

SENATE  
S. No. 3132

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Introduced by Senator Miriam Defensor Santiago

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EXPLANATORY NOTE

The Constitution, Article 13, Section 11 provides that:

SEC. 11. 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. There shall be a priority for the needs of the underprivileged, sick, elderly, disabled, women and children. The State shall endeavor to provide free medical care to paupers.

The World Health Organization estimates the number of Filipinos with disabilities at about one for every ten. Eighty percent live in rural areas where the benefit of development could hardly reach them.<sup>1</sup>

In order to maximize our resources in fighting paralysis, we need to be able to coordinate our research activities and grants for programs to improve the quality of life for persons with paralysis and disabilities. By doing so, we will be able to prevent replication of efforts and build upon each other's successes instead and minimize wasted endeavors.

We also need to encourage activities centered on assisting the daily lives of our countrymen with disabilities. By establishing a grant program to institutions providing help to our fellow Filipinos with disabilities, we will be able to increase the effectiveness of worthy programs.

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<sup>1</sup> <http://www.unescap.org/stat/meet/widd/paperphilippines2.htm>

This bill seeks to coordinate all paralysis research and programs across the country. This bill further empowers the Department of Health to provide grants for programs to improve the quality of life for persons with paralysis and physical disabilities.

  
MIRIAM DEFENSOR SANTIAGO

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1 AN ACT  
2 TO ENHANCE AND FURTHER RESEARCH INTO PARALYSIS AND TO IMPROVE  
3 REHABILITATION AND THE QUALITY OF LIFE FOR PERSONS LIVING WITH  
4 PARALYSIS AND OTHER PHYSICAL DISABILITIES, AND FOR OTHER PURPOSES  
5

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

8 SECTION 1. *Short Title.* – This Act shall be known as the “Philippine Paralysis Act.”

9 SECTION 2. *PCHRD Research.* – The Director of the Philippine Council for Health  
10 Research and Development (PCHRD), referred to in this Act as the “Director”, pursuant to the  
11 general authority of the Director, may develop mechanisms to coordinate all government funded  
12 paralysis research and rehabilitation activities in order to further advance such activities and  
13 avoid duplication of activities.

14 SECTION 3. *Paralysis Research Consortia.* – The Director may make awards of grants  
15 to public or private entities to pay all or part of the cost of planning, establishing, improving, and  
16 providing basic operating support for consortia in paralysis research.

17 SECTION 4. *Research.* – Each consortium under Section 3--

18 A. may conduct basic, translational, and clinical paralysis research;

19 B. may focus on advancing treatments and developing therapies in paralysis research;

20 C. may focus on one or more forms of paralysis that result from central nervous system  
21 trauma or stroke;

22 D. may facilitate and enhance the dissemination of clinical and scientific findings; and

1 E. may replicate the findings of consortia members or other researchers for scientific and  
2 translational purposes.

3 SECTION 5. *Coordination of Consortia.* – The Director may, as appropriate, provide for  
4 the coordination of information among consortia under Section 3 and ensure regular  
5 communication among members of the consortia, and may require the periodic preparation of  
6 reports on the activities of the consortia and the submission of the reports to the Director.

7 SECTION 6. *Organization of Consortia.* - Each consortium under Section 3 may use the  
8 facilities of a single lead institution, or be formed from several cooperating institutions, meeting  
9 such requirements as may be prescribed by the Director.

10 SECTION 7. *Public Input.* – The Director may provide for a mechanism to educate and  
11 disseminate information on the existing and planned programs and research activities of the  
12 PCHRD with respect to paralysis and through which the Director can receive comments from the  
13 public regarding such programs and activities.

14 SECTION 8. *Research with Implications for Enhancing Daily Function for Persons with*  
15 *Paralysis.* – The Director, pursuant to the general authority of the Director, may make awards of  
16 grants to public or private entities to pay all or part of the costs of planning, establishing,  
17 improving, and providing basic operating support to multicenter networks of clinical sites that  
18 will collaborate to design clinical rehabilitation intervention protocols and measures of outcomes  
19 on one or more forms of paralysis that result from central nervous system trauma, disorders, or  
20 stroke, or any combination of such conditions.

21 SECTION 9. *Clinical Site Network.* – A multicenter network of clinical sites funded  
22 through this section may--

23 A. focus on areas of key scientific concern, including--

24 1. improving functional mobility;

- 1           2. promoting behavioral adaptation to functional losses, especially to prevent
- 2           secondary complications;
- 3           3. assessing the efficacy and outcomes of medical rehabilitation therapies and
- 4           practices and assisting technologies;
- 5           4. developing improved assistive technology to improve function and
- 6           independence; and
- 7           5. understanding whole body system responses to physical impairments,
- 8           disabilities, and societal and functional limitations; and

9           B. replicate the findings of network members or other researchers for scientific and  
10          translation purposes.

11          SECTION 10. *Coordination of Clinical Trials Networks.* – The Director may, as  
12          appropriate, provide for the coordination of information among networks funded through this  
13          section and ensure regular communication among members of the networks, and may require the  
14          periodic preparation of reports on the activities of the networks and submission of reports to the  
15          Director.

16          SECTION 11. *Programs to Improve Quality Of Life for Persons with Paralysis and*  
17          *Other Physical Disabilities.* – The Secretary of Health (in this title referred to as the “Secretary”)  
18          may study the unique health challenges associated with paralysis and other physical disabilities  
19          and carry out projects and interventions to improve the quality of life and long-term health status  
20          of persons with paralysis and other physical disabilities. The Secretary may carry out such  
21          projects directly and through awards of grants or contracts.

22          SECTION 12. *Activities under the Program.* – Activities under Section 11 may include—

- 23          A. the development of a national paralysis and physical disability quality of life action
- 24             plan, to promote health and wellness in order to enhance full participation,
- 25             independent living, self-sufficiency, and equality of opportunity in partnership with
- 26             voluntary health agencies focused on paralysis and other physical disabilities;

- 1 B. support for programs to disseminate information involving care and rehabilitation  
2 options and quality of life grant programs supportive of community-based programs  
3 and support systems for persons with paralysis and other physical disabilities;
- 4 C. in collaboration with other centers and national voluntary health agencies, the  
5 establishment of a population-based database that may be used for longitudinal and  
6 other research on paralysis and other disabling conditions; and
- 7 D. the replication and translation of best practices and the sharing of information across  
8 the country, as well as the development of comprehensive, unique, and innovative  
9 programs, services, and demonstrations within existing local government unit (LGU)  
10 disability and health programs which are designed to support and advance quality of  
11 life programs for persons living with paralysis and other physical disabilities focusing  
12 on—
- 13 1. caregiver education;
  - 14 2. promoting proper nutrition, increasing physical activity, and reducing tobacco  
15 use;
  - 16 3. education and awareness programs for health care providers;
  - 17 4. prevention of secondary complications;
  - 18 5. home- and community-based interventions;
  - 19 6. coordinating services and removing barriers that prevent full participation and  
20 integration into the community; and
  - 21 7. recognizing the unique needs of underserved populations.

22 SECTION 13. *Grants.* – The Secretary may award grants in accordance with the  
23 following:

- 24 A. To LGU health and disability agencies for the purpose of—
- 25 1. establishing a population-based database that may be used for longitudinal and  
26 other research on paralysis and other disabling conditions;
  - 27 2. developing comprehensive paralysis and other physical disability action plans  
28 and activities focused on the items listed in Section 12 (D);

- 1           3. assisting LGU-based programs in establishing and implementing partnerships
- 2           and collaborations that maximize the input and support of people with
- 3           paralysis and other physical disabilities and their constituent organizations;
- 4           4. coordinating paralysis and physical disability activities with existing LGU-
- 5           based disability and health programs;
- 6           5. providing education and training opportunities and programs for health
- 7           professionals and allied caregivers; and
- 8           6. developing, testing, evaluating, and replicating effective intervention
- 9           programs to maintain or improve health and quality of life.

10        B. To private health and disability organizations for the purpose of—

- 11           1. disseminating information to the public;
- 12           2. improving access to services for persons living with paralysis and other
- 13           physical disabilities and their caregivers;
- 14           3. testing model intervention programs to improve health and quality of life; and
- 15           4. coordinating existing services with LGU-based disability and health
- 16           programs.

17        SECTION 14. *Appropriations.* --The amount necessary for the initial implementation of

18 this Act shall be charged against the appropriations of the Department of Education under the

19 current General Appropriations Act. Thereafter, such sum as may be necessary for its full

20 implementation shall be included in the annual General Appropriations Act as a distinct and

21 separate item.

22        SECTION 15. *Separability Clause.* – If any provision or part hereof, is held invalid or

23 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain

24 valid and subsisting.

25        SECTION 16. *Repealing Clause.* – Any law, presidential decree or issuance, executive

26 order, letter of instruction, administrative order, rule or regulation contrary to or is inconsistent

27 with the provision of this Act is hereby repealed, modified, or amended accordingly.

1           SECTION 17. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its  
2 publication in at least two (2) newspapers of general circulation.

3           Approved,

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