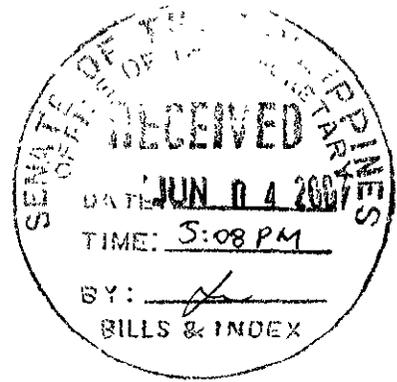


THIRTEENTH CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
Third Regular Session)

SENATE
S.B. No. 1005



Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The Constitution, Article II, Section 15, provides:

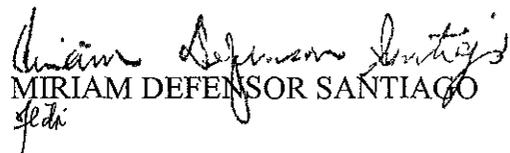
The State shall protect and promote the right to health of the people and instill health consciousness among them

Postpartum depression is a devastating mood disorder which strikes many women during and after pregnancy. Postpartum mood changes are common and can be broken into three subgroups: 'baby blues,' characterized by mood swings, feelings of being overwhelmed, tearfulness, irritability, poor sleep, mood changes, and a sense of vulnerability, and is an extremely common and the less severe form of postpartum depression; postpartum mood and anxiety disorders, which are more severe than baby blues and can occur during pregnancy and anytime within the first year of the infant's birth; and postpartum psychosis, which is the most extreme form of postpartum depression and can occur during pregnancy and up to twelve months after delivery, and its symptoms include losing touch with reality, distorted thinking, delusions, auditory hallucinations, paranoia, hyperactivity, and rapid speech or mania.

Although experts offered theories that might explain this disorder, the causes of postpartum depression are complex and unknown at this time. Furthermore, it is estimated that there were 126,826 cases of postpartum depression in the Philippines in 2004, but this number has been heavily measured through statistical extrapolation rather than an actual count. This complete lack of statistics and information concerning this disorder is alarming. If this disorder goes undiagnosed and/or untreated, postpartum depression can lead to further depression, substance abuse, loss of employment, divorce

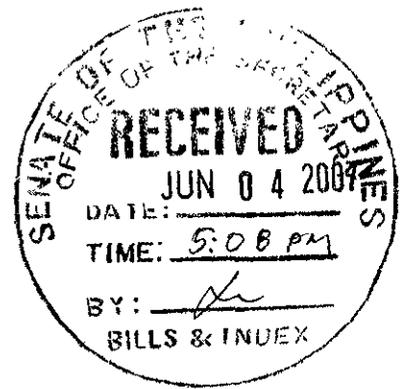
and further social alienation, self-destructive behavior, or even suicide. Other known sociological impacts include negative effects on the infant's physical and psychological development, child abuse, neglect or death of the infant or other siblings, and the disruption of the family.

But postpartum depression is a treatable disorder if promptly diagnosed by a trained provider and attended to with a personalized regimen of care including social support, therapy, medication, and, when necessary, hospitalization. Research and public information campaigns is valuable in the diagnosis and treatment, and could eliminate the social stigma surrounding depression and mental illness, the myth of motherhood, the new mother's inability to self-diagnose her condition, the new mother's shame or embarrassment over discussing her depression so near to the birth of her child, the lack of understanding in society and the medical community of the complexity of postpartum depression.


MIRIAM DEFENSOR SANTIAGO
feda

THIRTEENTH CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
Third Regular Session)

SENATE
S.B. No. 100



Introduced by Senator Miriam Defensor Santiago

AN ACT
TO PROVIDE FOR RESEARCH
ON POSTPARTUM DEPRESSION AND PSYCHOSIS

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

SECTION 1. *Short Title.* – This Act may be cited as the “Postpartum Depression Research Act of 2007.”

SECTION 2. *Definition.* – For the purposes of this Act, the term

- (A) “Secretary” shall refer to the Secretary of the Department of Health;
- (B) “Postpartum conditions” shall refer to the complex combination of physical, emotional, and behavioral changes that occur in a mother after giving birth, ranging from mild to severe depression.

SECTION 3. *Research on Postpartum Depression and Psychosis.* –

- (A) In General- The Secretary, acting through the Director of the National Center for Mental Health (in this section referred to as the “Center”), shall expand and intensify research and related activities of the Center with respect to postpartum conditions.
- (B) Coordination With Other Centers- The Director of the Center shall coordinate the activities of the Director under subsection (A) with similar activities conducted by the other national research centers and agencies of the Department of Health to the extent that such centers and agencies have responsibilities that are related to postpartum conditions.

(C) Programs for Postpartum Conditions- In carrying out subsection (A), the Director of the Center shall conduct or support research to expand the understanding of the causes of, and to find a cure for, postpartum conditions. Activities under such subsection shall include conducting and supporting the following:

- (1) basic research concerning the etiology and causes of the conditions;
- (2) epidemiological studies to address the frequency and natural history of the conditions;
- (3) development of improved diagnostic techniques;
- (4) Clinical research for the development and evaluation of new treatments, including new biological agents; and
- (5) information and education programs for health care professionals and the public.

SECTION 4. *Appropriations.* – The amount necessary to carry out the provisions of this Act shall be included in the budget of concerned government agencies in the General Appropriations Act of the year following its enactment into law and thereafter.

SECTION 5. *Repealing Clause.* – All laws, decrees, executive orders, administrative orders or parts thereof inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

SECTION 6. *Separability Clause.* – If any provision of this Act is held invalid or unconstitutional, other provisions not affected thereby shall continue to be in full force and effect.

SECTION 7. *Effectivity Clause.* – This Act shall take effect fifteen (15) days following its complete publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved,