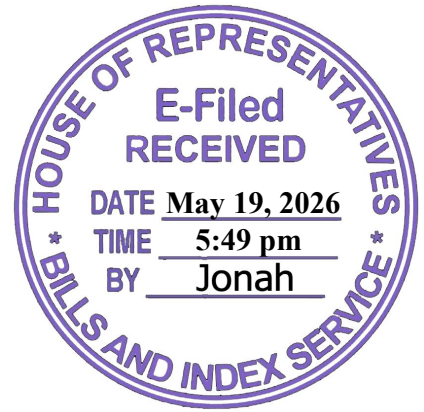


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. **9342**



Introduced by **Rep. MANUEL “WOWO” L. FORTES, JR.**

EXPLANATORY NOTE

The mental health and emotional well-being of the youth have become pressing concerns in contemporary society. Increasing numbers of young Filipinos are experiencing anxiety, depression, emotional distress, self-harm, and suicidal thoughts brought about by academic pressure, bullying, family problems, social isolation, and other challenges. These realities highlight the urgent need for stronger and more proactive measures to protect the mental health of the youth.

The Constitution recognizes the vital role of the youth in nation-building and mandates the State to promote and protect their physical, moral, spiritual, intellectual, and social well-being. As such, the government must establish effective mechanisms that will provide early intervention, accessible mental health support, and community-based prevention programs for vulnerable young individuals.

While Republic Act No. 11036, otherwise known as the “Mental Health Act,” established a national mental health policy, there remains a need for programs specifically focused on youth suicide prevention. Schools, families, healthcare institutions, and communities must be equipped to recognize warning signs, provide psychosocial support, and encourage young people to seek help without fear of stigma or discrimination.

Therefore, this bill seeks to institutionalize a comprehensive Youth Suicide Prevention Program that will strengthen mental health education, establish early intervention systems, and enhance counseling and peer support mechanisms in schools and communities.

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


ATTY. MANUEL “WOWO” L. FORTES, JR.

Representative

Second District, Province of Sorsogon

Twentieth Congress of the
Republic of the Philippines
First Regular Session

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TWENTIETH CONGRESS
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HOUSE BILL NO. 9342

Introduced by **Rep. MANUEL “WOWO” L. FORTES, JR.**

**AN ACT TO PROVIDE EARLY YOUTH SUICIDE INTERVENTION AND
PREVENTION EXPANSION**

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

SEC. 1. *Title.* – This Act shall be known as the “Youth Suicide Prevention Act”.

SEC. 2. *Declaration of Policy.* – Under Section 13, Article II of the 1987 Constitution, the State shall promote and protect the physical, moral, spiritual, intellectual, and social well-being of the youth. In view of this policy, the State shall promote youth programs that will shape their values and inculcate in them positive self-image, self-respect, critical thinking, and moral responsibility to enable them to become principle-centered and values-driven individuals.

It is recognized by the State that youth suicide is a public health tragedy linked to underlying mental health problems and that youth suicide early intervention and prevention activities are national priorities.

SEC. 3. *Formulation of Life Planning Education.* – The Department of Education (DepEd), in coordination with the Department of Health (DOH), is mandated to formulate and include in the elementary and secondary education curriculum a course of Life Planning Education (LPE). LPE shall require lectures and discussions on self and identity, family, community values, communication and interrelationship with others, sexuality and gender roles, community participation, health, psychological thinking, and employment, among others. The DepEd is mandated to ensure that LPE is integrated in all schools. Training shall be provided to school administrators, teachers, guidance counselors, and other school personnel responsible for delivering LPE.

The DepEd is likewise mandated to formulate a mechanism for sustaining peer counseling and peer education programs.

SEC. 4. *Implementation of Public Education Campaign.* – The DOH, in consultation with the DepEd, is mandated to tap doctors, health specialists, medical experts, hospitals, and other medical institutions to conduct a nationwide education campaign to help the youth, parents of youth, teachers, school personnel, and the general public to:

- a. Become aware of the increasing problem of youth suicide and suicidal behaviors;
- b. Recognize common warning signs of suicidal thoughts and intentions;
- c. Learn how to respond to youth who exhibit such signs; and
- d. Know when and where to go for accurate assessments and professional help.

The DOH shall also develop and implement nationwide youth suicide early intervention and prevention strategies and education campaigns in schools, educational institutions, juvenile justice systems, substance abuse programs, mental health programs, foster care systems, and other child and youth support organizations.

SEC. 5. *Implementation of a Peer Counseling Group Program in Every School.* – The DepEd is mandated to require all schools to implement a Peer Counseling Program that will be conducted by the school psychologist or guidance counselor and shall involve lessons on basic counseling skills and analyses for students. The school may also tap the help of health specialists through the aforementioned Public Education Campaign.

SEC. 6. *Employment of Psychologist for Monthly School Counseling Alignment Sessions.* – The DepEd, in cooperation with the DOH, is mandated to employ at least one (1) psychologist in every school. The psychologist shall be employed in a consultancy service position and shall be required to visit the school at least once a month to hold School Counseling Alignment Sessions. The school psychologist must also prepare a yearly School Counseling Program of Work in order to align the guidance counselors with the campaigns and programs included in this Act. The psychologist must be licensed to practice the profession in accordance with existing laws, rules, and regulations. The duties and responsibilities of the school psychologist are, but not limited to, the following:

- a. Gain up-to-date scientific knowledge about effective screening and crisis intervention strategies to identify symptoms of suicidal behavior;
- b. Formulate and implement standardized and reliable screening procedures of suicidal intent and tendencies;
- c. Provide consultation and assist students in seeking help from their parents, other adults in social networks, and health care system personnel;
- d. Increase competencies in post-suicide intervention to prevent further suicide;
- e. Offer immediate support, information resources, and appropriate services to families of youth who are at risk for emotional behavioral disorders, which may lead to suicide attempts;
- f. Provide timely referrals for appropriate community-based mental health care and treatment of youth in all child-serving settings and agencies who are at risk for suicide;
- g. Work with interested families and advocacy organizations to conduct annual self-evaluation of outcomes and activities on the national level, according to established standards; and

- h. Other duties and responsibilities which DepEd and DOH may identify as necessary to fulfill the above mandate.

The DOH is hereby mandated to provide technical assistance to schools with respect to training psychologists in schools. It shall implement the best practice in the identification and treatment of youth who are at risk for committing suicide.

SEC. 7. *Capacity Building and Certification.* – All school personnel involved in screening, peer counseling supervision, and crisis intervention shall undergo mandatory training and certification programs to be developed by the DepEd in coordination with the DOH and relevant professional regulatory bodies. Training shall include trauma-informed care, suicide risk assessment, crisis de-escalation, and ethical handling of sensitive information.

SEC. 8. *Incentives for Compliance.* – Schools that demonstrate exemplary implementation of programs under this Act may be recognized through incentive mechanisms to be determined by the DepEd, including priority access to grants, training support, or additional program funding.

SEC. 9. *Family Engagement and Parental Training Program.* – The DepEd, in coordination with the DOH, shall develop a Family Engagement and Parental Training Program that is designed to educate families on mental health misinformation and how to respond in a supportive and stigma-free approach towards youth experiencing suicidal thoughts and similar behaviors. The DOH will also establish post-crisis family support services to help families cope after a suicide attempt or loss.

SEC. 10. *Provision of Technical Assistance and Data Management.* – The DOH is mandated to assist the DepEd in:

- a. Identifying and promoting strategies to prevent suicide among the youth;
- b. Ensuring the quality of screening and crisis intervention strategies and procedures; and
- c. Studying the effectiveness of practices relating to the identification and treatment of youth who are at risk for committing suicide on the overall wellness and health promotion strategies related to suicide attempts.

The DOH shall conduct research and development programs on the effectiveness of new and existing youth suicide prevention strategies and related research aimed at reducing youth suicide and providing support for emotional and behavioral disorders which may lead to suicide attempts.

The DOH is likewise mandated to develop a suicide data collection system to provide reliable data about attempted suicides in the country. In developing the system, the DOH shall:

- I. Include information on the incidence of attempt;
- II. Include demographic information on the persons who attempt suicide; and
- III. Explore prevention strategies to reduce the number of attempted suicides and suicides.

SEC. 11. *Confidentiality and Data Privacy Protection.* – All records, reports, screening results, referrals, and other documents containing personal information of students and youth under this Act shall be treated as strictly confidential.

The collection, storage, processing, and sharing of data shall comply with Republic Act No. 10173, otherwise known as the "Data Privacy Act of 2012," and other applicable laws, rules, and regulations.

No personally identifiable information shall be disclosed without the written consent of the parent or legal guardian, except in cases where disclosure is necessary to prevent imminent harm to the student or others, subject to existing laws and ethical standards.

SEC. 12. *Establishing of Youth Health Centers.* – The DOH may establish linkages with national government agencies, local government units (LGUs), and non-governmental institutions to establish a network of health facilities and teen centers catering especially to young people in order to address their identified youth issues.

These health facilities and teen centers shall provide family services, peer counseling, and other related services and collaborate with parents, schools, religious groups, and youth-serving organizations to successfully implement youth suicide prevention strategies.

SEC. 13. *Means Restriction Measures for the Protection of Minors.* – As part of the national youth suicide prevention strategy under this Act, the Department of Health (DOH), in coordination with the Food and Drug Administration (FDA) and other relevant agencies, shall identify substances and materials associated with elevated suicide risk and issue appropriate safeguards to reduce access by persons below eighteen (18) years of age.

Such safeguards may include age-verification measures, reasonable quantity limitations, advisories, and public guidance on safe storage of medications and toxic household products.

The DOH shall ensure that all measures under this section are evidence-based, proportionate, and consistent with existing laws and regulations. Nothing herein shall restrict access to legitimate medical treatment duly prescribed by a licensed health professional.

SEC. 14. *Implementing Rules and Regulations (IRR).* – The DepEd and DOH, in consultation with the National Center for Mental Health, National Youth Commission, local and national organizations that serve youth, shall issue the IRR within ninety (90) days from the effectivity of this Act.

SEC. 15. *Appropriations.* – The amount necessary to carry out the provisions of this Act shall be included in the General Appropriations Act of the year following its enactment into law and thereafter. An initial amount of Fifty Million Pesos (PhP 50,000,000.00) shall be allocated for the first year of its implementation. Such sum shall be included in the special project allocation of the DepEd and DOH.

SEC. 16. *Separability Clause.* – If any provision of this Act is declared invalid or unconstitutional, the other provisions hereof which are not affected thereby shall continue to be in full force and effect.

SEC. 17. *Repealing Clause.* – All laws, decrees, executive orders, letters of instructions, proclamations, rules and regulations, or parts thereof inconsistent with this Act shall be deemed modified, amended, or repealed accordingly.

SEC. 18. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its complete publication in the Official Gazette or a newspaper of general circulation.

Approved,