

PROJECT EXPECTED OUTPUTS

1. Emergency Obstetric Care (EmOC) service delivery is strengthened
2. MCH Service Delivery System is enhanced at the primary health level
3. Management to Support SBA (Skilled Birth Attendants) is improved
4. System for supporting pregnant mothers and newborns in the community is enhanced
5. Feedback on lessons learned from the Project is reflected in the national policy implementation

ACTIVITIES

For each output, planned activities are as follows:

1. EmOC (Emergency Obstetric Care) service delivery is strengthened.
 - 1.1 Assist in strengthening the EmOC system by updating or reproducing standard manual, improving training equipment and conducting training of trainers.
 - 1.2 Organize teams towards strengthening health care at various levels of BEmOC (Basic Emergency Obstetric Care).
2. MCH Service Delivery system is enhanced at the primary health level.
 - 2.1 Improve capacities of training to conduct MCH related trainings.
 - 2.2 Conduct CMMNC (Community Managed Maternal and Newborn Care) training.
 - 2.3 Fulfill the requirement for the PhilHealth Maternal and Child Package.
3. Management to support SBA (Skilled Birth Attendants) is improved.
 - 3.1 Implement monitoring and supportive supervision for SBA.
 - 3.2 Review complicated pregnancy and delivery cases among groups of SBA.
4. System for supporting pregnant mothers and newborns is enhanced at the community level.
 - 4.1 Advocate community-based supporting system for emergency
 - 4.2 Organize and train Women's Health Team towards strengthening health care at the community level.
5. Feedback on lessons learned from the Project is reflected in the national policy implementation.
 - 5.1 Participate in the discussion and implementation of policies related to maternal and child health with special focus on EmOC by the DOH-MCH Task Force consisting of cooperation partners.
 - 5.2 Participate in developing monitoring and supervision system of MCH
 - 5.3 Implement TOT (Training of Trainers) of CMMNC (Community Managed Maternal and Newborn Care).
 - 5.4 Disseminate the MCH education materials with other cooperation partners.

Project Profile

PROJECT MANAGEMENT

As agreed upon between the JICA and the DOH, the Joint Coordination Committee (JCC) at the Central Level and the Provincial Executive Committee (Provincial EC) and Technical Working Group (TWG) have been delegated to manage the MCH Project. Meanwhile, discussions are still ongoing as regards to the final composition of the JCC.

PROVINCIAL EXECUTIVE COMMITTEE

The Provincial Governor provides the managerial and technical needs of the project and is assisted by their respective Provincial Health Officer/Chairperson of the Inter-Local Health Zone.

PROVINCIAL EXECUTIVE COMMITTEE:

Chairperson:

Governor

Members:

Vice Governor

Provincial Health Officer

Chairperson of the Inter-Local Health Zone

Sanggunian Panlalawigan Chairperson of the Committee on Health

Mayors of the Project Sites

Director of Center for Health Development Region

Representative from the Philippine Health Insurance Corporation

Representative from the PSWDO, PPDO

JICA-MCH Chief Advisor, Experts, Assistant Project Manager

Representative from the JICA Philippine Office

Others stakeholders

PROVINCIAL TECHNICAL WORKING GROUP

Ifugao Province

Chairpersons:

Chief of PHO Technical Department

Members:

Municipal Health Officers of Project Sites

Sanggunian Bayan for Health of Project Sites

Chief of Hospital

Representative from the Philippine Health Insurance Corporation

Provincial Planning & Development Officer

Provincial Social Welfare and Development Officer

DOH Representatives

JICA-MCH Chief Advisor, Experts, Assistant Project Manager

Others stakeholders

Biliran Province

Chairpersons:

Provincial Health Officer

Members:

Chief of PHO Technical Department

Provincial MCH Coordinator

Provincial FP Coordinator

Municipal Health Officers of Project Sites

Chief of Hospital

Representative from the Philippine Health Insurance Corporation

CHD Representatives

JICA-MCH Chief Advisor, Experts, Assistant Project Manager

Others stakeholders

Project Profile

ACTIVITIES AND ACCOMPLISHMENTS

CONVENE 1ST CENTRAL PROJECT PREPARATORY COMMITTEE MEETING

The meeting was held on December 20, 2005 at the DOH, National Center for Disease Prevention and Control (NCDPC) Conference Room with the following participants: NCDPC Director, Bureau Chief, NCDPC, Family Health Office and NCDPC staff, Bureau of International Health Cooperation Administrative Staff, Biliran Provincial Governor, Representative from the Ifugao Provincial Health Office, and the JICA-MCH Chief Advisor.

Discussions on the PDM were made. It has been agreed upon that on the first quarter of the project year, technical assistance will be provided for the baseline survey (i.e. situation analysis through quantitative and qualitative surveys), as well as for the administration of various trainings and provisions of medical equipment, supervision vehicles and ambulances for RHUs and district hospitals in the project areas.

SIGNING OF THE RD BETWEEN JICA AND THE DOH ON THE PROJECT IMPLEMENTATION

On January 10, 2006, the Record of Discussion was signed by the DOH and JICA as represented by Secretary Francisco T. Duque III and Mr. Shozo Matsuura, respectively (refer to Annex 1).



Project agreement signed between the Department of Health and Japan International Cooperation Agency (DOH Secretary Francisco Duque III with representatives from JICA, Japan Embassy and NCDPC Director Yolanda Oliveros)

PROVINCIAL EC AND TWGs

A total of two (2) Provincial Executive Committee (EC) Meetings and four (4) Technical Working Group (TWG) meetings were conducted in each project sites. Succeeding meetings in each project site focused the agenda on the agreements between JICA and the Provincial Government responsibilities.

Agenda:

- Formulation of activities on improving the MCH service delivery to be undertaken;
- Assist on the finalization of Provincial Health Operational Plan;
- Promotion of accreditation for Philippine Health Insurance Corporation (PhilHealth) for Maternity Care Package (MCP);



Launching of the MCH Project in Ifugao Province (the late Governor Benjamin Cappleman with the municipal mayors)

- Identification of stakeholders to support MCH-related Programs;
- Revisiting of the Provincial Health Referral System;
- Identification and promotion of strategies on implementing full facility-based delivery;
- Technical assistance in creating community-based support group such as Women's Health Team (WHT).



Meeting between Biliran Governor Rogelio Espina and representatives from JICA, Japan Embassy and CHD 8

BASIC EMERGENCY OBSTETRIC CARE TRAINING (BEmOC)

The training on Basic Emergency Obstetric Care (BEmOC) for Skilled Birth Attendants (SBAs) has been implemented in response to the need to improve the Provincial Health Systems of Obstetric Care. Its objective is to enhance the knowledge and skills of SBAs such as the rural doctors, nurses and midwives (12 from Ifugao and 25 from Biliran) as well as to advance their capacity in providing quality service delivery to pregnant women and newborns. Consequently, the participants were expected to perform technical skills for facility-based delivery.



Dr. Pedrosa of Culaba, Biliran Province presenting their plans during BEmOC Training in Cebu on October 16-26, 2007

Trainings for Ifugao were conducted at the Dr. Jose Fabella Memorial Hospital in Manila on September 25 to October 5, 2006 for 12 SBAs and for Biliran Province, at the St. Anthony Mother and Child Hospital on October 16-26, 2006 for 25 SBAs.

A combination of didactic and practicum methods were used during the 11-day training.

Inputs of the training include:

- Overview of BEmOC Course;
- Principles of Good Care;
- Quick Check and RAM Sessions 1-2;
- Antenatal Care (S1-4);
- Labor Delivery and Postpartum (S1-4);
- Perineal Anatomy, Lacerations, and Repair;
- Suturing of Perineal Laceration;
- Newborn Care (S1-3) (Exam of Newborn at Delivery);
- Postpartum Care (S1-4);
- Neonatal Resuscitation
- Use of Partograph

MATERNAL DEATH REVIEW (MDR)

Due to the high maternal death occurring in each area (5 in Ifugao and 10 in Biliran in the year 2006), the Project supported the strategy of the MDR. This is to evaluate each case of maternal death from the view of supporting and accelerating the existing mechanism to prevent its rising number. The activity specifically aims to explore the following areas:

- Conduct an in-depth review of each maternal death that occurred in each province from January 2006 to January 2007;
- Identify the main causes of maternal death;
- Determine the contributing factors of the death;
- Propose possible strategies to prevent maternal deaths;
- Identify possible gaps in reporting and identifying maternal deaths; and
- Importance of timely reporting



A discussion on the Maternal Death Review in Biliran Province held in September 24, 2006

Biliran

The MDR in Biliran Province was held on September 28-29, 2006. A total of 25 participants from the RHU, PHO, CHD, the Biliran Provincial Hospital and the Rural Health Midwives attended the discussion.

Highlights of the meeting include the orientation on the MDR, review of the DOH-adopted Forms used for the MDR, Mortality and Morbidity Review in the context of the Eastern Visayas Regional Medical Experience, and a workshop on Managing the MDR.

Ifugao

The MDR for Ifugao Province was held on October 16-19, 2006. A total of 70 people participated in the dialogue. They were the MHOs, Public Health Nurses, Rural health Midwives, the PHO, CHD and other local government unit representatives. This activity was launched in cooperation with the UNFPA.

A presentation and analysis of the 4 Maternal Death Cases from 4 Municipalities was made. The group also had a Review of the 3-Delay Model in relation to the causes of maternal deaths. The participants were given an overview of the BEmOC, a review of the MDR Guidelines regarding the formation of the MDR Teams at the provincial and municipal level.

INFORMATION MANAGEMENT SYSTEM (IMS) TRAINING FOR BILIRAN PROVINCE

The IMS training was held on September 25-27, 2006. Participants in the training were 16 SBAs from 8 RHUs. The objective of the activity is to further enable the health managers to appreciate, as well as encourage



Participants in the data encoding during the IMS Training for Biliran Province last Sept. 25-27, 2006

them to participate and begin maximizing their available data so as to serve their health information needs through the Philippine Health Information System (PHIS).

The PHIS is an information system promoted by the Bureau of Local Health Development of the DOH for the purpose of providing means of exchanging local health information. This would be useful in supporting the management or decision-making in the various local health programs and initiatives to advocate the information needs of the FourMula One approach.

DEVELOPMENT OF TRAINER'S GUIDEBOOK FOR THE COMMUNITY MANAGED MATERNAL AND NEWBORN CARE (CMMNC)

(refer to Publications)

The Project has developed a training manual for the CMMNC through the technical inputs of the DOH-NCDPC. This was also made possible through the assistance of other development partners such as the UNICEF, UNFPA, WHO, Plan International, who are working on women and children's issues. The CMMNC aims to promote the DOH policy on increasing the number of facility-based delivery at the community level. The CMMNC: A Trainer's Guide is an instruction manual for trainers at the field level.

TRAINING OF TRAINERS (TOT) ON CMMNC

The Project supported to implement the TOT on CMMNC to support the capacity building of trainers of 2 participants from 17 CHDs and 3 participants from 19 FourMula One sites. The Project also prepared TOT kits (each kit contains one copy of the *CMMNC: A Guide for Primary Health Care Professionals*, one copy of *CMMNC: A Trainer's Guide*, a set of OHP materials and a CD presentation for the lectures). The DOH agreed to conduct roll out trainings for the remaining 40 provinces. Each trainer has formulated a roll-out training plan for their respective SBAs at the local level. The trainings are aimed to strengthen the capacity of the SBAs and the local health units in managing and improving the health service delivery for pregnant mothers and newborns. This strategy has been adopted nationwide.

