

SEVENTEENTH CONGRESS)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

'17 - MAY -3 P4:03

S E N A T E
P.S. Res No. 360

RECEIVED BY: J

Introduced by Senators LOREN LEGARDA, SONNY M. ANGARA, MARIA
LOURDES BINAY, GREGORIO B. HONASAN II, RISA HONTIVEROS,
FRANCIS N. PANGILINAN, GRACE N. POE, RALPH G. RECTO,
CYNTHIA A. VILLAR

RESOLUTION

EXPRESSING THE SUPPORT OF THE PHILIPPINE SENATE FOR THE RESUMPTION OF THE PEACE TALKS BETWEEN THE GOVERNMENT OF THE REPUBLIC OF THE PHILIPPINES (GRP) AND THE NATIONAL DEMOCRATIC FRONT OF THE PHILIPPINES (NDFP) FOR THE ATTAINMENT OF JUST AND LASTING PEACE IN THE COUNTRY

WHEREAS, on August 22-26, 2016, the Government of the Republic of the Philippines (GRP) and the National Democratic Front of the Philippines (NDFP) resumed peace negotiations aimed at ending the decades-old armed conflict. Both parties agreed to accelerate the talks based on previously signed agreements and, in the spirit of goodwill, declared separate indefinite, unilateral ceasefires;

WHEREAS, during the second round of the talks held October 6-10, 2016 in Oslo, Norway, common outlines and frameworks were adopted by both parties on the three remaining substantive agenda: 1) Social and Economic Reforms, 2) Political and Constitutional Reforms, and 3) End of Hostilities and Disposition of Forces;

WHEREAS, on the third round of talks held January 19-25, 2017 in Rome, Italy, both panels achieved progress on the following areas:

- Breakthrough in the discussion on the Comprehensive Agreement on Social and Economic Reforms (CASER), a landmark document that shall address the country's chronic poverty situation, with both parties reaching an agreement in principle on the first four items of the draft, which includes free land distribution to landless farmers;
- Agreement to form Bilateral Working Teams of Reciprocal Working Committees (RWCs) in order to accelerate the drafting of CASER;
- Exchange of drafts and initial discussion on Political and Constitutional Reforms;
- Signing of a Supplementary Agreement for the operationalization of the Joint Monitoring Committee (JMC) for the implementation of

the Comprehensive Agreement on Respect for Human Rights and International Humanitarian Law (CARHRIHL);

- Agreement of both parties to discuss GRP's proposal for a bilateral ceasefire on February 22-25, 2017 in the Netherlands and to hold the fourth round of talks on April 2-6, 2017 in Oslo, Norway;

WHEREAS, after a series of clashes between the Armed Forces of the Philippines (AFP) and the New People's Army (NPA), and in response to the announcement by the NPA that it is lifting its unilateral ceasefire, the peace negotiations were terminated on February 5, 2017;

WHEREAS, after over a month of suspended negotiations, a joint statement from the Government of the Republic of the Philippines (GRP) and the National Democratic Front of the Philippines (NDFP) was released expressing the willingness of both parties to resume formal peace talks and reinstate unilateral ceasefire declarations;

WHEREAS, the most compelling reason to continue the peace talks is peace itself. The talks are a means of ending the armed conflict by addressing its roots – poverty, inequality, injustice and underdevelopment. It is our people's desire to see the talks achieve its ultimate goal of a just and lasting peace;

NOW, THEREFORE, BE IT RESOLVED, AS IT IS HEREBY RESOLVED, that the Senate of the Philippines support the resumption of peace negotiations between the Government of the Republic of the Philippines (GRP) and the National Democratic Front of the Philippines (NDFP) for the attainment of just and lasting peace in the country.

Adopted,



SONNY M. ANGARA



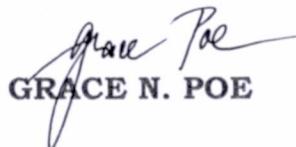
LOREN LEGARDA


MARIA LOURDES BINAY

GREGORIO B. HONASAN II


RISA HONTIVEROS

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SEVENTEENTH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

17 MAY -3 P 3:00

SENATE

RECEIVED BY: J

SENATE BILL NO. 1433

Introduced by **SENATOR LEILA M. DE LIMA**

AN ACT
INSTITUTING A NATIONAL COMPREHENSIVE PROGRAM FOR THE
PREVENTION, EARLY DETECTION, DIAGNOSIS, AND TREATMENT OF
PERSONS WITH AUTISM SPECTRUM DISORDERS AND FOR OTHER
PURPOSES

Explanatory Note

The Constitution mandates the State to protect and promote the right to health of the people¹ and endeavor to make health services available to all people at affordable cost, with priority for the needs of children and the disabled.²

Autism is a highly variable neurodevelopmental disorder that first appears during infancy or childhood, and generally follows a steady course without remission. Overt symptoms gradually begin after the age of six months, become established by age two or three years, and tend to continue through adulthood. It is distinguished not by a single symptom, but by a characteristic triad of symptoms: difficulties in social interaction; impairments in communication; and restricted interests and repetitive behavior.

Experts estimate that 3 to 6 children out of every 1,000 will have autism. In the Philippines, it is estimated that 1 out of every 500 Filipinos suffer from autism or approximately 200,000 Filipinos out of a 100 million total population. Recent studies further strongly suggest that some people have a genetic predisposition to autism. In families with one autistic child, the risk of having a second child with the disorder is approximately 5 percent, or one in 20.

Autism is a developmental disability that has yet to be fully known and understood in the Philippines. And because of the lack of educational and financial support, it is only the upper and middle class families who can afford to send their

¹ Article II, section 15, 1987 Constitution.

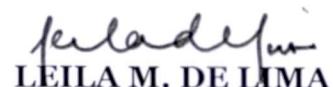
² Article XIII, section 11, 1987 Constitution.

autistic children to special schools. Undeniably, addressing the needs of these individuals in our country would require a comprehensive legislative framework and integrated operational plan for autism. Currently, there is no national data tracking system that caters to the state of autism in the country. A registry for autism is needed to improve current knowledge and understanding of autism, to conduct thorough and complete epidemiologic surveys of the issue, and to plan for and provide services to children with autism as well as to their families.

Furthermore, there is a shortage of trained and highly skilled teachers and health providers to handle and cater to the special needs of children and adults with autism. These considerations reflect the urgent need to conduct a comprehensive training program for health providers all over the country in order to help these persons suffering from the disorder cope with their condition and participate as productive members of society.

This bill seeks the creation of a national roadmap for addressing autism through the establishment of the Autism Council of the Philippines and aims to increase public awareness about this psychological disorder as a national health issue. To alleviate the plight of thousands of families struggling with the costs for its detection and treatment, this bill provides for mandatory PhilHealth coverage for persons with autism, in addition to the benefits provided for persons with disabilities under existing laws.

In view of the foregoing, early approval of this measure is requested.


LEILA M. DE LIMA

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SENATE

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SENATE BILL NO. 1433

Introduced by **SENATOR LEILA M. DE LIMA**

AN ACT
INSTITUTING A NATIONAL COMPREHENSIVE PROGRAM FOR THE
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PERSONS WITH AUTISM SPECTRUM DISORDERS AND FOR OTHER
PURPOSES

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

- 1 **Section 1.** *Short Title.* - This Act shall be known as the "Autism Care Act of 2017".
- 2 **Sec. 2.** *Declaration of Policy.* – It is hereby declared the policy of the State to protect and promote the right to health of the people, including the rights of persons with autism to full, healthy and holistic development. As such, the State shall promote an environment conducive to the development of autistic persons to become, to the best of their potentials, independent, self-reliant and productive members of society.
- 7 Towards this end, the State commits itself to the establishment of institutional and social mechanisms to support children and adult persons with autism and their families. In this light, the State shall institutionalize a holistic program for persons with autism in the country that will be sensitive to their needs for purposes of empowering and providing them quality of life.
- 12 **Sec. 3.** *Definition of Terms.* – As used in this Act, the following terms shall mean:

- 1 (a) “Autism or Autism Spectrum Disorder” refers to a range of conditions
2 characterized by challenges with social skills, repetitive behaviors,
3 speech and nonverbal communication, as well as by unique strengths
4 and differences. It includes autism disorder, Asperger syndrome, Rett's
5 syndrome, and pervasive developmental disorders not otherwise
6 specified.
- 7 (b) “Diagnosis” refers to medically necessary assessments, evaluations
8 including neuropsychological evaluations, genetic testing or other tests
9 to diagnose whether an individual has one of the autism spectrum
10 disorders.
- 11 (c) “Treatment” refers to those that are medically necessary, appropriate,
12 effective or efficient and shall include evaluation and assessment
13 services; behavior training and management and applied behavior
14 analysis; habilitative or rehabilitative care, including occupational,
15 physical or speech therapy; pharmacy care and medication; psychiatric
16 care; psychological care; and therapeutic care.

17 **Sec. 4. Epidemiological Surveillance Programs.** – The National Institutes of Health
18 (NIH) is hereby mandated to conduct an annual epidemiological survey to determine
19 the extent and total incidence and prevalence of persons with autism in the country in
20 order for the government to provide the necessary and appropriate interventions to
21 address the needs faced by persons with autism.

22 The NIH is further mandated, in coordination with the Department of Health
23 (DOH), to strengthen its research focus on autism; to renew its investment into basic
24 and clinical research; to expand its research into the link between environmental
25 factors and autism; and to continue investigations into causation, diagnosis, early

1 detection, and treatment of autism spectrum disorders. Such factors that will be
2 studied shall include, among others, infection and immune function, hormonal and
3 reproductive factors, genetic factors, gastro-intestinal factors, and socio-demographic
4 factors.

5 **Sec. 5. Prevention of Conflict of Interest in the Research Process.** – Within six (6)
6 months from the date of effectivity of this Act, the DOH shall issue the necessary
7 standards, guidelines, and regulations in order to ensure that there is no conflict of
8 interest, whatsoever, between the research agenda of the researchers and the drug
9 manufacturers or government agencies promoting the use of a particular vaccine or
10 medicine for the treatment and rehabilitation of persons with autism. The DOH shall
11 ensure the timely publication and dissemination of information of these guidelines
12 and regulations in order to ensure that the various health providers and stakeholders
13 all over the country are adequately informed.

14 **Sec. 6. Autism Council of the Philippines.** – There is hereby created an Autism
15 Council of the Philippines (“Council”) under the DOH which shall serve as an inter-
16 agency and multi-sectoral mechanism tasked to promote the implementation of the
17 National Autism Program of the government. The Council shall endeavor:

- 18 (a) to promote public awareness, education, and information on issues
19 concerning autism;
- 20 (b) to establish sustainable networks of support groups for families of
21 children and adults with autism;
- 22 (c) to provide referral services to patients with autism and identify the
23 appropriate educational and medical expertise and facilities suited to
24 their needs;

- 1 (d) to combat the spectrum of disorders related to autism through
2 screening, education, early intervention, prompt referrals for treatment
3 and services;
- 4 (e) to undertake research and/or collaborate with other entities on
5 research activities regarding autism in the Philippines;
- 6 (f) to coordinate with schools in formulating individualized programs for
7 school children and young students with autism;
- 8 (g) to receive donations and grants from international donor institutions,
9 foundations, and multilateral and bilateral foreign donor agencies
10 involved in the prevention, cure and rehabilitation of persons with
11 autism;
- 12 (h) to promote the advocacy against bias and stereo-typing against persons
13 with autism thereby eliminating discrimination and/or misconceptions
14 of the notion of being autistic with the end in view of opening the doors
15 of productive economic opportunities to persons with autism;
- 16 (i) to provide the avenue for exchange of information, exchange programs
17 and sharing of best practices on issues relating to the early detection,
18 prevention, cure, treatment, and rehabilitation of persons diagnosed
19 with autism;
- 20 (j) to network with other organizations, institutions and professionals
21 working for the promotion of legislation and public programs for
22 persons diagnosed with autism; and
- 23 (k) to assist in the creation of appropriate programs for individuals
24 diagnosed with autism.

