



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

NINETEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 4181



INTRODUCED BY REP. HARRIS CHRISTOPHER M. ONGCHUAN

EXPLANATORY NOTE

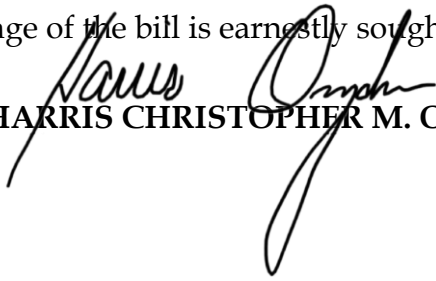
In 2019, the Dangerous Drugs Board conducted a survey on the drug dependency of Filipinos. It showed that around 1.67 million Filipinos aged 10 to 69 are drug users. It is therefore important that the issue of drugs and the rehabilitation of dependents be seen as an issue in the Philippines.

The World Health Organization classifies drug dependence to individuals who, "have developed a dependency syndrome in using psychoactive substances - substances that affect the mental process." According to experts from the Philippine Psychiatric Association, the issue of drug dependence must be seen as a health problem and not a criminal one.

The purpose of this measure is to refer drug dependents to Department of Health accredited healthcare facilities for their rehabilitation and treatment. Moreover, the bill guarantees that drug dependents who surrender voluntarily will be given the opportunity to seek treatment and rehabilitation. Finally, the bill seeks to establish the Bureau on Drug Abuse Prevention and Control, which will be under the supervision of the Department of Health. The bureau will be in-charge of monitoring and promoting drug dependency treatment and rehabilitation.

In the 18th Congress, this bill was filed by Representatives Belmonte and Cabochan.

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


REP. HARRIS CHRISTOPHER M. ONGCHUAN



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HOUSE BILL NO. **4181**

Introduced by Representative
HARRIS CHRISTOPHER M. ONGCHUAN

AN ACT
STRENGTHENING THE DRUG ABUSE PREVENTION, TREATMENT, AND
REHABILITATION, AMENDING FOR THE PURPOSE REPUBLIC ACT NO.
9165, OTHERWISE KNOWN AS "THE COMPREHENSIVE DANGEROUS
DRUGS ACT OF 2002" AS AMENDED, AND APPROPRIATING FUNDS
THERFOR

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

SECTION 1. Declaration of Policy. — It is hereby declared the policy of the State to protect and promote the right to health of the Filipino people and to instill health consciousness among them on the harmful effects of dangerous drugs through the adoption of a more integrated and comprehensive approach in the drug abuse prevention, treatment, and rehabilitation.

SECTION 2. Section 15 of Republic Act No. 9165, otherwise known as "The Comprehensive Dangerous Drugs Act of 2002", is hereby amended to read as follows:

*"Section 15. Use of Dangerous Drugs. — A person apprehended or arrested, who is found to be positive for use of any dangerous drug, after a confirmatory test, [shall be imposed a penalty of a minimum of six (6) months rehabilitation in a government center for the first offense, subject to the provisions of Article VIII of this Act] **SHALL BE REFERRED TO AN APPROPRIATE PROGRAM AS RECOMMENDED BY A***

QUALIFIED DOH-ACCREDITED PHYSICIAN. Provided, That this Section shall not be applicable where the person tested is also found to have in his/her possession such quantity of any dangerous drug provided for under Section 11 of this Act, in which case the provisions stated therein shall apply.”

SECTION 3. Section 45 of Republic Act no 9165 is hereby amended, to read as follows:

“Section 45. *Publication and Distribution of Materials on Dangerous Drugs.* — With the assistance of the Board, the Secretary of the Department of Education (DepEd), **THE SECRETARY OF THE DEPARTMENT OF HEALTH (DOH)**, the Chairman of the Commission on Higher Education (CHED) and the Director-General of the Technical Education and Skills Development Authority (TESDA) shall cause the development, publication and distribution of information and support educational materials on dangerous drugs to the students, the faculty, the parents, and the community.”

SECTION 4. Section 47 of Republic Act No. 9165 is hereby amended, to read as follows:

“Section 47. *Drug-Free Workplace.* — It is deemed a policy of the State to promote drug-free workplaces using a tripartite approach. With the assistance of the Board, the Department of Labor and Employment (DOLE), shall develop, promote and implement a national drug abuse prevention program in the workplace to be adopted by private companies with ten (10) or more employees. Such program shall include the mandatory drafting and adoption of company policies [against] **IN RELATION TO** drug use in the workplace in close consultation and coordination with the DOLE, labor and employer organizations, human resource development managers and other such private sector organizations

SUCH COMPANY POLICIES SHALL INCLUDE THE PROVISION THAT SHALL ENSURE THAT EMPLOYEES FOUND TO BE POSITIVE FOR DRUG USE WILL BE REFERRED TO A TRAINED HEALTH SERVICE PROVIDER; PROVIDED, THAT THE EMPLOYER SHALL NOT TERMINATE THE SERVICES OF AN EMPLOYEE ON THE BASIS OF THE EMPLOYEE’S TREATMENT, REHABILITATION, AND REFERRAL; PROVIDED, FURTHER THAT EMPLOYEES FOUND TO BE POSITIVE FOR DRUG USE SHALL NOT BE DEPRIVED OF ANY AND ALL RIGHTS.”

SECTION 5. Section 54 of Republic Act No. 9165 is hereby amended, to read as follows:

“Section 54. Voluntary Submission [of a Drug Dependent] to [Confinement] Treatment and Rehabilitation. – [A drug dependent or any person who violates Section 15 of this Act] ANY PERSON may by himself/herself or with the assistance of his/her parent, spouse, guardian or relative within the fourth degree of consanguinity or affinity, apply to the Board or its duly recognized representative, for treatment and rehabilitation [of the drug dependency. Upon such application, the Board shall bring forth the matter to the Court which shall order that the applicant be examined for drug dependency. If the examination by a DOH-accredited physician results in the issuance of a certification that the applicant is a drug dependent, he/she shall be ordered by the Court to undergo treatment and rehabilitation in a Center designated by the Board for a period of not less than six (6) months:] Provided, That a PERSON WHO VOLUNTARILY SUBMITS [drug dependent] 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 or where said drug dependent is below eighteen (18) years of age and is a first-time offender and non-confinement in a Center will not pose a serious danger to his/her family or the community.] SEEK TREATMENT AND REHABILITATION FROM A HEALTH FACILITY, BE SCREENED BY A TRAINED HEALTH SERVICE PROVIDER AND ASSESSED THEREAFTER BY A DOH-ACCREDITED PHYSICIAN. IF THE EXAMINATION BY A DOH-ACCREDITED PHYSICIAN RESULTS IN THE DIAGNOSIS OF DRUG DEPENDENCY, THE PERSON WHO VOLUNTARILY SUBMITS SHALL BE REFERRED TO AN APPROPRIATE DRUG TREATMENT AND REHABILITATION FACILITY WITH THE DURATION DEPENDING ON THE SEVERITY OF THE DRUG DEPENDENCE AS DETERMINED BY A QUALIFIED DOH-ACCREDITED PHYSICIAN.

