

Law enforcement agency and social welfare essay sample

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The Philippine Drug Enforcement Agency (PDEA) (Filipino: Kawanihan ng Pilipinas Laban sa Droga) is the lead anti-drugs law enforcement agency, responsible for preventing, investigating and combating any dangerous drugs, controlled precursors and essential chemicals within the Philippines. The agency is tasked with the enforcement of the penal and regulatory provisions of Republic Act No. 9165 (R. A. 9165), otherwise known as the Comprehensive Dangerous Drugs Act of 2002. PDEA is the implementing arm of the Dangerous Drugs Board (DDB). The DDB is the policy-making and strategy-formulating body in the planning and formulation of policies and programs on drug prevention and control. PDEA and DDB are both under the supervision of the Office of the President.

History and mandate

For thirty years, the Republic Act No. 6425, or the Dangerous Drugs Act of 1972, had been the backbone of the drug law enforcement system in the Philippines. Despite the efforts of various law enforcement agencies mandated to implement the law, the drug problem alarmingly escalated. The high profitability of the illegal drug trade, compounded by the then existing laws that imposed relatively light penalties to offenders, greatly contributed to the gravity of the problem. Recognizing the need to further strengthen existing laws governing Philippine drug law enforcement system, the then Philippine President Gloria Macapagal-Arroyo signed the Republic Act No. 9165, or the Comprehensive Dangerous Drugs Act of 2002, on June 7, 2002 and it took effect on July 4, 2002. The R. A. 9165 defines more concrete courses of action for the national anti-drug campaign and imposes heavier

penalties to offenders. The enactment of R. A. 9165 reorganized the Philippine drug law enforcement system.

While the Dangerous Drugs Board remains as the policy-making and strategy-formulating body in planning and formulation of policies and program on drug control and prevention, it created the Philippine Drug Enforcement Agency under the Office of the President. The new law abolished the National Drug Law Enforcement and Prevention Coordinating Center, which was created under Executive Order No. 61; and the Narcotics Group of Philippine National Police (PNP-NG), Narcotics Division of National Bureau of Investigation (NBI-ND), and the Customs Narcotics Interdiction Unit of the Bureau of Customs (BOC-CNIU). However, these law enforcement agencies have organized the following anti-illegal drugs task force to support the PDEA: Philippine National Police - Anti-Illegal Drugs Special Operation Task Force (PNP-AIDSOTF); National Bureau of Investigation - Anti-Illegal Drugs Task Force (NBI-AIDTF); and Bureau of Customs - Customs Task Group/Force in Dangerous Drugs and Controlled Chemicals (BOC-CTGFDDCC).

Vision, Mission and Values

Vision: To be a professional, effective and well-respected agency working for a drug-free Philippines. Mission: To be the lead agency in the enforcement of the anti-drug law; to serve as the principal implementing arm of the DDB; to exercise operational supervision over drug enforcement units of other law enforcement agencies; and to coordinate the participation of other sectors in the national anti-drug campaign. Core Values:

- * Honor
- * Commitment
- * Respect for Human Dignity
- * Excellence and Competence

The Parole and Probation Administration

The Parole and Probation Administration (Filipino: Pangasiwaan ng Parol at Probasyon), abbreviated as PPA, is an agency of the Philippine government under the Department of Justice responsible for providing a less costly alternative to imprisonment of first-time offenders who are likely to respond to individualized community-based treatment programs. History

Probation was first introduced in the Philippines during the American colonial period (1898–1945) with the enactment of Act No. 4221 of the Philippine Legislature on August 7, 1935. This law created a Probation Office under the Department of Justice. On November 16, 1937, after barely two years of existence, the Supreme Court of the Philippines declared the Probation Law unconstitutional because of some defects in the law's procedural framework. In 1972, House Bill No. 393 was filed in Congress, which would establish a probation system in the Philippines. This bill avoided the objectionable features of Act 4221 that struck down the 1935 law as unconstitutional. The bill was passed by the House of Representatives, but was pending in the Senate when Martial Law was declared and Congress was abolished. In 1975, the National Police Commission Interdisciplinary drafted a Probation Law. After 18 technical hearings over a period of six months, the draft decree was

presented to a selected group of 369 jurists, penologists, civic leaders and social and behavioral scientists and practitioners.

The group overwhelmingly endorsed the establishment of an Adult Probation System in the country. On July 24, 1976, Presidential Decree No. 968, also known as Adult Probation Law of 1976, was signed into Law by the President of the Philippines. The startup of the probation system in 1976-1977 was a massive undertaking during which all judges and prosecutors nationwide were trained in probation methods and procedures; administrative and procedural manuals were developed; probation officers recruited and trained, and the central agency and probation field offices organized throughout the country. Fifteen selected probation officers were sent to United States for orientation and training in probation administration. Upon their return, they were assigned to train the newly recruited probation officers. The probation system started to operate on January 3, 1978. As more probation officers were recruited and trained, more field offices were opened. There are at present 204 field offices spread all over the country, supervised by 15 regional offices. Mission

To rehabilitate probationers, parolees and pardonees and promote their development as integral persons by utilizing innovative interventions and techniques which respect the dignity of man and recognize his divine destiny. Mandate

The Parole and Probation Administration is mandated to conserve and/or redeem convicted offenders and prisoners who are under the probation or

parole system. Goals

The Administration's programs sets to achieve the following goals: Promote the reformation of criminal offenders and reduce the incidence of recedivism, and Provide a cheaper alternative to the institutional confinement of first-time offenders who are likely to respond to individualized, community-based treatment programs. Functions

To carry out these goals, the Agency through its network of regional and field parole and probation offices performs the following functions: to administer the parole and probation system

to exercise supervision over parolees, pardonees and probationers to promote the correction and rehabilitation of criminal offenders. Serenity at the Quarry

* Serenity at the Quarry is a drug and alcohol rehabilitation and treatment center five hours north of Manila in the mountainous setting of Baguio City. The center caters for international clients and the treatment is conducted in English unless specified otherwise. The facility operates according to the 12-step process favored by Alcoholics Anonymous. The rehabilitation team is led by Junjun Abella, a licensed counselor with the Professional Regulatory Commission of the Philippines. The Rising Phoenix Foundation

* The Rising Phoenix Foundation is a non-government drug rehabilitation organization that was opened in 2003. The center's founders have more than 50 years of experience in drug rehabilitation and use the principles of the 12-

step program in their treatment. The center is accredited by the Philippine Government's Department of Health. * Sponsored Links

* Singapore Psychiatrists

Psychiatric & Addictions Treatment For Local and International clients
resilienzmind. com. sg/

SELF Enhancement for Life Foundation

* The government-accredited SELF Enhancement for Life Foundation was founded in 1992 as a substance abuse treatment and rehabilitation facility. The center operates according to a dual approach program of clinical intervention and behavior modification. The therapists aim to wean their clients off drugs while concurrently identifying and developing their life-skills and abilities. * The House of Hope specializes in the treatment and rehabilitation of drug addicts. It is a non-profit facility that provides eight-month treatment programs for free and is run by ex-addicts. The treatment consists of work therapy and spiritual therapy. The spiritual therapy is Christian-based as the center is funded by churches in Singapore. The Philippines Department of Social Welfare and Development (DSWD)

The Philippines Department of Social Welfare and Development (DSWD) (Filipino: Kagawaran ng Kagalingang Panlipunan at Pagpapaunlad) is the executive department of the Philippine Government responsible for the protection of the social welfare rights of Filipinos and to promote social development. History

In 1915, the Public Welfare Board (PWB) was created and was tasked to study, coordinate and regulate all government and private entities engaged in social services. In 1921, the PWB was abolished and replaced by the Bureau of Public Welfare under the Department of Public Instruction. On November 1, 1939, Commonwealth Act No. 439 created the Department of Health and Public Welfare and in 1941, the Bureau of Public Welfare officially became a part of the Department of Health and Public Welfare. In addition to coordinating services of all public and private social welfare institutions, the Bureau also managed all public child-caring institutions and the provision of child welfare services. In 1947, President Manuel Roxas abolished the Bureau of Public Welfare and created the Social Welfare Commission, under the Office of the President, in its place. In 1968, Republic Act 5416, known as the Social Welfare Act of 1968, created the Department of Social Welfare, placing it under the executive branch of government. In 1976, the Department of Social Welfare was renamed Department of Social Services and Development (DSSD) through Presidential Decree No. 994.

This was signed into law by President Ferdinand E. Marcos and gave the department an accurate institutional identity. On June 2, 1978, the DSSD was renamed Ministry of Social Services and Development (MSSD) in line with the change in the form of government. In 1987, the MSSD was reorganized and renamed Department of Social Welfare and Development (DSWD) through Executive Order 123, which was signed by President Corazon C. Aquino. Executive Order No. 292, also known as the Revised Administration Code of 1987, established the name, organizational structure and functional areas of

responsibility of DSWD and further defined its statutory authority. In 1991, Republic Act 7160, otherwise known as the Local Government Code of 1991, devolved the basic services of the DSWD to local government units. Current projects include the National Household Targeting System for Poverty Reduction (NHTS-PR), Pantawid Pamilyang Pilipino Program (Pantawid Pamilya) and Kapit Bisig Laban sa Kahirapan-Comprehensive and Integrated Delivery of Social Services (KALAHI-CIDSS).

The Philippine Department of Health (Filipino: Kagawaran ng Kalusugan), abbreviated as DOH, is the executive department of the Philippine government responsible for ensuring access to basic public health services by all Filipinos through the provision of quality health care and the regulation of all health services and products. It is the government's over-all technical authority on health.[2] It has its headquarters at the San Lazaro Compound, along Rizal Avenue in Manila. The department is led by the Secretary of Health, nominated by the President of the Philippines and confirmed by the Commission on Appointments. The Secretary is a member of the Cabinet. The current Secretary of Health is Enrique Ona.

History

On September 29, 1898, the Americans established a military Board of Health with Dr. Frank S. Bourns as president. The purpose of this Board of Health was to care for injured American troops but as the hostilities between Filipinos and Americans waned in 1901, a civilian Board of Health was now deemed appropriate with Dr. L. M. Maus as the first health commissioner. In the early 1900s, 200, 222 lives including 66, 000 children were lost; three

percent of the population was decimated in the worst epidemic in Philippine health history. In view of this, the Americans organized and erected several institutions, including the Bureau of Governmental Laboratories, which was built in 1901 for medical research and vaccine production. The Americans, led by Dean Worcester built the UP College of Medicine and Surgery in 1905, with Johns Hopkins University serving as a blueprint, at the time, one of the best medical schools in the world.

By 1909, nursing instruction was also begun at the Philippine Normal School. In terms of public health, the Americans improved on the sewer system and provided a safer water supply. In 1915, the Bureau of Health was reorganized and renamed into the Philippine Health Service. During the succeeding years leadership and a number of health institutions were already being given to Filipinos, in accordance with the Organic Act of 1916. On January 1, 1919, Dr. Vicente De Jesus became the first Filipino to head the Health portfolio. In 1933, after a reorganization, the Philippine Health Service reverted to being known as the Bureau of Health. It was during this time that it pursued its official journal, The Health Messenger and established Community Health and Social Centers, precursors to today's Barangay Health Centers. By 1936, as Governor-General Frank Murphy was assuming the post of United States High Commissioner, he would remark that the Philippines led all oriental countries in terms of health status. When the Commonwealth of the Philippines was inaugurated, Dr. Jose Fabella was named chief of the Bureau of Health.

In 1936, Dr. Fabella reviewed the Bureau of Health's organization and made an inventory of its existing facilities, which consisted of 11 community and social health centers, 38 hospitals, 215 puericulture centers, 374 sanitary divisions, 1, 535 dispensaries and 72 laboratories. In the 1940s, the Bureau of Health was reorganized into the Department of Health and Public Welfare, still under Fabella. During this time, the major priorities of the agency were tuberculosis, malnutrition, malaria, leprosy, gastrointestinal disease, and the high infant mortality rate. When the Japanese occupied the Philippines, they dissolved the National Government and replaced it with the Central Administrative Organization of the Japanese Army. Health was relegated to the Department of Education, Health and Public Welfare under Commissioner Claro M. Recto. In 1947, President Manuel Roxas signed Executive Order (E. O.) No. 94 into law, calling for the creation of the Department of Health. Dr. Antonio C. Villarama as appointed Secretary. A new Bureau of Hospitals and a Bureau of Quarantine was created under DOH. Under E. O. 94, the Institute of Nutrition was created in 1948 to coordinate various nutrition activities of the different agencies.

On February 20, 1958, Executive Order 288 provided for the reorganization of the Department of Health. This entailed a partial decentralization of powers and created eight Regional Health Offices. Under this setup, the Secretary of Health passed on some of responsibilities to the regional offices and directors. One of the priorities of the Marcos administration was health maintenance. From 1975 to the mid-eighties, four specialty hospitals were built in succession. The first three institutions were spearheaded by First

Lady Imelda Marcos. The Philippine Heart Center was established on February 14, 1975 with Dr. Avelino Aventura as director. Second, the Philippine Children's Medical Center was built in 1979.

Then in 1983, the National Kidney and Transplant Institute was set up. This was soon followed by the Lung Center of the Philippines, which was constructed under the guidance of Health Minister Dr. Enrique Garcia. With a shift to a parliamentary form of government, the Department of Health was transformed into the Ministry of Health on June 2, 1978 with Dr. Clemente S. Gatmaitan as the first health minister. On April 13, 1987, the Department of Health was created from the previous Ministry of Health with Dr. Alfredo R. A. Bengzon as secretary of health. Bureaus: The DOH is composed of eight bureaus, namely:

Bureau of Health Devices and Technology

Bureau of Health Facilities and Services

Bureau of International Health Cooperation

Bureau of Local Health Development

Bureau of Quarantine and International Health Surveillance

Food and Drug Administration

Health Human Resources Development Bureau

Health Policy Development and Planning Bureau