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FOURTEENTH CONGRESS OF OF THE PHILIPPIN First Regular Session		7 JH4 P4113
	SENATE S.B. No. 1126	HECEIVED BY:

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The Constitution, Article XV, Section 3, paragraph 2 provides that the State shall defend:

"The right of children to assistance, including proper care and nutrition, and special protection from all forms of neglect, abuse, cruelty, exploitation and other conditions prejudicial to their development."

The child has the rights to survival, development, protection and participation in accordance with the United Nations' Convention on the Rights of the Child. These rights are interdependent, indivisible and should be respected, promoted and protected so that the child can enjoy a full life.

Shaken Baby Syndrome is a form of child abuse affecting thousands of children every year all over the world. According to studies, it is estimated that between onequarter and one-third of Shaken Baby Syndrome victims die as a result of their injuries, while one-third suffer permanent, severe disabilities including paralysis, seizures, loss of hearing or vision, cognitive impairments, and other disabilities, often resulting in a lifetime of extraordinary medical, educational, and care expenses.

Shaken Baby Syndrome is preventable. Prevention programs abroad have demonstrated that educating new parents and other caregivers about the danger of shaking young children, healthy strategies for coping with infant crying, infant soothing skills, and how to protect children from injury can bring about a significant reduction in the number of cases of Shaken Baby Syndrome. Education programs abroad have been shown to raise awareness about Shaken Baby Syndrome and provide critically important information about the syndrome to caregivers, day care workers, child protection employees, law enforcement personnel, health care providers, and legal representatives.¹

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¹ This bill was originally filed in the Thirteenth Congress, Third Regular Session.

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	FOURTEENTH CONGRESS OF THE REPUBLIC) OF THE PHILIPPINES7JUL -4P 429First Regular Session)			
	SENATE S.B. No. 1126 HECEIVED BY:			
	Introduced by Senator Miriam Defensor Santiago			
1 2 3 4	AN ACT TO ENHANCE THE EFFORTS FOCUSED ON PUBLIC AWARENESS AND EDUCATION ABOUT THE RISKS AND DANGERS ASSOCIATED WITH SHAKEN BABY SYNDROME			
5 6	Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:			
7	SECTION 1. Short Title. – This Act shall be known as the "Shaken Baby Syndrome			
8	Prevention Act of 2007".			
9 10	SECTION 2. <i>Declaration of policies.</i> – It is the policy of the State to prioritize the need of the children.			
10				
11	SECTION 3. Definition of Terms The following terms as used in this Act shall be			
12	defined as follows:			
13	(a) Council shall refer to the Shaken Baby Awareness Advisory Council created under			
14	Section 5 of this Act			
15 16	(b) Secretary refers to the Secretary of Health;(c) Shaken Baby Syndrome (SBS) is a term used to describe the constellation of			
10	symptoms, trauma, and medical conditions resulting from the violent shaking, or abusive impac			
18	to the head, of an infant, toddler or other young child.			
19	SECTION. 4. Public Health Campaign The Secretary shall develop an effective			
20	national Shaken Baby Syndrome public health campaign.			
21	The public health campaign shall inform the general public, and new parents, child car			
22	providers and other caregivers of young children, health care providers, and social workers			

among others, about brain injuries and other harmful effects that may result from shaking, or
 abusive impact to the head, of infants and children under five (5) years old, and healthy strategies
 to cope with a crying infant and related frustrations, in order to help protect children from injury.

In carrying out the public health campaign, the Secretary shall also coordinate activities
with providers of other support services to parents and other caregivers of young children.

In carrying out the public health campaign, the Secretary shall carry out the activities
described in Section 5.1 to 5.3.

8 SECTION 5. National Action Plan and Strategies. –

9 5.1 The Secretary shall:

(a) develop a National Action Plan and effective strategies to increase awareness of
 opportunities to prevent Shaken Baby Syndrome through activities that comprehensively and
 systematically provide information and instruction about healthy strategies for parents and other
 caregivers concerning how to cope with a crying infant and related frustrations; and

(b) coordinate the Plan and effective strategies with evidence-based strategies and efforts
that support families with infants and other young children, such as home visiting programs and
respite child care efforts, which have a role to play in prevention of the syndrome.

