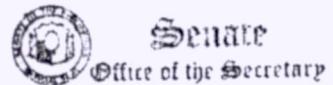


EIGHTEENTH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)



SENATE

S. No. 855

'19 AUG -5 P1 :45

Introduced by SENATOR LEILA M. DE LIMA ~~ED BY~~ J

**AN ACT
INSTITUTING A NATIONAL COMPREHENSIVE PROGRAM FOR THE
PREVENTION, EARLY DETECTION, DIAGNOSIS, AND TREATMENT OF
PERSONS WITH AUTISM AND OTHER DEVELOPMENTAL
DISABILITIES 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 people with disabilities (PWDs)².

Based on the 2010 Census of Population and Housing (CPH)³, approximately 1.44 million persons had some form of disability out of a population of 92.1 million. This amounted to roughly 1.57 percent of the total population at the time. With the Philippine population set to balloon to 109 million by the end of 2019⁴, the number of PWDs also figures to increase proportionally. This means that the country may have up to 1.71 million PWDs by then.

Nevertheless, these are merely estimates and the real figure itself is difficult to determine as the lack of relevant and up-to-date data makes the tasks of tracking, monitoring, and delivering basic social services to PWDs in the Philippines extremely problematic and challenging.

When the State falls short of fulfilling its duty to protect and promote the rights of PWDs, the responsibility of caring for PWDs, more often than not, is borne

¹ Article II, Section 15, 1987 Constitution.

² Article XIII, Section 11, 1987 Constitution.

³ Retrieved from <https://psa.gov.ph/content/persons-disability-philippines-results-2010-census>

⁴ Cepeda, M. (2018). *Philippine population to hit 109 million by end-2019* – PopCom. Retrieved from <https://www.rappler.com/nation/219798-philippine-population-2019>

primarily by their immediate families and other relatives. Unsurprisingly, the cost of living for PWDs is higher than that of non-disabled persons. According to studies, a vast majority of PWDs are poor and PWDs in poverty often face economic problems due to things like additional medical treatment, rehabilitation and access to education⁵. PWDs and their families are also confronted with the additional burden of discrimination due to the general public's lack of knowledge, awareness, and understanding of their situational contexts. In some cases, the discrimination comes from within the families of the PWDs themselves⁶.

Persons with developmental disabilities constitute a subset of PWDs whose disabilities usually become apparent during infancy or childhood and are marked by delayed development or functional limitations especially in learning, language, communication, cognition, behavior, socialization, or mobility. Developmental disabilities result in functional limitations in three (3) or more areas of major life activity, namely, 1) self-care; 2) receptive and expressive language; 3) learning; 4) mobility; 5) self-direction; 6) capacity for independent living; and 7) economic self-sufficiency.

These impairments are often invisible to the naked eye and are thus much harder to identify than physical disabilities. Additionally, persons with developmental disabilities are placed in a precarious position due to the social and cultural stigmas attached with the nature of their disability. Society's lack of understanding and general insensitivity towards these persons leads to ridicule, violence and further alienation. These words and actions contribute to the legitimization of the dominant political discourse surrounding PWDs and the perception that they are simply nuisances undeserving of a place in mainstream Philippine society.

State neglect forces these individuals and their families to find solutions to complex, multi-dimensional issues surrounding poverty and disability. Under this arrangement, only those who belong to the upper- and middle-classes can afford to care for their family members who are PWDs. The lack of institutional support for PWDs, in general, and persons with developmental disabilities, in particular, leave those impoverished families living with PWDs highly vulnerable to being

⁵ Retrieved from <https://borgenproject.org/disabled-people-in-poverty/>

⁶ Shahani, L. R. (2014). *Stories of Silence: Deaf women and sexual abuse*. Retrieved from <https://news.abs-cbn.com/focus/10/20/14/stories-silence-deaf-women-and-sexual-abuse>

overwhelmed by the sheer economic and social costs of this burden. The State's failure to integrate these individuals into mainstream Philippine society leaves them further marginalized and disempowered and greatly inhibits them from escaping the vicious cycle of poverty.

Undeniably, addressing the needs of these individuals in our country would require a comprehensive legislative framework and integrated operational plan for developmental disabilities.

Currently, there is no national data tracking system that caters to the state of developmental disabilities in the country. In order to improve our current knowledge and understanding of developmental disabilities, a national registry is needed to conduct thorough and complete epidemiologic surveys of the issue, as well as to plan for, and provide services to, children with developmental disabilities and 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 developmental disabilities. 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 cope with their condition and participate as productive members of society.

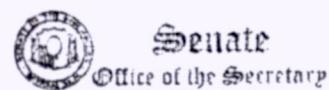
This bill seeks the creation of a national roadmap for addressing developmental disabilities through the establishment of the Developmental Disability Council of the Philippines (DDCP) and aims to increase public awareness of developmental disabilities and treat it as a national health issue. To alleviate 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 developmental disabilities, in addition to the benefits provided for PWDs under existing laws.

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



LEILA M. DE LIMA

EIGHTEENTH CONGRESS OF THE)
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SENATE
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RECEIVED BY: *(Signature)*
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 AND OTHER DEVELOPMENTAL
DISABILITIES AND FOR OTHER PURPOSES**

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

1 Section 1. *Short Title.* – This Act shall be known as the “Integrating Persons
2 with Autism and other Developmental Disabilities (IPADD) Act of 2019”.

3 Sec. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to
4 protect and promote the right to health of the people, including the rights of persons
5 with developmental disabilities to full, healthy and holistic development. As such, the
6 State shall promote an environment conducive to the development of persons with
7 developmental disabilities to become, to the best of their potentials, independent,
8 self-reliant and productive members of society.

9 Towards this end, the State commits itself to the establishment of institutional
10 and social mechanisms to support children and adult persons with developmental
11 disabilities and their families. In this light, the State shall institutionalize a holistic
12 program for persons with developmental disabilities in the country that will be
13 sensitive to their needs for purposes of empowering and providing them quality of
14 life.

15 Sec. 3. *Definition of Terms.* – As used in this Act, the following terms shall
16 mean:

1 (a) *Developmental Disability* – refers to a severe, chronic disability which
2 usually becomes apparent during infancy or childhood and are marked by delayed
3 development or functional limitations especially in learning, language,
4 communication, cognition, behavior, socialization, or mobility. Developmental
5 disabilities include autism, cerebral palsy, Down syndrome, fetal alcohol syndrome,
6 and spina bifida, among others. Developmental disabilities result in functional
7 limitations in three (3) or more areas of major life activity, namely, 1) self-care; 2)
8 receptive and expressive language; 3) learning; 4) mobility; 5) self-direction; 6)
9 capacity for independent living; and 7) economic self-sufficiency.

10 (b) *Diagnosis* – refers to medically necessary assessments, evaluations
11 including neuropsychological evaluations, genetic testing or other tests to diagnose
12 whether an individual has a developmental disability.

13 (c) *Treatment* – refers to those that are medically necessary, appropriate,
14 effective or efficient and shall include evaluation and assessment services; behavior
15 training and management and applied behavior analysis; rehabilitative or
16 rehabilitative care, including occupational, physical or speech therapy; pharmacy
17 care and medication; psychiatric care; psychological care; and therapeutic care.

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

24 The NIH is further mandated, in coordination with the Department of Health
25 (DOH), to strengthen its research focus on developmental disabilities; to renew its
26 investment into basic and clinical research; to expand its research into the link
27 between environmental factors and developmental disabilities; and to continue
28 investigations into causation, diagnosis, early detection, and treatment of
29 developmental disabilities. Such factors that will be studied shall include, among
30 others, infection and immune function, hormonal and reproductive factors, genetic
31 factors, gastro-intestinal factors, and socio-demographic factors.

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

10 Sec. 6. *Developmental Disability Council of the Philippines.* – There is hereby
11 created a Developmental Disability Council of the Philippines (“Council”) under the
12 DOH which shall serve as an inter-agency and multi-sectoral mechanism tasked to
13 promote the implementation of the National Developmental Disability Program of
14 the government. The Council shall endeavor to:

15 (a) Promote public awareness, education, and information on issues
16 concerning developmental disabilities;

17 (b) Establish sustainable networks of support groups for families of children
18 and adults with developmental disabilities;

19 (c) Provide referral services to patients with developmental disabilities and
20 identify the appropriate educational and medical expertise and facilities suited to
21 their needs;

22 (d) Undertake research and/or collaborate with other entities on research
23 activities regarding developmental disabilities in the Philippines;

24 (e) Coordinate with schools in formulating individualized programs for school
25 children and young students with developmental disabilities;

26 (f) Receive donations and grants from international donor institutions,
27 foundations, and multilateral and bilateral foreign donor agencies involved in the
28 prevention, cure and rehabilitation of persons with developmental disabilities;

29 (g) Promote the advocacy against bias and stereo-typing against persons with
30 developmental disabilities thereby eliminating discrimination and/or
31 misconceptions of the notion of being developmentally disabled with the end in view

1 of opening the doors of productive economic opportunities to persons with
2 developmental disabilities;

3 (h) Provide the avenue for exchange of information, exchange programs and
4 sharing of best practices on issues relating to the early detection, prevention, cure,
5 treatment, and rehabilitation of persons with developmental disabilities;

6 (i) Network with other organizations, institutions and professionals working
7 for the promotion of legislation and public programs for persons with developmental
8 disabilities;

9 (j) Establish and implement capacity-based training, employment, and
10 livelihood programs for persons with developmental disabilities; and

11 (k) Assist in the creation of appropriate programs for persons with
12 developmental disabilities.

13 Sec. 7. *Composition of the Developmental Disability Council of the*
14 *Philippines.* – The Council shall be headed by the Secretary of Health as the
15 Chairperson. It shall be composed of the following members, or their representative:

16 (a) The Secretary of Social Welfare and Development;

17 (b) The Secretary of Education;

18 (c) The Secretary of Labor and Employment;

19 (d) The Chairperson of the Council for the Welfare of Children (CWC);

20 (e) The Chairperson of the National Council on Disability Affairs (NCDA);

21 (f) The Head of the NIH;

22 (g) The Executive Director General of Technical Education and Skills
23 Development Authority (TESDA);

24 (h) The Head of the Philippine Information Agency (PIA);

25 (i) One (1) representative from the duly accredited drug and vaccine
26 manufacturers and distributors;

27 (j) One (1) representative from the duly accredited association of caregivers in
28 the Philippines;

1 (k) One (1) representative from the duly accredited association of nurses in the
2 Philippines;

3 (l) One (1) representative from the duly accredited association of medical
4 doctors in the Philippines; and

5 (m) One (1) representative from the non-governmental organizations (NGOs)
6 involved in the advocacy for the prevention, cure and rehabilitation of
7 persons with developmental disabilities.

8 The five (5) members of the Council coming from the representatives of the
9 drug and vaccine manufacturers and distributors; caregivers; nurses; medical
10 doctors and non-governmental organizations shall be appointed by the President of
11 the Philippines, from a list of three (3) nominees from each sector, who shall serve
12 for a term of three (3) years, and renewable for another term: *Provided*, That the
13 person appointed shall be of good moral character, of unquestionable integrity, and
14 with expertise and experience of at least six (6) years in the field of developmental
15 disabilities, mental health and other related fields; *Provided, further*, That in the
16 event of a vacancy, the successor appointed to fill the same shall serve only the
17 unexpired portion of the term of the member he/she succeeds to.

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

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

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

28 Sec. 9. *Programs and Services of the Developmental Disability Council of the*
29 *Philippines*. – The programs and services that will be provided by the Council shall
30 include, among others, the following:

31 (a) Orientation and counselling services for families of newly diagnosed
32 children with developmental disabilities;

- (b) Establishment of Family Support Networks and Sibling Program for families of persons with developmental disabilities to seek psycho-social support for the various problems they face;
 - (c) Establishment of National and Regional Referral Services wherein the Council will update a list of professionals and child care institutions concerned with the care and development of persons with developmental disabilities;
 - (d) Publication of reading materials, manuals and easily readable instruction materials for the early detection, prevention, rehabilitation and care of developmental disabilities;
 - (e) The conduct of continuing education, information and training programs and lectures on the proper handling of persons with developmental disabilities;
 - (f) The establishment of a databank and information and monitoring system (IMS) on the demographic, socio-economic and incidence, type and prevalence of persons with developmental disabilities in the country;
 - (g) The publication of a newsletter on current developments, resources and research on developmental disabilities
 - (h) The establishment of a continuing capacity-based training, employment, and livelihood programs for persons with developmental disabilities; and
 - (i) The conduct of continuing education/training of families, teachers, therapists and caregivers of persons with developmental disabilities through seminars, conventions and other forms of tri-media educational tools.

