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## PERSONS WITH DISABILITIES

### HEALTH AND WELLNESS PROGRAM FOR PERSONS WITH DISABILITIES

#### BACKGROUND

Persons with disabilities (PWDs), according to the UN Convention on the Rights of Persons With Disabilities, include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

The International Classification of Functioning, Disability and Health (ICF) refers to disability as "an umbrella term covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations". The ICF's definition of disability denotes a negative interaction between a person (with a health condition) and his or her contextual factors (environmental and personal factors). A comprehensive approach in interventions is then necessary for persons with disabilities (PWDs) as it entails actions beyond the context of health, but more on helping them to overcome difficulties by removing environmental and social barriers (WHO, 2013).

Globally, over 1 billion people, or approximately 15% of the world's population, have some form of disability. About 110 to 190 million people 15 years and older have significant difficulties in functioning. Moreover, the rapid spread of chronic diseases and population ageing contribute to the increasing rates of disability. About 80% of the world's PWDs live in low-income countries, wherein majority are poor and cannot access basic services. With their conditions, PWDs need greater attention and considerations in terms of health needs, without discrimination. However, reports show that PWDs have less access to health services and therefore have greater unmet needs (WHO, 2012.)

In the Philippines, the results of the 2010 Census of Population and Housing (CPH, 2010) show that of the household population of 92.1 million, 1.443 million Filipinos or 1.57%, have a disability. Region IV-A, with 193 thousand PWDs, was recorded to have the highest number of PWD among the 17 regions, while the Cordillera Administrative Region (CAR) had the lowest number with 26 thousand PWDs. There were more males, who accounted for 50.9% of the total PWD in 2010, compared to females, with 49.1% with disability. For every five (5) PWD, one (18.9%) was aged 0 to 14 years, three (59.0%) were in the working age group (15-64 years old), and one (22.1%) was aged 65 years and above (NSO, 2013).

The mandate of the DOH to come up with a national health program for PWD was based on Republic Act No. 7277, "An Act Providing for the Rehabilitation and Self-Reliance of Disabled Persons and Their Integration into the Mainstream of Society and for Other Purposes" or otherwise known as "The Magna Carta for Disabled Persons" and the Implementing Rules and Regulations (IRR) of RA 7277. This document stipulated that the DOH is required to: (1) institute a national health program for PWDs, (2) establish medical rehabilitation centers in provincial hospitals, and (3) adopt an integrated and comprehensive program to the Health Development of PWD, which shall make essential health services available to them at affordable cost. In response to this, the DOH issued Administrative Order No. 2006-0003, which specifically provides the strategic framework and operational guidelines for the implementation of Health Programs for PWDs.

In 2013, a Medium Term Strategic Plan (2013-2017) was developed to strengthen the existing health program for PWDs. However, in the review done for the purpose, it was noted that in the implementation of the program in the past years, there were operational issues and gaps identified that need to be addressed. These include among others, the need to strengthen multi-sectoral action to harmonize efforts of stakeholders; clarify delineation of roles and responsibilities of concerned government agencies working for PWDs; strengthen national capacity, both facilities and manpower, to provide rehabilitation services for PWDs from primary to tertiary level of care; provide access to health facilities and services for PWDs; and, strengthen registration database for PWDs.

Recently, the World Health Organization released the Global Disability Action Plan 2014-2021. This document intends to help countries direct their efforts towards specific actions in order to address health concerns of persons with disabilities. The Action Plan identified three major objectives: to remove barriers and improve access to health services and programmes; (2) to strengthen and extend rehabilitation, habilitation, assistive technology, assistance and support services, and community-based rehabilitation; (3) to strengthen collection of relevant and internationally comparable data on disability and support research on disability and related services.

Considering all of the above, the Health and Wellness Program of Persons with Disabilities currently has been configured to address all the issues discussed above, and aligned with the thrusts and goals of Kalusugang Pangkalahatan or Universal Health Care, the Global Disability Action Plan 2014-2021, and, the direction the program should take in the succeeding years as articulated in the newly developed strategic plan.

#### II. HEALTH AND WELLNESS PROGRAM FOR PERSONS WITH DISABILITIES

**A. Vision:** A country where all persons with disability, including children and their families, have full access to inclusive health and rehabilitation services.

**B. Mission:** A program designed to promote the highest attainable standards of health and wellness for PWDs by fostering a multi-sectoral approach towards a disability inclusive health agenda.

**C. Objectives:**

- To address barriers and improve access and reasonable accommodations of PWDs to health care services and programs.
- To ensure the accessibility, availability, appropriateness and affordability of habilitation and rehabilitation services for PWDs, including children with disabilities.
- To ensure the development and implementation of policies and guidelines, health service packages, including financing and provider payment schemes for health services of PWDs.
- To enhance capacity of health providers and stakeholders in improving the health status of PWDs.
- To strengthen collaboration and synergy with and among stakeholders and sectors of society to improve response to a disability inclusive health agenda through regular dialogues and interactions.
- To provide the mechanism in facilitating the collection, analysis and dissemination of reliable, timely and complete data and researches on health-related issues of PWDs in order to develop and implement evidence-based policies and interventions.