Below are the details of training outputs supported by various funding agencies. A total of 184 participants were trained through a series of 4-day live-in trainings.



Dr. Catibog discusses the Referral System during the Training of Trainers on CMMNC for Visayas area held last Nov.11-14, 2006



Ifugao participants during an activity for the Community-Managed Maternal and Newborn Care Training held on January 9-12, 2007

Date	Batch and Venue	Total	Provinces Supported by Agency			
			JICA (+all the CHDs)	UNFPA	UNICEF	Plan Phil.
Nov. 6-9, 2006	Luzon Batch: held in Baguio	70	Ifugao, Mt. Province, Nueva Vizcaya, Pangasinan, Romblon, Sorsogon, Benguet, Ilocos Norte, Oriental Mindoro	Olongapo	Isabela, Aurora, Camarines Norte, Quezon City, Pasay, Manila, Masbate	Occidental Mindoro
Nov. 12-17	Visayas Batch: held in Cebu	49	Biliran, Capiz, Eastern Samar, Southern Leyte, Negros Oriental	Bohol	Antique, Guimaras, Cebu, Northern Samar	Western Samar
Nov. 20-23	Mindanao Batch: held in Davao	65	Agusan del Sur, Misamis Occidental, North Cotabato, Surigao	Sultan Kudarat, Maguindanao, Sulu, Tawi-tawi, Lanao del Sur	Zamboanga Sur, Bukidnon, Saranggani, Davao	

FACILITY MAPPING FOR MATERNAL AND CHILD PACKAGE ACCREDITATION OF PHILHEALTH

The PHO and a local PhilHealth Representative conducted a field visit in Biliran Province on January 29 and 30, 2007. This was to determine the situation and requirements needed for the PhilHealth Accreditation for the MCP.

Below are the findings and standard medical equipment supported by the project:

At the end of fiscal year, all the 8 RHUs of Biliran Province are operating 24-hours a day to provide

Requirements and Provincial Status	Remarks
<ul style="list-style-type: none"> MCP Center has not yet been identified; MHO and Midwife should apply for accreditation from PhilHealth as service providers; No basic equipment for MCP available yet 	<ul style="list-style-type: none"> Mayors and MHOs signified their commitment, part of the health center will be renovated by the LGUs for the MCP Center The service provider will file the application for accreditation
<ul style="list-style-type: none"> Comply basic equipment for MCP; No accredited service provider from PhilHealth 	<ul style="list-style-type: none"> Application for accreditation will be filed within August 2006
<ul style="list-style-type: none"> No area for leaning / resuscitation of newborn; Comply basic equipment for MCP 	<ul style="list-style-type: none"> RHU will utilize the PHN room as MCP where facilities needed for MCP is available. Application for accreditation as service provider will be filed
<ul style="list-style-type: none"> Comply basic equipment for MCP; No access to electricity 	<ul style="list-style-type: none"> Application for MCP accreditation will be filed as soon as all equipment are available

maternity care services.

Below are the 4 RHUs which have received MCP accreditation from PhilHealth:

1. Almeria - approved on August 19, 2006
2. Cabucgayan - approved on January 19, 2007
3. Biliran and Kawayan - approved on March 15, 2007

As of March 31, 2007, the following equipment were provided to further strengthen the capacity

of each RHU to get MCP Accreditation (refer to Annex 2).

Biliran		Ifugao
Item		Items provided to RHUs and District Hospitals
Electric Generator	2 RHU	BP Apparatus Baumometer, Nebulizer Compact, Infant Weighing Scale, Weighing Scale for Adult, Littman Adult Stethoscope, Littman Pedia Stethoscope, Gooseneck Lamp Droplight, Sphygmomanometer, Baumometer with wheels, Hospital bed w/ mattress for pedia stretcher, Ambu bag for Adult, Ambu bag Pedia, Bassinet, Delivery Table with Accessories, Instrument Cabinet, IV Stand, Oxygen gauge w/ regulator, Oxygen tank 50, lbs., Suction Apparatus, Doppler Machine, Autoclave, Forceps, Needle holders, etc., 3 Emergency Ambulances for 3 District Hospitals and 2 monitoring vehicles
Computer set	8 RHUs	
Medical Equipment: Delivery Table, Examining, Electronic Fatal Monitoring Apparatus, Instrument Table, Instrument Cabinet, Ambu bags (for adult and pedia), Weighing Scale (for adult and pedia), Suction Apparatus, Stethoscope, Rubber suction bulb syringe, Emergency Light, Oxygen tank and gauge/ regulator, Kelly pad, IV Stand, Goose neck lamp, BP apparatus, Bassinet	8 RHUs	

WOMEN'S HEALTH TEAM (WHT)

(refer to Publications)

After a series of meetings and consultations with the DOH and the PHOs, the WHT has finally adopted and transformed the TBAs as advocates of the facility-based delivery. Members of which are Midwife of the Barangay Health Station (BHS) who acts as the team leader, the TBAs, the Barangay Nutrition Scholar and the Barangay Health Workers. These community-based WHTs were trained by the RHU, PHO and DOH Representative to perform the following:

1. Promote safe delivery;
2. Conduct regular census of pregnant women in their respective areas;
3. Promotion of newborn and infant care;
4. Promotion on availing facility-based health services;
5. Assist the community on informed choices of various health services

Presently, Ifugao has 96 WHTs (with 321 members) while Biliran has 221 WHTs (with 700 members). The barangay leaders and representatives from each community will act as advocates and support group for both the WHTs and the whole community.

In Biliran Province, the teams were supported by Provincial Resolution No. 166 regulating the practices of TBAs. This resolution has been approved on August, 2006 (refer to Annex 3).



Participants of the Women's Health team Training in the remote area of Aguinaldo, Ifugao (midwives, barangay health workers, barangay nutrition scholars and traditional birth attendants)

TRAINING ON NEWBORN SCREENING

Supporting the goal of the DOH in achieving greater survival rate for the infants, the Project provided assistance to the Biliran Province for Trainings on Newborn Screening (Ifugao trainings will be scheduled on July 2007). A total of 20 SBAs and medical technologist from the Biliran Provincial Hospital (BPH) and 80 from RHU received the training through the CHD VIII and National Newborn Screening Center on November 23, 2006 and November 29, 2006, respectively.



Blood sample collection during the Newborn Screening Training in Biliran Province last November 23, 2006

Each participating facility has also received copies of the manual of operations and educational materials for the implementation of the program in their localities. Presently, the Biliran Province has conducted 20 newborn screenings and one of the infants was detected with Congenital Hypothyroidism. The BPH's physician referred the patient to Cebu City for management and was recommended to undergo a lifetime treatment for survival.

TRAINING ON COMMUNITY-MANAGED MATERNAL AND NEWBORN CARE (CMMNC) FOR SKILLED BIRTH ATTENDANTS IN THE PROJECT SITES

To promote further awareness and knowledge of the community women and their families regarding safe delivery, a roll-out training by the trained PHO staff on CMMNC were conducted for all SBAs. The 4-day training contains essential information needed by the SBAs to sustain the safe motherhood programs.



Biliran Province participants in the Community-Managed Maternal and Newborn Care Training last January 16-19, 2007

Below are the accomplishments:

	Date Conducted	Number of SBAs trained
Biliran Province: held at the Biliran Garden Resort, Naval, Biliran Province		
1st	January 16-19, 2007	35
2nd	February 13-16, 2007	35
Total Trained		70
Ifugao Province: held at Wilmer's Hotel, Santiago, Ifugao Province		
1st	January 8-11, 2007	37
2nd	January 15-18, 2007	36
Total Trained		73

DISSEMINATION OF THE BASELINE SURVEY RESULT (refer to Publications)

The Baseline Survey was conducted by the JBJ Consulting Firm from August to October 2006 in the project areas. The survey was done to determine the current situation of the MCH services in each province by:

1. Assessing the magnitudes of maternal death and neonatal death in the study area through the compilation of primary, secondary data and interview of community-based midwives;
2. Assessing the existing accessibility of the MCH Services especially in EmOC;
3. Assessing the existing availability of the MCH Services especially the EmOC in facilities and communities; and
4. Review Health Seeking Behaviors of pregnant women and their families for MCH service.
5. Qualitative study of the attitude of Traditional Birth Attendants on their profession



MCH Project Chief Advisor Ms. Izumi Murakami during the Baseline Survey Dissemination Forum held in Biliran on February 2, 2007

Below are the highlights:

Biliran

The dissemination was held on February 2, 2007. A total number of 80 persons headed by Mayors, Sanggunian Panlalawigan Chair for Health, barangay officials and representatives from the following institutions and sectors: DOH-CHD VIII, provincial hospital, RHUs, the education sector, media, WHTs, and other partner organizations attended the occasion.

The provincial local government vowed to lobby the budget approval for the MCH Program at the provincial level, the creation of a WHT at the barangay level that would assist pregnant women in their community. On the other hand, the municipal level stated that it would promote a 24-hour service delivery at the RHUs, strengthen the provision of services at the BHS and would conduct more educational activities at the barangay level. Whereas the CHD promised to provide continuing assistance to the PHO and the RHU.

Ifugao (refer to Annex 4)

A total of 250 persons headed by the Provincial Vice Governor, the JICA Deputy Representative, representatives from the PHO, CHD CAR, PSWDO and PhilHealth attended the Baseline Survey Results for the Province of Ifugao. Prior to the presentation of the Baseline Survey Results, a ceremonial turnover of the 3 ambulances and various equipment was held.

One significant information mentioned in the presentation is the alarming increase in the rate of neonatal deaths (9 per 1,000 live births in 2006 and 13 per 1,000 live births in 2005).

CAPACITY BUILDING TRAINING IN JAPAN

A total of 5 persons (3 from Ifugao: one Technical staff of the PHO, the Head of Mayoyao District Hospital, and one RHU nurse from Alfonso Lista; 2 from Biliran: Municipal Health Officer and the person in charge of the pediatric department from the Biliran Provincial Hospital) have been sent to Osaka, Japan for a one month training on the MCH program management.

One representative from the Department of Health was sent to participate in the month-long *Asean Maternal and Child Health and Welfare Training* in Tokyo, Japan.

NATIONAL LAUNCHING CEREMONY OF THE COMMUNITY-MANAGED MATERNAL AND NEWBORN CARE (CMMNC) GUIDEBOOKS AND HANDOVER OF THE CMNMC TRAINING KITS TO THE DOH

The JICA Resident Representative, Mr. Shozo Matsuura, headed the presentation and turnover ceremony of the CMMNC Guidebooks to the DOH on February 22, 2007. DOH Undersecretary Ethelyn Nieto officially accepted the guidebooks (a total of 32,000 printed copies to be distributed to all the SBAs all over the country and Training Kits for 79 provinces). Dr. Nieto also expressed that the Guidebooks are important components in further strengthening the Emergency Obstetric Care. The event was witnessed by 110 representatives from the DOH, other government officials, the academic sector, and other organizations working for the welfare of mothers and newborns.



DOH Undersecretary Ethelyn Nieto formally receives the CMMNC Guidebooks and Training Kits from the Embassy of Japan Minister Akira Sugiyama during the turnover ceremony on February 22, 2007

At the ceremony, Mr. Matsuura emphasized JICA's commitment to provide greater effort in reducing child mortality and improving maternal health. Furthermore, some of the other key figures who graced the event were Minister Akira Sugiyama and Health Attaché Norito Araki, both from the Embassy of Japan, DOH-NCDPC Director Yolanda Oliveros, and Former Secretary of Health Dr. Jaime Galvez-Tan.

