



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila



Twentieth Congress First Regular Session

HOUSE BILL NO. 7430

**Introduced by Ako Bicol Partylist Representative Hon. Jan Franz Norbert Joselito
Almario Chan and Hon. Alfredo A. Garbin Jr.**

EXPLANATORY NOTE

Neurodivergent children and adults, such as those with autism, ADHD, dyslexia, intellectual disability, developmental delays, and other neurodevelopmental conditions, remain among the most vulnerable and least supported members of our society. While their conditions are lifelong, the support systems available to them are fragmented, inconsistent, and often inaccessible. For thousands of Filipino families, the burden of care falls almost entirely on parents and primary caregivers.

However, across the country, one fear rises above all others:

“What will happen to my child when I die, grow old, or can no longer care for them?”

Today, no law answers this question. No statute assures parents who will stand in their place when they die, grow old, or become incapable of caring for their neurodivergent child. There is no national program for guardianship, assisted living, long-term care, or lifetime planning. And so, despite their love and sacrifice, Filipino families continue to bear this fear alone and unprotected.

While current laws such as the Magna Carta for Persons with Disability (Republic Act No. 7277), the Mental Health Act (Republic Act No. 11036), and the Inclusive Education Act (Republic Act No. 11650) provide general protections and services, none of these laws offer a comprehensive, family-centered system that supports neurodivergent dependents throughout their lives and secures their future after the death or incapacity of their caregivers.

This bill does not replace existing laws. Rather, it completes them. It operationalizes the principles of the UN Convention on the Rights of Persons with Disabilities, to which the Philippines is a State Party, and provides the missing infrastructure needed to protect the most vulnerable neurodivergent individuals: those who cannot speak, cannot live independently, and cannot advocate for themselves when their families are no longer there.

It also recognizes the sacrifices of Filipino parents who have given everything for their children with special needs. For decades, these families have filled the gaps in government response, often going bankrupt, quitting jobs, or isolating themselves from society. They deserve not only compassion, but a law that guarantees they will not leave this world with uncertainty and fear.

Every Filipino family deserves lasting peace of mind. Every neurodivergent child deserves a protected and dignified future. And no parent should spend their final years, or their final breath, fearing that their child will be left without care, guidance, or protection.

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



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ALFREDO A. GARBIN JR.

Representative
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**Introduced by Ako Bicol Partylist Representative Hon. Jan Franz Norbert
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**AN ACT ESTABLISHING A NATIONAL LIFETIME SUPPORT SYSTEM
FOR NEURODIVERGENT CHILDREN AND ADULTS, GUARANTEEING
CARE, GUARDIANSHIP, AND DIGNITY AFTER THE LOSS OR
INCAPACITY OF PRIMARY CAREGIVERS, AND CREATING A
NATIONWIDE FRAMEWORK FOR INCLUSIVE PLANNING, SERVICES,
AND LONG-TERM SECURITY, AND FOR OTHER PURPOSES**

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

**CHAPTER I
GENERAL PROVISIONS**

SEC. 1. Short Title. –

This Act shall be known as the “*Neurodivergent Children and Families Lifetime Security Act*.”

SEC. 2. Declaration of Policy. –

It is the policy of the State to uphold the dignity, rights, and lifelong welfare of all neurodivergent persons, especially those whose ability to live independently is limited, and whose care depends on family members or primary caregivers. The State shall recognize its obligation to support neurodivergent Filipinos not only

during childhood but across their entire lifespan, including when their parents or guardians pass away or become incapacitated.

The State shall ensure that every neurodivergent Filipino is provided with opportunities for early diagnosis, education, employment, and community inclusion, and, when necessary, access to guardianship, supported decision-making, residential care, and lifetime support. It shall guarantee continuity of care and services, protect families from abandonment and exhaustion, and build systems that ensure no neurodivergent person is left without care, protection, or dignity.

