

Globally, there has been a noted increase in autism diagnoses over recent decades. This global trend is largely attributed to increased awareness, improved screening, and evolving diagnostic criteria, rather than a single causative factor (World Population Review, 2025). The International Society for Autism Research (INSAR) emphasizes that autism is a complex condition with primarily genetic causes that occur prenatally, and it is not a "preventable disease" (INSAR, 2025).

Children on the autism spectrum often face challenges in communication, social interaction, and behavior. They are at increased risk of bullying, neglect, and social exclusion. Families frequently report difficulties in accessing diagnosis, affordable therapies, and inclusive education – services that are often cost-prohibitive or geographically inaccessible.⁴ Evidence indicates that early diagnosis, affordable therapies, and inclusive educations – services that are often cost-prohibitive or geographically inaccessible.⁵

Despite the increasing global prevalence of autism—with recent global data indicating that as many as 1 in 36 children are diagnosed—the Philippines lacks a coherent national policy to ensure their health, education, employment, and overall social inclusion.

This legislative gap results in fragmented services, significant familial burdens, and the systemic exclusion of persons with autism from fully participating in society.

The development of a National Autism Care Plan for the Philippines is timely and supported by national and international frameworks. This bill is grounded in the State's constitutional duty to protect the rights of persons with disabilities and is aligned with international commitments, including the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). It adopts a **"whole-of-government"** and **"whole-of-society"** approach to create a society where persons with autism can live with dignity and realize their full potential.

Also referred to are global best practices, among them, Australia's **National Autism Strategy 2025–2031**.⁶ This strategy was developed through a co-design process with people and families with ASD and is structured around key outcome areas of social inclusion, economic inclusion, diagnosis and supports, and health and mental health.⁷

This proposed legislation, therefore, provides a foundational blueprint for the proposed National Autism Care Plan, highlighting a clear path toward institutionalizing support and services for individuals with autism and their families in the Philippines. The law, upon enactment, will help ensure that children with autism in the Philippines are supported within a social and legal framework that upholds their dignity, rights, and protection. The bill's key features are discussed below.

- **Creates a coordinated governance structure.** The bill establishes an Inter-Agency **Council on Autism**, which will be attached to the National Council on Disability Affairs (NCDA). This inter-agency body, comprising relevant government agencies and, critically, representatives from NGOs, autism self-advocates, and family

⁴ SunStar Publishing. (2014, 19 Aug). Statistics on Autism Spectrum Disorder. Retrieved 22 August 2025 from <https://www.sunstar.com.ph/more-articles/statistics-on-autism-spectrum-disorder?utm/>

⁵ Ibid.

⁶ Australian DOH.

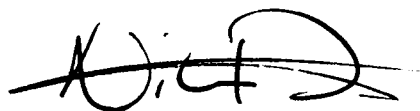
⁷ Ibid.

organizations, is tasked with policy-making, planning, and monitoring the implementation of a National Autism Care Plan (NACP). This ensures that national efforts are synchronized and accountable

- **Mandates a holistic National Autism Care Plan (NACP).** The NACP provides a concrete roadmap across key life domains:
 - **Health** – by establishing systems for early identification, diagnosis, and access to evidence-based interventions, recognizing that early support is crucial for long-term development
 - **Education** - by promoting inclusive education and training for educators and families to support learners with autism, moving beyond traditional methods to approaches that build vital social and life skills.
 - **Employment and community life** – by fostering opportunities for gainful employment and livelihood, including support for social enterprises, and promoting models for integrated community living to ensure persons with autism can lead dignified lives beyond childhood.
 - **Rights protection** – by integrating protection within the justice system and ensuring equitable access to all public services, building upon the country's existing framework for protecting vulnerable groups.
- **Promotes evidence-based and rights-based approaches.** The bill mandates the creation of a central database and supports research to inform policy and program development. It upholds a rights-based perspective, recognizing the preferences of persons with autism, including the use of identity-first or person-first language, and ensuring their voices are central in the design of policies that affect them.

The passage of the National Autism Care Plan Act is an urgent and necessary step to translate the State's policy of inclusion into tangible action. By providing a clear legal framework for a coordinated, lifelong support system, this bill will empower individuals with autism, provide relief to their families, and enable our nation to benefit from the unique talents and contributions of all its citizens. The long-term social benefits—healthier, happier, and more productive individuals and families with reduced lifelong dependence— underscore this proposed legislation's importance.

For these reasons, the immediate passage of this bill is earnestly recommended.



Representative NIKO RAUL S.J. DAZA
Northern Samar, 1st District



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

Twentieth Congress
First Regular Session

House Bill No. 9131

Introduced by Representative NIKO RAUL S.J. DAZA

AN ACT

**ESTABLISHING A NATIONAL FRAMEWORK FOR THE RIGHTS, CARE, AND
INTEGRATION OF PERSONS WITH AUTISM, CREATING THE INTER-AGENCY
COUNCIL ON AUTISM, INSTITUTING A NATIONAL AUTISM CARE PLAN, 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 Framework Act."

SECTION 2. *Declaration of Policy.* – Pursuant to the constitutional mandate to protect and promote the right to health, education, employment, and dignity of all persons, and in full alignment with the State's commitments under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), it is hereby declared the policy of the State to ensure the rights, welfare, and full inclusion of all persons with autism.

