



**World Health
Organization**

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Voluntary care model for persons who use drugs resulted in over 90% completion for treatment rate

DOH to scale up the model nationwide with lessons from pilot Recovery Clinics

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According to the World Health Organization (WHO) and United Nations Office on Drugs and Crime (UNODC), around 35 million people suffer from substance use disorders worldwide. However, only one in six people who are eligible for drug dependent treatment have access to treatment programmes.

In the Philippines, an estimated 1.7 million Filipinos were taking dangerous drugs in 2019. In the same year, there were only 5,277 recorded admissions in inpatient and outpatient facilities, excluding those who are accessing services through community-based programmes.

Substance use disorders are similar to other chronic health conditions. They are linked to the individual's health and social conditions, and are best managed with a public health perspective and a human rights lens.

The duration of the treatment services for and the recovery of persons who use drugs (PWUDs) depend on the individual needs of patients. It is important that long-term support and crisis interventions are available when needed, and barriers to access to treatment are minimized.

The recently passed Universal Health Care Law will also give Filipinos affordable and quality healthcare services, including drug rehabilitation services for PWUDs.

Voluntary Care Model for PWUDs

Substance use disorders are complex health conditions with psychosocial, environmental, and biological determinants. Institutions and organizations must work together to address deep-rooted causes with multidisciplinary, comprehensive, and public health-oriented responses.

From 2017 to 2020, the World Health Organization, with support from the Australian Government, assisted the Department of Health (DOH) in developing a voluntary care model for PWUDs.

Working closely with the DOH, Dangerous Drugs Board (DDB), UNODC, and other partners, six pilot Recovery Clinics provided a complementary pathway for rights-based and evidenced-informed substance use disorder treatment service in the community. The Recovery Clinics were managed by the local government units of Ifugao, Tarlac, Pasay City, Oriental Mindoro, Mandaue City, and Davao de Oro.

The Recovery Clinics admit patients on a voluntary basis. They are as free to enroll in treatment as they are to quit treatment. The Recovery Clinic is a non-residential treatment facility where specialized consultations, evaluations, and treatment may be provided. Health professionals consult with PWUDs in making decisions about treatment options, while maintaining their confidential medical records and respecting patient's rights and privacy.

In three years, the pilot Recovery Clinics enrolled 19% of the total 22,756 enrolled PWUDs in outpatient services, with a treatment completion rate averaging at 91% based on DOH data.

"The implementation of the pilot Recovery Clinics was successful in achieving its goal of developing a voluntary pathway for drug rehabilitation services," said Dr Rabindra Abeyasinghe, WHO Representative to the Philippines. "We now have local evidence and lessons to prove their impact as a complementary approach to the current model of care for persons who use drugs in the Philippines. We look forward to seeing more Recovery Clinics managed by local governments and health authorities nationwide," he added.



Dr Rabindra Abeyasinghe (right), WHO Representative to the Philippines, led the handover of the Substance Use Disorder Recovery Clinic Toolkit and Evaluation Report of Pilot Recovery Clinics as a Complementary Pathway for SUD Treatment to the Department of Health, through Dr Jose Bienvenido Leabres, Program Manager for Dangerous Drug Abuse Prevention and Treatment Program, and Dr Hevander Homol from the Health Facilities and Infrastructure Development Team.

“I discovered that I am more than just a name in a list,” said by a patient from Tarlac Drug Recovery Clinic. “The Recovery Program changed my outlook. It is a spiritual journey to the self,” another patient said.

The DOH, in collaboration with WHO Philippines, also launched the Substance Abuse Helpline (SAH) 1550. The Helpline is run by counselors who provide free and confidential services, including information on treatment services available, referral to relevant health facilities, and brief psychosocial intervention.

The mobility restrictions brought about by the COVID-19 pandemic have affected access to healthcare and the SAH 1550 provides a way of delivering basic services for PWUDs and their families.

Scaling Up the Model

“The Recovery Clinic which is jointly developed by the DOH and WHO will be of great help in the reintegration of Persons Who Use Drugs (PWUDs) in their return to a productive life. Likewise, the Substance Abuse Helpline 1550 (SAH 1550) will provide easy access for PWUDs, families, and stakeholders by providing brief interventions and referrals to treatment” said Dr. Lilibeth C. David, Undersecretary for Health Facilities and Infrastructure Development at the DOH. “Together let us continue to build networks, structures, and people to improve our fellow Filipinos’ health.”

The lessons learned from the pilot Recovery Clinics documented in the evaluation report will support the development of guidelines for the scaling up of the model. In addition, the Recovery Clinic Toolkit also serves as a compendium of the necessary information, guidelines and procedures in establishing, operating, maintaining and advocating for recovery clinics may be used by DOH, LGUs and other partners in setting up more Recovery Clinics in the country.

