



Republic of the Philippines
MUNICIPALITY OF PANIQUI
Province of Tarlac

OFFICE OF THE SANGGUNIANG BAYAN

EXCERPT FROM THE MINUTES OF THE REGULAR SESSION OF THE SANGGUNIANG BAYAN OF PANIQUI, TARLAC FOR THE TERM YEAR 2019-2022 HELD ON NOVEMBER 24, 2020 AT THE SB SESSION HALL.

PRESENT: Hon. Aida D. Roxas II-*Vice Mayor & Presiding Officer*
Hon. Felomina F. Bravo – *member-Majority Floor Leader*
Hon. Christian Alfred F. Cuchapin, *member*
Hon. Javerne C. Santillan, *member*
Hon. Charo G. Oca, *member-Minority Floor Leader*
Hon. Nestor B. Castro, *member*
Hon. Rachilda Myra O. Garcia, *member*
Hon. Robert J. Torio, *member*
Hon. Mary Anne B. Fernandez, *member*
Hon. Linda B. Manuel (ABC Pres.), *Ex-Officio member*
Hon. Karl Bernard M. Obcena (SK Pres), *Ex-Officio member*

ABSENT: None

MUNICIPAL ORDINANCE NO.009
Series 2020

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“ORDINANCE ENACTING COMMUNITY-BASED REHABILITATION PROGRAM (CBRP) FOR PERSON WHO USED DRUGS (PWUD) OF THE MUNICIPALITY OF PANIQUI, TARLAC”

WHEREAS, His Excellency, President Rodrigo R, Duterte signed an Executive Order No. 66, series of 2018, institutionalizing the Philippine Anti-Illegal Drugs Strategy (PADS), a program that aims to boost government’s ongoing anti-narcotics campaign.

WHEREAS, the PADS outlined efforts of the government to the government to strengthen its campaign against prohibited drugs and their precursors, and contribute to international efforts to counter the worldwide illegal drug problem;

WHEREAS, pursuant to the aforesaid Order, all government agencies and local government units were ordered to formulate and adopt drug-free workplace programs and conduct authorized drug testing among their officials and personnel and their constituents, to end the drug scourge in the country as the President’s top priority;

WHEREAS, the Department of Health, one of the leading key government agency working and facilitating the process of those persons who uses drugs (PWUD) on drug clearing program required by the Government through joined tasked-government agencies like Philippine Drug Enforcement Agency (PDEA), Department of Interior and Local Government (DILG), Department of Health (DOH), Philippine National Police (PNP), and others;

WHEREAS, the Department of Health has formulated its strategy to help process and facilitate the illegal drug victims to counter the rising numbers of drug surrenderers as of this time where there were already hundreds of thousands of illegal drug users/pushers reliably reported that our Government has outnumbered the facilities to cater, thus the DOH has initiated already its mandate for the implementation of its strategy called, "Community-Based Rehabilitation Program":

NOW THEREFORE, BE IT ORDAINED by the Sangguniang Bayan of Paniqui, Tarlac in session assembled, that:

**ARTICLE 1
TITLE AND SCOPE**

SECTION 1. TITLE. This Ordinance shall be known as the "**COMMUNITY-BASED REHABILITATION PROGRAM (CBRP) FOR PERSON WHO USED DRUGS (PWUD) OF THE MUNICIPALITY OF PANIQUI, TARLAC.**"

SECTION 2. The provisions of this ordinance shall apply to all barangays within the jurisdiction of the Municipality of Paniqui, Tarlac.

**ARTICLE 2
BACKGROUND AND OBJECTIVE**

SECTION 3. The Community-Based Rehabilitation Program (CBRP) is a holistic approach in rehabilitating the surrendered drug personalities and aims to focus on the healing of the body, mind, and soul through counseling and other therapeutic sessions.

According to statistics, 94% of the PWUD's are considered "low risk". Meaning, their level of drug addiction is relatively low and may not be accepted in conventional rehabilitation facilities. They also needing different kinds of interventions, thus, the CBRP was conceptualized.

