

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

Twentieth Congress
First Regular Session

HOUSE BILL NO. **1879**



Introduced by Hon. Alexandria P. Gonzales

EXPLANATORY NOTE

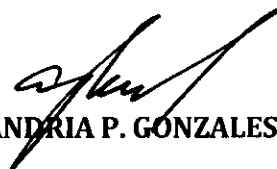
The aging population in the Philippines continues to grow, bringing with it a significant rise in mental health challenges faced by the elderly, particularly loneliness, depression, and social isolation. According to data from the Department of Health and local studies, many Filipino senior citizens suffer in silence, often disconnected from family, community, and health support systems.

The traditional extended family structure that once provided consistent care and companionship to the elderly is increasingly eroded by urban migration, overseas work, and evolving socio-economic pressures. The pandemic further exacerbated this disconnect, revealing gaps in elder care and the urgent need for policy intervention.

This bill seeks to establish a comprehensive national program to address mental health concerns and loneliness among older adults through community engagement, psychological support, digital literacy initiatives, and intergenerational programs. By investing in the mental and emotional well-being of our senior citizens, we not only uphold their dignity and rights, but also recognize their enduring contributions to society.

The passage of this measure will promote a more compassionate, inclusive, and mentally healthy aging population—ensuring that no Filipino elder feels forgotten, isolated, or invisible.

Immediate passage of this bill is earnestly sought.


ALEXANDRIA P. GONZALES

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AN ACT

ESTABLISHING A NATIONAL PROGRAM FOR THE MENTAL HEALTH AND SOCIAL WELL-BEING OF SENIOR CITIZENS, TO BE KNOWN AS THE “ELDER MENTAL HEALTH AND LONELINESS REDUCTION ACT,” AND APPROPRIATING FUNDS THEREFOR

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 “Elder Mental Health and Loneliness Reduction Act.”

SEC. 2. *Declaration of Policy.* - It is the policy of the State to promote and protect the mental health and overall well-being of senior citizens. The government shall implement measures that reduce loneliness, prevent mental health decline, and enhance the quality of life of older persons through accessible, community-based, and culturally responsive programs.

SEC. 3. *Definition of Terms.* - For purposes of this Act:

- a) Senior Citizens refer to individuals aged sixty (60) years and above.
- b) Loneliness is the subjective feeling of isolation or lack of meaningful connection with others.
- c) Mental Health Services include psychological counseling, psychiatric care, peer support groups, and other therapeutic interventions.
- d) Community Care Hubs refer to local government or accredited centers providing support, activities, and health monitoring for senior citizens.

SEC. 4. *National Elder Mental Health and Loneliness Reduction Program.* - There is hereby established a National Program for Elder Mental Health and Loneliness Reduction, which shall include:

- a) Provision of free or subsidized mental health screenings and counseling for senior citizens.
- b) Creation of “Senior Wellness and Socialization Hubs” in every city and municipality.
- c) Implementation of intergenerational programs to foster meaningful engagement between seniors and youth.
- d) Training of barangay health workers and caregivers on recognizing and responding to elder mental health issues.

- e) Digital literacy and inclusion programs to help seniors connect with family and access online resources.
- f) Public awareness campaigns to destigmatize mental health concerns among the elderly.

SEC. 5. *Implementing Agencies.* - The Department of Health (DOH), in coordination with the Department of Social Welfare and Development (DSWD), Local Government Units (LGUs), and the National Commission of Senior Citizens (NCSC), shall be the lead agencies in the implementation of this Act.

SEC. 6. *Funding.* - The initial funding for the implementation of this Act shall be charged against the current appropriations of the DOH and DSWD. Thereafter, such amount as may be necessary shall be included in the annual General Appropriations Act.

SEC. 7. *Implementing Rules and Regulations (IRR).* - Within ninety (90) days from the effectivity of this Act, the DOH and DSWD shall promulgate the necessary implementing rules and regulations (IRR).

SEC. 8. *Separability Clause.* - If any provision of this Act is declared unconstitutional, the remaining provisions not affected shall remain in full force and effect.

SEC. 9. *Repealing Clause.* - All laws, decrees, executive orders, or rules and regulations contrary to or inconsistent with this Act are hereby repealed or amended accordingly.

SEC. 10. *Effectivity.* - This Act shall take effect fifteen (15) days after its complete publication in the Official Gazette or in at least two (2) national newspapers of general circulation.

Approved,