5.2 The Secretary shall carry out communication, education, and training about Shaken
Baby Syndrome prevention, including efforts to communicate with the general public by:

(a) disseminating effective prevention practices and techniques to parents and caregivers
 through maternity hospitals, child care centers, organizations providing prenatal and postnatal
 care, organizations providing programs for fathers, and organizations providing parenting
 education and support services;

(b) producing evidence-based educational and informational materials in print, audio,
video, electronic, and other media, giving special attention to educating young men and English
language learners through the materials, and coordinating activities carried out with national
awareness activities, such as the activities accompanying Shaken Baby Awareness Week, which
shall be determined by the Council, to the extent possible;

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(c) carrying out Shaken Baby Syndrome training, which shall aim--

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1 (i) to ensure that primary care providers, home visitors, parent educators, child 2 care providers, foster parents and others involved in the care of young children, and 3 nurses, physicians, and other health care providers, are aware of ways to prevent abusive 4 head trauma and other forms of child maltreatment, and the need to secure immediate 5 medical attention in cases of head trauma; and

6 (ii) to provide health care providers and early childhood educators with the 7 knowledge, skills, and materials to simply, quickly, and effectively educate parents, 8 including adoptive and foster parents, as well as others who are caregivers of young 9 children, about infant crying and thus reduce abuse.

5.3 The Secretary, in consultation with the Council, shall work to ensure that the parents
 and caregivers of children are connected to effective supports through the coordination of
 existing programs and networks or the establishment of new programs.

5.4 To the extent practicable, the supports provided under this paragraph shall include the
provision of a 24-hour phone hotline, and the development of an Internet website for round-theclock support, for:

16 (i) parents and caregivers who struggle with infant crying and related concerns;

(ii) parents and caregivers of surviving children who suffer serious injuries, as a
result of shaking or an abusive impact to the head, as a young child; and

(iii) parents and family members of children who do not survive such shaking or
abusive impact.

SECTION 6. *Creation of the Shaken Baby Awareness Advisory Council.* – The Shaken Baby Awareness Advisory Council is hereby created. The Council shall be composed of members appointed by the Secretary, not later than six (6) months after the date of enactment of this Act, including, to the maximum extent possible, one (1) representative each from:

- (a) Shaken Baby Awareness advocacy organizations, including groups formed by
 parents and relatives of victims;
- 27 (b) child protection advocacy organizations;

28 (c) organizations involved in child protection and child maltreatment prevention;

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1	(d)	disability advocacy organizations;	
2	(e)	pediatric medical associations;	
3	(f)	professional associations or institutions involved in medical research related to	
4		abusive head trauma;	
5	(g)	academic institutions;	
6	(h)	parenting support organizations, including those providing programs targeted	
7		towards fathers;	
8	(i)	organizations who come in contact with families and caregivers of infants,	
9		toddlers, and other young children; and	
10	(j)	other government agencies involved in child abuse prevention activities.	
11	The Se	cretary shall, after consultation with the members of the Council initially	
12	appointed by the Secretary, determine and establish the term of service on the Council that shall		
13	13 apply to all current and future members.		
14	4 Any vacancy in the Council shall not affect the powers of the Council, but shall be filled		
15	5 in the same manner as the original appointment.		
16	The Council shall meet at least semi-annually –		
17	7 (a) to develop recommendations regarding the National Action Plan and effective		
18	18 strategies; and		
19	(b) to develop recommendations related to support services for families and caregivers of		
20	0 young children.		
21	1 The members of the Council shall not receive compensation for the performance of		
22	22 services for the Council, but shall be allowed travel expenses, including per diem in lieu of		
23	subsistence, at rates authorized for employees of agencies under the law, while away from their		
24	homes or regular places of business in the performance of services for the Council. The Secretary		
25	25 may accept the voluntary and uncompensated services of members of the Council.		
26	Any government employee may be detailed to the Council without reimbursement, and		
27	such detail shall be without interruption or loss of civil service status or privilege.		

1 The Secretary shall terminate the Council when the Secretary determines, after 2 consultation with the Council, that it is no longer necessary to pursue the goals and carry out the 3 activities of the Council.

4 SECTION 7. *Appropriations.* – Such sums as may be necessary for the initial 5 implementation of this Act shall be taken from the current appropriations of the Department of 6 Health (DOH). Thereafter, the fund necessary to carry out the provisions of this Act shall be 7 included in the annual General Appropriations Act.

8 SECTION 8. Separability Clause. – If any provision of this Act is held invalid or 9 unconstitutional, the remainder of the Act or the provision not otherwise affected shall remain 10 valid and subsisting.

11 SECTION 9. *Repealing Clause.* – Any law, presidential decree or issuance, executive 12 order, letter of instruction, administrative rule or regulation contrary to or inconsistent with the 13 provisions of this Act is hereby repealed, modified or amended accordingly.

SECTION 10. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its
 publication in at least two (2) newspapers of general circulation.

Approved,

FLDP/8/5/07