SEC. 3. Definition of Terms. –

For the purposes of this Act, the following terms are defined as follows:

- (a) “***Assisted Living Facility***” refers to a supervised, community-based residential care setting established for neurodivergent persons who require structured support, especially those without family caregivers.
- (b) “***Autism Spectrum Disorder***” refers to a neurodevelopmental condition characterized by differences in social communication, behavior, or sensory processing, presenting with varying levels of support needs.
- (c) “***Developmental delay***” refers to significant delays in one or more areas of a child’s development, including communication, motor, cognitive, self-help, or social skills, as identified through standardized developmental screening or assessment.
- (d) “***Executive functioning***” refers to cognitive processes such as working memory, planning, organization, impulse control, and emotional regulation.
- (e) “***Legal Guardian***” refers to a person appointed by the court to make decisions on behalf of a neurodivergent person who has been assessed as unable to manage major aspects of their own welfare or property.
- (f) “***Lifetime Care Plan***” refers to a structured, individualized roadmap developed with the family and authorized agencies that outlines services, supports, guardianship arrangements, transition goals, and long-term care provisions to ensure continuity of support for a neurodivergent person across their life stages.
- (g) “***National Neurodivergent Support Fund***” refers to a dedicated fund created under this Act to finance services, facilities, guardianship programs, and long-term care for neurodivergent persons, particularly when they are left without family support.
- (h) “***Neurodivergent***” refers to an individual whose neurological development or cognitive functioning differs from typical patterns, including but not limited to persons with autism spectrum disorder, attention-deficit/hyperactivity disorder (“***ADHD***”), dyslexia and specific learning

disorders, dyspraxia, Tourette syndrome, intellectual disability, developmental delay, and other neurodevelopmental conditions, as may be further defined by the Department of Health or relevant clinical authorities.

- (i) “**Neurodevelopmental Disability**” refers to a lifelong condition arising from atypical brain development that affects cognition, learning, communication, behavior, motor functioning, or adaptive skills.
 - (j) “**Person with Disability (PWD)**” refers to any individual defined under Republic Act No. 7277, as amended. For purposes of this Act, all neurodivergent persons, as defined herein, are hereby recognized as Persons with Disabilities.
 - (k) “**Primary Caregiver**” refers to the parent, legal guardian, or designated adult who is primarily responsible for the daily care, supervision, or decision-making of a neurodivergent person.
 - (l) “**Respite Care**” refers to the short-term, temporary care of a neurodivergent person provided by accredited service providers or facilities, designed to give relief and recovery time to the individual’s parent or primary caregiver. Respite care may be delivered for a few hours, overnight, or several days, depending on need. It allows caregivers to attend to personal matters, rest, recover from stress or illness, or handle family or medical emergencies, while ensuring the neurodivergent individual continues to receive safe, supervised, and appropriate support.
- Respite care is recognized internationally as an essential part of sustainable caregiving systems for persons with disabilities.
- (m) “**Supported Decision-Making**” refers to a formal arrangement wherein a neurodivergent person designates trusted individuals to assist in understanding, making, and communicating decisions, without transferring legal authority or removing legal capacity.
 - (n) “**Transition Planning**” refers to the structured process of preparing a neurodivergent individual for adulthood, including access to further education, supported employment, independent or assisted living, and community participation.

CHAPTER II

CAREGIVER SUPPORT SYSTEM

SEC. 4. CAREGIVER SUPPORT ENTITLEMENT.–

Primary caregivers of neurodivergent persons shall be recognized as essential partners in care and development, and shall be entitled to formal support services to promote their well-being and enable sustainable, dignified caregiving.

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SEC. 5. RESPITE CARE SERVICES.–

The Department of Social Welfare and Development (DSWD), in coordination with local government units (LGUs), shall establish and maintain respite care programs to relieve caregiving burden. These may include:

- (a) Short-term care arrangements in accredited homes or day centers;
- (b) Scheduled daytime programs where neurodivergent individuals may safely engage in supervised activities;
- (c) Emergency respite care in cases of caregiver illness, crisis, or hospitalization.