Sec. 10. Early Identification and Intervention for Children with Developmental Disabilities. – The Council is hereby mandated to establish a program for early identification, screening, and detection of developmental disabilities, and to provide the appropriate services to children and toddlers with developmental delays associated with their respective developmental disabilities. The Council is tasked to monitor and update the list of children diagnosed with developmental disabilities in the country in its central registry so that such persons

1 may be referred to appropriate programs of the government, should the same
2 become available.

3 *Sec. 11. Treatment as Persons with Disabilities (PWDs).* – All persons with
4 developmental disabilities shall be treated as PWDs as defined under Republic Act
5 No. 7277, as amended. As such, they shall be entitled to all the rights, privileges and
6 benefits provided for PWDs under existing laws.

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

15 *Sec. 13. Continuing Education and Training of Health Personnel and Service
16 Providers on Developmental Disabilities.* – All DOH, CWC, NCDA and Department
17 of Social Welfare and Development (DSWD) officers and their staff in charge with
18 providing various developmental and welfare services to persons with developmental
19 disabilities are mandated to undergo a mandatory continuing education and training
20 program to sensitize and empower service providers to become effective frontliners
21 in the delivery of health service to persons with developmental disabilities.

22 *Sec. 14. Protection against Discrimination in Schools.* – The Department of
23 Education (DepEd), in coordination with the DOH, DSWD, CWC, and the NIH, shall
24 formulate the necessary implementing rules and regulations to ensure that all
25 educational institutions shall be free from policies and regulations discriminatory to
26 school children and young students with developmental disabilities. Towards this
27 end, the DepEd shall conduct an annual education, information, and training
28 program for school administrators, faculty, and staff to empower them to effectively
29 handle school children and young students with developmental disabilities.

30 *Sec. 15. Non-Discrimination of Adults with Developmental Disability.* –
31 Within six (6) months from the date of effectivity of this Act, the Council shall
32 formulate the necessary guidelines, standards, and regulations in order to ensure

1 that adults with developmental disabilities are not discriminated against due to their
2 condition. The Council shall ensure the timely publication and dissemination of
3 information of these guidelines and regulations in order to ensure that the various
4 stakeholders all over the country in the early detection, prevention, rehabilitation,
5 and care of persons with developmental disabilities are adequately informed.

6 *Sec. 15. Training, Employment, and Livelihood.* – The TESDA shall establish
7 a continuing training program for persons with developmental disabilities for
8 purposes of employment and livelihood. The Department of Labor and Employment
9 (DOLE) shall establish a network to connect persons with developmental disabilities
10 to prospective employers. The DOLE shall promulgate rules that shall prohibit
11 employment discrimination against persons with developmental disabilities.

12 *Sec. 16. Confidentiality of Medical Information for Persons with*
13 *Developmental Disability.* – To ensure that the early detection, screening tests,
14 vaccination, medical treatment, and rehabilitation of persons with developmental
15 disabilities are implemented, the DOH, in consultation with the Department of
16 Justice (DOJ), shall formulate the pertinent implementing rules and regulations to
17 ensure the confidentiality of the medical records of persons with developmental
18 disabilities in order to protect the unwarranted intrusion into the privacy of the
19 person, particularly in relation to the medical condition of the patient.

20 *Sec. 17. Appropriation.* – The amount necessary to carry out the provisions of
21 this Act shall be included and incorporated in the annual general appropriations of
22 the DOH.

23 *Sec. 18. Implementing Rules and Regulations.* – Within six (6) months from
24 the date of effectivity of this Act, the DOH, in coordination with the DSWD, DepEd,
25 CWC, NIH, NCDA, and PIA, shall promulgate the necessary implementing rules and
26 regulations to implement the provisions of this Act.

27 *Sec. 19. Separability Clause.* – If any provision of this Act is declared invalid
28 or unconstitutional, the provisions not affected thereby shall continue to be in full
29 force and effect.

30 *Sec. 20. Repealing Clause.* – All laws, executive orders, presidential decrees,
31 presidential proclamations, letters of instruction, rules and regulations or parts

1 thereof inconsistent with the provisions of this Act are hereby repealed or modified
2 accordingly.

3 Sec. 21. *Effectivity Clause.* – This Act shall take effect fifteen (15) days
4 following its publication in the Official Gazette or in two (2) newspapers of general
5 circulation in the Philippines.

Approved,