#### Community- Based Health Programs: Struggles for Health, Education, and Social Care

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**Session:** 

**Community Health: Investigating Successes and Challenges** 

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CAPE TOWN SOUTH AFRICA

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#### **Declaration of Conflict of Interest:**

I declare that I do not have any conflict of interest in this undertaking.

My STTI Chapter, Iota Sigma, partly sponsored my participation in this conference while my organization supported my travel on official time.

I was part of the second wave of the Community Based Health Programs (1979-1985) and has been then an active advocate.



## Why am I here?

- Share lessons and insights, pieces of evidence on what works and what does not work in community health development work.
- Share stories of the struggles and contradictions of highly dedicated and committed health professionals as they inspire, advise, motivate, serve the people.
- Share what and how it is to journey with the community as we endeavor to close the gaps of inaccessibility and inequality in health care.



### **Community-Based Health Programs (CBHP)**

CBHP: An Approach honed by history Embraced, practiced and nurtured by the people

I have been part of community-based health programs (CBHPs) in the Northern Part of the Philippines, taking on the struggle for health, education and social care.







# Luzon

- Community Health Education, Services and Training \ in the Cordillera Region (CHESTCORE)
- 2. Community Based Health Development Program –(CBHDP-Isabela)
- 3. SARANAY, Isabela
- 4. CBHP-Nueva Ecija
- 5. Center for Environment & Development Services (CEDS) in Bulacan
- 6. San Jose Diocesan CBHP, Nueva Ecija (Canossa)
- 7. CBHP-Central Luzon
- 8. CBHP-Boso-Boso, Antipolo
- 9. Programa sa Pag-oorganisa sa Pangkalusugan sa Rizal (POPSIR)
- AUSCULTA Ambagan Udyok ng Sandiwaan ng mga Congregasyon may Ugnayan Lingkod sa Taong Aba (AOR: Southern Tagalog)
- 11. Bukluran (Palawan)
- 12. Pangkalusugang Samahan ng Magsasaka ng Kanlurang Mindoro (PASAMA-KAMI)
- 13. Samahang Pantribu ng mga Mangyan sa Mindoro (SPMM)
- 14. CANOSSA Health and Social Center, Silang, Cavite
- 15. Caysasay Development Center, Batangas
- 16. USWAG-P.O.
- 17. Tabang sa mga Biktima sa Bicol (TABI), Naga
- 18. SIPAG-KO, San Benito, Legaspi City



### **National Capital Region**

- 1. Tuazon Community Center Foundation, Inc. Marikina
- 2. Institute for Social Action, Miriam College
- 3. Rural Missionaries of the Philippines
- 4. Parañague Development Foundation, Inc. (PDFI)
- 5. Feed the Children- Parañaque
- 6. CANOSSA Health and Social Center Tondo
- 7. Community Medicine Development Foundation, Inc. (COMMED)







#### Visayas

- 1. MAKAPAWA
- 2. Leyte Community Development Center (LCDE)
- 3. Health Empowerment and Action in Leyte and Samar (HEALS)
- 4. Visayas Primary Health Care Services, Cebu-Bohol
- 5. Health Education and Services f or the Less Privileged (HELP-Panay)
- 6. Negros Island Health Integrated Program(NIHIP)
- 7. Franciscan Mountain Clinics, Negros Oriental
- 8. Katilingbanon nga Programa ha Panlawas han Samar (KAPPS)



