



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City



TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 618

Introduced by Representative **ANTONINO B. ROMAN III**

EXPLANATORY NOTE

In many countries all over the world, there is a growing recognition of autism as a healthcare crisis and a national concern. In the United States, for instance, where one out of 59 children are born with autism, President Donald Trump has recently signed a bill that allocates \$1.8 billion in funding to help Americans in the autism spectrum. The Autism Collaboration, Accountability, Research, Education and Support (CARES) Act provides funding for autism programs and research in the U.S. and includes care for the aging members of the society and expands government programs to include older people with autism who were or are often misdiagnosed, under diagnosed, and overlooked. In other parts of the globe, the autism community also receives huge support.

Sadly, in the Philippines, notwithstanding the State policy to protect and promote the rights of all persons to full, healthy and holistic development, thousands of families struggle every day with autism with very little or no support from our government. Medical experts in the field of autism have declared that given the proper guidance, attention, education, and training, persons with autism (PWAs) can be useful citizens in society. Unfortunately, people lack understanding as to how PWAs can actually live independent and productive lives. As a result, the development of PWAs is stunted and, instead of becoming productive citizens, they become burdens not only on their families, but also on the whole community. It is, therefore, urgent to address the concerns of the autism community by adopting and implementing programs to help society accept and understand PWAs.

Specifically, the State should immediately create an environment conducive to the development of PWAs so they reach their full potential and become independent, self-reliant, productive, and socially-accepted members of society. Toward that end, institutional and social mechanisms to support PWAs and empower them must be established.

We need to have long-term measures to develop autism screening, early diagnosis, and intervention programs for children. Experts should be able to transfer knowledge to the community especially to parents of PWAs to enable them to create a home program for their children so they need not rely solely on therapists.

We have to devise and fund a strategic plan for autism research. We need to explore and adopt strategies to address the needs of PWAs and improve the quality of life of PWAs, i.e., improve their access to education, intervention and therapy, employment, and care. In sum, just as other countries have recognized autism as a healthcare crisis, so must the Philippines.

In light of the foregoing, to promote a healthy and productive environment in the Philippines and protect the rights of PWAs to full, healthy and holistic development, the speedy approval of this Bill is earnestly recommended.



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AN ACT
INSTITUTING A NATIONAL AUTISM CARE PLAN, ESTABLISHING A SUB-
COMMITTEE ON AUTISM UNDER THE NATIONAL COUNCIL ON DISABILITY
AFFAIRS, AND PROVIDING FUNDS THEREFOR

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

SECTION 1. *Short Title.* - This Act shall be known as the "National Autism Care Act".

SECTION. 2. *Declaration of Policy.* – It is the policy of the State to protect and promote the right to health of the people to full, healthy, and holistic development. To this end, the State shall promote an environment conducive to the development of persons with autism to become, to the best of their potentials, independent, self-reliant, and productive members of society.

The State commits itself to the establishment of institutional and social mechanisms to support children and adult persons with autism and their families, develop a clear and consistent pathway to early detection and diagnosis, provide easy access to quality health care, education, and employment opportunities such that persons with autism may live independently within the community, to minimize or completely eradicate discrimination, and to enable the private sector to extend relevant services that will complement the government's programs. The State recognizes and respects the preferences and differences of the members of the community, including the use of identity-first or person-first language.

SECTION 3. *Definition of Terms.* – As used in this Act:

- a. *Autism* or *Autism Spectrum Disorder (ASD)* refers to a neurodevelopmental condition characterized by challenges with communication, social skills, restrictive and repetitive behaviors, as well as by unique strengths, as defined in the latest version of the Diagnostic and Statistical Manual of Mental Disorders;
- b. *Diagnosis* refers to necessary assessments, including, but not limited to neuropsychological and neurodevelopmental evaluations, genetic testing,

- c. neuroimaging, neurophysiologic examination, hearing tests, psychometric tests to diagnose autism/and or developmental disabilities in individuals;
- d. *Disability* refers to 1) a physical or mental impairment that substantially limits one or more psychological, physiological, or anatomical function of an individual or activities of such individual; 2) a record of such an impairment; or 3) regarded as having such an impairment;
- e. *Epidemiology* refers to the study and analysis of the distribution and determinants of health conditions in defined populations;
- f. *Habilitation* refers to an integrated approach to physical, psychological, cultural, spiritual, educational, or vocational, measures that create conditions for individuals to attain the highest possible level of functional ability and quality of life;
- g. *Inclusive Education* refers to the process of addressing and responding to the diversity of needs of all learners by moving towards the end-goal of full participation, presence, and achievement in learning cultures and communities, which involves accommodation, modification, adaptation, and individualization in content, approaches, structures, and strategies. It involves equitable opportunities for learners with disabilities to receive educational services, and the needed support and related services with their age-appropriate peer groups and, as far as practicable, in such schools or Inclusive Learning Resource Centers (ILRCs) nearest their homes or residences, in order to prepare them to live as fully functional members of society;
- h. *Intervention* refers to the interceding action undertaken to help improve the autism prognosis. Intervention in autism may take the form of, medical, pharmacological, therapeutic, educational, and non-traditional habilitative care, and all other support services;
- i. *Rehabilitation* a set of interventions designed to optimize functioning and reduce disability in individuals with health conditions in interaction with their environment; and
- j. *Service providers* – any person or entity that provides a service to the public. This can include businesses, government agencies, and non-profit organizations.

SECTION 4. *Inter-Agency and Multi-Sectoral Mechanism.* – A Sub-Committee on Autism, herein referred to as the Sub-Committee, is hereby created, under the National Council on Disability Affairs (NCDA) which shall serve as an inter-agency and multi-sectoral policy-making and coordinative mechanism to develop and implement a sustainable National Autism Care Plan (NACP).

SECTION 5. *Powers and Functions of the Sub-Committee.* - The Sub-Committee shall have the following powers and functions:

- (a) Develop the NACP, a roadmap in addressing the holistic needs of Filipinos with autism and their families, such as health, education, employment, among others, for the guidance of stakeholders in the private and public sectors, calibrated to meet the changing needs of society and developments in technology;
- (b) Coordinate, monitor, and evaluate the implementation of the NACP and the protection of rights of persons with autism, with the concerned government and non-governmental agencies;
- (c) Design campaigns that promote public awareness, acceptance, accommodation, and appreciation of persons with autism;
- (d) Undertake research in collaboration with private and public entities regarding autism in the Philippines;
- (e) Enhance the programs and capabilities of the government to provide nationally available services that support persons with autism and their families, in areas including, but not limited to screening, diagnoses, early intervention, education, training, employment, and livelihood;
- (f) Assist the private and public sector in the design and delivery of support programs for persons with autism and their families;
- (g) Develop capacity-building programs, incentives, and awards, for persons with autism to enhance their potentials as independent, self-reliant, and productive members of society;
- (h) Establish networks with other organizations, institutions, and professionals working for the promotion of public policy and programs for persons with autism, and support groups for families of persons with autism;
- (i) Receive donations and grants from international donor institutions, foundations, and multilateral and bilateral foreign donor agencies, involved in the direct services for persons with autism;
- (j) Enter into memoranda of agreement with government and non-governmental entities for the implementation of various programs for persons with autism; and
- (k) Perform other acts as may be necessary, proper, or incidental to the attainment of purposes and objectives of this Act.

SECTION 6. *Composition of the Sub-Committee on Autism.* – The Sub-Committee shall be composed of the heads of office of the following agencies:

- a. The NCDA as Chairperson;
- b. The DOH as Vice Chairperson;
- c. The Department of Social Welfare and Development (DSWD);
- d. The DepEd;
- e. The Department of the Interior and Local Government (DILG);
- f. The Department of Labor and Employment (DOLE);
- g. The Department of Science and Technology-Philippine Council for Health and Research Development (DOST-PCHRD);
- h. The Commission on Higher Education (CHED);
- i. The Commission on Civil Service (CSC);
- j. The Technical Skills and Development Authority (TESDA);
- k. The Council for the Welfare of Children (CWC);
- l. Philippine Council for Mental Health (PCMH);
- m. The National Institutes for Health (NIH);
- n. Three (3) representatives from non-governmental organizations (NGOs) with programs and advocacy for persons with autism;
- o. Two (2) representatives from duly accredited associations of families of persons with autism; and
- p. Two (2) representatives from NGOs composed of autism self-advocates.

Except for members from government agencies, the members of the Sub-Committee shall be appointed by the Chairperson of the Sub-Committee.

The heads of office of government agencies may designate official permanent representatives to the Sub-Committee, whose rank shall not be lower than an Assistant Secretary or its equivalent: *Provided*, That the designated representative has no vote, unless authorized in writing.

The members of the Sub-Committee shall be appointed not later than thirty (30) days after the date of the enactment of this Act. Members representing the non-government agencies shall serve for a term of three (3) years renewable upon recommendation of the Sub-Committee and approval of the President for a maximum of two (2) consecutive terms. In case of vacancy, the successor appointed to fill the same shall serve only the unexpired portion of the term of the member he/she succeeds to.

All members of the Sub-Committee shall receive per diem as may be determined by the Sub-Committee, in accordance with existing budget and accounting rules and regulations.

The Sub-Committee shall meet at least quarterly or as often as necessary. The presence of a majority of the members of the Sub-Committee shall constitute a quorum.

The Sub-Committee shall have a Secretariat which will coordinate the functions and organize the programs, plans, and activities pursuant to this Act. The NCDA shall determine the necessary staffing requirements of the Sub-Committee, subject to the evaluation and approval of the Department of Budget and Management (DBM) and in compliance with the civil service and other pertinent laws, rules and regulations.

SECTION 7. *The National Autism Care Plan.* – The Sub-Committee on Autism shall spearhead and coordinate with government agencies and other stakeholders on the implementation of the NACP.

The programs and services under the NACP shall include, among others, the following:

(a) *Information campaigns* - The DOH, DepEd, NCDA, DSWD, CHED, TESDA, and PCMH shall, in accordance with their respective mandates, conduct various forms of information campaigns, as follows:

1. Publication such as manuals, infographics, and easily readable instruction materials on early detection, management, intervention, habilitation, rehabilitation, and care of autism;
2. Publication of a newsletter on current developments, milestones, best practices, resources, and research on autism;
3. Promotion of early screening of children and individuals at higher risk for such disability;
4. Other platforms for families of persons with autism such as online resources, educational aids, guides, and other suitable alternatives in local languages;
5. The NCDA shall create and develop a central database of professionals and childcare institutions concerned with the case and development of persons with autism: and
6. The Sub-Committee may initiate and conduct collaborative information campaigns as may be necessary.

(b) *Health* -

1. The DOH shall implement epidemiological surveillance programs to establish a databank and information and monitoring system (IMS) on the demographic, socio-economic, and total incidence and prevalence of persons with autism in the country;
2. The DOH, PCMH, PCHRD, the Early Childhood Care and Development (ECCD) Council, DepEd's ILRCs shall, in coordination with other concerned agencies:
 - a. Strengthen research focus on autism;
 - b. Promote, create, develop, and adopt strategic plans that will continue to determine and establish evidence-based practices for interventions, care, and integration into society of persons with autism;
 - c. Expand research into the link between environmental factors and autism; and
 - d. Continue investigations into causation, diagnosis, early detection, and interventions for autism spectrum disorders.

Such factors that will be studied shall include, among others, infection and immune function, hormonal and reproductive factors, genetic factors, gastro-intestinal factors, and sociodemographic factors; and

3. The Sub-Committee may initiate and conduct collaborative health programs, plans, and activities as may be necessary.

(c) *Education* – The DOH, DepEd, CHED, TESDA, DSWD, and shall, in accordance with their respective mandates, conduct various forms of education programs, plans, and activities in cooperation with other concerned agencies, as follows:

1. Continuing education and training programs on the proper handling of persons with autism;
2. Continuing education and training of families, teachers, therapists, and caregivers of persons with autism through seminars, conventions, and other forms of educational tools;
3. Continuing education and training on autism for public service providers to sensitize and empower them as effective front liners in the delivery of services to persons with autism and their families;
4. Curriculum development for continuing education to assist individuals in recognizing the need for and using valid and reliable screening tools;
5. “Teach the Teachers” Program on specialized and holistic training for health and education professionals;
6. Formulation of guidelines, policies, protocols, and individualized programs on inclusive education for school children, young students, and other learners with autism, in matters including, but not limited to discrimination, acceptance to academic or training programs, instructional support, and behavior management; and
7. The Sub-Committee may initiate and conduct collaborative education programs, plans, and activities as may be necessary.

(d) *Employment and livelihood* - The DOLE and CSC shall formulate policies and initiate and implement programs to ensure that persons with autism are provided opportunities for gainful employment and apprenticeship both in the private and public sectors.

(e) *Other Support Programs* –

1. The DILG and Department of National Defense shall provide lifesaving support to persons with autism with behavioral and communication challenges, in times of disasters, calamities, situations of armed conflict, and other emergencies, ensure their inclusion on the list of priority sectors;

2. The Department of Transportation shall formulate policies and protocols to ensure that persons with autism with behavioral and communication challenges and their families are given reasonable accommodation in accessing all forms of transportation by land, sea, and air;
3. The Department of Justice (DOJ) shall formulate policies and protocols to ensure criminal justice agencies and professionals shall provide the accommodations and protections to persons with autism with behavioral and communication challenges, who may be accused of, are victims of, or are witnesses to crimes;
4. The DOJ and the Commission on Human Rights shall promulgate guidelines and standards to ensure that interventions and programs for persons with autism do not violate their basic human rights, particularly as regards their rights to determine their own decisions.
5. All other concerned agencies shall, in accordance with their respective mandates, conduct orientation and counselling services for families of persons newly diagnosed with autism and establish Family Support Networks and Sibling Programs;
6. The Sub-Committee may initiate and conduct other collaborative support programs, plans, and activities as may be necessary.

SECTION 8. *Panel of Technical Experts.* – The Sub-Committee shall constitute a national panel of technical experts consisting of practitioners related to autism, such as, but not limited to:

- a. One (1) representative from the duly accredited association of medical doctors in the Philippines;
- b. One (1) representative from the speech-language pathologists' national organization, duly recognized by the Professional Regulation Commission;
- c. One (1) representative from the developmental and behavioral pediatricians' national organization, duly recognized by the Professional Regulation Commission;
- d. One (1) representative from the psychologists' national organization, duly recognized by the Professional Regulation Commission;
- e. One (1) representative from the dieticians' national organization, duly recognized by the Professional Regulation Commission;
- f. One (1) representative from the occupational therapists' national organization, duly recognized by the Professional Regulation Commission;
- g. One (1) representative from the social workers' national organization, duly recognized by the Professional Regulation Commission;
- h. One (1) representative from the developmental educators' national organization, duly recognized by the Professional Regulation Commission; and
- i. One (1) representative from the disability support workers' national organization, duly recognized by the Professional Regulation Commission.

The Panel shall provide professional and technical advice to the Sub-Committee in science, technologies, and best practices for autism.

The Sub-Committee shall set the qualifications and per diems for the technical experts. The Sub-Committee or through the collaborative programs and plans of its member agencies and organizations shall provide resources for the operations and activities of the Panel.

SECTION 9. *Local Government Support.* — Local government units (LGUs) shall promote the NACP in their respective territorial jurisdictions. LGUs may enter into joint ventures with national agencies and organizations or associations with programs and advocacy for persons with autism, to explore livelihood opportunities and other undertakings that shall enhance the health, physical fitness, and the economic and social well-being of persons with autism.

The Sub-Committee and the DILG shall coordinate with LGUs in the mainstreaming of the NACP.

SECTION 10. *Consultation with Stakeholders.* - The Sub-Committee shall, in collaboration with professionals, networks and support groups for persons with autism, hold broad consultations and massive information campaigns on the various programs, with government and non-governmental stakeholders.

SECTION 11. *PhilHealth Coverage.* – The Sub-Committee shall facilitate the necessary Philippine Health Insurance Corporation (PhilHealth) coverage for persons with autism, including early screening and detection programs, immediately from the effectivity of this Act.

SECTION 12. *Protection Against Discrimination in Insurance and Other Financial Instruments.* – The Department of Finance shall, within 180 days from the effectivity of this Act, formulate policies and protocols to ensure that all financial service providers such as banks, insurance companies, and health maintenance organizations (HMOs) shall provide persons with autism equitable access to their services and products.

SECTION 13. *Implementing Rules and Regulations.* – The Sub-Committee shall, in consultation and coordination with appropriate national government agencies, NGOs, and other stakeholders, promulgate the necessary rules and regulations for the effective implementation of this Act, no later than 180 days upon the effectivity of this Act.

SECTION 14. *Appropriations.* – The amount necessary for the implementation of this Act shall be included in the annual General Appropriations Act.

SECTION 15. *Separability Clause.* – If any section or provision of this Act is held unconstitutional or invalid, the other sections or provisions not affected thereby shall continue to be in full force and effect.

SECTION 16. *Repealing Clause.* – All laws, executive orders, presidential decrees, presidential proclamations, letters of instruction, rules and regulations or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

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

Approved.