CONVENE 2ND CENTRAL EXECUTIVE COMMITTEE (JOINT COORDINATION COMMITTEE) MEETING

The Central Executive Committee Meeting was held on March 13, 2007 at the DOH Secretary of Health Conference Room. The following were discussed during the ExeCom Meeting:

- Accomplishment of JICA-MCH Project in the Provinces of Ifugao and Biliran (presented by the Provincial Health Officers of Ifugao and Biliran)
- Discussion of Project Design Matrix
- Project administrative issues



The 2nd Executive Committee Meeting held on March 13, 2007

JICA EXPERTS AND VISITORS

JICA Experts

- a. Expert on Policy on Maternal and Child Health: Dr. Kyo Hanada (July 2006 and February 2007)
- b. Expert on Monitoring and Supervision of MCH Programs: Ms. Michiru Suda (January to March 2007)

Visitors

- a. Sasagawa Foundation 2006 Fellowship

The Sasagawa Foundation-sponsored 2006 Fellowship of International Health Cooperation delegates visited Biliran Province on August 10-12, 2006. There were 17 members of the delegation (14 medical students, 1 adviser and 2 members of the secretariat).

- b. Japanese Red Cross

On August 24-26, 2006, 28 nursing students from Kyushu International Red Cross College of Nursing visited Biliran Province.

- c. Public Health Students

Two Master of Public Health students from Gunma University
One Master of Nursing student from Hyogo University
Three Medical students and one Nursing student from Tottori University

- d. JICA Interns

One JICA intern for 3 months

Project Profile

NEXT STEPS...

Below are the target priorities of the project in the succeeding years:

Strengthening Capability Building of SBAs

Massive Campaign to promote the Safe Motherhood Programs by the Women's Health Teams

Fulfill the need for equipment at each level of health facility

Training of Health Human Resources in Japan

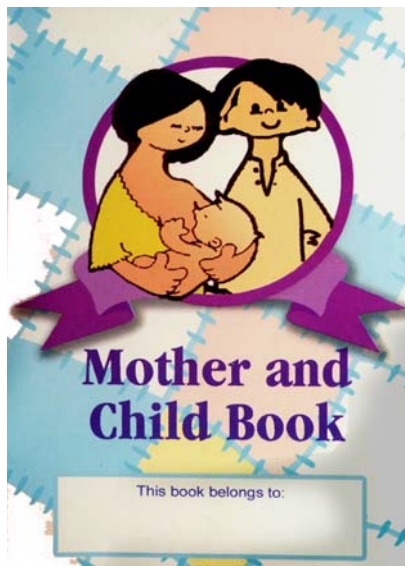
Assist in the development of a functional monitoring and supervision system at the Provincial Level

Advocacy to promote safe motherhood

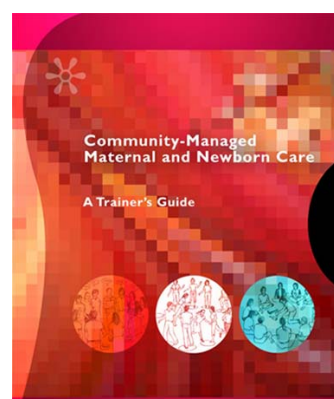
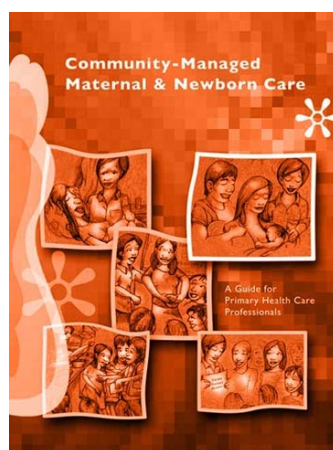
As planned by the RHU worker, a community-based educational campaign will be done on safe delivery, promotion of infant care, promotion on availing facility-based health services and assist the community on informed choices. Through the assistance of the WHT members, tracking of pregnant women should be continually done to closely monitor their health status.

Project Profile

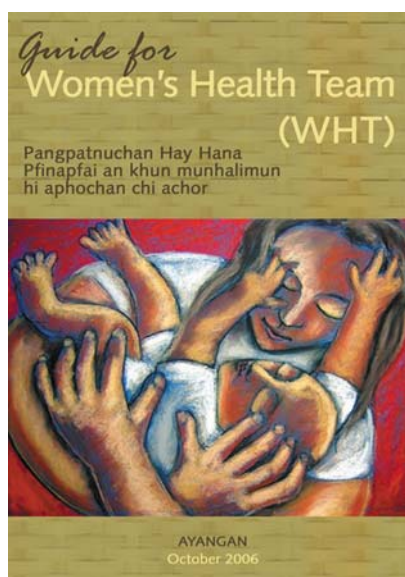
PUBLICATIONS



The JICA-MCH Project reproduced 100,000 copies of the **Mother and Child Book** in support of the Safe Motherhood Program of the DOH



The **CMMNC Guidebook and Trainer's Guide** were published to support the capacity development of the SBAs in the community so they could promote facility-based delivery that would help reduce the maternal and neonatal mortality ratios.



The **Women's Health Team guidebook** was developed to encourage community-based volunteers as to promote safe delivery and healthy individual. The WHT Guidebook was published in four native languages (Cebuano, Waray, Ilokano and Ayangan)

Other advocacy materials : CMMNC Training Kit, Baseline Survey Report, brochure and calendar

Project Profile

PROJECT STAFF

The JICA-MCH Project holds its offices at:

JICA-MCH Project Central Office

Building 3, Department of Health, San Lazaro
Compound, Rizal Avenue, Sta. Cruz, Manila.
Office number: (632) 7438301 loc 1345
Telefax: (632) 339-2361

Chief Advisor:	Izumi Murakami
Project Coordinator:	Nobuko Yamagishi
Program Assistant:	Sharon Anne Pangilinan
Secretary:	Mary Kristine Escobido

Biliran Project Office:

Biliran Provincial Hospital
Castin St., Naval, Biliran Province

Assistant Project Manager:	Roland Eric Macanas
Secretary:	Chester Quijano
Driver:	Odelon Abanilla

Ifugao Project Offices:

Mayoyao District Hospital
Mayoyao, Ifugao Province

Assistant Project Manager:	Marcela Donaal
Secretary:	Helen Anawan
Driver:	Delfin Bayongan

Provincial Health Office
Lagawe, Ifugao Province

Assistant Project Manager:	Marcelyn Dulnuan
Secretary:	Jayson Daulayan
Driver:	Stephen Nadyahan

Annexes


ANNEX I

**RECORD OF DISCUSSIONS
BETWEEN
The JAPAN INTERNATIONAL COOPERATION AGENCY
AND AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE REPUBLIC OF THE PHILIPPINES
ON
JAPANESE TECHNICAL COOPERATION
FOR MATERNAL AND CHILD HEALTH PROJECT**

The Japan International Cooperation Agency (hereinafter referred to as "JICA") had a series of discussions through the Resident Representative of JICA Philippine's with Philippine authorities concerned namely, Department of Health, Center for Health Development of Cordillera Administrative Region and Region VIII, Provincial Health Office of Ifugao and Biliran with respect to desirable measures to be taken by JICA and Government of the Republic of the Philippines for the successful implementation of the MATERNAL AND CHILD HEALTH PROJECT.

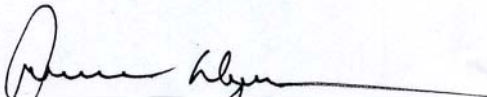
As a result of the discussions, JICA and the Philippines authorities concerned agreed on the matters referred to in the document attached hereto.

Manila, 10 January 2006



SHOZO MATSUURA

Resident Representative
Japan International Cooperation Agency
In the Philippines



FRANCISCO T. DUQUE MD.MSc.

Secretary of Health
Department of Health
The Republic of the Philippines

THE ATTACHED DOCUMENT

I. COOPERATION BETWEEN JICA AND THE GOVERNMENT OF THE REPUBLIC OF THE PHILIPPINES

1. The Government of the Republic of the Philippines will implement the Project of Maternal and Child Health (hereinafter referred to as “the Project”) in cooperation with JICA.
2. The Project will be implemented in accordance with the Master Plan, which is given in Annex I.

II. MEASURES TO BE TAKEN BY JICA

In accordance with the laws and regulations in force in Japan, JICA will take, at its own expense, the following measures according to the normal procedures under the Colombo Plan Technical Cooperation Scheme.

1. DISPATCH OF JAPANESE EXPERTS

JICA will provide the services of the Japanese experts as listed in Annex II.

2. PROVISION OF EQUIPMENT

JICA will provide necessary equipment and other materials (hereinafter referred to as “the Equipment”) as listed in Annex III. The Equipment will become the property of the Government of the Republic of the Philippines upon delivery C.I.F. (cost, insurance and freight) to the Republic of the Philippine authorities concerned at the ports and/or airports of disembarkation.

3. TRAINING OF THE PHILIPPINE PERSONAL IN JAPAN

JICA will receive the Philippine personnel connected with the Project for technical training in Japan.

III. MEASURES TO BE TAKEN BY THE GOVERNMENT OF THE REPUBLIC OF PHILIPPINES

1. The Government of the Republic of the Philippines will take necessary measures to ensure that the self-reliant operation of the Project will be sustained during and after the period of Japanese technical cooperation through full and active involvement in the Project by all related authorities, beneficiary groups and institutions.
2. The Government of the Republic of the Philippines will ensure that the technologies and knowledge acquired by the Republic of the Philippine nationals as a result of Japanese technical cooperation will contribute to the economic and social development of the Republic of the Philippines.

3. The Government of the Republic of the Philippines will grant in the Republic of the Philippine privileges, exemptions and benefits to the Japanese experts referred to in II-1 above and their families, which are no less favorable than those accorded to experts of third countries working in the Republic of the Philippines under the Colombo Plan Technical Cooperation Scheme.
4. The Government of the Republic of the Philippines will ensure that the Equipment referred to in II-2 above will be utilized effectively for the implementation of the Project in consultation with the Japanese experts referred to in Annex II.
5. In accordance with the laws and regulations in force in the Republic of the Philippines, the Government of the Republic of the Philippines will take necessary measures to provide at its own expense:
 - 1) Services of the Philippine counterpart personnel and administrative personnel as listed in Annex IV;
 - 2) Land, buildings and facilities as listed in Annex V;
 - 3) Supply or replacement of machinery, equipment, instruments, vehicles, tools, spare parts and any other materials necessary for the implementation of the Project other than the Equipment provided by JICA under II - 2 above;
 - 4) Assistance to find suitably furnished accommodation for the Japanese experts and their families.
6. In accordance with the laws and regulations in force in the Republic of the Philippines, the Government of the Republic of the Philippines will take necessary measures to meet:
 - 1) Expenses necessary for transportation within the Republic of the Philippines of the Equipment referred to in II - 2 above as well as for the installation, operation and maintenance thereof;
 - 2) Customs duties, internal taxes and any other charges, imposed in the Republic of the Philippines on the Equipment referred to in II - 2 above; and
 - 3) Running expenses necessary for the implementation of the Project.