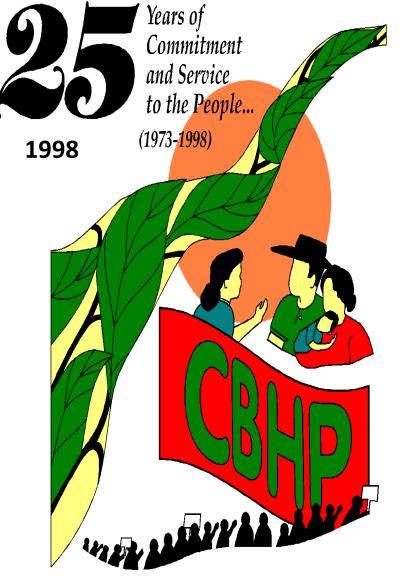
#### Mindanao

- Community-Based Health Services Association (CBHSA)
- 2. Community Based Health Services NMR Inc.
- 3. CBHP-Butuan
- 4. CBHP-Tandag
- 5. Health Services for Community Development
- 6. Religious of the Good Shepherd TFM Health Program
- 7. Missionary Sisters of Mary-Alternative Health Program
- 8. Urban Integrated Health Services (UIHS)
- 9. KAABAY
- Brokenshire Integrated Health Ministries, Community Health and Dental Center
- 11. Community Primary Health Care SOCSKSARGENDS
- 12. Zamboanga Peninsula Health Extension Program (ZPHEP)
- 13. CBHP-Zamboanga del Norte
- 14. CBHP-Zamboanga del Sur
- 15. CBHS- Misamis Occidental
- 16. Ipil Prelature, Zamboanga del Sur





Stage and Time Period	Description
Stage I: (1973-1975)	Conceptualization of a Developmental Approach to Health Care For and By the People
Stage II: (1976-first half, 1977)	Promotion of a New Approach to Health Care
Stage III: (Second half, 1977-1978)	Community Organization: the Backbone and Key to Success;
Stage IV: (1979-1980)	The Growth of People's Organization through Refined Organizing Methods
Stage V: (1981-1985)	Growth and Strengthening of CBHPs
Stage VI: (1985- 1988)	Setback Years
Stage VII: (1989-1995)	Reorientation and Reaffirming Commitment to CBHPs
Stage VIII: 1996-2000	Facing the challenges, resolutely continue community-based approach to health
Stage IX: 2001-2010	Continuing Struggle and Service to the People
Stage X: 2011-present	Continuing struggle and service: Asserting the right to health towards social transformation



#### 2008









working for people's health, struggling for social change

35 years of Community-Based Health Programs in the Philippines



CBHPs@40: Apatnapung Taon ng Puspusang Pakikibaka at Paglilingkod sa Sambayanan

ONWARD WITH THE STRUGGLE FOR SOCIAL CHANGE!



# 'Serving the people is what we do best'

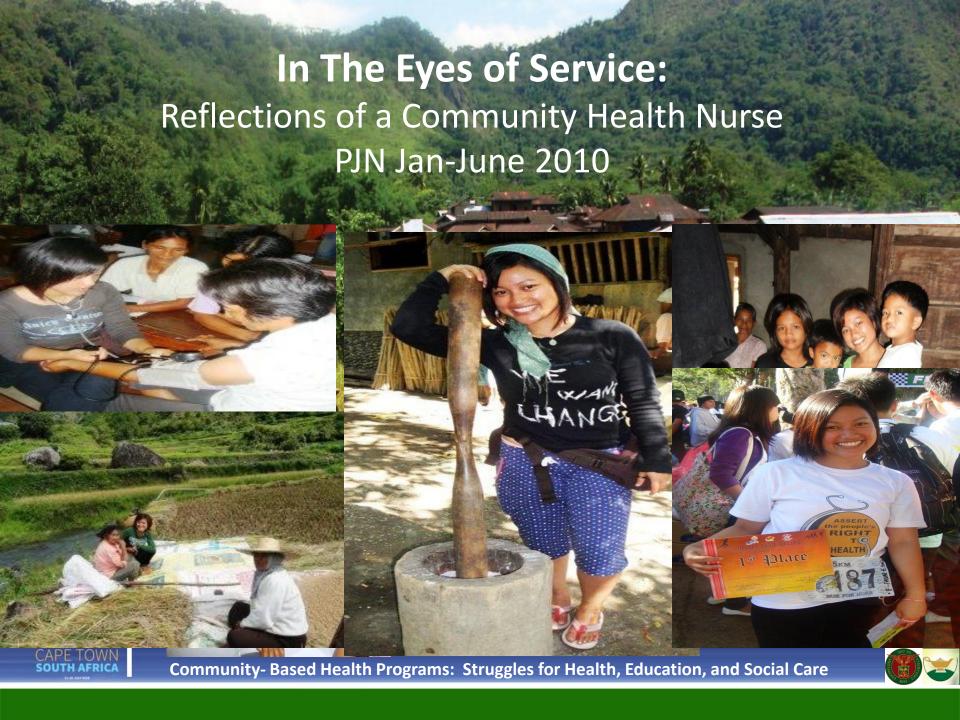












# **Community-based health programs**

- "working for people's health and struggling for social change"
- a process and as an approach to working with the community in response to identified health needs













