EXPLANATORY NOTE

The past years have witnessed widespread increase in suicide cases among the Filipinos yet there is limited knowledge about suicide in the Philippines.

Suicide is the tragic result of the unaddressed mental health problem in the country. In a Catholic country like ours, talking about mental health creates a stigma among Filipinos, thus persons affected by mental health condition have to suffer alone in the dark. Unfortunately, more and more youth are suffering from mental illness, hindering them from achieving their maximum potential.

In fact, a school-based survey of the 2015 World Health Organization (WHO) among 8,761 students from Grade 7-9 in the Philippines shows that 11.6% of students age 13 to 17 year olds have considered suicide while 16.8% of students age 13 to 17 year olds have attempted suicide. However, the reality is far darker than these numbers but we know so little of it because there is not enough help extended to our youth.

According to the Department of Education (DepEd), there is not enough guidance counselors in public schools because low salaries have discouraged them from filling the said position. Moreover, mental health education is still to be included in the DepEd’s curriculum. These measures are necessary to ensure that students’ academic, career and social/emotional (including mental health) needs are addressed. As such, this bill is proposed.

It is the state’s policy to protect and promote the overall health of the Filipinos. The passage of Republic Act 11036 has renewed the State’s commitment to ensure that mental health is valued, promoted, and protected. Part of this commitment is to ensure that the well-being of students are prioritized. Schools, being the second home of our youth, shall be empowered to provide the best education. Moreover, it shall also be a conducive environment for learning where students needs, including their mental health, are recognized and addressed. Under this Act, the Mental Health Comprehensive Guidance Program shall provide necessary measures to ensure that the well-being of the youth are protected so that they may reach their full potential as pag-asa ng bayan.

There is a desperate cry for help and we can no longer watch from the sideline and this is why immediate approval of this measure is earnestly sought.

Rep. Ramon V. Guico III
AN ACT
PROMOTING MENTAL HEALTH THROUGH A COMPREHENSIVE GUIDANCE
PROGRAM IN EVERY PUBLIC ELEMENTARY AND SECONDARY SCHOOLS

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

CHAPTER 1
GENERAL PROVISIONS

SECTION 1. Short Title.—This Act shall be known as the “Mental Health
Comprehensive Guidance Program.”

SEC. 2. Declaration of Policy.—It shall be the policy of the State to strengthen their
commitment to protect and promote the right to health of all Filipinos by providing timely,
affordable, high quality, and culturally appropriate mental health care is made available to the
youth. In doing so, the state shall that all persons affected by mental health conditions are able to
live their rights fully as citizens of the Philippines. In pursuance thereto, the State shall:

a. Take responsibility to promote mental health awareness among the youth;

b. Implement policy measures related to the mental health of the youth and pay
due regard so that such policy measures embody the basic principles set forth
in this Act and in the Constitution;
c. Recognize the role of elementary and secondary public schools in promoting mental health by providing efficient and effective health services;

d. Ensure that authorized officers for the mental health of the Filipinos shall, in carrying out services, endeavour to improve the general welfare of the; and

e. Secure and respect the rights of people affected by mental health condition so that they may live a healthy and comfortable lives;


SEC. 4. *Definition of Terms.*—For purposes of this Act, the following terms shall be defined as follows:

a. “Mental Health”, as defined in Republic Act 11036, otherwise known as the Mental Health Act, refers to a state of well-being in which the individual realizes one’s own abilities and potentials, copes adequately with the normal stresses of life, displays resilience in the face of extreme life events, works productively and fruitfully, and is able to make a positive contribution to the community;

b. “Mental Health Condition”, as defined in Republic Act 11036, otherwise known as the Mental Health Act, refers to a neurologic or psychiatric condition characterized by the existence of a recognizable, clinically-significant disturbance in an individual’s cognition, emotional regulation, or behaviour that reflects a genetic or acquired dysfunction in the neurobiological, psychosocial, or developmental processes underlying mental functioning. The determination of neurologic and psychiatric conditions shall be based on scientifically-accepted medical nomenclature and best available scientific and medical evidence;
CHAPTER II
THE MENTAL HEALTH COMPREHENSIVE GUIDANCE PROGRAM

SEC. 5. The Mental Health Comprehensive Guidance Program. — The Mental Health Comprehensive Guidance Program shall be the national strategy to address barriers in maximizing students’ success by providing education, prevention, and crisis and short-term intervention to promote positive mental health. It shall also affirm the State’s commitment to promote the well-being of every Filipino by ensuring that mental health is valued, promoted, and protected.

The Department of Health (DOH) shall serve as the central planning, coordinating, implementing, and monitoring body of the program.

In the implementation of this Act, the DOH shall perform the following functions:

a. Formulate and implement policies, plans and programs for the mental health of the students;

b. Coordinate with different national and local government agencies, including non-government organizations (NGOs), people’s organizations (PO), and private sector for the promotion of mental health to ensure full implementation of statutory commitments herein;

c. Coordinate with the Department of Education (DepEd), including local government units (LGUs), NGOs, POs, and private sector to provide integrated mental health service for the youth.

SEC. 6. Mental Health Education. - The State shall ensure that:

a. Mental health education should be taught as part of the overall school health education programme;

b. Specific topic areas, namely, the brain and behaviour, psychological and emotional development, the effects of stress, successful coping strategies,
common psychological problems in youth and families, risk factors, how and where to seek assistance, and healthy relationships between the sexes, shall be covered and included in the mental health education;

c. The content of teaching the mental health education shall be in the present and shall be relevant to the student's personal life;

d. Students shall actively participate in the development and implementation of classroom activities; and

e. Teachers of mental health education shall be knowledgeable about child development and the development of good interpersonal behaviours.

