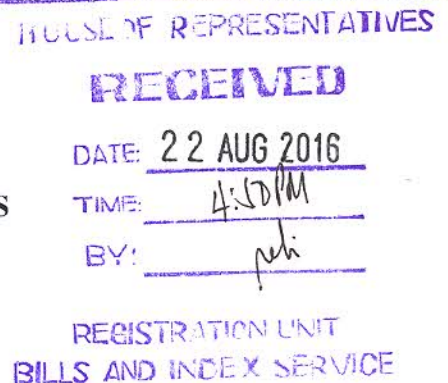


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

SEVENTEENTH CONGRESS
First Regular Session

House Bill No. **3170**



Introduced by Rep. Christopher V.P. de Venecia

EXPLANATORY NOTE

Drug proliferation and drug use are among the pressing issues in the country. In the 2014 report of Dangerous Drugs Board, there are roughly 1.7 million drug users in the Philippines. In Metro Manila alone, 92% of its barangays are drug-affected thereby increasing the likelihood of drug use among high-risk individuals.

Drug use is often associated with crime. In fact, the existing drug laws are oriented towards penalizing drug users rather than providing prevention programs, which is an alternative way to fight the war on drugs.

In view thereof, this bill aims to promote proactive preventive measures that would combat the proliferation of drugs by way of reducing the demand thereof and educating society of the ills of drug use. This will be carried out by institutionalizing the Barangay Anti-Drug Abuse Council (BADAC) as the first-line of defense. Educational institutions in collaboration with other government agencies will be tapped to help individuals understand the nature and detrimental effects of drugs use.

This bill would also like to emphasize that drug problem is a mental health issue. The use of dangerous drugs affect and change the mental ability of those who use it, often leading to drug dependency. In view thereof, there is an urgent need to incorporate psychosocial treatments in the rehabilitation process of the drug dependent by utilizing needs-based assessment programs, psychosocial interventions, cognitive therapies and coping strategies to ensure the rehabilitated individual's healthy and successful reintegration back to their respective communities.

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

A handwritten signature in black ink, appearing to read "Christopher V.P. de Venecia".

REP. CHRISTOPHER V.P. DE VENECIA
Fourth District, Pangasinan

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SEVENTEENTH CONGRESS
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AN ACT
PROVIDING FOR THE PREVENTION OF DRUG USE AMONG HIGH RISK
INDIVIDUALS AND FOR THE REHABILITATION OF DANGEROUS DRUG USERS,
APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES

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

SEC. 1. Declaration of Policy.— Pursuant to Article II, Section 15 of the 1987 Constitution, the State “shall protect and promote the right to health of the people and instill health consciousness among them.” In view thereof, it shall be declared the policy of the State to ensure that citizens are protected from the proliferation of dangerous drugs in order to safeguard one’s health and well-being. In view thereof, the State needs to institutionalize the Barangay Anti-Drug Abuse Council (BADAC) to serve as the barangays’ first line of defense in the fight against dangerous drugs. It shall play a critical role in prevention and monitoring of cases relative to drug use in the primary unit of society.

In the event that a citizen is already under the influence of dangerous drugs, they must be given sufficient rehabilitative treatment that would allow them to regain their well-being.

SEC. 2. Definition of Terms.— As used in this Act:

a.) *Dangerous Drugs* refer to those listed in the Schedules annexed to the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, and in the Schedules annexed to the 1971 Single Convention on Psychotropic Substances as enumerated in the attached annex which is an integral part of Republic Act No. 9165 (RA 9165), otherwise known as the “Comprehensive Dangerous Drugs Act of 2002.”

b.) *Drug Addiction* refers to the chronic brain disease characterized by compulsive drug seeking despite harmful consequences. Intake of dangerous drugs, as defined in the previous subsection, alters the normal functioning of the brain leading to adverse change of behaviour, vulnerability and drug dependency.

c.) *Discrimination* refers to any gesture, expression, word, or activity by any person or entity that is directed towards the exclusion or distinction of an individual. This shall also include a rehabilitated individual’s rejection, refusal, and deprivation of access to services by any institution or entity.

d) *High-Risk Individual* refers to any person who, due to personal and environmental circumstances, is at risk of undertaking actions which are not permitted by the law or detrimental to one's well-being.

e) *Rehabilitated Individual* refers to any person who has completed rehabilitation treatment, assessed to have fully recovered from drug dependence, and obtained valid exit clearance from the rehabilitation facility.

f) *Psychosocial Treatments* refer to counselling, motivational enhancement, case management, care-coordination, psychotherapy or relapse prevention programs that ensure the individual's psychological well-being and successful reintegration back to society.

g.) *Social Reintegration* refers to the successful integration of the rehabilitated individual back into the community.

SEC. 3. *The Barangay Anti-Drug Abuse Council (BADAC).* — The Barangay Anti-Drug Abuse Council shall serve as the barangays' first line of defense in the fight against dangerous drugs. It shall be the policy-making and strategy-formulating body in the planning of dangerous drugs use in the barangay level.

3.1 The BADAC shall be composed of (1) the Punong Barangay as chairperson; (2) Sangguniang Barangay Member/Kagawad (Chair of Peace and Order) as Vice-Chairperson; (3) Sangguniang Barangay Member/Kagawad (Chair of Women and Family), Sangguniang Kabataan Chair, School Principal (Public) or Representative, Executive Officer or Chief Tanod, Representative of a Non-Government Organization (NGO)/Civic Society, Representative of a Faith-Based Organization (i.e. Ugnayang Barangay at mga Simbahan or UBAS and a Social Worker as members; and (4) the City/Municipal Chief of Police or Representative as adviser.

3.2 The BADAC shall have the following powers and functions –

- a. Plan, strategize, implement and evaluate programs and projects on drug abuse prevention in the barangay;
- b. Equip Barangay Tanods for their roles and functions in the campaign against street-level illegal drug trade through seminars or trainings;
- c. Coordinate and collaborate with other institutions implementing programs and projects on drug abuse prevention at the barangay level;
- d. Continuously gather and update data on all drug related incidents and its effect on the peace and order situation in the barangay including listing of suspected drug users and pushers;
- e. Submit a monthly report to the City/Municipal Anti-Drug Abuse Council and to furnish the DILG and DSWD City/Municipal Field Office a copy thereof;

- f. Refer suspected drug users to the DILG Municipal Field Office and other institutions for corresponding counselling and/or rehabilitation;
- g. Conduct an Information, and Education Campaign (IEC) on illegal drug demand reduction;
- h. Conduct regular meetings at least once a month and call for special meetings whenever necessary;
- i. Monitor disposition and progress of drug-related cases filed; and
- j. Perform other related functions.

3.3 The creation and operation of each BADAC shall be charged against the allocation of the Philippine Drug Enforcement Agency (PDEA) in the General Appropriations Act and one percent (1%) from the total Internal Revenue Allotment of the corresponding barangay.

3.4 Failure of the BADAC officials to take appropriate measures to enforce the pertinent provisions of RA 9165, after being made aware by the PDEA and/or the Philippine National Police (PNP) and other law enforcement agencies that (1) the sale, delivery, use of dangerous drugs is rampant within their barangay; or (2) that dangerous drugs and other illegal drug laboratories and marijuana plantations have been uncovered within the areas of their jurisdiction, shall be considered as prima facie evidence for administrative charge(s) for gross negligence or dereliction of duties, as may be warranted by evidence.

3.5 Any BADAC official engaged in the manufacture, sale, delivery, transportation and use of dangerous drugs or who may have benefited therefrom, shall be dealt with pursuant to the provisions of RA 9165.

SEC. 4. *Institutionalizing Drug Education in the curriculum of educational institutions through the National Drug Education Program (NDEP).* – The Department of Education (DepEd) and Commission on Higher Education (CHED), shall include Drug Education in the curriculum of Primary, Secondary and Tertiary levels. The curriculum must fit the absorptive capacity of the students and must be sensitive and age-appropriate.

4.1 The DepEd and CHED, in coordination with the Dangerous Drugs Board (DDB), PNP, National Commission on Culture and the Arts (NCCA) and the National Youth Commission (NYC), shall craft a comprehensive Drug Education curriculum as basis for the implementation of NDEP in all schools and in all levels.

4.2 The program shall focus in the following objectives:

- a. Acquire knowledge and skills to recognize and resist peer pressure to experiment with drugs;
- b. Enhance self-esteem;
- c. Learn assertiveness techniques;

- d. Learn about positive alternatives to substance abuse;
- e. Learn anger management and conduct resolution skills;
- f. Develop risk assessment and decision-making skills;
- g. Reduce violence;
- h. Build interpersonal and communication skills; and
- i. Learn to implement different decision-making models.

SEC. 5 *Establishment of Community based programs that are rooted in NDEP.* – The BADAC, in collaboration with civil society organizations, shall design comprehensive and needs-specific programs in accordance with the NDEP, provided that the said programs shall be in line with the capacity of every barangay.

SEC. 6. *Mass media campaign and anti-drugs mass campaign.* – Media campaigns shall be used by concerned agencies and local authorities to disseminate that message that drug dependence is, first and foremost, a mental health issue. The main strategy shall focus on information campaign to warn individuals against the dangers and risks of dangerous drugs, inform individuals about where to seek support, counselling and treatment, and disseminate information about existing prevention and intervention programs in schools and communities to further strengthen community involvement and elicit support.

Likewise, the Movie and Television Review and Classification Board (MTRCB) shall regularly review films, television shows, advertisements and publicity materials that are considered discriminatory to drug users and high risk individuals.

SEC. 7. *Support Groups.* – Support groups such as, but not limited to, civil society organizations, peoples organizations, interest groups, cultural and religious organizations, civic and developmental associations, issue-oriented movements and similar organizations shall serve as the partner of the BADAC in the prevention of drug use.

SEC. 8. *Functions of Existing Drug Rehabilitation Centers.* – The existing public drug rehabilitation centers shall have the following functions:

- a. Provide care, treatment and accommodation to persons found to be drug dependents;
- b. Train the drug dependent to be physically, psychologically and socially capable of coping with problems common to peer groups;
- c. Provide after-care, follow-up and social reintegration services to enable the drug dependent to adjust to family and community life after release;
- d. Provide each drug dependent motivation to regain self-confidence, rediscover working abilities and develop a sense of responsibility;

- e. Encourage the formation of organizations and associations composed of parents, guardians and immediate relatives of drug dependents in order to raise awareness and enhance their participation in the care, treatment and rehabilitation of their relatives or wards;
- f. Provide continuous training for the physicians, nurses, health officers and social workers on the practical and scientific methods of prevention, care, treatment and rehabilitation of persons found to be drug dependents; and
- g. Strengthen the emotional and spiritual make-up of an individual drug dependent by conducting regular guidance and counselling sessions.

8.1. *In-house Psychologist and Psychiatrist.* – Each rehabilitation center shall have at least one (1) in-house psychologist and one (1) in-house psychiatrist.

8.2. *Psychosocial Therapy Interventions.* – Rehabilitation centers shall implement regular psychosocial therapy interventions such as, but not limited to, counselling, motivational enhancement, case management, care-coordination, psychotherapy, relapse prevention, psycho education, self-help and support groups.

8.3. *Release of Rehabilitated Users.* — Rehabilitation centers shall establish guidelines pertinent to the release of patients and shall issue an exit clearance subject to said guidelines. As a pre-requisite, the family of the patient is mandated to undergo a seminar that would orient them on how to deal with rehabilitated individuals.

SEC. 9. *Implementing Rules and Regulations.* – The Secretary of DILG, in coordination with the Secretary of DSWD, Secretary of DepEd, Secretary of CHED, NCCA Chairman, the Chief PNP and Chairman of the MTRCB shall issue the Implementing Rules and Regulations within ninety (90) days from the effectivity of this Act.

SEC. 10. *Appropriation of Funds.* – The implementation of this Act shall be charged against the budget allocation of the following departments and agencies: DILG, DSWD, DepEd, CHED, NCCA, PNP and MTRCB. Thereafter, such amount necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

SEC.11. *Separability Clause.* – If any provision or part hereof is held invalid or unconstitutional, the remainder of the provisions not otherwise affected shall remain valid and subsisting.

SEC. 12. *Repealing Clause.* – All laws, decrees, rules and regulations, or parts thereof inconsistent with the provisions this Act are hereby repealed, amended or modified accordingly.

SEC. 13. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,