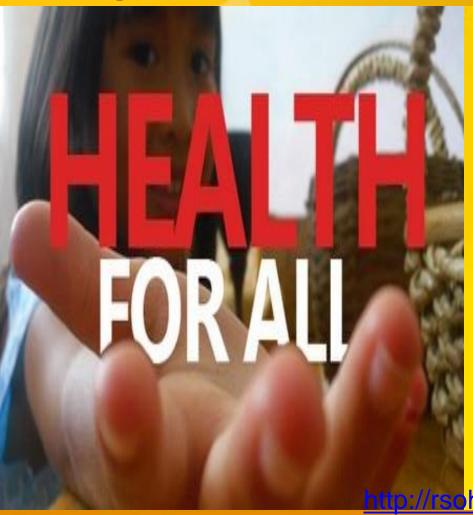
- •Awareness of the socio-cultural determinants of health.
- •Current health system as viewed from a historical, anthropological, economic and political perspective



For one to be able to change a system, one must be able to understand how the present system works.



# Principles of Primary Health Care and it's importance in achieving for Health for All





Primary Health Care and Stewardship:
Importance in Community Health

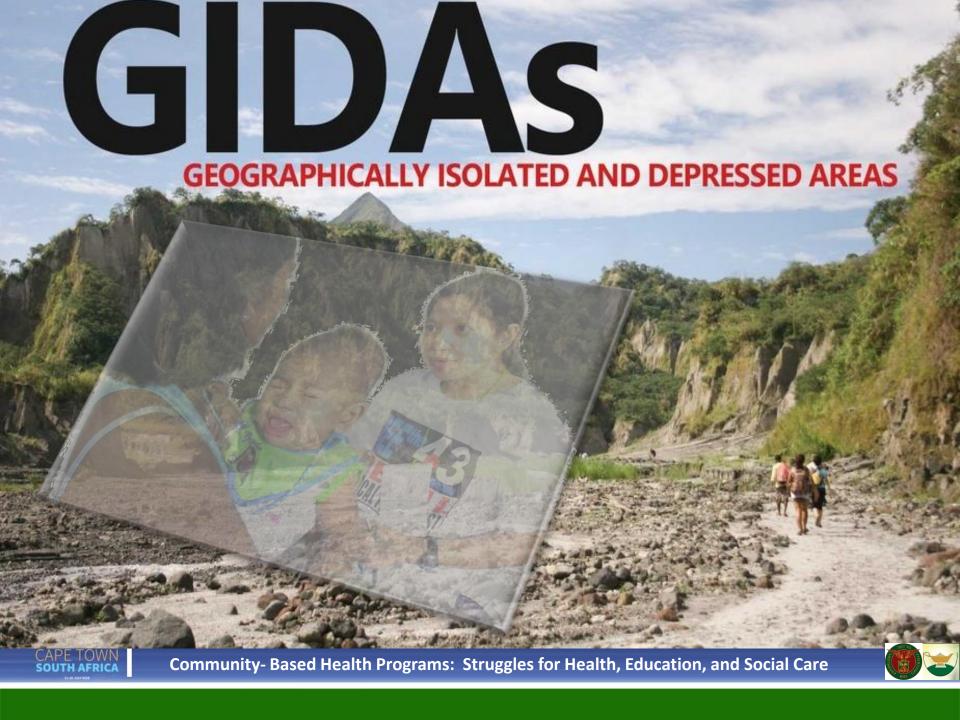
PRIMARY HEALTH CARE

USSR-ALMA-ATA 1978

http://rsohealthsummit.webs.com/model-congress







#### CBHP...

- Health Education on Prevention of Diseases
- Health Skills Training
- Patient Referral Network
- Livelihood Trainings
- Patient Database and Information Dissemination
- Resource Generation & Knowledge Sharing
- Partnership building



## **CBHP Strategies**

- Organizing and networking
- Advocacy and public information
- Education and training
- Provision of basic health services





simple mobile paramedic training team to a nationwide formation that is laying down the foundation for an alternative health care system that is nurtured, developed and defined by the people in the communities because it is their own health program.