The State shall adopt a holistic, life-course approach to establish a national framework that guarantees the rights of persons with autism to a life of dignity, self-determination, and participation in all aspects of societal life. To this end, the State shall:

- a. Promote an environment that enables persons with autism to develop to their fullest potential and become valued, independent, self-reliant, and productive members of society;
- b. Establish institutional and social mechanisms to support children and adults with autism and their families, ensuring a clear and consistent pathway from early detection and diagnosis to lifelong care and support;
- c. Ensure equitable access to quality health care, inclusive education, gainful employment, affordable housing, recreational activities, and social protection;
- d. Prohibit and eradicate all forms of discrimination, stigma, and barriers to the inclusion of persons with autism, and foster a culture of acceptance, accommodation, and appreciation within the community;
- e. Actively involve persons with autism, their families, and their representative organizations in the planning, development, implementation, and monitoring of policies and programs that affect them, recognizing their right to self-representation;
- f. Promote and invest in evidence-based practices, scientific research, technological innovation, and data-driven strategies to continuously improve services and support systems;
- g. Ensure the protection and safety of persons with autism, particularly in situations of risk, including armed conflict, humanitarian emergencies, and the adverse effects of climate change, recognizing their specific vulnerabilities and communication needs; and
- h. Foster multi-stakeholder partnerships among government agencies, the private sector, civil society, and the media to mobilize resources, leverage expertise, and ensure the efficient and effective implementation of a comprehensive National Autism Care Plan.

The State recognizes and respects the autonomy, preferences, and diversity of persons with autism, 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 social communication and interaction, and restrictive and repetitive patterns of behavior, interests, or activities, as well as by unique strengths and differences. The diagnosis is based on the latest version of the Diagnostic and Statistical Manual of Mental Disorders;
- b. ***Assistive technology*** refers to any item, piece of equipment, software program, or product system that is used to increase, maintain, or improve the functional capabilities of persons with autism, including communication devices, sensory tools, and learning aids;
- c. ***Climate resilience*** (in the context of autism), refers to the ability of persons with autism, their families, and the support systems serving them to anticipate, prepare for, respond to, and recover from the impacts of climate-related disasters and extreme weather events, taking into account their specific sensory, communication, and behavioral needs;
- d. ***Diagnosis*** refers to necessary assessments, including, but not limited to neuropsychological and neurodevelopmental evaluations, genetic testing, neuroimaging, neurophysiologic examination, hearing tests, and psychometric tests to diagnose autism and or developmental disabilities in individuals;
- e. ***Disability*** refers to (a) a physical, psychosocial, intellectual, neurological, sensory, or developmental impairment; (b) a medical condition; or (c) any perceived impairment or previous impairment, that has a substantial and long-term adverse effect on a person's ability to perform functions or participate in society on an equal basis with others, in accordance with Republic Act No. 7277, as amended, otherwise known as the "Magna Carta for Persons with Disability".
- f. ***Epidemiology*** refers to the study and analysis of the distribution, patterns, and determinants of health conditions, including autism, in defined populations;

- g. ***Evidence-based practices*** refers to interventions, strategies, or approaches that have been proven effective through high-quality scientific research;
- h. ***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;
- i. ***Inclusive education*** refers to the process (as defined in Republic Act No. 11650), which involves addressing and responding to the diversity of all learners through increased participation and reduced exclusion, within a barrier-free learning environment. For the purpose of this Act, this shall be achieved by ensuring learners with autism have equitable access to high-quality education and the needed support and related services within their age-appropriate peer groups, and, as far as practicable, in schools or Inclusive Learning Resource Centers (ILRCs) nearest their homes, in order to prepare them to live as fully functional members of society;
- j. ***Integrated community living*** - refers to a model of support, in accordance with the state policy of integrating persons with disabilities into the mainstream of society under Republic Act No. 7277, as amended. It enables persons with autism to live freely and as independently as possible within the general community, with dignity and autonomy. This is achieved through access to a range of personalized support services, social networks, recreational activities, and, where appropriate, residential options that promote choice, self-determination, and full social and economic inclusion;
- k. ***Inter-Agency Council on Autism (IACA) or "Council"*** refers to the primary governing body established under Section 4 of this Act, responsible for the development, implementation, and oversight of the National Autism Care Plan;
- l. ***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;

- m. ***Panel of Technical Experts*** refers to the national panel constituted under this Act, composed of practitioners from various disciplines related to autism, which provides professional and technical advice to the Council;
- n. ***Public-private partnership (PPP)*** refers to a contractual arrangement as defined in Republic Act No. 11966, otherwise known as the "Public-Private Partnership Code of the Philippines." For the purpose of this Act, the Council shall identify, promote, and facilitate potential PPP projects that advance its objectives, to be undertaken by the relevant national government agencies or local government units as the Implementing Agencies, in accordance with the said Code;
- o. ***Reasonable accommodation*** as provided in Republic Act 10524 ("An Act Expanding the Positions Reserved for Persons with Disability, Amending for the Purpose Republic Act No. 7277, as Amended, Otherwise Known as the Magna Carta for Persons with Disability") refers to necessary and appropriate modification and adjustments, without imposing a disproportionate or undue burden, where needed in a particular case, to ensure that persons with disability can enjoy or exercise on an equal basis with others of all human rights and fundamental freedoms. This includes, but is not limited to: (a) improvement of existing facilities used by employees to make these accessible; (b) modification of work schedules; (c) reassignment to a vacant position; (d) acquisition or modification of equipment or devices; (e) appropriate adjustments or modifications of examinations, training materials or policies; and (f) the provision of auxiliary aids and services;
- p. ***Rehabilitation*** refers to an integrated approach to physical, social, cultural, spiritual, educational, and vocational measures that create conditions for individuals to attain the highest possible level of functional ability, through interventions designed to optimize functioning and reduce disability in interaction with their environment, in accordance with Republic Act No. 7277, as amended;
- q. ***Social enterprise*** refers to a business or organization that applies commercial strategies to maximize improvements in human and environmental well-being, and which, for the purpose of this Act, has the primary objective of employing persons with autism or providing them with goods, services, or livelihood opportunities.