**D. Action Framework for the Health and Wellness Program of Persons with Disabilities**

The Action Framework for the Health and Wellness Program of Persons with Disabilities is adapted from the three major objectives of the WHO Global Disability Action Plan 2014-2021. As applied in the country, program actions or interventions shall focus on the following areas: 1) removal of barriers and improve access to health services and programs; (2) strengthening and expansion of rehabilitation, habilitation, assistive technology, and

community-based rehabilitation; (3) strengthen collection of relevant and internationally comparable data on disability and support research on disability and related services.

Figure 1 depicts the Action Areas that the Health and Wellness Program for Persons with Disabilities shall focus its interventions along the thrusts and goals of Kalusugang Pangkalahatan or Universal Health Care.

**Action Area 1: Removal of barriers and improve access to health services and programs.** People with disabilities, including children, encounter a range of attitudinal, physical and systemic barriers when they attempt to access health care such as physical barriers related to the architectural design of health facilities or health providers' lack of adequate knowledge and skills in providing services for persons with disabilities, among many others.

Therefore, actions or interventions should be under taken to ensure that persons with disabilities have access, on an equal basis with others, to health facilities and services. It is important to identify all of these barriers and institute collective actions to remove these barriers and improve access of persons with disabilities to health services and programs.

**Action Area 2: Strengthening and expansion of rehabilitation, habilitation, assistive technology, and community based rehabilitation.** Habilitation and rehabilitation are "sets of measures that assist individuals, who experience or are likely to experience disability, to achieve and maintain optimal functioning, in interaction with their environments". Encompassing medical care, therapy and assistive technologies, they should begin as early as possible and be made available as close as possible to where people with disabilities live.

Increasing government investments in habilitation, rehabilitation and provision of assistive technologies are expected actions or interventions that must be put in place. This is going to be beneficial in the long run because they build human capacity and can be instrumental in enabling people with limitations in functioning to remain in or return to their home or community, live independently, and participate in all aspects of life. They can reduce the need for formal support services as well as reduce the time and physical burden for caregivers.

**Action Area 3: Strengthening collection of relevant and internationally comparable disability data and support disability researches.** Data is needed to strengthen health care systems, as it informs policy and interventions. These can be collected through dedicated disability surveys, or disaggregating data from other data collection efforts by disability status, and research.

Interventions along this action area should ensure that data collected would be internationally comparable and results of researches and studies done are used for informing policy and resource allocation. The use of the Philippine Registry for Persons with Disability is an intervention that should be strengthened and made fully operational.

Figure 1: Action Framework for the Health and Wellness Program for Persons with Disabilities

Health and Wellness of Person with Disability and Family

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**First Public Health Convention on the Health and Wellness of PWDs - November 6-7, 2014**  
**PowerPoint Presentation of Speakers**

Day 1

- Current Developments in the Philippine Rehabilitation Services (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/CurrentDevelopmentsPhilippineRehabilitationServices.pptx>)
- Current Innovative Approaches to Increasing Access to Rehabilitation Services (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/CurrentInnovativeapproaches.pptx>)
- First Survey on Disabilities as part of NNHeS (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/Disability1.pptx>)
- Access to SRH Services (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/DOHConventionJM.pptx>)
- Opening: DOH Disability and Health Summit (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/DoHDisabilityHealthSummit.pptx>)
- Community Based Inclusive Health: A Vision (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/HealthBuildingInclusiveCommunities.pptx>)
- Perspective on Health and Wellness for Persons with Disabilities (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/PHLHealthandwellness.pptx>)
- National Perspectives: Philippine Framework for Action on the Health and Wellness Program for PWDs (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/PWDCConvention.ppt>)
- Personal Perspectives on Health and Wellness for PWDs (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/Raissa.ppt>)

Day 2

- Issues on Screening for Developmental Disabilities: Health Promotion Issues and Challenges (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/Developmental%20Disabilities.pptx>)
- Issues on Sexual and Reproductive Health of Persons with Disabilities (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/FinalDocuments%20IssueSexualReproductiveHealth.ppt>)
- Health Promotion Issues on Increasing Access to Health and Wellness of PWDS (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/HealthPromotionIssues.pdf>)
- Promoting Physical Activity Among PWDS (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/PhysicalActivityAmongPWDS.pptx>)
- Mental Health and Psychosocial Support for PWDs (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/PWD.pptx>)
- 1st Public Health Convention on the Health and Wellness of Persons with Disabilities (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/SynthesisDayPrescy.pptx>)
- Expanding the ZMORPH Benefit Package - The Product Team for Special Benefits (<http://gwhs-stg01.i.gov.ph/~dohgov/sites/default/files/ZMORPHExpansion.ppt>)