...communities have high levels of unity and cooperation among community members and a sense of security concerning basic health needs...







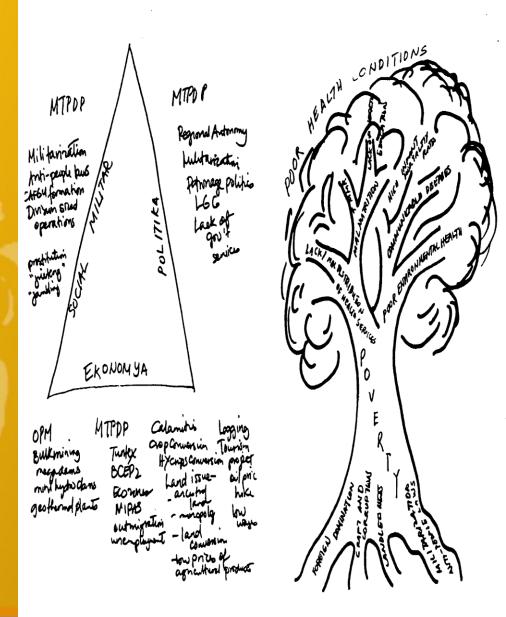
There are dedicated volunteer community health workers who:

- know how to prevent and manage common diseases;
- are capable of meeting health emergencies, and
- are greatly trusted by their neighbors



- The community
   members understand
   why they get sick....
- they know not only the medical reasons but...
- also the interrelationship of socioeconomic political problems

...in the community and country as a whole







### From learners to community health workers



#### For Acapulco Ointment

#### Ointment

- · 1 glass of chopped acapuico leaves
- . 1 glass cooking oil

Heat plant in oil to make oil extract. Mix 1 glass of the extract to 2 sticks small white candle (wick removed) or petroleum jelly. Transfer to clean containers while still hot then let it cool. Apply to affected part 2 to 3X a day.



















...dramatic change in the personality, attitude and capacity of our once timid, superstitious, subservient and passive, and socalled "ordinary" folks...





- The people have organized themselves to solve problems that affect their health and life.
- Find channels to voice out problems and collectively analyze their situation









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# Go in search of your people...

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COMMUNITY-BASED RESEARCH



**Livelihood Trainings Resource Generation** 

**Alternative Health Care Modalities** 

Technologies for field/community health use

http://rsohealthsummit.webs.com/model-congress





#### Conclusion

#### **CBHPs** continue to....

- empower communities, Local Government Units and key stakeholders toward good governance for health
- generate Local Government Unit and community commitment to manage and sustain health care
- strengthen multi sectoral linkages
- improve access and provision of health services to GIDAs





## For Community Health to Succeed:

- 1. The community knows, feels and accepts responsibility for community health, not just the health of the individual;
- 2. The community taps and develops its own resources to meet health needs, including personnel and material resources, organizations and institutions at all levels; and
- 3. Community priorities are the priority focus of the programs.



TOUCH LIVES

BE A COMMUNITY VOLUNTEER

GET INVOLVED WITH THE COMMUNITY BASED HEALTH PROGRAMS



GET IN TOUCH WITH THE PEOPLE
GET IN TOUCH WITH US

- This story is a celebration of committed health professionals and people's efforts and achievements in their movement for social change.
- These lessons found their way to curricular development and changes as well as related learning experiences of student nurses.
- These form evidences of tested strategies that aid community health nurses more relevant and effective in the delivery of community health services.





#### References:

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# Thank you...

