

**[KKPP DEPARTMENT ORDER NO. 49, S. 1994,
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**GUIDELINES FOR THE IMPLEMENTATION OF SOCIAL
MOBILIZATION OF PERSONS WITH DISABILITIES, SENIOR
CITIZENS AND THEIR FAMILIES**

I.

Introduction

In the Philippines, persons with disabilities constitute a significant disadvantaged group and a vastly under-utilized human resource base. It is estimated that 10% of the Philippine population belong to this category and 75% to 85% of them live in rural areas. Among them are children who are either born with or acquire physical, sensory or mental impairments. Results of the 1990 census show that 26% of the total number of disabled are children between the ages of 0-14 years old. In the third world countries, it was established that there is a correlation between disability and poverty. Thus, the risk of impairment is much greater for children belonging in the developing world.

Meanwhile, existing condition of persons with disabilities particularly in the rural areas has called for a more participative action/effort among themselves. This has resulted to the organization of self help groups among disabled persons. However, in its beginning stage, there is a need to enhance the management and operation of such groups. The lack of organizational know-how and resources has contributed to the non-involvement of this group in policy planning in areas which directly concern them. The attitudinal and structural barriers, inadequate support services due to limited resources and the low priority status given to the problems concerning disability issues are identified to be some of the major problems that need to be addressed.

It was demographically indicated that the rate of growth of the elderly population has been progressively high. This trend implies that the elderly will have an increasing effect in the development goals of the country. In this respect, instead of being the recipients of services, the elderly people are seen as potential resources who could be tapped to contribute to the improvement of their community.

II.

Legal Base

Rehabilitation means a goal-oriented and time-limited aimed at enabling an impaired person to reach an optimum mental, physical and/or social functional level thus providing her/him with the tools to change her/his own life. It can involve measures intended to compensate for a loss of function or a functional limitation (ex. technical aid) and other measures intended to facilitate social adjustment or readjustment.

Rehabilitation as a philosophy of treatment of the disabled, is a product of western Christian democratic civilization which concerned equality of opportunity for all.

Concerns for the welfare for PWD in the Philippines began as early as 1917 when the Philippine Government adopted the Revised Administrative Code providing compensation benefits during the period of disability. Important legislations were enacted in the '40s, '50s and '60s giving impetus to the rehabilitation of persons with disability in the country.

1. Commonwealth Act. No. 3203 set the provision for the care and protection of disabled children.
2. R.A. No. 65 of 1946 known as the Bill of Rights for the social and economic restoration of disabled veterans and government responsibility.
3. R.A. No. 1179 of 1954 creating the Office of Vocational Rehabilitation now the Bureau of Disabled Persons' Welfare (BDPW) restoring the PWD's useful role in society by providing rehabilitation and placement service.
4. R.A. No. 2615 amending R.A. 1179 creating the National Council on Rehabilitation tasked in updating and coordinating all government and civic programs and setting up nine regional training centers to serve disabled persons in the rural areas.
5. R.A. 3562 set the provision for the education of the blind in the Philippines.
6. The Labor Code of the Philippines set the provision for disability rehabilitation services.
7. Batas Pambansa 344 of 1984 known as Accessibility Law.
8. In 1987 "Freedom Constitution" recognized the PWDs as a basic sector.
9. In 1990 a sectoral representative to the Lower House was appointed.
10. In 1993, President Fidel V. Ramos issued Presidential Proclamation 125 recognizing the need for the 2nd Decade for Persons with Disabilities in the Asia and Pacific Region (1993 to 2002) and enjoining National Government Agencies and the private sector to support and realize the Agenda for Action.

INTERNATIONAL SCENE:

- December 1971 United Nations adopted the Declaration on the Rights of the Mentally Retarded & Disabled Persons. The declaration provided a basis for the full integration of disabled person in the community.
- 1981 is the International Year of the Disabled Persons — It aims to encourage the rehabilitation of an estimated 500 million people suffering from physical or mental disability.

To promote the participation of disabled persons in social development and let them enjoy a standard of living equal to that of their non-disabled peers.

— 1980 the Rehabilitation International produced the Charter of the 80s as their major contribution to the International Year of the Disabled Persons. The Charter recognized the need for every Government to accept basic responsibility for the rehabilitation of disabled persons, and called for measures to protect and nurture the rights and responsibilities both for the disabled and non-disabled persons.