IV. ADMINISTRATION OF THE PROJECT

1. The Technical Coordination Group of the Health Sector Reform Agenda (TCG-HSRA) shall be the National Project Management Committee, with its Chairperson, Assistant Secretary of the Department of Health, as Advisor. Director of the National Center for Disease Prevention and Control as a Project Director will bear the overall responsibility for the administration and implementation of the Project.
2. Provincial Governors of both Ifugao and Biliran Provinces, as the Deputy Project Director, will be responsible for the managerial and technical matters of the Project.

3. Provincial Health officer/ chairperson of the Inter Local Health Zone in Ifugao Province and Provincial Health Officer in Biliran Province as Project Manager will be responsible for the assisting managerial and technical matters of the Project.
4. The Japanese Chief Advisor will provide necessary recommendations and advice to the Project Director and the Project Manager on any matters pertaining to the implementation of the Project.
5. The Japanese experts will give necessary technical guidance and advice to the Republic of the Philippine counterpart personnel on technical matters pertaining to the implementation of the Project.
6. For the effective and successful implementation of the technical cooperation for the Project, the TCG-HSRA and Executive Committees will be convened as necessary. Its functions and composition are described in Annex VI.

V. JOINT EVALUATION

Evaluation of the Project will be conducted jointly by JICA and the Philippine authorities concerned, at the middle and during the last six months of the cooperation term in order to examine the level of achievement of the Project.

VI. CLAIMS AGAINST JAPANESE EXPERTS

The Government of the Republic of the Philippines undertakes to bear claims, if any arises, against the Japanese experts engaged in technical cooperation for the Project either resulting from, occurring in the course of, or otherwise connected with the discharge of their official functions in the Republic of the Philippines except for those arising from the willful misconduct or gross negligence of the Japanese experts.

VII. MUTUAL CONSULTATION

There will be mutual consultation between JICA and the Government of the Republic of the Philippines on any major issues arising from, or in connection with this Attached Document.

VIII. MEASURES TO PROMOTE UNDERSTANDING OF AND SUPPORT FOR THE PROJECT

For the purpose of promoting support for the Project among the people of the Republic of the Philippines, the Government of the Republic of the Philippines will take appropriate measures to make the Project widely known to the people of the Republic of the Philippines.

IX. TERM OF COOPERATION

The duration of the technical cooperation for the Project under this Attached Document will be four (4) years from 16 March 2006.

ANNEX I	MASTER PLAN
ANNEX II	LIST OF JAPANESE EXPERTS
ANNEX III	LIST OF MACHINERY AND EQUIPMENT
ANNEX IV	LIST OF PHILIPPINE COUNTERPART
ANNEX V	LIST OF LAND, BUILDINGS AND FACILITIES
ANNEX VI	TECHNICAL COORDINATION GROUP OF HSRA
(NATIONAL PROJECT MANAGEMENT COMMITTEE AND EXECUTIVE COMMITTEE)	

JICA TURNS OVER MEDICAL EQUIPMENT TO BILIRAN RHUS FOR MATERNAL AND CHILD HEALTH CARE SERVICES

Jack D. Gadaingan
Manila Bulletin, Visayas Section, p. 13
24 April 2007

NAVAL, Biliran – Around P1.22-million worth of medical paraphernalia and equipment will be distributed to rural health units (RHUs) of the eight municipalities of this province.

Gov. Rogelio J. Espina disclosed that these accessories and equipment are part of the \$ 1.5-million “Maternal and Child Health Care Project” grant aid package from the Japan International Cooperation Agency (JICA) for the province of Biliran.

The aid package, which were granted only to the provinces of Ifugao and Biliran, covers technical support which includes training of rural health doctors and personnel here in the country and abroad, and equipment assistance to improve maternal and child health care services throughout the province.

Dionisio Oliva Jr., provincial information officer, said the eight towns here will also be provided with ambulance units each to answer for emergency cases, when patients have to be brought to the Provincial Hospital of Biliran in this capital town or Ormoc City or Tacloban City in Leyte.

This month, the RHU offices of the towns of Naval, Almeria, Culaba, and Caibiran received their respective paraphernalia and equipment package worth P 299,931, P152,510, P87,467, and P152,807, respectively.

The equipment were composed of a unit of ambu-bag each for adult and pedia, bassinet, delivery table gooseneck lamp, IV stand, Kelly pad, oxygen complete with gauge and regulator, portable emergency light, stethoscope, suction apparatus, weighing scale for infants, fetal monitoring apparatus, and examining table.

Izumi Murakami, chief advisor of the MCH Project, personally headed the turnover of the equipment to the RHUs of Naval, Almeria, Culaba, and Caibiran. Governor Espina and Naval Mayor and congressional aspirant Gerry Espina Sr. attended the turnover ceremony.



Republic of the Philippines
Province of Biliran

OFFICE OF THE SANGGUNIANG PANLALAWIGAN

EXCERPT FROM THE MINUTES OF THE 25TH REGULAR SESSION OF THE SANGGUNIANG PANLALAWIGAN OF BILIRAN, HEALD ON AUGUST 2, 2006 AT THE SESSION HALL, LEGISLATIVE BUILDING, CAPITOL COMPLEX, NAVAL, BILIRAN

PRESENT:

HON. CARLOS L. CHAN, SR.	Presiding Officer
HON. LUCILA C. CORSO	Presiding Officer Pro Tempore
HON. GETOLIO B. SOLITE	Asst. Majority Floor Leader
HON. GINA MARIA B. ENAGE	Minority Floor Leader
HON. RICARDO R. KHO	Asst. Minority Floor Leader
HON. ERIBERTO D. TUBIS, JR.	SP Member
HON. ELIZAR S. SABITSANA	SP Member
HON. ROLANDO A. SABORNIDO	SP Member
HON. JESUS P. ESTRADA	Ex-Officio Member
HON. LORENZO A. REVELDEZ, JR.	Ex-Officio Member
HON. ICEE P. SALUT	Ex-Officio Member

ABSENT :

HON. ORENCIO T. GERVACIO	Majority Floor Leader
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Resolution No. 166
(Series of 2006)

A RESOLUTION REGULATING THE PRACTICES OF TRAINED BIRTH ATTENDANTS ON SAFE MOTHERHOOD / MATERNAL AND CHILD HEALTH PROGRAM OF THE PROVINCE OF BILIRAN

WHEREAS, Local Government Code of 1991 was enacted in 1991 and mandated the transfer of health services and facilities, powers and responsibilities from the Department of Health to Local Government Units (provinces, municipalities, and cities) and ensure to contribute to a more effective delivery of health services to the people especially by that of women and children.

