

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

Twentieth Congress
First Regular Session

HOUSE BILL NO. **4225**



Introduced by **Representative RAYMOND ADRIAN SALCEDA**

AN ACT
INSTITUTIONALIZING A NATIONAL SUICIDE PREVENTION AND MENTAL
HEALTH CRISIS HOTLINE, ESTABLISHING IT AS AN EMERGENCY SERVICE,
PROVIDING FUNDS THEREFOR, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

Suicide is a growing public health and social crisis in the Philippines. According to the World Health Organization, more than 700,000 people die each year globally due to suicide, with young people and working-age adults among the most vulnerable. In the Philippines, suicide rates have increased over the past decade, exacerbated by the COVID-19 pandemic, economic insecurity, and the limited accessibility of mental health services.

While the Department of Health (DOH) currently operates hotlines such as the National Center for Mental Health (NCMH) Crisis Hotline, these remain underfunded, fragmented, and not fully integrated into the national emergency system. Many calls go unanswered due to staff shortages, and awareness of the service remains low. For many Filipinos in crisis, there is no guarantee of immediate, life-saving help.

This bill institutionalizes a **National Suicide Prevention and Mental Health Crisis Hotline** as a permanent, nationwide emergency service, operating through a three-digit number, available 24 hours a day, seven days a week, and free of charge from any mobile or landline network. The hotline will be integrated into the national 911 emergency platform, with capacity to dispatch responders, connect callers to licensed mental health professionals, and provide immediate counseling and crisis intervention.

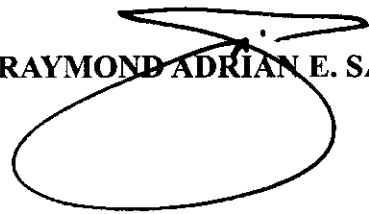
Beyond mental health services, this bill acknowledges that **financial distress is often a root cause of suicide risk**. For many individuals, the inability to meet basic needs, pay for medicine, or cover emergency expenses can trigger despair and self-harm. To address this, the bill empowers licensed social case workers to assess whether a caller's crisis is primarily financial in nature, and in such cases, to refer the individual or family to the **Department of**

Social Welfare and Development (DSWD) for possible coverage under the Assistance to Individuals in Crisis Situations (AICS) program. This integration of psychosocial support and immediate financial relief represents a holistic, life-saving innovation in crisis intervention.

The measure mandates proper staffing with licensed mental health professionals and trained responders, and guarantees sustainable funding through the General Appropriations Act. The hotline will also serve as a data-driven platform, collecting anonymized statistics to improve national suicide prevention strategies and guide mental health policy.

By passing this bill, Congress will ensure that no call for help goes unanswered. It will not only save lives but also reduce stigma, strengthen the implementation of Republic Act No. 11036 or the *Mental Health Act*, and give Filipinos in crisis a lifeline that is accessible, integrated, and responsive to both mental health and economic realities.

In view of the foregoing, the immediate passage of this measure is earnestly sought.



RAYMOND ADRIAN E. SALCEDA

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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 “*National Suicide Prevention Hotline Act.*”

SEC. 2. *Declaration of Policy.* It is the policy of the State to protect and promote the right to mental health, consistent with Republic Act No. 11036 or the *Mental Health Act*, and to provide accessible, immediate, and life-saving interventions for individuals experiencing mental health crises. To this end, the State shall establish and sustain a nationwide suicide prevention and crisis hotline as a dedicated emergency service, integrated with existing emergency and social protection systems.

SEC. 3. *Establishment of the National Suicide Prevention Hotline.* There is hereby established a National Suicide Prevention and Mental Health Crisis Hotline, accessible nationwide through a three-digit toll-free number, operating twenty-four (24) hours a day, seven (7) days a week.

The Hotline shall be considered an emergency service, at par with police, fire, and medical emergency hotlines. Calls and messages shall be free of charge from all landline and mobile networks.

SEC. 4. *Lead Agency.* The Department of Health (DOH), through the National Center for Mental Health (NCMH), shall be the lead agency in the establishment and operation of the Hotline. It shall coordinate with the Department of Information and Communications Technology (DICT), the Department of the Interior and Local Government (DILG), the National Telecommunications Commission (NTC), and other relevant agencies to ensure full technical integration and universal access.

SEC. 5. *Functions of the Hotline.* The Hotline shall:

- (a) Provide immediate crisis counseling and suicide prevention services;
- (b) Connect callers to licensed mental health professionals, hospitals, and crisis centers;
- (c) Dispatch emergency responders, in coordination with the Philippine National Police (PNP), Bureau of Fire Protection (BFP), and local government emergency units, if necessary;
- (d) Maintain referral pathways to community-based mental health programs and treatment facilities;
- (e) Collect anonymized data for policy development and service improvement; and
- (f) In cases where the crisis is determined to be primarily financial in nature, and upon the assessment of a licensed social case worker, refer the individual or family to the Department of Social Welfare and Development (DSWD) for possible coverage under the Assistance to Individuals in Crisis Situations (AICS) program.

SEC. 6. *Staffing and Capacity.* The DOH shall employ, assign, or accredit licensed psychologists, psychiatrists, psychiatric nurses, guidance counselors, and trained crisis responders to staff the Hotline. Continuous training and certification shall be conducted to ensure high-quality service.

SEC. 7. *Funding.* The amount necessary for the initial implementation of this Act shall be charged against the current appropriations of the DOH. Thereafter, such sums as may be necessary for the full and continuous operation of the Hotline shall be included in the annual General Appropriations Act.

The DSWD shall likewise allocate sufficient funds under the AICS program to respond to referrals from the Hotline, ensuring that individuals in dire financial crisis as identified by a social case worker may receive appropriate assistance.

SEC. 8. *Integration with Emergency Systems.* The Hotline shall be fully integrated with the 911 national emergency hotline and shall operate in parallel coordination with other emergency response agencies to ensure swift intervention for mental health crises.

SEC. 9. *Implementing Rules and Regulations.* Within ninety (90) days from the effectivity of this Act, the DOH, in coordination with the DICT, DILG, NTC, DSWD, and other relevant stakeholders, shall promulgate the necessary rules and regulations for the effective implementation of this Act.

SEC. 10. *Separability Clause.* If any part or provision of this Act is declared unconstitutional or invalid, the remaining portions not affected thereby shall remain in full force and effect.

SEC. 11. *Repealing Clause.* All laws, decrees, executive orders, rules, and regulations inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SEC. 12. *Effectivity.* This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,