SECTION 4. *Inter-Agency Council on Autism.* – An **Inter-Agency Council on Autism** (IACA), herein referred to as the Council, is hereby established. The Council shall be attached to the National Council on Disability Affairs (NCDA) for policy coordination and shall serve as the primary governing body tasked with the development, implementation, monitoring, and continuous refinement of the comprehensive and sustainable National Autism Care Plan (NACP).

The Council shall be composed of the heads of the agencies listed in Section 6 of this Act. To ensure efficiency and avoid duplication, the Council shall be supported by a Secretariat to be constituted from the existing personnel and resources of the NCDA. The Department of Budget and Management (DBM) shall authorize the NCDA to create such necessary additional *plantilla* positions as may be essential for the Council to fulfill its mandate, subject to existing civil service laws.

SECTION 5. *Powers and Functions of the Council.* – The Council shall have the following powers and functions:

a. Policy Development and Strategic Planning

1. Develop, monitor, and periodically update the National Autism Care Plan (NACP);
2. Develop, promulgate, and annually update a Joint Implementation Manual (JIM) to ensure bureaucratic and cost efficiency;
3. Formulate policies and standards for autism-related programs and services across all sectors;

b. Coordination and Implementation Oversight

1. Coordinate, monitor, and evaluate the implementation of the NACP across all concerned government agencies and non-governmental stakeholders;
2. Ensure the alignment of agency programs with the NACP through the JIM and regular reporting mechanisms;

c. Research, Knowledge Management, and Innovation

1. Commission and oversee research on autism, including epidemiology, emerging interventions, and assistive technologies;

2. Establish and maintain a national autism database and knowledge management system;
3. Provide guidance to the Panel of Technical Experts on research priorities;

d. Resource Mobilization and Partnership Building

1. Identify, promote, and facilitate Public-Private Partnership (PPP) projects in accordance with the PPP Code;
2. Mobilize resources through the Autism Care Fund and develop incentive mechanisms for private sector engagement;
3. Receive and manage grants, donations, and other forms of assistance;

e. Capacity Building, Awareness, and Stakeholder Engagement

1. Design and implement nationwide public awareness campaigns to promote acceptance and inclusion of persons with autism;
2. Develop capacity-building programs for professionals, families, and persons with autism;
3. Establish and maintain formal, ongoing consultation mechanisms with persons with autism, their families, and representative organizations in all aspects of the NACP's development, implementation, and monitoring;

f. Administrative Functions

1. Convene regularly and maintain records of proceedings;
2. Submit an annual report to Congress, through the appropriate committees, on or before June 30 of each calendar year. The report shall contain a detailed account of the Council's proceedings, accomplishments, and the implementation of the National Autism Care Plan during the preceding year, including financial statements, challenges encountered, and recommendations for legislative or policy modifications to enhance the effectiveness of this Act; and
3. Perform other necessary acts to achieve the objectives of this Act.

SECTION 6. *Composition of the Council.* – The Council shall be composed of the heads of office of the following agencies:

- a. The NCDA as Chairperson;

- b. The Department of Health (DOH) as Vice Chairperson;
- c. The Department of Social Welfare and Development (DSWD);
- d. The Department of Education (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.

To ensure the effective implementation of the National Autism Care Plan, the Council is hereby empowered to invite, on a permanent or ad-hoc basis, other relevant government agencies not listed herein whose mandates are critical to specific programs and projects of the NACP. These agencies shall include, but are not limited to:

- a. The Department of Justice (DOJ)
- b. The Department of Transportation (DOTr)

- c. The Commission on Human Rights (CHR)
- d. Movie and Television Review and Classification Board (MTRCB)
- e. The Department of Human Settlements and Urban Development (DHSUD)
- f. The Department of Finance (DOF)
- g. The Department of Economy, Planning, and Development (DEPDev)
- h. Philippine Statistics Authority (PSA)
- i. The Climate Change Commission (CCC)
- j. The Department of National Defense (DND)
- k. The National Disaster Risk Reduction and Management Council (NDRRMC)
- l. The Department of the Interior and Local Government (DILG) and its attached agencies, including the Philippine National Police (PNP), the Bureau of Fire Protection (BFP), and the Bureau of Jail Management and Penology (BJMP)

Representatives from these agencies shall participate in the proceedings of the Council and its relevant technical working groups, with the right to speak but not to vote.

SECTION 7. *Appointment and Term of Members.* – To ensure the formal constitution and continuity of the Council, the following rules on appointment and tenure shall govern:

- a. The heads of office of government agency members may designate an official permanent representative, whose rank shall not be lower than an Assistant Secretary or its equivalent.
- b. Except for the government agency members, the non-governmental members of the Council shall be appointed by the Chairperson of the Council not later than thirty (30) days after the effectivity of this Act.
- c. Non-governmental members shall serve for a term of three (3) years, which may be renewed for one (1) consecutive term upon recommendation of the Council and

approval of the President. In case of a vacancy, the successor shall serve only for the unexpired portion of the term.