Respite care shall be provided free of charge to indigent families, and subsidized for others based on an income-based schedule of support.

SEC. 6. FAMILY TRAINING AND MENTAL HEALTH SUPPORT.–

The Department of Health (DOH) and DSWD shall jointly offer caregiver education and psychological support programs, including:

- (a) Free or subsidized training on behavior support, communication, home-based therapy, and future planning;
- (b) Mental health counseling, stress management, and peer support groups for caregivers and siblings;
- (c) Online or community-based modules accessible in major local languages.

These services shall be accessible through public hospitals, barangay health stations, Inclusive Learning Resource Centers (“*ILRCs*”) established under Republic Act No. 11650, or accredited partners.

SEC. 7. FINANCIAL SUPPORT AND CAREGIVER RECOGNITION.–

Caregivers of neurodivergent dependents may be entitled to the following, subject to guidelines:

- (a) Subject to availability of funds, caregivers from low-income or indigent households may be eligible for a caregiver support grant, to be piloted and scaled based on DSWD’s assessment;
- (b) Priority access to social protection programs such as livelihood grants, skills training, or microenterprise support;
- (c) Recognition in public programs, including eligibility for flexible work arrangements and social security inclusion under SSS or GSIS, as applicable.

SEC. 8. FLEXIBLE WORK ARRANGEMENTS FOR CAREGIVERS.–

The Civil Service Commission (CSC) and the Department of Labor and Employment (DOLE) shall issue guidelines promoting flexible work policies for parents and primary caregivers of neurodivergent dependents. These may include

adjusted work schedules, remote work options, leave accommodations, or other supportive arrangements that enable sustained caregiving without loss of employment or income security.

Public and private employers are encouraged to adopt such accommodations in accordance with existing labor laws and workplace standards.

SEC. 9. TAX BENEFITS FOR FAMILIES.–

The Department of Finance (DOF) and Bureau of Internal Revenue (BIR) shall issue regulations to provide:

- (a) Additional income tax deductions for qualified expenses related to therapy, diagnosis, assistive devices, and education for neurodivergent dependents;
- (b) Enhanced dependent exemptions or tax credits for families supporting two or more neurodivergent children;
- (c) Tax exemptions or incentives for contributions to approved disability trust accounts or long-term care funds established under this Act.

**CHAPTER III
LIFETIME CARE AND TRANSITION SUPPORT**

SEC. 10. INDIVIDUAL LIFETIME CARE PLAN (ILCP).

Every registered neurodivergent person shall have the right to an individualized, long-term care plan developed in consultation with their parent or caregiver. The ILCP shall serve as a roadmap for accessing education, healthcare, employment, residential options, and support services across the lifespan.

- (a) The ILCP shall be created initially at the time of official diagnosis or recognition by the Department of Health (DOH), Inclusive Learning Resource Centers (ILRCs), or designated agencies. It shall be updated at key transitions: entry to basic education, post-secondary education or training, transition to adulthood, and in preparation for long-term care.
- (b) The plan shall be facilitated by a designated case manager from the DSWD or LGU-based disability affairs office, and include referrals and linkages to DepEd, DOLE, PhilHealth, and other services.
- (c) The plan shall include future planning, including care arrangements, guardianship preferences, living preferences, and supported decision-making needs.

For areas without an established ILRC or case manager, the local social welfare office shall facilitate temporary planning until the formal structure is available.

SEC. 11. GUARDIANSHIP AND LEGAL SUPPORT MECHANISMS.–

- (a) The Department of Justice (DOJ), in coordination with the Supreme Court and Public Attorney's Office (PAO), shall develop simplified procedures for the appointment of legal guardians for neurodivergent persons who, upon reaching the age of majority, are assessed to lack full legal capacity to manage their personal welfare, property, or decisions.
- (b) Parents may nominate a standby or successor guardian, subject to court approval. Family courts shall give priority to the expressed will of the parent or the best interest of the neurodivergent person.
- (c) The DSWD shall establish a roster of trained professional or volunteer guardians and may act as guardian of last resort through the Office of the Public Guardian, which shall be created under this Act.
- (d) Supported Decision-Making arrangements shall be recognized by public and private institutions as a valid legal mechanism, and may be executed in writing by a neurodivergent adult, with the assistance of an accredited facilitator.

