### Health Status in 2008

<table>
<thead>
<tr>
<th></th>
<th>Rich urban</th>
<th>Poor rural</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Life Expectancy</strong></td>
<td>Over 80 years</td>
<td>Less than 60 years</td>
</tr>
<tr>
<td><strong>Maternal Mortality Ratio</strong></td>
<td>Less than 15</td>
<td>More than 150</td>
</tr>
<tr>
<td><strong>Infant Mortality Rate</strong></td>
<td>Less than 10</td>
<td>Over 90</td>
</tr>
<tr>
<td><strong>Skilled Birth Attendant</strong></td>
<td>92.4%</td>
<td>25.1%</td>
</tr>
</tbody>
</table>

Source: Sec. Alberto Romualdez, MD, State of the Nation’s Health, Centennial Lecture, 2008
Deliveries in health facilities by wealth quintile

<table>
<thead>
<tr>
<th>Wealth Quintile</th>
<th>Public health facility</th>
<th>Private health facility</th>
<th>At home</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poorest</td>
<td>11.5%</td>
<td>1.5%</td>
<td>86.8%</td>
<td></td>
</tr>
<tr>
<td>Poorer</td>
<td>26.9%</td>
<td>7.1%</td>
<td>65.5%</td>
<td></td>
</tr>
<tr>
<td>Middle</td>
<td>33%</td>
<td>15.3%</td>
<td>51.5%</td>
<td></td>
</tr>
<tr>
<td>Richer</td>
<td>39%</td>
<td>29.7%</td>
<td>30.9%</td>
<td></td>
</tr>
<tr>
<td>Richest</td>
<td>29.4%</td>
<td></td>
<td>54.5%</td>
<td></td>
</tr>
</tbody>
</table>
Where do the poor go for health services?

Health Facility Utilization Rates by Wealth Index Quintile

- Quintile 1 (poorest)
  - BHS/RHU: 52.6
  - Municipal Hospital: 2.4
  - District Hospital: 4.8
  - Regional Hospital/Public Medical Center: 8.0
  - Provincial Hospital: 4.2
  - Private Clinic: 7.0
  - Private Hospital: 11.5
  - Others: 2.3

- Quintile 2
  - BHS/RHU: 47.9
  - Municipal Hospital: 3.6
  - District Hospital: 4.2
  - Regional Hospital/Public Medical Center: 4.7
  - Provincial Hospital: 6.0
  - Private Clinic: 12.6
  - Private Hospital: 11.5
  - Others: 9.2

- Quintile 3
  - BHS/RHU: 36.0
  - Municipal Hospital: 13.0
  - District Hospital: 21.8
  - Regional Hospital/Public Medical Center: 5.9
  - Provincial Hospital: 9.7
  - Private Clinic: 11.8
  - Private Hospital: 5.9
  - Others: 3.3

- Quintile 4
  - BHS/RHU: 21.8
  - Municipal Hospital: 2.0
  - District Hospital: 4.1
  - Regional Hospital/Public Medical Center: 3.9
  - Provincial Hospital: 13.9
  - Private Clinic: 23.8
  - Private Hospital: 8.3
  - Others: 1.7

- Quintile 5 (richest)
  - BHS/RHU: 22.7
  - Municipal Hospital: 0.2
  - District Hospital: 2.6
  - Regional Hospital/Public Medical Center: 4.0
  - Provincial Hospital: 11.0
  - Private Clinic: 32.6
  - Private Hospital: 1.1
  - Others: 0.4

Quintile 1 (poorest) and Quintile 5 (richest) are the richest and poorest quintiles respectively.
ZFF Response: Health Change Model

(1) Leadership Change

- Leadership and Governance
- Improved Health System
- Targeted and Pro-Poor Health Programs
- Better Health Outcomes: Lower IMR, MMR & Malnutrition Rates; Lower Incidence of Communicable & Non-Communicable Diseases

(2) Improvements in WHO’s Six Building Blocks of Health System

- Leadership & Governance
- Service Delivery
- Health Workforce
- Access to Essential Medicines
- Financing
- Health Information System
### Lapuyan’s baseline health indicators

#### Intervention on Health Systems Transformation: Municipal Basic Health System’s Technical Roadmap

<table>
<thead>
<tr>
<th>Leadership &amp; Governance</th>
<th>Health Financing</th>
<th>Health Human Resource</th>
<th>Access to Medicine &amp; Technology</th>
<th>Health Information System</th>
<th>Health Service Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Municipal Health Action Plan</td>
<td>LGU Budget for Health (15% IRA)</td>
<td>Health Human Resource Adequacy at the RHU (MD 1:20,000) (Nurse 1:20,000)</td>
<td>RHU HHR Competency</td>
<td>Presence of Essential Medicine at the RHU (Stock Basis)</td>
<td>Accomplished Baseline Data Collection</td>
</tr>
<tr>
<td>Expanded and Functional Local Health Board</td>
<td>Actual budget Utilization (95% Utilization)</td>
<td>Full Implementation of Magna Carta for Public Health Workers</td>
<td>Installed Performance Management System</td>
<td>Data Collection, Utilization and Information Dissemination</td>
<td>Barangay Health Infrastructure</td>
</tr>
<tr>
<td>Functional Barangay Health Governance Body (with functional CHT)</td>
<td>BLGU Health Budget (5% of barangay IRA)</td>
<td>Health Human Resource Adequacy in BHS (1 Midwife: 1 Brgy, with consideration to GIDA) (BHW to HH 1:20HH)</td>
<td>RHU Medicine Tracking and Inventory System</td>
<td>Monthly Updated Health Data Board</td>
<td>Maternal and Child Care</td>
</tr>
<tr>
<td>Barangay Health Governance Plan</td>
<td>4-in-1 Accreditation</td>
<td>BHS HHR Competency (Basic BHW Training Course and CHT Training)</td>
<td>Drug Management System</td>
<td>Accomplishment, Utilization and Dissemination of the DILG, DOH LGU Scorecards</td>
<td>Maternal and Child Care Initiatives</td>
</tr>
<tr>
<td>Implemented and Integrated Barangay Health Plan</td>
<td>Regular IEC for Enrolled Indigent (for Q1 and Q2)</td>
<td>System for BHW Recruitment and Retention Mechanisms</td>
<td>Ratio of Community-Based Pharmacy (1 BNB/CBP catchment or 1 BNB per barangay)</td>
<td>Creation of CRizen’s Chratr</td>
<td>Sustainable Adolescent Reproductive Health Initiatives</td>
</tr>
<tr>
<td></td>
<td>Reimbursement Filing (PCB, MCP, TB-DOTS)</td>
<td>Ordinance and System for Claims Disposition and Utilization Monitoring</td>
<td></td>
<td></td>
<td>Reproductive Health</td>
</tr>
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<td>Ordinance and Timely Provision of BHW</td>
<td></td>
<td></td>
<td>Sustainable Family Planning Initiatives</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Provision of FP Commodities and Services (RHU)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Contraceptive Prevalence Rate (63%)</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>Unmet Needs (50% under NHTS)</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>Sanitary Toilets (86%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Access to Safe Water (87% of HH)</td>
</tr>
</tbody>
</table>

Source: WHO’s Six Building Block, modified
## Lapuyan’s health indicators, post-partnership

### Intervention on Health Systems Transformation: Municipal Basic Health System’s Technical Roadmap

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<td>RHU HHR Competency</td>
<td>Presence of Essential Medicine at the RHU (Stock Basis)</td>
<td>Presence of Barangay Health Stations (1 BHS:1 Braangay or 1 BHS per Catchment)</td>
</tr>
<tr>
<td>Expanded and Functional Local Health Board</td>
<td>Actual budget Utilization (95% Utilization)</td>
<td>RHU HHR Resource Allocation</td>
<td>RHU Medicine Tracking and Inventory System</td>
<td>Accomplished Baseline Data Collection</td>
<td>Maintenance and Operations</td>
</tr>
<tr>
<td>Functional Barangay Health Governance Body (with functional CHT)</td>
<td>BLGU Health Budget (5% of Barangay IRA)</td>
<td>Full Implementation of Magna Carta for Public Health Workers</td>
<td>Drug Management System</td>
<td>Regular Data Gathering and Recording</td>
<td>Utilization</td>
</tr>
<tr>
<td>Barangay Health Governance</td>
<td>4-in-1 Accreditation</td>
<td>Installed Performance Management System</td>
<td>Data Collection, Utilization and Information Dissemination</td>
<td>Maternal/Infant Death Review</td>
<td>Available Transportation for Emergency</td>
</tr>
<tr>
<td>Local Philhealth Administration</td>
<td>Regular IEC for Enrolled Indigent (for Q1 and Q2)</td>
<td>Health Human Resource Adequacy in BHS (1 Midwife: 1 Brgy; with consideration to GIDA) (BHW to HH 1:20HH)</td>
<td>RHU Medicine Tracking and Inventory System</td>
<td>Monthly Updated Health Data Board</td>
<td>Sustainable Maternal Health Care Initiatives</td>
</tr>
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<td>Barangay Health Governance</td>
<td>Reimbursement Filing (PCB, MCP, TB-DOTS)</td>
<td>BHS HHR Competency (Basic BHW Training Course and CHT Training)</td>
<td>Accomplishment, Utilization and Dissemination of the DILG, DOH LGU Scorecards</td>
<td>Accomplished Baseline Data Collection</td>
<td>Sustainable Breastfeeding for Infants (70%)</td>
</tr>
<tr>
<td>Barangay Health Plan</td>
<td>Ordinance and System for Claims Disposition and Utilization Monitoring</td>
<td>System for BHW Recruitment and Retention Mechanisms</td>
<td>Creation of Citizen’s Charter</td>
<td>Access to Safe Water (87% of HH)</td>
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Source: WHO’s Six Building Block, modified
MMR of Cohorts 1 to 3

- MMR values for Cohorts 1 to 3 are shown over the years from '10 to '13.
- The values are: '10 = 165, '11 = 58, '12 = 47, '13 = 49.
- The MDG target is 52, indicated by the horizontal line.

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ZueLLig Family Foundation
MMR of Cohorts 4 and 5

Cohort 4
- '11: 121
- '12: 45
- '13: 162

Cohort 5
- '11: 421
- '12: 331
- '13: 452

MDG = 52
Capiz (Panay) - 2 municipalities - 12,000 households

Romblon - 6 municipalities – no report

Masbate - 9 municipalities – no report

Samar - 14 municipalities – 58,000 households

Source: Richard Johnson and Patterson Clark / The Washington Post