SEC. 7. Mental Health Program Development. – The State shall create a mental health program that is tailored to the needs of elementary and secondary public schools in the country and shall therefore mandate the said schools to take the following steps in the development of their mental health comprehensive guidance program:

a. Step 1: Establishment of a team

   i. There shall be a collaboration of school personnel, family members, community members, mental health professionals, and students who shall work together for the creation of a productive, supportive, and positive environment.

b. Step 2: Assessment of school and community environment

   ii. Demographics, health risks, and available resources shall be taken into consideration when creating a mental health comprehensive guidance program.

c. Step 3: Development of a plan
iii. Once the needs and potentials for school mental health programs are appreciated and ideas for the most suitable elements are discussed among school personnel, family members, community members, mental health professionals, and students have been discussed, a specific plan of action including the program’s objectives, assignment of responsibilities, a timeline, and a coordinating mechanism for agency linkages shall be developed.

d. Step 4: Monitoring and Evaluation

iv. To determine the effectiveness of a planned intervention, baseline data on the mental health of the children, the quality of school services, the environment of the school and health knowledge, skills and practices of students shall be obtained.

e. Step 5: Coordination and modification of programs

v. A coordinating body shall be organized to regularly meet with the coordinating team composed of the key providers in the mental health program.

SEC. 8. The School Guidance Counselor.— The State shall ensure that all elementary and secondary public schools provide a competent and compassionate school guidance counselor with the following roles:

a. Deliver the school counseling core curriculum that promotes awareness of mental health, positive and healthy behaviors and that removes the stigma surrounding mental health issues;

b. Provide responsive services including internal and external referral procedures and crisis intervention focused on mental health or situational concerns to help student return to the classroom and removing barriers to learning;
c. Recognize warning signs: changes in school performance (changes in grades, attendance), mood changes, complaining of illness before school, increased disciplinary problems at school, experiencing problems at home or family situation (stress, trauma, divorce, substance abuse, exposure to poverty conditions domestic violence), communication from teachers about problems at school, and dealing with existing mental health concerns;

d. Provide school-based prevention, and universal and targeted interventions for students with mental and behavioral health concerns;

e. Provide students with individual planning addressing their academic, career and social/emotional (including mental health) needs;

f. Educate teachers, administrators, parents/guardians, and community stakeholders about the mental health concerns of students;

g. Recognize the role environmental factors have in causing mental health issues and provide adequate resources and information;

h. Advocate, collaborate and coordinate with all stakeholders involved to ensure that students and their families have access to mental health services;

i. Recognize and address barriers to access mental health services and the associated stigma;

j. Adhere and commit to appropriate guidelines regarding confidentiality, the distinction between public and private information and consultation;

k. Direct students and parents to school and/or community resources for additional assistance through referrals that treat mental health issues;
l. Help identify and address students’ mental health issues while working within the ethical standards enumerated in RA 11036, otherwise known as the Mental Health Act;

m. National legislation shall guide school counselors’ informed decision-making and standardize professional practice to protect both the student and school counselor; and

n. Seek to continually update their professional knowledge regarding the students’ social/emotional needs.

SEC. 9. Advisory Council.- An Advisory Council shall be created at the regional and national levels to be headed by the DOH

The regional advisory councils and NAC shall have, as members, representatives from DepEd and Department of Social Welfare and Development (DSWD). The regional advisory councils and NAC shall also have, as additional members, two (2) representatives from accredited nongovernmental organizations working and private sector specializing in mental health care.

The Advisory Council shall have the following functions:

a. Meet regularly to promote coordination across agencies and public schools to enhance the implementation of the program and to resolve any implementation issues;

b. Recommend to the Congress measures and policies for the efficient and effective delivery of the commitments and goals under this Act and integration with the general goal of the government to improve the welfare people with mental health conditions;
c. Ensure that the funding required for the commitments under this Act shall be included in the annual budgets of the government agencies implementing this Act; and

d. Promulgate a grievance redress system and receive complaints pertinent to the implementation of this Act.

SEC. 10. Monitoring, Evaluation, and Reporting of the Mental Health Comprehensive Guidance Program. - The DOH shall monitor the implementation of the program and report its status at least once every three (3) years. The report shall include the findings of the Advisory Council. The DOH shall annually publish a full report of the Mental Health Comprehensive Guidance Program.

SEC. 11. Appropriations. – The initial amount necessary to carry out the provisions of this Act shall be charged against the current appropriated funding of the DOH and any subsequent appropriations shall be included in the annual General Appropriations Act.

SEC. 12. Implementing Rules and Regulations. - The DOH, in consultation with concerned agencies and stakeholders, shall promulgate the implementing rules and regulations of this Act within ninety (90) days from the effectivity of this Act.

SEC. 13. Repealing Clause.—All laws, decrees, executive orders or parts thereof inconsistent with the provisions of this Act is hereby repealed or modified accordingly.

SEC. 14. Separability Clause.—If any part or provision of this Act is declared invalid or unconstitutional, the other parts not otherwise affected shall remain in full effect and force.

SEC. 15. Effectivity.—This Act shall take effect fifteen (15) days after its complete publication in at least two newspapers of general publication.

Approved,