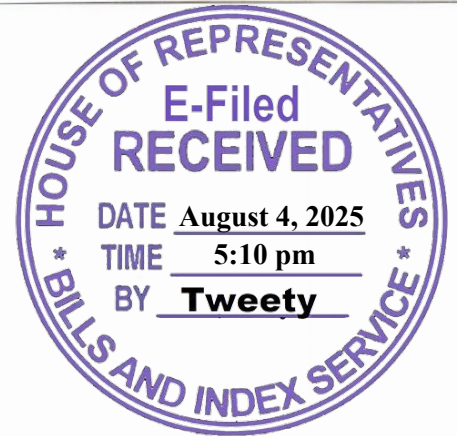


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 2991



Introduced by Representative ANTOLIN "LENLEN" A. ORETA III

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

EXPLANATORY NOTE

The 1987 Constitution, specifically Article II, Section 15, declares that the State shall protect and promote the right to health of the people and instill health consciousness among them. The Constitution further provides that the State shall adopt an integrated and comprehensive approach to health development, which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost.

Autism spectrum disorder (ASD) is neurodevelopmental condition that affects a person's communication, social interaction and behavior. People with ASD may also experience differences in learning, movement, and attention.

In the Philippines, the number of people with ASD continues to rise. According to the Centers for Disease Control and Prevention, one in every 100 Filipinos is estimated to have autism spectrum disorder.¹ The Department of Health has likewise noted a significant rise in cases, reporting that the number of Filipinos with autism increased from 500,000 in 2008 to 1,000,000 by April 2018.

Despite these growing numbers, many people with ASD still face barriers in accessing timely diagnosis, appropriate healthcare, inclusive education, and long-term support. Families are left to navigate these challenges on their own without professional guidance.

This bill seeks to institutionalize a National Autism Care Plan (NACP) as a national framework to support persons with autism and their families. It establishes a Sub-Committee on Autism under the National Council on Disability Affairs (NCDA), which will serve as the lead inter-agency and multi-sectoral mechanism in developing and implementing inclusive and sustainable NACP.

¹ Philippine Information Agency, 02 April 2024

These include services in early detection, health care, inclusive education, employment, community support, and legal protection.

In view of the foregoing, the immediate passage of this bill is earnestly sought.



ANTOLIN "LENLEN" A. ORETA III
Lone District of Malabon City

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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 "National Autism Care Act".
2

3 **SEC. 2. *Declaration of Policy.*** – It is the policy of the State to protect and promote the
4 right to health of the people to full, healthy, and holistic development. To this end, the State shall
5 promote an environment conducive to the development of persons with autism to become, to the
6 best of their potentials, independent, self-reliant, and productive members of society.
7

8 The State commits itself to the establishment of institutional and social mechanisms to
9 support children and adult persons with autism and their families, develop a clear and consistent
10 pathway to early detection and diagnosis, provide easy access to quality health care, education,
11 and employment opportunities such that persons with autism may live independently within the
12 community, to minimize or completely eradicate discrimination, and to enable the private sector
13 to extend relevant services that will complement the government's programs. The State
14 recognizes and respects the preferences and differences of the members of the community,
15 including the use of identity-first or person-first language.
16

17 **SEC. 3. *Definition of Terms.*** – As used in this Act:
18

19 a. *Autism or Autism Spectrum Disorder (ASD)* refers to a neurodevelopmental condition
20 characterized by challenges with communication, social skills, restrictive and repetitive
21 behaviors, as well as by unique strengths, as defined in the latest version of the
22 Diagnostic and Statistical Manual of Mental Disorders;
23

24 b. *Diagnosis* refers to necessary assessments, including, but not limited to
25 neuropsychological and neurodevelopmental evaluations, genetic testing, neuroimaging,

1 neurophysiologic examination, hearing tests, psychometric tests to diagnose autism/and
2 or developmental disabilities in individuals;
3

4 c. *Disability* refers to 1) a physical or mental impairment that substantially limits one or
5 more psychological, physiological, or anatomical function of an individual or activities
6 of such individual; 2) a record of such an impairment; or 3) regarded as having such an
7 impairment;
8

9 d. *Epidemiology* refers to the study and analysis of the distribution and determinants of
10 health conditions in defined populations;
11

12 e. *Habilitation* refers to an integrated approach to physical, psychological, cultural,
13 spiritual, educational, or vocational, measures that create conditions for individuals to
14 attain the highest possible level of functional ability and quality of life;
15

16 f. *Inclusive Education* refers to the process of addressing and responding to the diversity
17 of needs of all learners by moving towards the end-goal of full participation, presence,
18 and achievement in learning cultures and communities, which involves accommodation,
19 modification, adaptation, and individualization in content, approaches, structures, and
20 strategies. It involves equitable opportunities for learners with disabilities to receive
21 educational services, and the needed support and related services with their age-
22 appropriate peer groups and, as far as practicable, in such schools or Inclusive Learning
23 Resource Centers (ILRCs) nearest their homes or residences, in order to prepare them to
24 live as fully functional members of society;
25

26 g. *Intervention* refers to the interceding action undertaken to help improve the autism
27 prognosis. Intervention in autism may take the form of, medical, pharmacological,
28 therapeutic, educational, and non-traditional habilitative care, and all other support
29 services;
30

31 h. *Rehabilitation* a set of interventions designed to optimize functioning and reduce
32 disability in individuals with health conditions in interaction with their environment; and
33

34 i. *Service providers* – any person or entity that provides a service to the public. This can
35 include businesses, government agencies, and non-profit organizations.
36

37 **SEC. 4. Inter-Agency and Multi-Sectoral Mechanism.** – A Sub-Committee on Autism,
38 herein referred to as the Sub-Committee, is hereby created, under the National Council on
39 Disability Affairs (NCDA) which shall serve as an inter-agency and multi-sectoral policy-making
40 and coordinative mechanism to develop and implement a sustainable National Autism Care Plan
41 (NACP).
42

43 **SEC. 5. Powers and Functions of the Sub-Committee.** - The Sub-Committee shall have the
44 following powers and functions:
45

- (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.

SEC. 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.

1 **SEC. 7. The National Autism Care Plan.** – The Sub-Committee on Autism shall spearhead
2 and coordinate with government agencies and other stakeholders on the implementation of the
3 NACP.
4

5 The programs and services under the NACP shall include, among others, the following:
6

7 (a) *Information campaigns* - The DOH, DepEd, NCDA, DSWD, CHED, TESDA, and PCMH
8 shall, in accordance with their respective mandates, conduct various forms of information
9 campaigns, as follows:
10

- 11 1. Publication such as manuals, infographics, and easily readable instruction materials on
12 early detection, management, intervention, habilitation, rehabilitation, and care of
13 autism;
14
- 15 2. Publication of a newsletter on current developments, milestones, best practices,
16 resources, and research on autism;
17
- 18 3. Promotion of early screening of children and individuals at higher risk for such
19 disability;
20
- 21 4. Other platforms for families of persons with autism such as online resources,
22 educational aids, guides, and other suitable alternatives in local languages;
23
- 24 5. The NCDA shall create and develop a central database of professionals and childcare
25 institutions concerned with the case and development of persons with autism; and
26
- 27 6. The Sub-Committee may initiate and conduct collaborative information campaigns as
28 may be necessary.
29

30 (b) *Health* -
31

- 32 1. The DOH shall implement epidemiological surveillance programs to establish a
33 databank and information and monitoring system (IMS) on the demographic, socio-
34 economic, and total incidence and prevalence of persons with autism in the country;
35
- 36 2. The DOH, PCMH, PCHRD, the Early Childhood Care and Development (ECCD)
37 Council, DepEd's ILRCs shall, in coordination with other concerned agencies:
38
 - 39 a. Strengthen research focus on autism;
 - 40 b. Promote, create, develop, and adopt strategic plans that will continue to
41 determine and establish evidence-based practices for interventions, care, and
42 integration into society of persons with autism;
 - 43 c. Expand research into the link between environmental factors and autism; and
 - 44 d. Continue investigations into causation, diagnosis, early detection, and
45 interventions for autism spectrum disorders.
46

1 Such factors that will be studied shall include, among others, infection and immune
2 function, hormonal and reproductive factors, genetic factors, gastro-intestinal factors,
3 and sociodemographic factors; and
4

- 5 3. The Sub-Committee may initiate and conduct collaborative health programs, plans, and
6 activities as may be necessary.
7

8 (c) *Education* – The DOH, DepEd, CHED, TESDA, DSWD, and shall, in accordance with
9 their respective mandates, conduct various forms of education programs, plans, and
10 activities in cooperation with other concerned agencies, as follows:
11

- 12 1. Continuing education and training programs on the proper handling of persons with
13 autism;
14
15 2. Continuing education and training of families, teachers, therapists, and caregivers of
16 persons with autism through seminars, conventions, and other forms of educational
17 tools;
18
19 3. Continuing education and training on autism for public service providers to sensitize
20 and empower them as effective front liners in the delivery of services to persons with
21 autism and their families;
22
23 4. Curriculum development for continuing education to assist individuals in recognizing
24 the need for and using valid and reliable screening tools;
25
26 5. “Teach the Teachers” Program on specialized and holistic training for health and
27 education professionals;
28
29 6. Formulation of guidelines, policies, protocols, and individualized programs on
30 inclusive education for school children, young students, and other learners with autism,
31 in matters including, but not limited to discrimination, acceptance to academic or
32 training programs, instructional support, and behavior management; and
33
34 7. The Sub-Committee may initiate and conduct collaborative education programs, plans,
35 and activities as may be necessary.
36

37 (d) *Employment and livelihood* - The DOLE and CSC shall formulate policies and initiate and
38 implement programs to ensure that persons with autism are provided opportunities for
39 gainful employment and apprenticeship both in the private and public sectors.
40

41 (e) *Other Support Programs* –
42

- 43 1. The DILG and Department of National Defense shall provide lifesaving support to
44 persons with autism with behavioral and communication challenges, in times of
45 disasters, calamities, situations of armed conflict, and other emergencies, ensure their
46 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.

SEC.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.

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

3
4 The Sub-Committee shall set the qualifications and per diems for the technical experts. The
5 Sub-Committee or through the collaborative programs and plans of its member agencies and
6 organizations shall provide resources for the operations and activities of the Panel.

7
8 **SEC. 9. Local Government Support.** — Local government units (LGUs) shall promote the
9 NACP in their respective territorial jurisdictions. LGUs may enter into joint ventures with national
10 agencies and organizations or associations with programs and advocacy for persons with autism,
11 to explore livelihood opportunities and other undertakings that shall enhance the health, physical
12 fitness, and the economic and social well-being of persons with autism.

13
14 The Sub-Committee and the DILG shall coordinate with LGUs in the mainstreaming of the
15 NACP.

16
17 **SEC. 10. Consultation with Stakeholders.** - The Sub-Committee shall, in collaboration with
18 professionals, networks and support groups for persons with autism, hold broad consultations and
19 massive information campaigns on the various programs, with government and non-governmental
20 stakeholders.

21
22 **SEC. 11. PhilHealth Coverage.** - The Sub-Committee shall facilitate the necessary
23 Philippine Health Insurance Corporation (PhilHealth) coverage for persons with autism,
24 including early screening and detection programs, immediately from the effectivity of this Act.

25
26 **SEC. 12. Protection Against Discrimination in Insurance and Other Financial**
27 **Instruments.** - The Department of Finance shall, within 180 days from the effectivity of this Act,
28 formulate policies and protocols to ensure that all financial service providers such as banks,
29 insurance companies, and health maintenance organizations (HMOs) shall provide persons with
30 autism equitable access to their services and products.

31
32 **SEC. 13. Implementing Rules and Regulations.** - The Sub-Committee shall, in
33 consultation and coordination with appropriate national government agencies, NGOs, and other
34 stakeholders, promulgate the necessary rules and regulations for the effective implementation of
35 this Act, no later than 180 days upon the effectivity of this Act.

36
37 **SEC. 14. Appropriations.** - The amount necessary for the implementation of this Act
38 shall be included in the annual General Appropriations Act.

39
40 **SEC. 15. Separability Clause.** - If any section or provision of this Act is held
41 unconstitutional or invalid, the other sections or provisions not affected thereby shall continue to
42 be in full force and effect.

43
44 **SEC. 16. Repealing Clause.** - All laws, executive orders, presidential decrees,
45 presidential proclamations, letters of instruction, rules and regulations or parts thereof
46 inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

1
2 **SEC. 17. *Effectivity.*** – This Act shall take effect fifteen (15) days following its publication
3 in the Official Gazette or in two (2) newspapers of general circulation in the Philippines.
4

5 *Approved,*
6