— The United Nations proclaimed 1983-1992 as the "United Nations Decade of Disabled Persons." Concrete objectives were set out in the World Programme of Action concerning disabled persons which was adopted by the United Nations General Assembly in December 1982.

III. Project Brief

This is a 5-year pilot project which aims to mobilize and build up the productive potentials and resources of a clientele group traditionally regarded as beneficiaries so that they may be able to respond to their own needs and also assume responsibility for contributing to the well-being of the community. It is designed as a community-based program which recognizes that the potential for self-help and self-reliance exists in every individual irrespective of disability.

The project addresses the following problems and needs:

1. The lack of early detection of impairment and intervention measures is causing among children with disabilities unnecessary deterioration. This is compounded by the parents' inability to cope with the problems of their children's disability due to misinformation and lack of guidance and assistance.
2. Persons with disability and their organizations are hardly involved in policy planning in areas that directly concern them and their families. Many lack the confidence and skills in leadership, management of self-help groups and advocacy for their rights.
3. There is an increasing number of senior citizens who have the time, talent and resources yet are not tapped to share these with others and contribute to the improvement of the community.

The integration of the disabled and the elderly into the mainstream of society requires the utilization and mobilization of their skills and capacities to actively participate in the country's development efforts.

IV. Objectives

A. General Objective:

To tap and mobilize the potentials and resources of persons with disabilities, senior citizens and their families in the following:

1. Early Detection, Prevention and Intervention of Disabilities Among Children Aged 0-6 years;

2. Organization and Strengthening of Self-Help Groups Among the Disabled; and

3. Provision of volunteer service to needy senior citizens and the community as a whole.

B. Specific Objectives:

1. Early Detection, Prevention, and Intervention of Disabilities Among Children

1.1 To identify and assist children aged 0-6 years who show signs and symptoms of disability and/or impaired in seeing, hearing, moving and learning

1.2 To teach parents, child care givers, volunteers early disability detection, prevention, and intervention measures and procedures, to minimize the consequences of disability and reduce the children's dependence on family in performing basic activities of daily living

2. Organization of Self-Help Groups of Persons with Disability

2.1 To identify and train a core of disabled persons who shall in turn train others on effective leadership, group management, advocacy and other social skills

2.2 To provide support to persons with disability in establishing, managing and strengthening self-help groups and income-generating projects

3. Senior Citizens as Volunteer Resource

3.1 To identify senior citizens who have the time, talent resources and willingness to contribute to the improvement of the community

3.2 To motivate and train selected senior citizens on volunteerism and leadership in any of the following: peer outreach, senior aides, sponsorship, special support services for solo parents, bereaved and abandoned persons and families and others depending on community needs

3.3 To improve existing Day Centers for Elderly and expand its services to include volunteerism among their present activities

**V.
Target Beneficiaries**

The direct beneficiaries of this project are:

1. Children 0-6 years old who show signs and symptoms of disabilities and those already impaired in seeing, hearing, moving and learning

2. Disabled adults who may or may not be members of self-help groups

3. Senior citizens (60 years old and above) who are needy and those with time, talent, treasure and willingness to share this with others

VI. Target Areas/Project Coverage

This project will cover 15 regions with concentration on municipalities and cities that have been identified by the National Statistics Office as having high incidence of disability (based on the 1990 census). Added to these will be twenty-five depressed provinces for poverty alleviation.

Within a municipality and city, three depressed barangays shall be targetted initially. As project activities are implemented and initial outputs are seen in the barangays, the project workers shall move on to the next barangay until all the depressed barangays are covered and expected outputs are evident.

Criteria for Selection of Target Areas are the following:

1. known high incidence of disabilities (based on previous surveys and census)
2. presence of high risk factors or characteristics of being a depressed community
3. inadequate basic health and social services
4. visible interest and support of local government executives and officials to undertake a project
5. availability of interested and motivated social welfare workers and community volunteers

Accessibility of the areas for monitoring and supervision purposes is also a factor to be considered.

The following municipalities and cities will be covered during the first two years of project operation:

REGION I Urdueta & San Fabian Pangasinan Dagupan City Laoag City	REGION VII Cebu City Tanke, Talisay
REGION II Cauayan & Ilagan, Isabel Penablanca, Cagayan	REGION VIII Hilongos/Alang-Alang, Leyte Calbayog City
REGION III Balanga, Bataan	REGION IX Zamboanga City