



Republic of the Philippines
Office of the President
DANGEROUS DRUGS BOARD

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BOARD REGULATION No. 1
Series of 2009

SUBJECT: GUIDELINES FOR THE REHABILITATION OF FIRST TIME OFFENDERS UNDER SECTION 15 OF RA 9165 WHO ARE NOT DRUG DEPENDENTS

WHEREAS, it is a declared policy of the State to provide effective mechanisms or measures to re-integrate into society individuals who have fallen victims to drug abuse or dangerous drug dependence through sustainable programs of treatment and rehabilitation;

WHEREAS, under RA 9165, the Dangerous Drugs Board is the policy-making and strategy-formulating body in the planning and formulation of policies and programs on drug prevention and control and is empowered, among others, to promulgate such rules and regulations as may be necessary to carry out the purposes of the said Act;

WHEREAS, the Dangerous Drugs Board is likewise empowered to design and develop, in consultation and coordination with the DOH, DSWD and other agencies involved in drugs control, treatment and rehabilitation, both public and private, a national treatment and rehabilitation program for drug dependents including a standard aftercare and community service program for recovering drug dependents;

WHEREAS, under Section 76 of the Act, the Department of Health (DOH) is tasked to oversee and monitor the integration, coordination and supervision of all drug rehabilitation centers, interventions, aftercare, and follow-up programs, projects and activities;

NOW THEREFORE, be it **RESOLVED**, as it is hereby **RESOLVED**, to provide the following guidelines on the rehabilitation of first time offenders under Section 15 of RA 9165 who are determined to be not drug dependents after a drug dependency examination.

SECTION 1. Scope

This Regulation covers all government drug treatment and rehabilitation centers.

SECTION 2. Definition of Terms

- a) Center – any government drug treatment and rehabilitation center;
- b) Board – refers to the Dangerous Drugs Board;
- c) Court – refers to the Regional Trial Court of the Province/City;

- d) Drug Offender – a person convicted under Section 15 of RA 9165 and sentenced to be rehabilitated in a government center for a period of not less than six (6) months;
- e) Community service - is a free public labor or work with therapeutic purpose as a sanction for an offense committed, performed by an offender for the benefit of the community designed as an after-care intervention program for the rehabilitation of a drug offender;
- f) Drug Dependence – refers to a state of psychic and/or physical dependence on drugs arising in a person following administration or use of the drug on a periodic and continuous basis;
- g) Drug Dependency Examination – a procedure conducted by a DOH-Accredited Physician to evaluate the extent of drug abuse of a person and to determine whether he/she is a drug dependent or not, which includes history taking, intake interview, determination of the criteria for drug dependency, mental and physical status and the detection of dangerous drugs in body specimens through laboratory procedures;
- h) Rehabilitation – is a dynamic process directed towards physical, emotional/psychological, vocational, social and spiritual change to prepare a person for the fullest life compatible with his capabilities and potentials and render him able to become a law abiding and productive member of the community without abusing drugs;

SECTION 3. Rehabilitation Programs for Non-Drug Dependent Drug Offenders

- A. Upon the determination that a drug offender is not a drug dependent, after a drug dependency examination, and he/she does not pose a serious danger to himself/herself, his/her family or community, the center shall formulate the appropriate rehabilitation program for the drug offender, which does not require confinement, and shall include, but not limited to, any or a combination of the following therapeutic activities:
 - 1) Individual therapy – involves a one to one relationship between the counselor and the patient with the primary aim of helping the client to get rid or reduce his drug abusing behavior so that they may be able to get involved in productive work and develop insights into his conditions;

- also integrates coping skills-training techniques with abstinence-based addiction counseling. The primary goals of treatment are to enhance and sustain patient motivation for change, establish and maintain abstinence from all psychoactive drugs, and foster development of (non-chemical) coping and problem solving skills to thwart and ultimately eliminate impulses to “self-medicate” with psychoactive drugs. The approach combines cognitive-behavioral, motivational, and insight oriented techniques according to each client’s individual needs. The therapeutic style is emphatic, client centered, and flexible. Strong emphasis is placed on developing a good working alliance with the client to prevent premature dropout and as a vehicle for promoting therapeutic change.
 - 2) Group therapy – a form of therapy where the individual is helped through group process. Each member of the group receives immediate feedback from the other members regarding his verbal and other forms of behavior. Group support and encouragement are

given to the subject on the premise that these are effective devices, which can produce positive results toward behavioral modification;

- 3) Family therapy – a form of intervention based on the recognition that the family, as a primary social unit, can be source of problem leading to drug use. Family therapy may include restructuring of the family, environmental manipulation, strengthening of family communication and discovery of family members to help facilitate the rehabilitation of the drug dependent;
- 4) Community service – the participation of patients in community projects can help them integrate into the local society and can also promote community understanding of their needs and recognize of their remaining potential and acceptance. Projects include among others, the following:
 - a. Crime and Drug Abuses Prevention Projects;
 - b. Citizenship and Civic Participation;
 - c. Economic and Social Development;
 - d. Health and Sanitation;
 - e. Public Construction Work;
 - f. Mentoring and Intergenerational Services;
 - g. Ecology and Environment Projects;
 - h. Socio-civic religious projects
 - i. Energy conservation initiatives;
 - j. Agriculture and livestock management
- 5) Sheltered Workshops and Livelihood Trainings – provides training for skills development and employment with appropriate compensation in a controlled environment to increase self-esteem and chances for outside work placement.

B. A drug offender may be placed under the care of a DOH-Accredited Physician where there is no Center near or accessible to the residence of the drug dependent.

C. The drug offender shall perform the following acts:

- 1) He/She must report three (3) times a week to the Center as an out-patient or thru the trained program givers, or DOH-Accredited Physician, as the case may be;
- 2) He/She shall comply with the rules and regulations of the Center and the applicable regulations of the Board; and
- 3) He/She shall submit himself/herself to his/her rehabilitation program formulated by the Center or DOH-Accredited Physician.

D. The Center shall perform the following:

- 1) The Center or the DOH-Accredited Physician shall apprise the Court and the Board, at the end of the rehabilitation program, by the Head of the Treatment and Rehabilitation Center of the status of the drug offender and determine whether further rehabilitation will be for the welfare of the drug offender and his/her family or the community;
- 2) The Center shall every two (2) months submit a report to the Board of the status of the drug offender.

SECTION 4. Funding – The amount of TWO MILLION FIVE HUNDRED THOUSAND PESOS (Php 2,500,000.00) is hereby allocated in the Special Fund of the Board for the implementation of this Regulation.

SECTION 5. Separability Clause – If any part, section or provision of this Regulation is held invalid or unconstitutional, the other parts, sections or provisions not affected thereby shall continue in operation.

SECTION 6. Effectivity – This Regulation shall take effect after fifteen (15) days after its publication in two (2) newspapers of general circulation and after its registration with the Office of the National Administrative Register (ONAR), UP Law Center, Quezon City.

APPROVED and **ADOPTED**, this 26th day of March, in the year of Our Lord, 2009 in Quezon City.

(Sgd) **Secretary VICENTE C. SOTTO III**
Chairman, Dangerous Drugs Board

Attested by:

(Sgd) **Undersecretary EDGAR C. GALVANTE**
Secretary of the Board