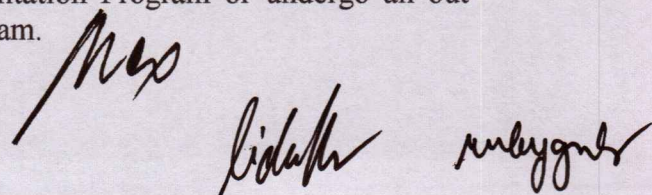
The CBRP will be facilitated by network of trained CBRP implementers in the community called the Community Rehabilitation Network or CRN. The CRN is composed of CBRP-trained and practitioners in the medical and psycho-social fields. The members of CRN may be medical doctors, psychologist, psychiatrist, guidance counselors, teachers, members of the faith-based organizations, or anyone who is trained enough and able to facilitate the conduct of CBRP.

Through the CBRP, the PWUD's will be given a second chance in life. The stigma that has been associated with them will be removed. By accepting, nurturing and caring for them, they will choose to live a drug-free life.

**ARTICLE 3.
TURN-OVER OF SURRENDERERS TO
COMMUNITY-BASED REHABILITATION PROGRAM**

SECTION 4. PROCEDURE BEFORE THE PWUD'S ENROLLED IN THE CBRP – The procedures are the following:

1. The PWUD'S will undergo an initial screening to be conducted by the DOH or Medical Health Unit of its municipality.
2. The PWUD'S will be classified as low-risk, mid-risk or high-risk
3. Low-risk PWUD'S will be further profiled by the DOH whether they should be turned to Community-Based Rehabilitation Program or undergo an out-patient facility-based rehabilitation program.



**ARTICLE 4.
REHABILITATION PROCESS**

SECTION 5. ORGANIZATION.

- a.) The Community Rehabilitation Network (CRN) shall be organized by the Municipal Anti-Drug Abuse Council (MADAC). The CRN shall be composed of volunteers in the municipality.
- b.) Once convened, the CRN shall be oriented on their duties and responsibilities in the community- based rehabilitation program.
- c.) The CRN should strategize on how they would implement the Community-Based Rehabilitation Program. The members should also design their rehabilitation program that would enable them to maximize the resources available in the community.
- d.) The design of their program should be flexible for all enrollees in the program. It should cater to the specific needs of the patients.

SECTION 6. ENROLLMENT TO THE PROGRAM

- a.) The PWUD's accompanied by their families, shall submit themselves to the Community Rehabilitation Network (CRN) for registration and recording.
- b.) They will fill out a Personal Data Sheet, which shall be recorded in a registry. This registry should be maintained by the members of the CRN for recording and monitoring purposes which should remain confidential.
- c.) The PWUD'S and a family member shall sign a Conditions of Admission or a Consent Form, Affidavit of Undertaking and Waiver agreeing that the patient will undergo this kind of treatment and that unannounced drug testing will be conducted within the rehabilitation process.
- d.) Once the patient has accomplished these steps, he/she must pledge his/her commitment to finish the rehabilitation program.

SECTION 7. ORIENTATION OF THE PROGRAM

- a.) A general orientation of the program will be given to both the patients and their families. They will be given an overview of the coverage of the rehabilitation program. The presence of the family is very important to make the patients feel that they will not be alone as they go through the process.
- b.) Once done with the general orientation, the patients will be given a more in-depth orientation of the program. The mechanics will be discussed and the expectation from the patients will be set.
- c.) Simultaneous to the patient's orientation, the families will also be oriented of what is expected from them. The Community Rehabilitation Network (CRN) must encourage the families to be the strongest support group of the patients during this time of needs.

SECTION 8. COMMUNITY-BASED REHABILITATION PROGRAM PROPER

- a.) The Community-Based Rehabilitation Program (CBRP) will run for **Eight (8) weeks or Forty Eight (48) days** and will be handled by the Community Rehabilitation Network (CRN) who may be composed of a team of experts such as Doctors, psychologists, Guidance Counselors and other community volunteers. Weekdays shall be dedicated for counseling/therapy sessions while weekends shall be dedicated for community service and religious services.

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b.) IMPLEMENTATION OF THE CARE PROGRAMS:

Patient's Care

- Sessions involving the understanding of the individual patient
- Sharing of Experiences
- Lectures/Seminars on the effects of drug abuse, HIV/AIDS and the like
- Individual/Group counseling
- Skills training
- Physical Activities
- Community service

Family Care

- Counseling
- Family therapy
- Parenting and family development programs

Community Care

- Community awareness seminars
- Recruitment of volunteers for the CRN
- Mobilization of the Basic Ecclesiastical Communities, Religious and Civic Organizations and other institutions
- "Adopt a Drug Patient" where an individual and a family may serve as sponsors for the needs of the patients such as foods and other materials

SECTION 9. EVALUATION – After accomplishing the Care Programs, drug recovering patients will undergo an unannounced drug test. This is also the period where the patients will be assessed/evaluated on how well they fared with the activities done. Those with negative results shall be awarded the Certificate of Program Completion issued by the Community Rehabilitation Network (CRN).

**ARTICLE 5.
AFTERCARE**

SECTION 10. After completing the intensive phase, the recovering drug dependent shall undergo a continuing **Aftercare Program of not less than 6 months** to be conducted by the concerned agencies (TESDA, DEPED/CHED, DSWD, PNP/PDEA, DOH/RHU, DTI). In this phase, they shall undergo programs which will help them and their families to be reintegrated back to their respective communities as God-fearing and productive individuals.

SECTION 11. LEADS. The Municipal Mayor of Paniqui, thru the Punong Barangays/BADAC Officer, Tarlac will spearhead the implementation of this ordinance, supervision of the procedures of the Community-Based Rehabilitation Program assuring that this activity be activated in all barangays of this municipality, monitor, secure and preserve the confidentiality of the patients. Other leading agencies that would accompany the implementation of this activity are; Department of Health (DOH), Philippine National Police (PNP), Philippine Drug Enforcement Agency (PDEA), Socio-Civic Organizations, Religious Organizations, Municipal Anti-Drug Abuse Council (MADAC), Barangay Anti-Drug Abuse Councils and volunteers in the community.

SECTION 12. ROLE OF PUNONG BARANGAY/BADAC ACTION OFFICER. The Punong Barangay/BADAC Action Officer can petition to the court seeking for an order to be issued for mandatory rehabilitation in an out-patient basis to any identified drug personality/ies for appropriate action and intervention that will eventually lead to referring the recovering drug dependent to a higher rehabilitation program or any government run facility.

[Handwritten signatures]

SECTION 13. FUNDS/BUDGETARY REQUIREMENT – The Local Government Unit of Paniqui, Tarlac shall allocate funds annually chargeable against Support to MADAC/Peace & Order appropriation for the effective implementation of this ordinance.

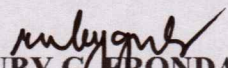
SECTION 14. SUPPORT OF BARANGAY ANTI-DRUG ABUSE COUNCIL (BADAC) – The BADAC shall insure active participation in the implementation of the program and shall recommend to the barangay council to appropriate substantial portion in their respective barangay budget to assist or enhance the enforcement of this ordinance, giving priority to program advocacy, community awareness, preventive interventions and the rehabilitation or treatment and recovery of a person with substance-use disorder.

SECTION 15. REPEALING CLAUSE – All Ordinances, resolutions, rules and regulations which are inconsistent with the provisions of this ordinance are hereby repealed or amended accordingly.

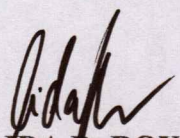
SECTION 16. SEPARABILITY CLAUSE. If any provision of this Ordinance is declared unconstitutional, the same shall not affect the validity and effectivity of the other provisions hereof.

SECTION 17. EFFECTIVITY - This Ordinance shall take effect upon its approval.

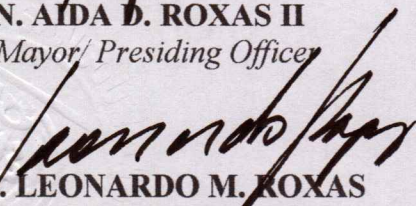
CERTIFIED CORRECT:


RUBY G. FRONDA
Secretary to the Sanggunian

ATTESTED:


HON. AIDA D. ROXAS II
Vice-Mayor/ Presiding Officer

APPROVED:


HON. LEONARDO M. ROXAS
Municipal Mayor