1 **Sec. 7. Composition of the Autism Council of the Philippines.** – The Council shall be
2 headed by the Secretary of Health as the Chairperson. It shall be composed of the
3 following members:

- 4 (a) The Secretary of Social Welfare and Development;
- 5 (b) The Secretary of Education;
- 6 (c) The Chairperson of the Council for the Welfare of Children (CWC);
- 7 (d) The Chairperson of the National Council on Disability Affairs (NCDA);
- 8 (e) The Head of the NIH;
- 9 (f) The Head of the Philippine Information Agency (PIA);
- 10 (g) One (1) representative from the duly accredited drug and vaccine
11 manufacturers and distributors;
- 12 (h) One (1) representative from the duly accredited association of
13 caregivers in the Philippines;
- 14 (i) One (1) representative from the duly accredited association of nurses in
15 the Philippines;
- 16 (j) One (1) representative from the duly accredited association of medical
17 doctors in the Philippines; and
- 18 (k) One (1) representative from the non-governmental organizations
19 (NGOs) involved in the advocacy for the prevention, cure and
20 rehabilitation of persons with autism.

21 The five (5) members of the Council coming from the representatives of the drug
22 and vaccine manufacturers and distributors; caregivers; nurses; medical doctors and
23 non-governmental organizations shall be appointed by the President of the
24 Philippines, from a list of three (3) nominees from each sector, who shall serve for a
25 term of three (3) years, and renewable for another term: *Provided*, That the person
26 appointed shall be of good moral character, of unquestionable integrity, and with

1 expertise and experience of at least six (6) years in the field of autism, mental health
2 and other related fields: *Provided, further,* That in the event of a vacancy, the
3 successor appointed to fill the same shall serve only the unexpired portion of the term
4 of the member he/she succeeds to.

5 The members of the Council from the government agencies and institutions
6 may designate their permanent representatives who shall have a rank not lower than
7 an assistant secretary or its equivalent to attend meetings.

8 All members of the Council shall receive emoluments as may be determined by
9 the Council, in accordance with existing budget and accounting rules and regulations.

10 **Sec. 8. Meetings.** – The Council shall meet at least once a month upon a three-day
11 notice signed by the Chairperson or as often as necessary upon the written request
12 signed by two-thirds (2/3) of its members. The presence of a majority of the members
13 of the Council shall constitute a quorum in order for it to conduct its business.

14 **Sec. 9. Programs and Services of the Autism Council of the Philippines.** – The
15 programs and services that will be provided by the Council shall include, among
16 others, the following:

- 17 (a) Orientation and counselling services for families of newly diagnosed
18 children with autism;
- 19 (b) Establishment of Family Support Networks and Sibling Program for
20 families of persons with autism to seek psycho-social support for the
21 various problems they face;
- 22 (c) Establishment of National and Regional Referral Services wherein the
23 Council will update a list of professionals and child care institutions
24 concerned with the care and development of persons with autism;

- (d) Publication of reading materials, manuals and easily readable instruction materials for autism early detection, prevention, rehabilitation and care;
 - (e) The conduct of continuing education, information and training programs and lectures on the proper handling of persons with autism;
 - (f) The establishment of a databank and information and monitoring system (IMS) on the demographic, socio-economic and incidence and prevalence of persons with autism in the country;
 - (g) The publication of a newsletter on current developments, resources and research on autism; and
 - (h) The conduct of continuing education/training of families, teachers, therapists and caregivers of persons with autism through seminars, conventions and other forms of tri-media educational tools.

Sec. 10. Early Identification and Intervention for Children with Autism. – The Council is hereby mandated to establish a program for early identification, screening, and detection of autism, and to provide the appropriate services to children and toddlers with developmental delays associated with autism. The Council is tasked to monitor and update the list of children diagnosed with autism in the country in its central registry so that such persons may be referred to programs of the government, should the same become available.

Sec. 11. Treatment as Persons with Disabilities. – All persons with autism shall be treated as persons with disability as defined under Republic Act No. 7277, as amended. As such, they shall be entitled to all the rights, privileges and benefits provided for persons with disabilities under existing laws.

1 **Sec. 12. Mandatory PhilHealth Coverage.** – All persons with autism shall be covered
2 by the National Health Insurance Program of the Philippine Health Insurance
3 Corporation (PHIC). Funds necessary to ensure the enrolment of all persons with
4 autism who are not currently covered under any existing category shall be sourced
5 from the National Health Insurance Fund of PHIC earmarked from the proceeds of sin
6 tax collections as provided for in Republic Act No. 10351. It shall likewise include the
7 cost of early detection and screening programs as one of the available benefits of its
8 members.

9 **Sec. 13. Continuing Education and Training of Health Personnel and Service**
10 *Providers on Autism.* – All DOH, DSWD, CWC, NCDA officers and their staff in charge
11 with providing various developmental and welfare services to persons with autism are
12 mandated to undergo a mandatory continuing education and training program to
13 sensitize and empower service providers to become effective frontliners in the delivery
14 of health service to persons with autism.

15 **Sec. 14. Protection against Forceable Use of Cures and Vaccines.** – The DOH shall
16 formulate the necessary guidelines, standards and procedures against the forcible use
17 of cures, vaccines, and therapies to persons diagnosed with autism in order to uphold
18 the right of every individual to give informed consent to medical treatment
19 administered to them as well as to protect their right to determine for themselves the
20 medical treatment to which they shall be subjected.

21 The DOH shall promulgate guidelines and standards to ensure that the
22 interventions and programs being provided by the government for persons diagnosed
23 with autism do not violate their basic human rights, particularly as regards their right
24 to determine their own decisions.

1 **Sec. 15. Protection against Discrimination in Schools.** – The Department of
2 Education (DepEd), in coordination with the DOH, Department of Social Welfare and
3 Development (DSWD), CWC, and the NIH, shall formulate the necessary
4 implementing rules and regulations to ensure that all educational institutions shall be
5 free from policies and regulations discriminatory to school children and young
6 students suffering from autism. Towards this end, the DepEd shall conduct an annual
7 education, information, and training program for school administrators, faculty, and
8 staff to empower them to effectively handle school children and young students
9 suffering from autism.

10 **Sec. 16. Non-Discrimination of Adults Suffering from Autism.** – Within six (6)
11 months from the date of effectivity of this Act, the Council shall formulate the
12 necessary guidelines, standards, and regulations in order to ensure that adults with
13 autism are not discriminated against due to their condition. The Council shall ensure
14 the timely publication and dissemination of information of these guidelines and
15 regulations in order to ensure that the various stakeholders all over the country in the
16 early detection, prevention, rehabilitation, and care of persons with autism are
17 adequately informed.

18 **Sec. 17. Confidentiality of Medical Information for Persons with Autism.** – To ensure
19 that the early detection, screening tests, vaccination, medical treatment, and
20 rehabilitation of persons suffering from autism are implemented, the DOH, in
21 consultation with the Department of Justice (DOJ), shall formulate the pertinent
22 implementing rules and regulations to ensure the confidentiality of the medical
23 records of persons suffering from autism in order to protect the unwarranted intrusion
24 into the privacy of the person, particularly in relation to the medical condition of the
25 patient.

1 **Sec. 18.** *Appropriation.* – The amount necessary to carry out the provisions of this
2 Act shall be included and incorporated in the annual general appropriations of the
3 DOH.

4 **Sec. 19.** *Implementing Rules and Regulations.* – Within six (6) months from the date
5 of effectivity of this Act, the DOH, in coordination with the DSWD, DepEd, CWC, NIH,
6 NCDA, and PIA, shall promulgate the necessary implementing rules and regulations
7 to implement the provisions of this Act.

8 **Sec. 20.** *Separability Clause.* - If any provision of this Act is declared invalid or
9 unconstitutional, the provisions not affected thereby shall continue to be in full force
10 and effect.

11 **Sec. 21.** *Repealing Clause.* - All laws, executive orders, presidential decrees,
12 presidential proclamations, letters of instruction, rules and regulations or parts
13 thereof inconsistent with the provisions of this Act are hereby repealed or modified
14 accordingly.

15 **Sec. 22.** *Effectivity.* - This Act shall take effect fifteen (15) days following its
16 publication in the Official Gazette or in two (2) newspapers of general circulation in
17 the Philippines.

18 Approved,