De La Salle University (DLSU) is a Catholic educational institution that prioritizes and adds a premium to the mental health and well-being of students and employees by protecting their rights and ensuring a safe and healthy learning and working environment designed to promote a vibrant educational and professional community. Adhering to the Mental Health Act of the Philippines, DLSU endeavors to maintain a caring community working together to achieve an inclusive environment free of stigma and discrimination by promoting mental health, protecting the basic rights of students and employees with mental health conditions, providing responsive programs, policies and practices and facilitating access to mental health care services.

DLSU strives for excellence in providing information and raising awareness and management skills to improve the mental health of students and employees and capacitate the community with preventive and proactive approaches.

DLSU ensures a supportive culture, offering assistance to students and employees needing mental health services. It also adheres to the protection of rights against discrimination and abuse, as well as its right to privacy.

Lasallian Core Principles:

1. De La Salle University, as a Lasallian Institution, values the dignity of persons and engages its members in nurturing relationships built on respect. It promotes diversity, recognizing the unique abilities of every member.
2. As it pursues the Lasallian Mission, De La Salle University maintains an inclusive community where members adhere to the principles of “together and by association” and “no one left behind” as they work together with greater understanding and acceptance of one another.

Guiding Principles:

1. Lasallian education is a mission and ministry directed towards the integral human and Christian development of persons;
2. DLSU as a Lasallian school commits to its identity as an educational community that works towards the holistic development of learners in all their uniqueness and diversity;
3. De La Salle University provides an environment that promotes the safety and well being of all members of the Community, including those who have mental health conditions and all the people around them;
4. Mental well-being is a health issue;
5. De La Salle University takes a proactive preventive approach to health;
Governing Laws and Regulations:

1. Republic Act 11036 (Mental Health Act), June 20, 2018
2. Implementing Rules and Regulations of the Mental Health Act, January 22, 2019
3. DOLE Department Order 208, series of 2020, February 11, 2020

General Policies on Mental Health:

1. De La Salle University shall take a proactive holistic stance to the promotion of physical and mental well-being of its community members, and the protection of the basic rights of all members of the community, free from discrimination and stigmatization. It shall provide programs, processes, procedures, and support services that favor early preventive intervention;
2. De La Salle University shall have an integrated approach to health and well-being covering physical, psychosocial, psychiatric and neurological aspects;
3. De La Salle University shall Integrate mental health in the relevant policies and procedures of the University, including but not limited to employment, student admission, student retention, discipline formation, grievance, performance evaluation;
4. Courses of action shall consider significant issues affecting physical, psychological, and social health of both those afflicted with mental health conditions, as well as those who may be adversely affected by their actions. Specifically, the University shall provide responses to persons who experience violence, abuse, and neglect; help prevent or reduce the effects of violence; provide information, counselling, medical treatment, forensic, examination and support services for anyone with mental health conditions, as well as those who have been adversely affected or been attacked by individuals with mental health conditions particularly within the workplace and in educational settings.
5. De La Salle University shall maintain and protect the confidentiality of all information regarding the mental health of all individual members of the community;

Structure:

De La Salle University shall form a University Mental Health Committee to:

1. Design and implement awareness programs on mental health to promote and maintain a culture of acceptance and understanding in the University community;
2. Monitor the integration of mental health issues in the policies and procedures of the University;
3. Organize fora to discuss the interface of the mental health law with other laws and issues such as the safe spaces act;
4. Recommend policies and actions to promote mental health and wellness.
Basic Rights of service users (from RA 11036):

1. Freedom from social, economic, and political discrimination and stigmatization, whether committed by public or private actors;
2. Exercise all inherent civil, political, economic, social, religious, educational, and cultural rights, respecting individual qualities, abilities, and diversity of background, without discrimination on the basis of physical disability, age, gender, sexual orientation, race, color, language, religion or nationality, ethnic, or social origin;
3. Access to evidence-based treatment of the same standard and quality, regardless of age, sex, socioeconomic status, race, ethnicity or sexual orientations;
4. Access to affordable essential health and social services for the purpose of achieving the highest attainable standard of mental health;
5. Access to mental health services at all levels of the national health care system;
6. Access to comprehensive and coordinated treatment integrating holistic prevention, promotion, rehabilitation, care and support, aimed at addressing mental health care needs through a multi-disciplinary, user-driven treatment and recovery plan;
7. Access to psychosocial care and clinical treatment in the least restrictive environment and manner;
8. Humane treatment free from solitary confinement, torture and other forms of cruel, inhumane, harmful or degrading treatment and invasive procedures not backed by scientific evidence.
9. Access to aftercare and rehabilitation when possible in the community for the purpose of social reintegration and inclusion;
10. Access to adequate information regarding available multidisciplinary mental health services;
11. Participate in mental health advocacy, policy planning, legislation, service provision, monitoring, research and evaluation;
12. Confidentiality of all information, communications, and records, in whatever form or medium stored, regarding the service user, any aspect of the service user’s mental health, or any treatment or care received by the service user, which information, communications, and records shall not be disclosed to third parties without the written consent of the service user concerned or the service user’s legal representative, except in the following circumstances:
   a. Disclosure is required by law or pursuant to an order issued by a court of competent jurisdiction;
   b. The service user has expressed consent to the disclosure;
   c. A life-threatening emergency exists and such disclosure is necessary to prevent harm or injury to the service user or to other persons;
   d. The service user is a minor and the attending mental health professional reasonably believes that the service user is a victim of child abuse; or
e. Disclosure is required in connection with an administrative, civil, or criminal case against a mental health professional or worker for negligence or a breach of professional ethics, to the extent necessary to completely adjudicate, settle or resolve any issue or controversy involved therein;

13. Give informed consent before receiving treatment or care, including the right to withdraw such consent. Such consent shall be recorded in the service user’s clinical record;

14. Participate in the development and formulation of the psychosocial care or clinical treatment plan to be implemented;

15. Designate or appoint a person of legal age to act as his or her legal representative in accordance with this Act, except in cases of impairment or temporary loss of decision-making capacity;

16. Send or receive uncensored private communication which may include communication by letter, telephone or electronic means, and receive visitors at reasonable times, including the service user’s legal representative and representatives from the Commission of Human Rights (CHR);

17. Legal services, through competent counsel of the service user’s choice. In case the service user cannot afford the services of a counsel, the Public Attorney’s Office, or a legal aid institution of the service user or representative’s choice, shall assist the service user;

18. Access to their clinical records unless, in the opinion of the attending mental health professional, revealing such information would cause harm to the service user’s health or put the safety of others at risk. When any such clinical records are withheld, the service user or his or her legal representative may contest such decision with the internal review board created pursuant to this Act authorized to investigate and resolve disputes, or with the CHR;

19. Information, within twenty four (24) hours of admission to a mental health facility, of the rights enumerated in this section in a form and language understood by the service user; and

20. By oneself or through a legal representative, to file with the appropriate agency, complaints of improprieties, abuses in mental health care, violations of rights of persons with mental health needs, and seek to initiate appropriate investigation and action against those who authorized illegal or unlawful involuntary treatment or confinement, and other violations.