WHEREAS, the Province of Biliran has experienced the following:

1. High rate of maternal death (2.39/1,000 livebirths as of December 31, 2005).
2. High rate of infant death (16.77/1,000 livebirths as of December 31, 2005).
3. High home-deliveries (58% of total deliveries of as December 31, 2005).

WHEREAS, a joint 1999 World Health Organization (WHO) / UNFP / UNICEF/World Bank statement called on countries to “ensure that all women and newborns have skilled care during pregnancy, childbirth and the immediate postnatal care.

WHEREAS, a joint 1999 statement only considered the registered doctors, nurses and midwives as skilled birth attendants.

ANNEX 3

WHEREAS, the World Health Organization have strictly referred Trained Birth Attendant as traditional, independent of the health system, non-formally trained and community-based providers of care.

Now, therefore be it resolved as it is hereby resolved by the Member of the Board of Biliran Province, that:

1. This resolution shall cover all the registered and non-registered Trained Birth Attendants of Biliran Province, either active or non-active;
2. Practices of Trained Birth Attendant should be limited only to the following:
 - a. Serving as member of Woman's Health Team (WHT) (Midwife as a team leader and Barangay Health Volunteer and TBA as a member) to support tasks of skilled birth attendants and maternal and newborn needs;
 - b. Serving as advocates for health facility-based birth delivery as a WHT ;
 - c. Encouraging women to enroll for essential pre-and postnatal care and to obtain care from a skilled attendant during childbirth;
 - d. Helping women and families to follow-up on self-care advice and other recommendations from the skilled birth attendants (nutrition, treatment, dietary supplementation, immunization, scheduled appointments, plan for births and emergencies, etc.);
 - e. Encouraging the involvement of the male partner in the care of the woman and their newborn;
 - f. Disseminating health information through the community and families;
 - g. Giving social support during and after delivery, either as a birth companion;
 - h. Informing the Skilled Birth Attendant about the women who have become pregnant in the community so that the Skilled Birth Attendant can make direct contact with them;
 - i. Serving as a link between the families, communities and local authorities and the reproductive health services;
 - j. Encouraging communities' involvement in the development / maintenance of the continuum of care.

Resolve as it is hereby resolved that this resolution shall take effect after 15 days upon approval. Regular monitoring on the implementation of this resolution should be done by the Municipal Health Office.

Resolve further, to furnish copies of this resolution to the Local Chief Executive, Barangay Captains/ Barangay Health Council and Municipal Health Officer.

APPROVED Unanimously.

CERTIFIED CORRECT:

(SGD)

ELISIO S. SABAGKIT

Legislative Staff Officer II

Acting SP Secretary

ATTESTED BY:

(SGD)

HON. CARLOS L. CHAN, SR.

Presiding Officer

JICA TO IMPROVE HEALTH OF IFUGAO MOTHERS AND CHILDREN Donates P5.3M medical facilities to AMADHS

Vency D. Bulayangan/PIA
Mungkalun, The Ifugao Messenger:
A Monthly Publication of the Ifugao Provincial Advocacy Team
Vol. 3 No. 1
January 2007, pp.1 & 8

MAYOYAO, Ifugao – the Provincial and local officials here are very grateful to be a recipient of the Maternal and Child Health Project (MCH) of the Japan International Cooperation Agency (JICA) and the Department of Health.

With the belief that every woman has the right to health: to avail of quality maternal care services and to make informed choices, a forum on MCH Baseline Survey Result Dissemination was conducted by JICA in the municipalities of Mayoyao, Aguineldo and Alfonso Lista.

In a message delivered by Mr. Kenzo Iwakami, JICA Deputy Resident Representative, he said that he believes that the active demonstration of all concerned demonstrates their commitment and eagerness to work for the betterment of health of mothers and children in Ifugao.

“As we start this 4-year Project, we undertook a baseline survey in order to assess the current situation and to formulate effective strategies for the Project,” Iwakami said. We would like you to use the results of the baseline survey as a tool for planning the activities for the project.

With only two provinces throughout the country, Ifugao and Biliran as target areas, the project aims to reduce Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) within the framework of formula one health policy and national goal of improving women and child health service providers; providing medical equipment facilities; extensive technical and managerial trainings in Japan.

The MCH project which started last March 2006 to March 2010 was first implemented in the said three municipalities here. However, Mr. Iwakami said that the Project will be expanded in the other municipalities here this year.

He said that the country has a rather high MMR and IMR, and the rate of the decrease has been slow compared to other ASEAN countries. “I hope this workshop will provide an opportunity for you to understand better the problems that mothers and children face in Ifugao and help you plan more effectively,” Iwakami said.

The JICA-donated medical equipment worth P5.3M to the three municipalities includes 3 ambulances, delivery tables with accessories, electric sterilizers and others.

Mayor Federico Juguiad, Jr. of Aguineldo said that he hopes that the data presented will help improve the health conditions of mothers and children in his municipality.

Mayor Charles Cattiling of Alfoso Lista requested for communication facilities to be used in emergency cases. “We are grateful that the three municipalities were chosen as beneficiaries of the said project. But we also need communication facilities because of the geographical location of our towns,” Cattiling said.