SECTION 8. *Proceedings and per diems.* – To ensure the smooth and orderly conduct of its affairs, the Council shall be governed by the following operational guidelines:

- a. The Council shall meet at least quarterly or as often as necessary. The presence of a majority of the members shall constitute a quorum.
- b. All members of the Council shall be entitled to per diems for every meeting attended, as may be determined by the Council in accordance with existing budget and accounting rules and regulations.
- c. The designated representative of a government agency member shall have no voting power unless specifically authorized in writing by their respective agency head.

SECTION 9. *Secretariat.* – To provide continuous administrative and technical support, the Council shall be assisted by a Secretariat constituted as follows:

The Council shall be supported by a Secretariat. The NCDA shall provide the Secretariat and determine its necessary staffing requirements, subject to the evaluation and approval of the Department of Budget and Management (DBM) and in compliance with civil service laws, rules, and regulations.

SECTION 10. *The National Autism Care Plan.* – The Council shall spearhead and coordinate with government agencies and other stakeholders on the implementation of the NACP. The programs and services under the NACP shall be comprehensive and include the following pillars:

- a. **Information and Public Awareness** – The DOH, DepEd, NCDA, DSWD, CHED, TESDA, DILG, and PCMH shall, in accordance with their respective mandates, lead the following programs:

1. **Public information.** Develop and disseminate publications, including manuals, infographics, and easily readable guides in local languages on early detection, management, intervention, and care of autism;
2. **Knowledge dissemination.** Publish and maintain a regular newsletter and online platforms on current developments, best practices, resources, and research on autism;
3. **Centralized resource database.** The NCDA shall create, maintain, and publicize a central database of qualified professionals, accredited institutions, and available support services for persons with autism and their families;
4. **National and local awareness campaigns.** The Council, in coordination with relevant agencies and LGUs, shall initiate and conduct collaborative national and local information campaigns to promote acceptance, accommodation, and appreciation of persons with autism. In coordination with stakeholders, media outlets, and invited agencies such as the Movie and Television Review and Classification Board (MTRCB), the Council shall develop and disseminate national guidelines for the accurate, respectful, responsible, inclusive, and destigmatizing portrayal of persons with autism in film, television, news media, and online content. These guidelines shall aim to promote understanding and inclusion, building upon positive examples in Philippine media; and
5. **Family training and empowerment.** The DSWD, in coordination with LGUs through their Municipal Social Welfare Development Offices (MSWDOs), shall develop and implement training programs for parents, siblings, and guardians on providing appropriate support, special education techniques, and intervention strategies for persons with autism. These programs shall be part of the comprehensive family support package under subsection (h) of this section. When local MSWDOs lack capacity, they shall coordinate with the DSWD regional offices or accredited private institutions to ensure access to such training.

6. **Observance of Autism Awareness Days.** The Council, in coordination with relevant agencies, LGUs, and stakeholders, shall lead the annual observance of:

- a. **National Autism Consciousness Week** every third week of January, in accordance with Proclamation No. 711, series of 1996, and other relevant laws; and
- b. **World Autism Awareness Day** every 2nd of April, as declared by the United Nations.

During these observances, information campaigns shall be intensified nationwide, and programs highlighting the rights, dignity, and contributions of persons with autism shall be spearheaded by member agencies of the Council, LGUs, and partner organizations from the private sector and civil society.

b. **Health, Research, and Technology** – The DOH, DOST-PCHRD, NIH, and PCMH shall, in accordance with their respective mandates, lead the following programs:

1. **Epidemiological surveillance.** The DOH, in coordination with the Philippine Statistics Authority (PSA), the DILG, and relevant LGUs, shall implement a national autism surveillance program to establish a comprehensive databank and monitoring system that tracks the incidence, prevalence, demographic data, and socio-economic factors related to persons with autism in the Philippines. The PSA shall, within one (1) year from the effectivity of this Act and in consultation with the Council and the DOH, integrate appropriate questions and data variables on persons with disabilities, including persons with autism, into its regular censuses and surveys, such as the Census of Population and Community-Based Monitoring System (POPCEN-CBMS). Relevant findings from such censuses and surveys shall be submitted to the Council annually for policy development, program planning, and resource allocation;

2. **Targeted research initiatives.** The DOST-PCHRD and the NIH, in collaboration with the Panel of Technical Experts, shall prioritize and fund research in the following key areas:
- a. **Novel interventions and precision medicine.** Investigating the efficacy of novel biological and therapeutic interventions, including the gut-brain axis and other emerging areas of study;
 - b. **National data commons and biobank.** Developing a secure, national data infrastructure to pool and share de-identified data from research and clinical settings for the purpose of accelerating scientific discovery, with strict adherence to ethical data privacy standards;
 - c. **Environmental links.** Expanding research into the potential links between environmental factors and autism;
 - d. **Biomarkers and early detection.** Continuing investigations into biological markers, causation, and tools for early detection;
 - e. **Implementation science.** In collaboration with relevant agencies, studying the most effective methods to integrate evidence-based practices into public health centers, schools, and communities; and
 - f. **National Autism Research and Innovation Hub.** Subject to the availability of resources, the support of a leading academic institution as host, and the involvement of the private sector and other stakeholders, the establishment of a centralized National Autism Research and Innovation Hub is encouraged. The Hub shall coordinate national research priorities, facilitate collaboration, and serve as a repository of knowledge and best practices. Upon the sunset review under Section 18, the Hub may, by law, assume some or all of the functions of the Council should Congress deem such reorganization necessary;

3. **Evidence-based practices and technology.** The DOH, in coordination with the Council, shall:

- a. **Guideline development.** Develop, promote, and periodically update national guidelines on evidence-based practices for the intervention, habilitation, and care of persons with autism;
- b. **Assistive technology.** Support the development, evaluation, and adoption of affordable and effective assistive technologies to improve the communication, learning, and daily living of persons with autism; and
- c. **Referral pathways.** Develop and implement a national referral system that enables frontline workers, including teachers, barangay health workers, and MSWDO personnel, to refer children who display potential signs of autism to appropriate health facilities for proper diagnostic assessment by qualified specialists.

c. **Inclusive Education** – The DepEd, CHED, TESDA, and DSWD shall, in accordance with their respective mandates, this Act, and Republic Act No. 11650, lead the following programs:

- 1. **Professional capacity building.** Implement continuing education and specialized "Teach the Teachers" programs for public and private school teachers, therapists, and administrators on inclusive instructional strategies and proper support for learners with autism;
- 2. **Caregiver and family empowerment.** Conduct training for families, caregivers, and teacher-aides on autism through seminars, conventions, and other educational tools;
- 3. **Inclusive education policy.** Formulate and enforce guidelines, policies, and protocols for inclusive education, including non-discrimination in admission (whether in Special Education (SPED) centers or regular schools), supportive environment for early detection, screening and assessment, provision of instructional support, and positive behavior management for learners with autism;

- a. **Access for Indigent Persons with Autism.** The DepEd shall ensure that indigent persons with autism have priority access to enrollment in public SPED centers and regular schools with inclusive education programs. When no public SPED center or inclusive education program is available or accessible within the LGU, or when the public institution lacks the capacity to accommodate the learner's specific needs, the DepEd, in coordination with the DSWD and the LGU, shall provide financial assistance to cover partial or full tuition and other school-related expenses for enrollment in a private SPED school or private regular school that can appropriately serve the learner. The amount of assistance shall be determined based on the financial capacity and needs of the learner's family, following the guidelines to be issued by the DepEd and the DSWD;
 - b. **Tax Incentives for Private Educational Institutions.** Any private educational institution, whether SPED or regular, that admits and enrolls indigent persons with autism shall be eligible for tax incentives under existing laws, including but not limited to the National Internal Revenue Code, as amended, and the Corporate Recovery and Tax Incentives for Enterprises (CREATE) Act. The Department of Finance, in coordination with the Bureau of Internal Revenue and the DepEd, shall issue the necessary revenue regulations to implement this provision, which may include tax deductions or credits equivalent to a reasonable portion of the educational expenses incurred for each indigent student with autism enrolled;
4. **System development.** Develop curricula and training for the use of valid and reliable screening tools and the implementation of individualized education plans; and

5. **Support to epidemiological surveillance.** In consultation and collaboration with relevant agencies such as the DOH, DOST-PCHRD, NIH, and the PCMH, review programs and policies (and update, if necessary) to help identify students who may need to have assessment and diagnosis for autism spectrum disorder and refer them, as necessary, following a duly-constituted referral system. In coordination with the DOH, the DepEd shall develop training programs for teachers and school personnel on the early recognition of **developmental indicators or early signs** that may suggest autism, and on proper referral protocols to ensure that learners are directed to qualified health professionals for definitive diagnosis.

d. **Employment, Livelihood, and Community Integration** – The DOLE, DSWD, TESDA, and DHSUD shall, in accordance with their respective mandates, lead the following programs:

1. **Inclusive employment.** Formulate and implement policies and programs to ensure opportunities for gainful employment, apprenticeship, and entrepreneurship for persons with autism in both the public and private sectors;
2. **Vocational training and social enterprises.** Formulate and implement policies and programs to ensure opportunities for vocational and technical training; promote, support, and provide incentives for the creation of social enterprises and community-based vocational training centers that employ persons with autism; and
3. **Supported community living.** Develop models and provide guidance for integrated residential communities and supported housing options that enable adults with autism to live with dignity and as independently as possible within and outside their households and the general community.

e. **Rights Protection and Access to Justice** – The DOJ, DOTr, CHR, and DILG shall, in accordance with their respective mandates and in coordination with the PNP, BFP, and BJMP, lead the following programs:

1. **Justice system accommodation.** The DOJ shall develop and implement mandatory training programs and protocols for law enforcement, prosecutors, and public attorneys to ensure persons with autism receive necessary accommodations and protections within the criminal justice system;
2. **Accessible transportation.** The DOTr shall formulate and enforce policies to ensure reasonable accommodation and non-discriminatory access for persons with autism and their families in all public transportation systems;
3. **Human rights safeguards.** The CHR, in coordination with the Council, shall promulgate guidelines and monitor compliance to ensure all interventions and programs respect the autonomy, dignity, and right to self-determination of persons with autism;
4. **Legal assistance.** The Council, in collaboration with the DOJ and DSWD, shall facilitate access to legal assistance and support services for persons with autism and their families in matters relating to the protection of their rights; and
5. **Frontline assistance through MSWDOs.** The DSWD, through the MSWDOs, shall serve as the primary frontline service provider for persons with autism and their families. The DSWD shall issue guidelines to ensure uniform implementation of these services nationwide. MSWDOs shall:
 - a. Assist in the registration of persons with autism to avail of PWD benefits and other benefits under this Act;
 - b. Facilitate enrollment in special education programs and referrals to appropriate institutions;

- c. Provide assistance in availing of PhilHealth and other social protection benefits;
 - d. Submit annual reports to their respective LGUs, the DSWD, and the Council for policy development and program improvement; and
 - e. Any government worker, including but not limited to personnel of the PSA, DOH, DepEd, DSWD, and LGUs, who in the performance of their duties discovers reasonable grounds to believe that a person with autism is being subjected to abuse, neglect, exploitation, or inhumane treatment shall immediately report the same to the DSWD, the MSWDO, the PNP, or the nearest barangay official. The receiving agency shall take immediate appropriate action in accordance with Republic Act No. 7610, Republic Act No. 9262, and other applicable laws. Failure to report without justifiable cause may constitute neglect of duty and shall be subject to administrative disciplinary action.
- f. **Climate Resilience and Disaster Response** – The Council, in coordination with the CCC, NDRRMC, DILG, and DND, in accordance with their respective mandates, shall lead the following programs:
- 1. **Inclusive disaster planning.** Ensure that the specific needs and communication requirements of persons with autism are integrated into national and local climate adaptation, disaster risk reduction, and emergency response plans;
 - 2. **Accessible early warning.** Develop and disseminate accessible early warning information for extreme weather events and other disasters, tailored to the needs of persons with autism; and
 - 3. **Inclusive evacuation and response.** Formulate specific protocols for the evacuation, protection, and support of persons with autism during disasters and other emergencies, recognizing them as a priority sector.

g. **Resource Generation and Public-Private Partnership** – The Council, in coordination with the DOF and DEPDev, in accordance with their respective mandates, shall lead the following programs:

1. **Autism Care Fund.** There is hereby created a special fund to be known as the "Autism Care Fund," which shall be sourced from:

- a. Appropriations from the annual General Appropriations Act;
- b. All fines collected pursuant to the enforcement of this Act;
- c. Donations, grants, and contributions from local and international sources;
- d. Other sources as may be authorized by law.

2. **Direct Subsidies for Persons with Autism.** Subject to the availability of funds and guidelines to be issued by the Council in coordination with the DSWD and DOH, a program of direct subsidies shall be established to assist indigent persons with autism and their families. Such subsidies may cover, but shall not be limited to:

- a. Initial and follow-up screening and diagnostic assessments;
- b. Therapy sessions, including occupational, physical, speech, and behavioral therapy;
- c. Assistive devices and technologies;
- d. Educational supplies and support; and
- e. Other essential needs as may be determined by the Council.

The amount, manner of release, and frequency of such subsidies shall be determined by the Council based on the financial capacity of the family, the specific needs of the person with autism, and the availability of resources from the Autism Care Fund and other sources;

3. **Public-private partnerships (PPPs).** Identify, promote, and facilitate PPP projects, in accordance with the PPP Code of the Philippines, to finance, build, and operate autism support infrastructure and services; and
 4. **Private sector engagement.** Develop and implement a framework of incentives to attract corporate social responsibility (CSR) funding, grants, and other forms of support from the private sector and civil society.
- h. **Family Support and Social Welfare Services** – The DSWD, in coordination with the DOH, DepEd, DOLE, DILG, and LGUs, shall develop and implement a comprehensive package of social development and welfare services for parents, siblings, and guardians of persons with autism. The package shall include:
1. **Counseling services.** Free individual, peer group, or family counseling focused on stress management, coping mechanisms, and emotional support for families caring for persons with autism. These services shall be provided by MSWDOs in coordination with DOH mental health programs. Where local capacity is insufficient, referrals shall be made to DSWD regional offices, DOH facilities, or accredited private institutions;
 2. **Parent and guardian effectiveness services.** Programs to expand knowledge, skills, and core parental strengths for assisting both themselves and the person with autism, including positive behavior support and advocacy training;
 3. **Sibling support programs.** The DSWD shall develop programs specifically designed to address the needs of siblings of persons with autism, including peer support groups and educational resources; and
 4. **Streamlined access.** The DSWD shall streamline the processes and requirements for availing of these services. In the implementation of this section, a liberal construction shall be employed to further the intention of granting benefits to persons with autism and their families.

- i. **Family Welfare and Labor Rights** – The DOLE, in coordination with the DSWD and the Council, shall lead the following programs to support families caring for persons with autism:

1. **Caregiver Leave Benefit.** Any parent, sibling, or guardian of a person with autism who has rendered at least one (1) year of service, whether continuous or broken, shall be entitled to seven (7) working days of paid leave per year specifically for the purpose of providing immediate and necessary care to the person with autism. This leave shall be in addition to the service incentive leave provided under Article 95 of the Labor Code, as amended, and shall be subject to the same rules on notice and supporting documentation. In the interpretation of this provision, liberal construction shall be applied in favor of the caregiver to ensure the timely and adequate care of the person with autism;
2. **Flexible Work Arrangements.** Parents, siblings, or guardians of a person with autism shall have the right to avail of flexible work arrangements from their employers, which may include but are not limited to: compressed work weeks, flexi-time, part-time work, or work-from-home arrangements of at least one (1) day per week, subject to the nature of the employer's business and existing laws, including Republic Act No. 11165 (the Telecommuting Act).
3. **Family Support Grant.** Subject to the availability of funds and guidelines to be issued by the DSWD and the Council, a needs-based family support grant shall be provided to qualified indigent families caring for persons with autism. The grant shall be used to support the health, education, and social welfare needs of the person with autism. The grant shall have a minimum floor of Five Thousand Pesos (₱ 5,000.00) and a maximum ceiling of Twenty Thousand Pesos (₱ 20,000.00) per eligible family per year, the exact amount to be determined by the DSWD and the Council based on the financial capacity of the family, the specific needs of the person with autism, and the availability of resources from the Autism Care Fund and other sources.

The DSWD and the Council shall, every three (3) to five (5) years, or as necessary, review and adjust the minimum and maximum amounts of the grant to account for inflation, changes in the cost of living, purchasing power parity, and other relevant economic indicators. Any adjustment shall be made through a joint circular and shall not require amendment of this Act.

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.

The Council may initiate and conduct other collaborative support programs, plans, and activities as may be necessary.

SECTION 11. *Joint Implementation Manual.* – The Council shall, within one (1) year from its organization and following the promulgation of the Implementing Rules and Regulations, develop and promulgate a Joint Implementation Manual (JIM). The JIM shall clearly delineate the roles, responsibilities, specific deliverables, and reporting requirements for each member agency in the execution of the National Autism Care Plan. The Manual shall be reviewed and updated annually to ensure synergy, prevent duplication, and promote the cost-efficient use of resources, and shall be made publicly available online.

SECTION 12. *Panel of Technical Experts.* – The Council 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 dietitians' 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;
- i. One (1) representative from the disability support workers' national organization, duly recognized by the Professional Regulation Commission;
- j. One (1) representative from the national organization of electronics and communications engineers, or a similar body, with expertise in assistive and augmentative technology;
- k. One (1) representative from the national organization of environmental planners, or a similar body, with expertise in universal design and climate-resilient infrastructure; and
- l. One (1) representative from the national organization of data scientists or health researchers, with expertise in epidemiology and data analytics.

The Panel shall provide professional and technical advice to the Council in science, technologies, best practices, and other relevant themes depending on their expertise.

The Council shall set the qualifications and *per diems* for the technical experts. The Council, through the collaborative programs and plans of its member agencies, shall provide resources for the operations and activities of the Panel.

SECTION 13. *Role of Local Government Units.* — All Local Government Units (LGUs) are hereby directed to actively implement the National Autism Care Plan within their respective

territorial jurisdictions. In partnership with national agencies and non-governmental organizations, LGUs shall:

- a. **Mainstream NACP pillars.** Integrate the objectives and programs of the NACP, particularly those relating to health, inclusive education, social protection, and employment, into their respective Local Development Plans;
- b. **Facilitate community-based services.** Promote and support the establishment of community-based programs, which may include therapy centers, inclusive livelihood projects, social enterprises, and recreational activities for persons with autism and their families;
- c. **Ensure inclusive disaster risk reduction.** Incorporate the specific needs of persons with autism into local disaster risk reduction and management plans, climate adaptation strategies, and public safety protocols, in coordination with the DILG, OCD, and the Council;
- d. **Mobilize resources.** Allocate local funds and explore joint ventures or public-private partnerships to finance local autism support services and initiatives.

The Council, in close coordination with the DILG, shall develop and disseminate a guidebook for LGUs on the implementation of this section and provide necessary technical assistance and capacity-building.

SECTION 14. Universal Health Care Coverage. – Consistent with the principles of the Universal Health Care Act (Republic Act No. 11223) and the Act Providing for the Mandatory PhilHealth Coverage for All Persons With Disability (Republic Act No. 11228), it is hereby declared that persons with autism shall receive comprehensive, lifelong, and accessible health care and support.

- a. **Guidelines for Coverage.** – The Council, through the Department of Health (DOH) and the Philippine Health Insurance Corporation (PhilHealth), shall issue the necessary guidelines to ensure the full implementation of existing health coverage for persons with autism under relevant laws. Such guidelines shall be issued within one hundred eighty (180) days from the effectivity of this Act.

b. **Comprehensive Health Care Program.** – To address any gaps in existing laws and policies, the Council, with the DOH and PhilHealth as lead agencies, shall develop and enforce a comprehensive health care program for persons with autism, their caregivers, and guardians. The program shall be aligned with the health programs under Section 10(b) of this Act and shall include, but not be limited to:

1. Early screening and detection;
2. Diagnostic assessments;
3. Occupational therapy, physical therapy, speech therapy, and behavioral therapy;
4. Medical, pharmacological, and habilitative interventions; and
5. Other evidence-based interventions as may be determined by the DOH.

The program shall be implemented by the DOH through its retained hospitals and medical centers, and by local government units (LGUs) through their provincial, district, city, and municipal hospitals and rural health units (RHUs).

c. **PhilHealth Benefit Package.** – PhilHealth shall develop and administer a specific benefit package for persons with autism that covers the services enumerated in subsection (b). Coverage shall take effect immediately upon the issuance of the guidelines under subsection (a).

d. **Non-Discrimination in Claims Payment.** – No accredited health facility or health care provider shall deny or unduly delay the processing and payment of claims filed on behalf of a person with autism. Any violation of this provision shall be subject to the administrative sanctions and penalties provided under Republic Act No. 11223 and its implementing rules and regulations, including but not limited to fines, suspension, or revocation of accreditation.

- e. **Burden of Proof.** – In any proceeding arising from the refusal of a claim, the burden of proving that the denial was justified shall rest on the health facility or health care provider.

SECTION 15. Prohibited Acts and Penalties. – The following acts shall be unlawful and subject to the penalties provided herein:

- a. **Discrimination and Stigmatization.** Any person who, in public or through cyberspace, publicly ridicules, harasses, or subjects a person with autism to ridicule or contempt on the basis of their condition shall, upon conviction, be punished by imprisonment of six (6) months to six (6) years, or a fine of Ten Thousand Pesos (₱10,000.00) to Forty Thousand Pesos (₱40,000.00), or both, at the discretion of the court. This provision shall be without prejudice to liability under the Cybercrime Prevention Act of 2012 (Republic Act No. 10175) or other applicable laws;
- b. **Neglect, Abuse, and Exploitation.** Any person who commits any of the following acts against a person with autism shall, upon conviction, suffer the penalty of ten (10) to twenty (20) years imprisonment and a fine of Five Hundred Thousand Pesos (₱500,000.00) to One Million Pesos (₱1,000,000.00):
 - 1. Keeping a person with autism in unsanitary, unsafe, or inhumane living conditions;
 - 2. Neglecting or abandoning a person with autism;
 - 3. Subjecting a person with autism to physical, sexual, or psychological abuse, exploitation, child labor, prostitution, trafficking, or any form of violence;
 - 4. Administering illegal drugs or un-prescribed, unmedicated, or unsupervised sedatives to a person with autism, except when administered by a licensed physician for a legitimate medical purpose; and
 - 5. Acts analogous to the foregoing.

These acts shall also be prosecuted under the Special Protection of Children Against Abuse, Exploitation and Discrimination Act (Republic Act No. 7610), Anti-Violence Against Women and Their Children Act (Republic Act No. 9262), and other applicable laws;

- c. **Unlicensed Practice of Autism-Related Services.** Any person who practices or offers therapy, intervention, or any professional service related to autism without the necessary license, certification, or accreditation from the Professional Regulation Commission (PRC) or relevant government agency shall, upon conviction, be punished by imprisonment of one (1) to six (6) years and a fine of One Hundred Thousand Pesos (₱100,000.00) to Five Hundred Thousand Pesos (₱500,000.00). This provision shall not apply to students, interns, or trainees under direct supervision, or to family caregivers providing unpaid care;
- d. **Violations by Educational Institutions.** Any Special Education (SPED) institution, private school, or similar educational entity, or any official or employee thereof, who commits any of the following acts shall, upon conviction, be punished by imprisonment of one (1) to six (6) years and a fine of One Hundred Twenty Thousand Pesos (₱120,000.00) to Two Hundred Fifty Thousand Pesos (₱250,000.00). If the violation is committed by a juridical entity, the penalty shall be imposed upon the officers or members of the board who knowingly allowed or consented to such violation:
 - 1. Imposing unnecessary requirements for registration or enrollment beyond those prescribed by the DepEd, the Council, or other relevant agencies;
 - 2. Refusing to accept the registration or enrollment of a qualified person with autism without just cause, in violation of non-discrimination provisions of this Act and Republic Act No. 11650;
- e. **Violations by Employers.** Any employer, corporation, or business entity, or the officers thereof, who commits any of the following acts shall, upon conviction, be punished by imprisonment of one (1) to six (6) years and a fine

of One Hundred Twenty Thousand Pesos (₱120,000.00) to Two Hundred Fifty Thousand Pesos (₱ 250,000.00):

1. Unjustly refusing to grant the caregiver leave benefit under Section 10(i)(1) to a qualified employee;
2. Unreasonably denying a request for flexible work arrangements under Section 10(i)(2) without justifiable business grounds communicated in writing;
3. Adopting policies or practices that effectively prevent parents, siblings, or guardians of a person with autism from availing of the benefits granted under this Act;

f. **Violations by Financial Service Providers.** Any bank, insurance company, health maintenance organization (HMO), lending company, or other financial service provider, or the officers thereof, who denies services or imposes discriminatory terms and conditions based solely on a person's autism diagnosis in violation of Section 15 of this Act; or imposes additional requirements that are beyond the guidelines provided by the Council, or in the absence thereof, implement unreasonable or unduly burdensome policies or requirements for persons with ASD, shall, upon conviction, be punished by imprisonment of one (1) to six (6) years and a fine of One Hundred Twenty Thousand Pesos (₱120,000.00) to Two Hundred Fifty Thousand Pesos (₱ 250,000.00), without prejudice to administrative sanctions from the Insurance Commission, *Bangko Sentral ng Pilipinas* (BSP), or Securities and Exchange Commission (SEC);

g. **Liability of Government Officials and Employees.** Public officials and employees who violate any provision of this Act, or who, through gross negligence or deliberate inaction, fail to fulfill their duties and responsibilities under this Act, shall be punished by imprisonment of one (1) to six (6) years and a fine of One Hundred Twenty Thousand Pesos (₱120,000.00) to Two Hundred Fifty Thousand Pesos (₱ 250,000.00), without prejudice to the administrative disciplinary proceedings, including suspension, removal, or other sanctions, under Code of Conduct and Ethical Standards for Public

Officials and Employees (Republic Act No. 6713) and other relevant civil service laws, rules, and regulations, without prejudice to criminal prosecution under applicable laws.

SECTION 16. *Implementing Rules and Regulations.* – The Council shall, in consultation and coordination with appropriate national government agencies, organizations of persons with autism, their families, 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 17. *Rule of Construction.* – In the implementation, interpretation, and grant of benefits under this Act, any doubt or ambiguity shall be resolved in favor of the person with autism. The best interest of the person with autism shall be the paramount consideration in allowing access to the benefits and services provided herein. Any rule, regulation, policy, or practice issued by any public or private institution that creates barriers to accessing the benefits of this Act shall be construed strictly against such institution.

SECTION 18. *Sunset Review.* – Six (6) years after the effectivity of this Act, the Council shall be subject to a mandatory review by the Congressional Oversight Committee on Disability Affairs. The review shall assess the Council's performance, impact, and cost-effectiveness in achieving the objectives of this Act. The findings of this review shall serve as the basis for a legislative action to abolish, continue, or modify the Council.

SECTION 19. *Appropriations.* – The amount necessary for the implementation of this Act shall be included in the annual General Appropriations Act.

SECTION 20. *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 21. *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 22. *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,