OTHER FORMS OF confinement in a Center for treatment and rehabilitation shall [not exceed one (1) year, after which time the Court, as well as the Board, shall be apprised by the head of the treatment and rehabilitation center of the status of said drug dependent and determine whether further confinement will be for the welfare of the drug dependent and his/her family or the community.] **BE BASED ON THE DIAGNOSIS AND RECOMMENDATION OF A DOH-ACCREDITED PHYSICIAN.”**

SECTION 6. Section 56 of Republic Act No. 9165 is hereby amended, to read as follows:

Section 56. *[Temporary Release From the Center;] After-Care and Follow-Up Treatment Under the Voluntary Submission Program. – Upon certification of [the Center] A DOH-ACCREDITED PHYSICIAN that the [drug dependent] PERSON within the voluntary submission program HAS COMPLETED THE PRESCRIBED TREATMENT AND REHABILITATION PROGRAM may be [temporarily]*

released, the Court shall order his/her release on condition that said [drug dependent] **HE/SHE** shall report to the DOH for after-care and follow-up treatment, including urine testing, [for a period not exceeding eighteen (18) months under such terms and conditions that the Court may impose.] **WITH A DURATION BASED ON THE RECOMMENDATIONS OF A QUALIFIED DOH-ACCREDITED PHYSICIAN BUT SHALL NOT EXCEED EIGHTEEN (18) MONTHS.**

If during the period of after-care and follow-up, the [drug dependent] **PERSON RELEASED** is certified to be rehabilitated, [he/she may be discharged by the Court, subject to the provisions of Section 55 of this Act, without prejudice to the outcome of any pending case filed in court.]

However, should the DOH find that during the initial after-care and follow-up program of eighteen (18) months, the [drug dependent] **PERSON RELEASED** requires further treatment and rehabilitation, he/she shall be recommitted to [in the Center for confinement] **A TREATMENT AND REHABILITATION FACILITY AS RECOMMENDED BY A DOH-ACCREDITED PHYSICIAN.** Thereafter, he/she may again be certified [for temporary release] **AS REHABILITATED** and ordered [released] for another after-care and follow-up program pursuant to this Section."

SECTION 7. Section 75 of Republic Act No. 9165 is hereby amended, to read as follows:

"Section 75. *Treatment and Rehabilitation Centers.* — The existing treatment and rehabilitation centers for **DRUG USERS** [drug dependents operated and maintained by the NBI and the PNP] shall be operated, maintained and managed by the DOH in coordination with other concerned agencies. For the purpose of enlarging the network of centers, the Board through the DOH shall encourage, promote or whenever feasible, assist or support in the establishment, operations and maintenance of private centers which shall be eligible to receive grants, donations or subsidy from either government or private sources. It shall [also support the establishment of] **ESTABLISH** government-operated regional treatment and rehabilitation centers [depending upon the availability of funds.] The national government, through its appropriate agencies shall give priority funding for the increase of subsidy to existing government drug rehabilitation centers, and shall establish at least one (1) **RESIDENTIAL** drug rehabilitation center in each **REGION, AND ONE (1) NON-RESIDENTIAL DRUG REHABILITATION CENTER IN EACH** province, depending on the availability of funds.

BASED FROM THE EXISTING TREATMENT AND REHABILITATION CENTERS, THE DOH SHALL ESTABLISH FIVE (5) APEX TREATMENT AND REHABILITATION CENTERS TO PROVIDE SPECIALISED CARE FOR DRUG USERS.

FOR DRUG DEPENDENTS WITH CRIMINAL OFFENSES OTHER THAN VIOLATION OF SECTION 2 OF THIS ACT, THE DEPARTMENT OF JUSTICE (DOJ) THROUGH THE BUREAU OF CORRECTIONS (BUCOR) AND THE DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT (DILG) THROUGH THE PHILIPPINE NATIONAL POLICE (PNP) AND BUREAU OF JAIL MANAGEMENT AND PENOLOGY (BJMP) SHALL ESTABLISH TREATMENT AND REHABILITATION CENTERS WITHIN THEIR PENITENTIARY FACILITIES; PROVIDED, THAT PERSONS DEPRIVED OF LIBERTY SHALL NOT BE DENIED ACCESS TO TREATMENT AND REHABILITATION SERVICES.

SECTION 8. Section 76 of Republic Act No. 9165 is hereby amended, to read as follows:

“Section 76. The Duties and Responsibilities of the Department of Health (DOH) Under this Act. - The DOH shall:

(1) XXX

XXX

XXX

XXX

(5) The DOH shall, without prejudice to the criminal prosecution of those found guilty of violating this Act, order the closure of a Center for treatment and rehabilitation of drug dependency when, after investigation it is found guilty of violating the provisions of this Act or regulations issued by the Board; [and]

(6) Charge reasonable fees for drug dependency examinations, other medical and legal services provided to the public, which shall accrue to the Board. All income derived from these sources shall be part of the funds constituted as special funds for the implementation of this Act under Section 87; AND

(7) REGULATE THE LICENSE TO PRESCRIBE (A) DANGEROUS DRUG PREPARATIONS IN ANY FORM AND/OR (B) DRUG PREPARATIONS CONTAINING CONTROLLED CHEMICALS.”

SECTION 9. Creation of the Bureau on Drug Abuse Prevention and Control. To carry out the above policy, the Bureau on Drug Abuse, Prevention, and Control shall be created under the DOH.

(a) Objectives of the Bureau. The objectives of the Bureau are:

(1) To lead in the implementation of the selected mandates of the DOH as stipulated under Republic Act No. 9165.

(2) To promote evidence-based and rights-based approach in the provision of treatment and rehabilitation services.

(b) *Composition.* The present Dangerous Drugs Abuse Prevention and Treatment Program (DDAPTP) functionally created in the DOH shall be accordingly modified and absorbed by the Bureau.

The Bureau shall be headed by a Director IV, who shall be responsible for the general administration and management of the Bureau. The Director of the Bureau shall be appointed by the Office of the President, as recommended by the Secretary of Health and shall provide guidance, recommendations, and directions related to matters concerning drug abuse prevention and control, and perform such other duties that may be assigned. The Director IV must possess adequate knowledge, training and experience in the field of addiction and drug dependence.

The Bureau shall determine the composition and size of the organizational structure as it may be deemed necessary, in accordance with the Civil Service laws and regulations.

(c) *Powers and Functions.* The Bureau shall have the following powers and functions:

1. Develop standards, guidelines and systems including health promotion and advocacy programs on the prevention, treatment, rehabilitation and of dangerous drugs across identified key settings;

2. Recommend and propose the establishment of additional Drug Abuse Treatment and Residential Centers (DATRCs) (residential and non-residential) based on needs, and aligned with the existing health facility development plan of the DOH;

3. Provide technical, functional, and advocacy assistance to end users, stakeholders and partner agencies relative to drug abuse prevention and treatment;

4. Conduct health research for the improvement of prevention and treatment services;

5. Represent DOH in the Dangerous Drugs Board (DDB), Inter-Agency Task Forces and other relevant committees; and

6. Establish networks with various agencies, professional groups and organizations in implementing the mandates of DOH.

SECTION 10. Appropriations. The amount needed for the initial implementation of this Act shall be taken from the current fiscal year's appropriation for the Dangerous

Drugs Board. Thereafter, the amount needed for the operations and maintenance of the Bureau shall be included in the General Appropriations Act.

SECTION 11. Implementing Rules and Regulations. The DOH, the Department of Budget and Management (DBM), and the Civil Service Commission (CSC), in consultation and in coordination with the DDB, Department of Interior and Local Government (DILG), civil society organizations, non-government organizations, and the private sector, shall promulgate a new set of implementing rules and regulations within ninety (90) days from the effectivity of this Act.

SECTION 12. Separability Clause. — Separability Clause. If any provision of this Act is held invalid or unconstitutional, the same shall not affect the validity and effectivity of the other provisions hereof.

SECTION 13. Repealing Clause. Sections 58, 59, and 61 of Republic Act No. 9165 are hereby repealed.

All other laws, decrees, executive orders and rules and regulations contrary to or inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SECTION 14. Effectivity Clause. — This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved.