

Republic of the Philippines  
**HOUSE OF REPRESENTATIVES**  
Quezon City, Metro Manila

**SEVENTEENTH CONGRESS**  
First Regular Session

House Bill No. 1040



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**Introduced by Representative Ron P. Salo**

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### **EXPLANATORY NOTE**

Mental health is a fundamental component of a person's overall health and well-being. As defined by World Health Organization (WHO), health is "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." The Filipino's right to health is enshrined in Article II, Section 15 of the Philippine Constitution.

Perhaps because of social and cultural stigma attached to being afflicted with mental disorder, mental health has not been given sufficient attention in the Philippines despite studies highlighting the need for a more intensive mental health service delivery system. The Department of Health reported more than 8,000 cases of mental disorders in 2015, with schizophrenia comprising a large percentage at 3,457 making it on top of the 10 leading causes of morbidity (National Center for Mental Health, 2016). There were more than 2,000 cases of bipolar affective disorder, followed by psychotic disorder and depression. As early as 2004, a DOH-commissioned Social Weather Stations survey found that almost one per 100 households (0.7%) has a family member who has a mental disorder. The WHO reported 2,558 cases of suicide in the country in 2012. The WHO Global School-Based Health Survey in 2011 showed that 16% of students between 13-15 years old have seriously considered attempting suicide, while 13% have actually attempted suicide at least once.

The State has limited resources to adequately address the large and growing number of mental health problems. The 2011 WHO Mental Health Atlas approximated that 5% of the total health budget goes to mental health services. However, majority of primary health care doctors and nurses have not received official in-service training on mental health within the last 5 years, and there are no available officially approved manuals on the management and treatment of mental disorders in most primary health care clinics.

In addition to limited access to proper health care services, persons with mental disorders are also vulnerable to abuse. In a Special Report in March 2015, the United Nations (UN) Special Rapporteur on Torture and other Cruel, Inhuman or

Degrading Treatment or Punishment cited incidents of ill-treatment of children with mental disorders in so-called prayer camps (alternative residential facilities), such as shackling to the walls, floors or trees and forced fasting. An earlier report in 2013 cited severe abuses, such as neglect, mental and physical abuse and sexual violence, committed against people with psychosocial and intellectual disorders in health-care settings. Certainly, in those instances, instead of getting cured, their conditions get aggravated.

Thus, responding to mental health issues with a “human rights-based” approach has been highlighted by international bodies such as the UN and the WHO. Very recently, on 29 June 2016, the UN General Assembly adopted a Resolution affirming the need for States to integrate human rights perspective into mental health services. WHO, in its 2003 Mental Health Legislation and Human Rights document (WHO Document), stressed that “all people with mental disorders have the right to receive high quality treatment and care delivered through responsive health care services,” and that “they should be protected against any form of inhuman treatment and discrimination.”

The WHO Document also underscored the need for mental health legislation to protect the rights of people with mental disorders. The document states that mental health legislation: (i) can provide a legal framework for addressing critical issues such as community integration of persons with mental disorders, provision of high quality care, protection of civil rights and the protection and promotion of rights in other critical areas such as housing, education and employment; and (ii) can play an important role in promoting mental health and preventing mental disorders.

This proposed law aims to address the growing mental health needs of Filipinos by formulating and institutionalizing a national mental health care delivery system that will ensure available, accessible, affordable, equitable, responsive, and high quality mental health care services, especially the marginalized and high-risk population. This law also aims to promote mental health and well-being of all Filipinos.

Hence, immediate passage of this bill is earnestly sought.

  
**Ron P. Salo**  
KABAYAN Party List

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**AN ACT PROMOTING MENTAL HEALTH,  
PROVIDING FOR A NATIONAL MENTAL HEALTH CARE DELIVERY SYSTEM,  
ESTABLISHING A PHILIPPINE MENTAL HEALTH COUNCIL,  
APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES**

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

**SECTION. 1. Short Title.** – This Act shall be known as the "Philippine Mental Health Act of 2016."

**SEC. 2. Declaration of Policy.** – It is hereby declared the policy of the State to protect, promote, and fulfill the right of all Filipinos to mental health. It shall promote mental health and well-being of the people, respect the rights of the people who require mental health services, and protect the rights of all people with mental disabilities. The State shall provide mental health care services appropriate to their needs and based on nationally and internationally-accepted standards.

The state recognizes that people with mental disorders are a vulnerable section of society. Because of the nature and/or severity of their illness, people with mental disorders may face discrimination, marginalization, and other vulnerabilities that increase the likelihood of violation of their human rights. Hence, the State shall endeavor to develop plans, policies, programs, mechanisms and measures to address these discrimination, marginalization and vulnerabilities.

The State reaffirms its commitment as a State-Party to the UN Convention on the Rights of Persons with Disabilities, to undertake measures to "ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disorders without discrimination of any kind on the basis of disability," and to promote respect for their inherent dignity. In line with this, the State guarantees its obligation under the UN General Assembly Resolution 46/119, which adopts the principles for the protection of persons with mental illness and for the improvement of mental health care, to implement the said principles through appropriate legislative, judicial, administrative, educational and other measures.

**SEC. 3. Objectives.** – The following are the objectives of this Act:

- a) Ensure a community of Filipinos who are mentally healthy, able to contribute to the development of the country and attain a better quality of life;
- b) Promote mental health and well-being of all Filipinos through access to an integrated, well-planned, effectively organized and efficiently delivered mental health care delivery system that provides affordable, equitable, and high quality mental health care services, and that responds to their mental health needs in equity with their physical health needs;
- c) Ensure the protection of the fundamental rights and freedoms of persons with mental health needs, and the reduction of the burden and consequences of mental ill - health, mental and brain disorders and disabilities;
- d) Provide the direction for a coherent, rational, and unified response to the nation's psychosocial and mental health problems, concerns and efforts;
- e) Integrate mental health care in the general health delivery system; and
- f) Promote a strengthened community based mental health care delivery system.

**SEC. 4. Definitions.** – For the purpose of this Act, the following terms shall be defined as follows:

- a) **Mental health** refers to a state of well-being in which an individual fulfills his or her own potential in every stage of human development, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.
- b) **Mental Disorder** refers to impairments, activity limitations, and individual and participatory restrictions denoting dysfunctional aspects of interaction between an individual and his/her environment.
- c) **Mental Illness** refers to neurologic or psychiatric disorder characterized by the existence of recognizable, clinically significant disturbance in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the neurobiological, psychosocial, or developmental processes underlying mental functioning.
- d) **Mental Incapacity** refers to the: (i) absence of mental capacity resulting to the inability to carry on the everyday affairs of life or to care for one's person or property with reasonable discretion; or (ii) inability to understand the consequences that his/her decisions and actions have for his/her own life or health and for the life and health of others, which may be serious and irreversible.