SEC. 12. RESIDENTIAL CARE AND ASSISTED LIVING HOMES.–

The DSWD, in coordination with LGUs and accredited civil society organizations, shall establish a network of small-scale, community-based assisted living homes for neurodivergent adults with high support needs, especially those without living caregivers.

- (a) At least one such home shall be established per region or per cluster of provinces, with geographic equity and priority for underserved areas, within five (5) years.
- (b) Homes shall provide 24-hour care, skills training, recreation, and community engagement in a safe, non-institutional setting.
- (c) Admission shall be based on need, with priority given to individuals whose caregivers are deceased, elderly, or incapacitated.

SEC. 13. COMMUNITY DAY PROGRAMS AND TRANSITION SUPPORT.–

The DSWD and DOLE, in coordination with TESDA and LGUs, shall implement day programs for neurodivergent adults who are not enrolled in school or employment.

These programs may include:

- (a) Functional life skills training;
- (b) Supported vocational or microenterprise programs;
- (c) Structured recreational and social activities; and

- (d) Transportation and meal support, as needed.

SEC. 14. POST-CARE TRANSITION PROTOCOL.–

When a neurodivergent person loses a parent or primary caregiver due to death, incapacity, or abandonment, the following shall take effect:

- (a) The DSWD, in coordination with LGU social welfare offices, shall initiate the care transition protocol described under Section 15 of this Act within thirty (30) days.
- (b) This shall include the activation of any designated standby guardian, initiation of court proceedings for public guardianship where required, and assessment for appropriate housing or community-based support services.
- (c) The person shall retain all existing benefits and entitlements, and shall be entered into the Lifetime Neurodivergent Support Registry.

SEC. 15. CARE TRANSITION PROTOCOL GUIDELINES.–

The Department of Social Welfare and Development (DSWD) shall develop and issue standardized guidelines for the Post-Care Transition Protocol referenced in Section 14 of this Act.

The protocol shall:

- (a) Set procedures for identifying and responding to the death, incapacity, or abandonment of a neurodivergent person's caregiver;
- (b) Define the specific roles of LGUs, public guardians, and residential care providers;
- (c) Ensure continuity of benefits, housing, and case management during the transition period; and
- (d) Establish emergency response pathways and temporary care placements where necessary.

SEC. 16. NATIONAL LIFETIME SUPPORT REGISTRY.–

The National Council on Disability Affairs (NCDA), in coordination with the DSWD, shall establish and maintain a secure and confidential registry of neurodivergent persons enrolled in programs under this Act, known as the Lifetime Neurodivergent Support Registry.

The registry shall be used to:

- (a) Track care continuity and service access;
- (b) Trigger transition responses in the event of caregiver loss;

- (c) Coordinate long-term planning, guardianship needs, and assisted-living access; and
- (d) Generate anonymized data for service planning, policy improvement, and national monitoring.

Participation shall be voluntary and shall comply with the Data Privacy Act of 2012 and other applicable laws, rules, and regulations on data protection, confidentiality, and informed consent.

SEC. 17. EMERGENCY ASSISTANCE FOLLOWING LOSS OF CAREGIVER.–

The Department of Social Welfare and Development (DSWD) may provide a one-time emergency cash grant or burial assistance to a neurodivergent person whose registered parent or primary caregiver has passed away or become permanently incapacitated, subject to the availability of funds and a validated assessment of need.

The grant shall assist with transition-related costs and ensure immediate continuity of care. DSWD shall include this support in the guidelines for the Post-Care Transition Protocol under Section 14 of this Act.

CHAPTER IV SUPPORTED EMPLOYMENT AND ECONOMIC SECURITY

SEC. 18. SUPPORTED EMPLOYMENT PROGRAM.–

The Department of Labor and Employment (DOLE), in coordination with DSWD, TESDA, and NCDA, shall implement a nationwide Supported Employment Program for neurodivergent adults.

- (a) The program shall provide job coaching, workplace accommodations, vocational training, and job-matching services tailored to the abilities and interests of neurodivergent individuals.
- (b) Employers hiring neurodivergent workers shall be entitled to enhanced incentives, including:
 - i. Expanded salary tax deductions under Republic Act No. 10524;
 - ii. Access to wage subsidies for up to six (6) months;
 - iii. Public recognition through an inclusive employer certification program.
- (c) DOLE and TESDA shall create specialized technical-vocational programs adapted for diverse learning and support needs, including modules in IT, arts, crafts, service work, and agriculture.

SEC. 19. PUBLIC AND PRIVATE SECTOR INCLUSION.–

- (a) All national government agencies, local government units (LGUs), and government-owned and controlled corporations (GOCCs) shall reserve at least one percent (1%) of all plantilla positions for qualified persons with disabilities, including neurodivergent applicants, in accordance with existing policies.
- (b) Private establishments employing one hundred (100) or more workers are encouraged to allocate at least one percent (1%) of their workforce to qualified PWDs, with priority given to neurodivergent persons. The Department of Labor and Employment (DOLE) shall include such employment data in its labor market monitoring and compliance assessments.
- (c) The Department of Trade and Industry (DTI), in partnership with DOLE and DSWD, shall assist in establishing neurodivergent-led cooperatives, livelihood initiatives, and inclusive microenterprises, and shall provide technical assistance and market linkage support.

SEC. 20. ECONOMIC SUPPORT FOR ADULTS WITHOUT FAMILY CARE.—

The National Neurodivergent Support Fund shall allocate resources for neurodivergent adults without living or capable caregivers to support:

- (a) Monthly care stipends or public assistance grants;
- (b) Participation in adult learning and social integration programs;
- (c) Ongoing transportation, health, and personal support expenses.

Eligibility and guidelines shall be set by DSWD, in consultation with NCDA and disability organizations.

**CHAPTER V
FINANCIAL SECURITY AND TRUST FUND**

SEC. 21. NATIONAL NEURODIVERGENT SUPPORT FUND.—

There is hereby created a special account in the National Treasury to be known as the National Neurodivergent Support Fund, which shall be administered by the Department of Budget and Management (DBM) and DSWD. This Fund shall finance:

- (a) Assisted living and residential care programs under this Act;
- (b) Caregiver subsidies and cash assistance;
- (c) Community-based services, day programs, and employment supports;
- (d) Financial transition supports for neurodivergent adults who have lost parental care.

The Fund shall receive annual appropriations under the General Appropriations Act, and may also accept grants, donations, and income from public-private partnerships and penalties collected under this Act.

SEC. 22. SPECIAL NEEDS TRUST PROGRAM.–

The DSWD, in coordination with the Department of Finance (DOF) and the Bangko Sentral ng Pilipinas (BSP), shall develop a government-accredited Special Needs Trust Program to assist families in securing the long-term financial future of their neurodivergent dependents.

- (a) Families may voluntarily establish and contribute to a private trust or savings account dedicated to their neurodivergent dependent's future needs. These contributions shall be considered private family assets, shall be tax-exempt, and shall be used exclusively for the dependent's care, support, or long-term services, in accordance with approved guidelines.
- (b) Low-income households may receive government counterpart contributions up to a prescribed limit.
- (c) Withdrawals shall be subject to approved guidelines and safeguards to protect the beneficiary.
- (d) Families may designate their contributions as part of the dependent's Lifetime Care Plan, and such trust accounts may be integrated into succession planning, eligibility assessments, or continuity-of-care reviews under this Act.

SEC. 23. SUCCESSION OF CARE PLANNING.–

The Lifetime Care Plan developed under this Act shall include a formal succession of care component, outlining:

- (a) Preferred future guardians or caregivers designated by the parent or family;
- (b) Housing preferences and care wishes of the family and neurodivergent person; and
- (c) Legal, financial, and medical instructions to guide post-care transitions.

DSWD and LGUs shall ensure that care planning discussions begin before the caregiver reaches sixty (60) years of age or earlier upon request.

SEC. 24. TAX EXEMPTIONS AND INCENTIVES.–

The following shall be exempt from income tax, estate tax, and donor's tax, subject to ceilings, qualifications, and implementing rules and regulations to be issued by the Bureau of Internal Revenue (BIR) in coordination with the Department of Finance (DOF):

- (a) Contributions made by families to an accredited special needs trust fund or dedicated savings account established under this Act;
- (b) Inheritance, donations, or insurance proceeds directed to such trust funds or accounts for the benefit of a neurodivergent dependent; and
- (c) Monthly subsidies, caregiver stipends, and government assistance grants received under this Act for the care or support of a neurodivergent person.

The BIR shall issue implementing rules and regulations within ninety (90) days from the effectivity of this Act, including documentation requirements, exemption thresholds, and audit mechanisms to prevent abuse.

CHAPTER VI IMPLEMENTATION, OVERSIGHT, AND FINAL PROVISIONS

SEC. 25. IMPLEMENTING RULES AND REGULATIONS.—

Within ninety (90) days from the effectivity of this Act, the Department of Social Welfare and Development (DSWD), in coordination with the Department of Health (DOH), Department of Education (DepEd), Department of Labor and Employment (DOLE), Commission on Higher Education (CHED), Technical Education and Skills Development Authority (TESDA), PhilHealth, National Council on Disability Affairs (NCDA), and other relevant agencies, shall promulgate the necessary rules and regulations to implement the provisions of this Act. Consultations with families, caregivers, and neurodivergent persons shall be mandatory.

SEC. 26. LEAD AGENCIES AND COORDINATING MECHANISM.—

The DSWD shall serve as the lead implementing agency of this Act and shall coordinate with other agencies in the formulation, implementation, monitoring, and reporting of programs and services. A National Council for Lifetime Neurodivergent Support shall be established under the NCDA, composed of representatives from all concerned departments and at least two (2) neurodivergent or parent advocacy organizations.

The Council shall meet at least once per quarter and shall have authority to review implementation gaps, recommend budget realignments, and escalate unresolved noncompliance to the Office of the President, the Civil Service Commission, or Congress, as appropriate

SEC. 27. MONITORING AND REPORTING.—

The NCDA, in coordination with DSWD, shall submit an annual report to Congress on the implementation of this Act, including:

- (a) Number of neurodivergent individuals registered under the program;
- (b) Status of caregiver supports, residential services, and guardianship systems;
- (c) Financial utilization and fund sufficiency; and
- (d) Key challenges and recommendations.

SEC. 28. PENALTIES.—

Government agencies or LGUs that willfully delay or neglect the implementation of services under this Act without justifiable cause may be subject to administrative sanctions as provided under existing civil service laws and the Local Government Code.

SEC. 29. PHASED IMPLEMENTATION.—

All programs, services, and mandates under this Act shall be implemented progressively and in phases, with priority given to the most underserved areas, and subject to the availability of appropriations, the capacity of implementing agencies, and readiness of local government units.

SEC. 30. SEPARABILITY CLAUSE.—

If any provision of this Act is declared unconstitutional or invalid, the other provisions not affected thereby shall remain in full force and effect.

SEC. 31. REPEALING CLAUSE.—

All laws, decrees, executive orders, rules and regulations, or parts thereof which are inconsistent with this Act are hereby repealed or amended accordingly.

SEC. 32. EFFECTIVITY.—

This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved.