

Restoring the Sanctity and Dignity of Life Among Low-Risk Drug User Surrenderers

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Abstract

The proponents of this research developed their interests to look into every good points a community-based relapse prevention program being implemented by a particular local community among low-risk drug-users surrenderers. This included appreciating the design of the program and how it impacted the participants and the community of Barangay Salapan, San Juan City. All these being viewed from the underlying principles of restorative justice, in the pursuit of describing how the sanctity and dignity of human life is being restored using the five stages of appreciative inquiry as method of analysis. The rehabilitation program being implemented by the local community and supported by the local government provided a silver lining for the victims of the prohibited drugs. Initially, it helped redeem their lost personal sense of dignity, social respect and acceptance, and become a productive and significant individual members of their particular families and their beloved community. It was emphasized that the restoration of the sanctity and dignity of life demands greater openness, volunteerism, respect sincerity and discipline from each of the persons involved in the rehabilitation program. It was noted also that all the sectors of the local community should be united and unselfishly support the program regardless of political color or affiliation, religious background, economic interests and social biases, so that the sacredness and dignity of life which is very primal as a value will be constructively attained.

Keywords: Sanctity and dignity of life, Drug Rehabilitation Program, Appreciative Inquiry, low-risk drug-users, Restorative Justice

Introduction

There has been a heightened appreciation of the sanctity and dignity of human life in the past decades. With the advent of so many developments in the areas of science and technology, and new discourses in philosophy, anthropology, law and politics, the sacredness of human life and its inherent value of dignity became hot issues of fierce debates. This is even true in the Catholic Church. For many decades now, the Church has taken the issue of the sacredness and dignity of human life as one of the most significant current topic of theological, philosophical, anthropological, and moral discourses. In fact, a lot of Catholic social teachings were written to clarify and provide the faithful an official teaching on these issues. The Catholic Church proclaimed that human life is sacred and that the dignity of the human person is the foundation of a moral vision for society. This belief is considered to be as the foundation of all the principles of Catholic social teachings.

In our modern society, the sanctity and dignity of human life has been under direct attack and being threatened by various issues like abortion, euthanasia, war and terrorism, cloning, embryonic stem cell research, and the use of the death penalty (USSCB, 2018). And more recently, according to Pope Francis in his encyclical *Laudato Si*, new forms of social aggression has risen. These are illegal drug trafficking and the growing illegal drug use by young people (2015, #46). His Holiness exclaimed that all these destroy the quality of life and society. This in turn, is an expression of disrespect and rejection of the sanctity and dignity of human life. Looking at the world today, illegal drugs indeed has now become a social menace, a symbol of social decline and a rupture in the sacredness of life and its intrinsic value of dignity. The abuse of illegal drugs has marred the sanctity and dignity of its users. It hinders them from using their freedom and making rational choices for self-actualization as well as enjoying the fullness of life. Worst is, this social problem has cost lives, destroyed trust among families and relationships in the community, and has also threatened cohesion in society.

In the Philippines alone, the incumbent government in its assumption to office in July 2016, reported that there are 1.8 million current drug users in the country while 4.8 million have used drugs at least once in their lives. As immediate response, the national government launched its anti-drug campaign called *Oplan Tok-Hang*, where the authorities visited and knocked on the doors of suspected illegal drug users/dealers to check on them, to make an appeal for them to stop their use and selling of illegal drugs, and counsel them to change their ways. The Philippine National Police (PNP) and the Philippine Drug

Enforcement Agency (PDEA) has reported that so far, there have been 1,308,708 who have voluntarily surrendered and professed their willingness to undergo a rehabilitation program. Notwithstanding, there have been 3,200 drug personalities who have been killed in police-led anti-drug operations, excluding those killed by vigilantes or other entities. This bloody outcome had caused the government's effort to eradicate the illegal drugs problem in the country under closed scrutiny from local and international human rights advocates.

In order to help the national government on its anti-illegal drugs campaign, local government units (LGUs) have been mandated to participate in *Oplan Sagip* as initiated by the Dangerous Drug Board (DDB). The LGUs, through Barangay Anti-Drug Abuse Council (BADAC), has developed a community-based treatment and rehabilitation services and interventions for the surrenderers under its low-risk category. DDB statistics shows that the low-risk category or mild substance use disorder comprise 90% of the surrenderers. After assessment and evaluation of the surrenderers, those under its low risk category are sent back to their respective communities and instructed to attend the community-based rehabilitation program and will then be monitored of their progress. This kind of intervention on the part of low-risk drug-users surrenderers of which the local community has participation seems to be very appealing and easy to accept by many civic organizations and religious groups locally and abroad. Something that has not yet been publicized by mainstream media. Nonetheless, this kind of intervention somewhat jibes with the findings of recent studies showing that the stakeholders of the local community, primarily the basic cell of the society – whether it be the family-, the extended family, significant others, friends and neighbors, have great contributions to the behavior and decisions of the drug user. More to this, they are also the ones who are gravely affected by the behavioral consequences of the drug-user. Thus, it is but essential to involve the stakeholders in restoring the dignity of life and freedom of the drug-user surrenderers which can start with mending trust and healing relationships in the family and in the community (Caday, F., 2017; Yip, P., et al, 2011). In reality, the *Oplan Sagip* program shares with this contention.

It has been almost two years now a community-based rehabilitation program was implemented by several local government units through their respective barangays. It is in this juncture that the proponents of this research developed their interest to look into the program, the effects it had with its attendees, and appreciate every good points the program as a whole had impacted to the low-risk drug-user surrenderers and its entire immediate community. All these being viewed

from the perspective of Restorative Justice as the pursuit of restoring the sanctity and dignity of human life using the Appreciative Inquiry (AI) approach.

The proponents of this research would like to answer the basic question, “*What are the practices initiated by the local community in order to help restore the sanctity of human life and its intrinsic value of dignity among low-risk drug-users surrenderers?*” Specifically, the researchers aim to: Determine the specific causes that have led people into becoming low-risk drug users and the psycho-social and spiritual effects that they have experienced and consequently desecrated their lives and disrespected their dignity as a person within their community; discern the mutual vision of the local barangay and its low-risk drug user surrenderers in implementing and undergoing a community-based treatment and rehabilitation services and interventions; and assess their recommendable restorative practices of the community-based treatment and rehabilitation services and interventions program being implemented for low-risk drug user surrenders through Appreciative Inquiry (AI) approach.

Every human person shares in the sanctity of life. Each are endowed with human dignity that makes one’s life worthy of respect and protection. And now due to many factors that threaten the sacredness and dignity of human life, this issue had become more and more a hot interest expressed in various forms by many people, whether they be in civic and religious organizations, and even across disciplines and cultures. These following are some of them:

On the sanctity and dignity of human life

The Sacred Scriptures provide us the fundamental references for philosophical, theological, moral, and spiritual discourses on human life. The first reference, as God has said, “*Let us make man in our image, to our likeness’...So God created man in his image; in the image of God He created him; male and female He created them* (Genesis 1:26-27).” underscores the very idea that human life is sacred and fashioned in the sacred image and likeness of God. This concept of the sacredness of human life is reinforced in details by the biblical imagery that says, *Then Yahweh God formed man, dust drawn from the clay, and breathed into his nostrils a breath of life and man became alive with breath* (Genesis 2:7). This biblical reference serves as the foundational principle of every important teachings contained in all Catholic social teaching documents.

St. John Paul II in his Encyclical Letter, *Evangelium Vitae*, published in 1995, declares what human life on earth is. He pointed out that “... life on earth is not an ‘ultimate’ but a ‘penultimate’ reality; even

so, it remains a sacred reality entrusted to us, to be preserved with a sense of responsibility and brought to perfection in love and in the gift of ourselves to God and to our brothers and sisters” (# 2). This insinuates the idea that each one is called to live a sacred life which is a divine gift, close to God and His sacred people. In a general sense, the document was written to reiterate the view of the Roman Catholic Church on the value of life and to warn against violating the sanctity of life.

Other magisterial documents either explicitly or implicitly discuss the sanctity and dignity of human life:

The post-synodal apostolic exhortation of St. John Paul II signed in Rome on December 30, 1988, *Christifideles Laici (Christ's Faithful People)*, also recognizes the sacredness of the human person. It says, “But the sacredness of the human person cannot be obliterated, no matter how often it is devalued and violated because it has its unshakable foundation in God as Creator and Father. The sacredness of the person always keeps returning, again and again” (CL 5).

Donum Vitae (The Gift of Life), is a document of the Congregation for the Doctrine of the Faith that offers specific replies to common questions about the Catholic Church's position on the dignity of human life. It was composed in 1987 by Joseph Cardinal Ratzinger prior to his election as Pope Benedict XVI. One finds in this document a declaration regarding the sacredness of human life. It states that,

“... human life is sacred because from its beginning it involves ‘the creative action of God’ and it remains forever in a special relationship with the Creator, who is its sole end. God alone is the Lord of life from its beginning until its end: no one can, in any circumstance, claim for himself the right to destroy directly an innocent human being (DV Intro 5).”

The Sacred Congregation for the Doctrine of Faith's Declaration *Jura et bona* (1980) expresses a strong statement that says life is sacred and a gift of God's love: “*Most people regard life as something sacred and hold that no one may dispose of it at will, but believers see in life something greater, namely, a gift of God's love*” (JEB # 1).

Mater et Magistra, the encyclical written by Pope John XXIII on the topic of "Christianity and Social Progress" and was promulgated in 1961, asserts that “*human life is a sacred reality because from its inception it reveals the creating hand of God*” (# 194). He insinuates, in this encyclical, the necessity to work towards authentic community in order to promote human dignity.

On restorative justice and rehabilitation of drug users

An article written by Amanda Ploch in 2012, *Why Dignity Matters*, says that human dignity provides an informative perspective from which to analyze the right of offenders to rehabilitation. If human dignity is firmly embraced as a foundational concept, then this can pave the way for a right to rehabilitation. Those wishing to encourage expansion of rehabilitative services for offenders should use the concept of human dignity in their efforts, as human dignity not only provides support for a right to rehabilitation, but further does this in a beneficial way than the other justifications for rehabilitation. The legal system should not lose sight of the powerful potential that human dignity has in ensuring respect for the rights of a vulnerable group.

Sandu, A. and Damian, S. (2012), in their literature entitled *Applying Appreciative Inquiry Principles in the Restorative Justice Field*, connects the issue on human dignity with the principle of restorative justice. They said, the concept of human dignity is supported by Restorative Justice whose philosophy creates an alternative justice that restores the communal condition before the commission of the crime. According to them, restorative justice works in solving the crime-created conflict by focusing with equal interest in assisting victims in repairing the damage caused by them. They added, the offender also must be helped to understand, accept and fulfill his obligations towards the victim and the community. Restorative justice implementation encourages collaboration between parties, victim restoration, and offender reintegration.

The United Nations Asia and Far East Institute for the Prevention of Crime and the Treatment of Offenders (UNAFEI) in 2004, reported the idea of reintegration of offenders especially in the rehabilitation of drug-users. This became known as a therapeutic community model which is a community-based treatment for drug abusers that originated in Synanon, Santa Monica, California in 1958. It was gradually recognized by the public institutions as offering hope for those in recovery from drug addiction. The programme is designed to enable the participants to recover their physical and mental health and be able to function properly in society through the interaction of the community members. In the process of attaining this ultimate goal, the modification of negative thinking, emotion and behavior is achieved by the use of self-examine, group truth-telling sessions, confrontation, various games and activities.

On a community-based rehabilitation literature

Mazo, G.N. (2017), In his article “*Transformational Rehabilitation: Community-Based Intervention to End the Drug Menace*,” published in the International Journal of Research – Granthaalayah, explores how a community-based transformational rehabilitation plan in Tanauan, Leyte, was crafted by the stakeholders to heal and restore the self-worth of the 396 surrenderers. The general objective was to enable the participant to understand the process of healing and recovery from their old lifestyles and embrace the new life of moral recovery. He exposes in the article that the act of volunteering for the transformational rehabilitation program shows an eagerness of surrenderers to renew their lives. The program is said to be effective based on the feedback from the surrenderers and their families because it really addressed the inner core of their problems. The holistic approach and gradual realization from the self, to the family and to the community made them truly commit to mend their ways.

Cooperrider, D. and Whitney, D., (2005), in their research entitled “*A Positive Revolution in Change: Appreciative Inquiry Case*,” emphasizes that when everybody is respected, valued and given worth, people, groups, communities respond in a more constructive, positive, life-affirming ways, even spiritually. Human relationships flourish “*where there is appreciative eye – when people see the best in one another, when they share their dreams and ultimate concerns in affirming ways, and when they are connected in full voice to create not just new worlds but better worlds. Perhaps our inquiry must become the positive revolution we want to see in the world.*”

A lot may have been written about the fundamental teachings of the Catholic Church on the sanctity and dignity of human life, including the many factors that threaten and can destroy it, and the possible interventions that may restore it through the years. But still, very few literatures (if not, none at all) tackle the issue on the restoration of the sacredness of human life and its intrinsic value of dignity as a subject matter. By considering, inquiring into and analyzing a community-based rehabilitation program given to low-risk drug user surrenderers in the country can such be appreciated. This brings to us the uniqueness of this research and its contribution to the academe and the society at large.

Conceptual Model and Operational Framework

The Judeo-Christian tradition has been very loud with its basic and yet very important teaching on the restoration of the sanctity of human life and its inherent value of dignity. The Book of Genesis first yielded to us the foundational principle of this important teaching when the sacred human writers pronounced the edifying statements, “*Let us make man in our image, to our likeness,*” (Gene. 1:26) and “*Then Yahweh God formed man, dust drawn from the clay, and breathed into his nostrils a breath of life and man became alive with breath*” (Genesis 2:7). The principle on the sanctity and dignity of human life may have been forgotten for a while because of the concept of the original sin, introduced through the disobedience of the first humans to God’s instructions, but nonetheless still gives much importance by God and His people, the Judeo-Christians. As it was vividly insinuated in the sacred writings about the exploits of certain individuals and their tribes guided meticulously by the covenantal love of the Divine Creator. The sanctity of life and human dignity finally found its way to full restoration through the sacrificial death on the cross by the Son of God the Father, Jesus of Nazareth.

The sanctity of human life and its dignity cannot be taken away from every person, but it can be threatened and damaged severely by certain individuals, institutions, organizations of people that enjoy unbridled power, driven by pride and selfish intentions, and blinded by fame and wealth. That is why the Catholic Church never wasted time forming the conscience of the faithful and the world, and keeps reminding them about the noblest principle of restoring the sacredness of life and human dignity. Now, it has become part of the Church’s duties and obligations within itself and in the world that is, becoming a responsible steward of human life. This is openly expressed as teachings without reservations in several catholic social documents. Catholic Social Teachings are social principles and moral teachings of the Church in protecting the sanctity of human life and dignity and promoting social justice. These teachings have been issued through papal, conciliar, and other official Church documents since the late 19th century.

The Catholic social teaching themes (Himes, 2001) that have arisen from the basic principles of the sanctity and dignity of human life, and are deemed essential for this research are as follows:

Call to Family, Community, and Participation. For the family is the central social institution that must be supported and strengthened as it is the foundation of coexistence and a remedy against social fragmentation; Another is the way a community organizes its economics and politics, laws and policies, directly affects human dignity and the capacity of individuals to grow in community; In as much as the community, there are also its people. People should be shapers of history, not just passive recipients of other people's decisions.

Rights and Responsibilities. Human dignity can be protected and a healthy community can be achieved only if human rights are protected and responsibilities are met – to one another, to our families, and to the larger society.

The Principle of Solidarity. Humanity belongs to one human family whatever our nationality is, our race, ethnicity, economic standing, and ideological differences. Family and community are called to solidarity in their right and duty to participate in shaping a more just and humane society, seeking together the common good and well-being of all, especially, restoring the dignity of the drug-user surrenderers.

The Principle of Common Good. This concept of the common good is the moral formula of the greatest good for all, including the poor, the weak, the vulnerable, the 'menace' or offenders, simply on the basis that they are human beings and are, therefore, with inherent worth.

Another essential principle that this research hinges on is the principle of *Restorative Justice* (RJ) (Mikulich, 2012). The ideals of RJ is founded also on the principles of the CST. It offers alternative criminal justice practices that emphasize on repairing the harm done by unjust behavior. It addresses three problems of the traditional system:

- Negligence of the hurts and needs of victims. RJ calls for genuine justice that includes healing of the victims' dignity.
- Does not call offenders to account, the system encourages defendants to plead not guilty. RJ invokes that the common good emphasizes 'punishment' is not only to defend public order and safety but should be a complete process of rehabilitation for the offender – (i.e. taking responsibility, making amends, and reintegrating into the community.). CST's rights and responsibilities mean that offenders must be held accountable without violating his or her basic rights.

- Negligence of the needs of the broader community. CST and RJ both stresses that the common good considers the needs of the victims, the accountability of the offenders, and the need to repair and restore relationships within the entire community. RJ roots on biblical shalom, “peace”, which involves God’s “unifying love” that saves and redeems all relationships.

CST and RJ share are underlying paradigms of building a more just and humane society. They are complementary frameworks that, when combined, create a powerful lens for examining and articulating interpretations about the restoration of the value of human life and dignity.

The entire research will be guided by this operational framework:

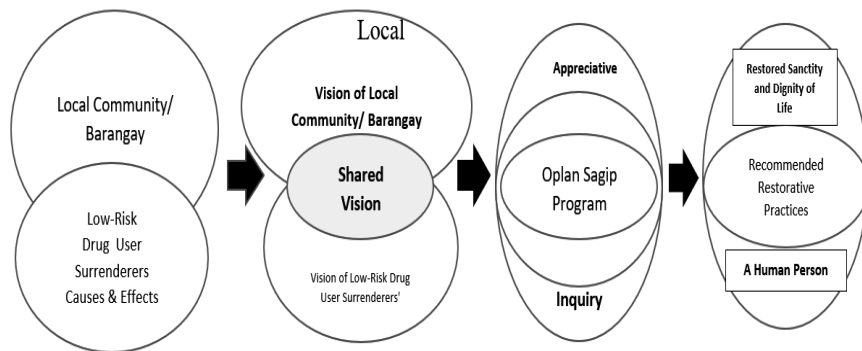


Figure 1. Operational Framework

Methodology

This research was descriptive in nature with the help of simple Appreciative Inquiry Approach applied on the implemented community-based rehabilitation and interventions program as experienced by the low-risk drug user surrenderers of a local community or barangay and some significant persons involved. In securing the data necessary for this research, the proponents used dual approaches: survey (interview) and archival. The respondents for this research were low-risk drug user surrenderers and other participants of KKDK in Barangay Salapan, San Juan City. The researchers were helped in choosing the said barangay,

their low-risk drug user surrenderers, and other participants of the local KKDK and by one of the friends of the researchers.

The concerned barangay was presented with a letter of request to conduct an interview about its community-based rehab and intervention program being implemented with some of the locals (low-risk drug user surrenderers with their relatives or friends). Before the personal interview was conducted, the identified respondents were informed about the nature of this research. Their consent to take part in it and the possibility of its publication was asked from them. The researchers also honored the right of the respondents to remain anonymous if in case they would like their identity protected. Each respondent was designated with a certain code to hide his or her identity. The researchers also followed the ethical guidelines of the Barangay Anti-Drug Addiction Council (BADAC) in dealing with, and handling their subjects with their corresponding data. The researchers observed the security guidelines of the Barangay Anti-Drug Addiction Council (BADAC) regarding safety measures of the subject and the researchers. The researchers requested the local officials if it is alright to conduct the interviews in an available room or hall in their barangay hall.

Upon identifying the prospective respondents for this research, they were subjected to individual or group-recorded interviews. If in case the data shared were unclear, the researchers would then validate them by asking clarificatory remarks. Then the recorded data were translated into lucid written form for analysis using Appreciative Inquiry Method.

The research is qualitative-descriptive. For the analysis, the Appreciative Inquiry Analysis framework was used. The shared experiences of the respondents were subjected to simple system of Appreciative Inquiry Analysis. There were keen identification of all positive and beneficial practices from the community-based rehab and intervention program as implemented by the local community or barangay, as experienced and shared by the low-risk drug user surrenderers themselves and as observed by their relatives and friends. Gathered data were analyzed and grouped according to themes then patterns examined and organized. From these, restorative practices were reacted upon(?) and feasible activities were suggested to make better their program for restoring the sanctity and dignity of life of the surrenderers.

Results and Discussion

The narratives of the respondents-participants of this research were analyzed through the five D stages of the appreciative inquiry, define, discover, dream, design, and delivery. Accordingly, Appreciative

Inquiry is the cooperative search for the best in people, their organizations, and the world around them. It involves systematic discovery of what gives a system 'life' when it is most effective and capable in economic, ecological, and human terms (Cooperrider, & Whitney, 2005). For this research, the implicit intention is to provide a third party non-participant objective evaluation of the researchers on how the sanctity and dignity of life of the low-risk drug-users surrenderers in Barangay Salapan, San Juan City was restored. This was made possible through considering the intervention initiated by the local community led by the barangay officials in coordination with the city authorities especially the office of the Vice-Mayor.

Definition Stage

A new addition to the four classic stages of Appreciative Inquiry's Method of analysis. This concerns clarifying on what the researchers are to inquire into and learn more about.

In this study, the researchers gave focus on the core value of restoration of the sanctity and dignity of life. This positive value is to be appreciated from the very life experiences of the low-risk drug-users surrenderers in Barangay Salapan, San Juan City, who participated in the "Katatagan Kontra Droga sa Komunidad" (KKDK), a community-based relapse prevention program implemented by the barangay in coordination with the City of San Juan. There were actually an estimate of more than three hundred surrenderers in the watch list of the said barangay. One hundred forty of them were enrolled in KKDK. Low-risk drug users are assessed by the Anti-Drug Abuse Council (ADAC) of the local government that uses the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) that was developed by the World Health Organization (WHO). Once referred by the concerned ADAC, they undergo intervention through the Barangay Anti-Drug Abuse Campaign (BADAC). The researchers managed to meet and interview several graduates of the intervention, their relatives and friends, and local officials including the facilitator of the KKDK program.

Discovery Stage

This stage peculiarly cites the best experiences of the people with the program, the things they deeply most value, the core, life-giving factors in their experiences, and even what they hope for in the future.

Upon scrutinizing all the narratives from the people who got involved in the KKDK program in Barangay Salapan, several themes had surfaced as positive experiences. The following statements, *gusto ko ng magbagong buhay, gusto ko at kaya kong magbago, namulat sa katotohanan na hindi kaya magbagong mag-isa, napapanahon na siguro at nagsawa na rin ako sa ganung systema, para mabago ang takbo ng aking buhay, magbago para sa security*, expressed one of the most glaring realizations that they ever had while undergoing the rehabilitation program, the need for change in their lives. It was a moral and personal decision for most of them to change their lives, from the fact that they voluntarily surrendered and undergo the rehabilitation, as they consistently exclaimed, *wala po, ako mismo ang kusang loob na may gusto para mapatunayan sa kanila na nagbago na ako*. In a way, this was an open admission that they have committed mistakes in life and that they would like to these. The best experience considered was also their appreciation of the importance of other people's help to achieve the much needed change in their lives. This was insinuated by their remarks, *barangay na ang humikayat sa amin, dahil sa programa ng gobyerno, nasa watchlist na kasi*. It was a best experience for them that their local community slowly started to accept them as a person and an important member of their own family and community. This social acceptance was well-expressed from these statements: *tinanggap na ako muli ng aking kabarangay. gumanda ang takbo at pagsasama ng pamilya, nag-uuusap-usap na, nagkaroon ng komunikasyon, naging close kami ng pamilya ko*. The issue on social acceptance was further emphasized through the trust issues that the surrenderers had experienced when they were given jobs by the local community and even city authorities. They said, *yung ibang surrenderees nagwowork na as a traffic management, sila nagko-control ng traffic, yung iba naman nasa city engineering, tumutulong sa pag-ano, binigyan ako ng trabaho ng minamahal naming vice mayor, nagkatrabaho ako at nabigyan ng kita*. Actually, this was not only a social issue for them but something economic as well. This added a conviction to really pursue a change in their lives. From all of these positive experiences, they are now experiencing peace and security, as they say, *nabigyan ako ng pagkakataon o chance na makapagtrabaho at ayusin ang buhay ko at maibalik unti-unti ang dati kong pagkatao, nakakagalaw ng walang alinlangan, walang takot na nakakalabas ng bahay, nasusuportahan at napoprotektahan ang aming buhay*. Most

importantly, from what they have experienced, they have rediscovered the value of one's life.

Dream Stage

The creation of a dream that is anchored in the life-experiences that they have had is what this stage is all about. By using the findings and stories from the discovery stage there will be an articulation of a compelling, memorable and ambitious picture of their desired future. Deviating a little from the traditional nature of this particular stage where the participants of the program are the ones articulating their envisioned dreams, for this study, the proponents of this research are the ones articulating their envisioned dreams. This will be done by digging deeper on the narratives of the participants of the program, where the dreams are possibly hidden. This is a sort of innovation on the Appreciative Inquiry Method of Analysis.

What can we draw upon from the positive experiences of the participants of KKDK program? Revisiting the transcribed narratives. What seemed to be the envisioned future of the participants was basically the restoration of what used to be the quality of life enjoyed most especially by the surrenderers-participants of the community-based relapse prevention program implemented by the barangay Salapan in the City of San Juan. Their quality of life before they were tagged as low-risk drug-users. A life that is living freely but responsible at the same time, healthy-living, living peacefully, being socially accepted, active and committed to be significant member of their own families and their barangay. A life that values the sacredness and dignity of life. An aspiration that will not remain as a dream permanently, but, is slowly being embraced and experienced by the surrenderers themselves as they remain and continue taking the KKDK program initiated by the local community.

Table 1.*Best practices of the program based from the narratives of the people*

Best practices of the program based from the narratives of the people	Significant values
<i>barangay na ang humikayat sa amin, dahil sa programa ng gobyerno..from Ateneo kasi galing yung modules namin</i>	Collaborative initiative of the Community, learning institution, and the government
<i>yung programa kasi namin hindi sya yung pinupush na, 'ikaw, magbago ka', yung pinapataas namin yung self-confidence nila na kaya nilang magbago... kumbaga, ang nakita namin dun, lumakas ang pananaw nila sa sarili nila, 'na ako kaya kong magbago'...</i>	Rebuilding self-confidence Positive self-concept Commitment to change
<i>na-explain sa kanya na hindi iha-harass yung mga kliyente, kakausapin ng maayos, kakausapin na parang kaibigan</i>	Proper, friendly, and non-coercive orientation
<i>kaya yung module namin ay once a week lang sya kasi yung iba talaga may trabaho, hindi sa public, may private work... pinapipili naman sila maam, kung umaga, tanghali o hapon... Tuesday, Thursday at Friday...15 weeks... tuloy-tuloy talaga maam, kasi kahit graduate na sila, minomonitor pa rin sila... kasi long-term process po yung pagbabago... sa isang buwan, siguro tatlong beses sa isang buwan...random drug tes...kina-counseling po yan maam... ipapatawag, tapos ang kumakausap na po dyan ay yung mismong psychologist... tapos, after naman nung program, inooffer naman kung gusto nyong magwork dito? well, yung ibang surrenderees nagwowork na as a traffic management, sila nagko-control ng traffic, yung iba naman nasa city engineering, tumutulong sa pag-ano... so, more on livelihood yung epekto kayalang hindi lahat kasi...</i>	Client availability considerate and modular program
<i>kasi yung module nyan more on family eh at tsaka yung spiritual nyan kaya ...Katatagan Kontra Droga (KKDK)</i>	Long term process of monitoring, Physical and psychological intervention
<i>Tinanggap na muli ako ng barangay..naging close kami ng pamilya...kinakausap at pinapansin na nila ako</i>	Economic support
	Familial, and spiritual formation
	Social acceptance

Design Stage

Traditionally, the design stage of the AI is more of a process discerning the ideas that brings energy and life to the participants and the organization. It is in this stage that determines what should be repeatedly done in order to achieve the preferred future. Relying from the shared narratives of all the participants in KKDK program especially from the designated facilitator of the KKDK in barangay Salapan, as validated by the experiences of the actual surrenderers, their relatives and friends, the researchers have had quite a good grasp of KKDK, its design as a program, especially what is perceived to be its best practices. Refer to the table above.

The KKDK program is a community-based relapse prevention program implemented by the local government given to the barangay for low-risk drug-users surrenderers. Formulated by the Ateneo group of psychologists, KKDK is made up of several formative modules on personal, familial, communal and spiritual life. Accordingly, the program is discreetly intended to boost and raise the confidence-level of the surrenderers to pursue change in their lives by personally getting rid from themselves the intention and addiction to use prohibited drugs. In this program, the low-risk drug-users surrenderers were given proper orientation regarding the program, emphasizing that they, the facilitators, will just talk to them as friends. The participants were given the freedom to choose the particular day they would conveniently attend the modules for two hours. In the case of Barangay Salapan, they can freely choose from Tuesday, Thursday or Friday sessions, or Saturday for those who have private work. The sessions lasted for fifteen weeks. Within that period, the participants were given two to three random drug tests. If found positive, they were counseled by a psychologist, then further evaluated if allowed to continue the program. All the participants continue to be monitored even after graduating from the program. Those who were not able to complete the modules were to be followed up through letters to return to the rehabilitation program. After taking the program, the surrenderers were motivated to work, or to go back to their previous work. Some of them were offered jobs by the local community official and San Juan City as well.

From the perspectives of the researchers, the said rehabilitation program initiated by the local community and supported by the City of San Juan for the low-risk drug-users surrenderers was found very formative. Although the scale of its popularity seemed low among the listed surrenderers, it was a fact that the program can truly be effective and helpful to the problematic members of the barangay because of the quality of its graduates. What was commendable about its design was the

non-coercive mood observed in helping the surrenderers, more so the reinforced level of confidence seen among them to personally pursue rehabilitation and change themselves. A certain level of freedom and tolerance was observed on the part of the surrenderers by the implementers that is seen to have enabled them to be helped more efficiently by the program, and they (the surrenderers) have taken advantage of. Generally, the program's design, as experienced by the concerned people, seems holistic because it addresses not just the personal-psychological life of the surrenderers but their familial, social, spiritual and even economic grasp of it as well. The possibility of restoring the sacredness and dignity of life of the low-risk drug-users surrenderers were initially restored.

Destiny Stage

Destiny is about empowering people to experiment with and improve upon their designs. It is in this AI stage that the determination of additional concrete ways to experience the dream is done. Thus the researchers, in this case, suggest some innovations on the program. Should there be more homegrown-trained members of the community that would serve as facilitators, it would be easier in carrying out the specific activities of the rehabilitation program. This will be a great help in absence of the facilitators who are nonmembers of the community. There should be greater positive awareness of the entire community regarding the rehabilitation program so that there will be a more cohesive communal support that would be given to the future participants. This can be done by distributing to each household, a copy of the primer of the rehabilitation program, this will let them know the appropriate disposition that is needed in relation to the participants of the program. Knowledge is moral and can be supported in bringing about real change. At least an appropriate orientation on the program can be shared in the local academic institution. All these must be done to create an environment of respect and love within the local community towards the participants of the program. The local community must conduct, if possible, a community-wide children's orientation on the reality of the prohibited drugs especially focusing on its ill effects. A house-to-house orientation can be done. Children, who are so innocent and vulnerable, will prevent themselves in becoming victims of prohibited drugs and probable future participants of the rehabilitation program. Remember, an ounce of prevention is better than a pound of cure. Since the rehabilitation program is being supported also by the local government, there must be a pledge of assurance that there will be continuity of the program by whoever is seated as officials of the local government. This will eliminate doubts from the community and the participants about the consistency of the

program's implementation. Church parishes must also actively get involved in the conduct of KKDK, because it addresses the primal important value, the restoration of the sanctity and dignity of life.

Conclusion

In as far as the restoration of the sacredness and dignity of life a continuous contention the low-risk drug-users surrenderers in barangay Salapan, San Juan City is concerned, there is a glaring hope that it will be achieved. The KKDK, being implemented by the local community and supported by the local government, and several institutions, provides a silver lining for the victims of the prohibited drugs that have destroyed them and affected their families negatively as well as harmed the good of the community. The KKDK is best practices, in essence are described as a collaborative initiative of the community, learning institution, and the government: 1) rebuilding self-confidence; 2) positive self-concept; 3) commitment to change; 4) proper, friendly, and non-coercive orientation; 5) client availability consideration and modular program; 6) long term process of monitoring; 7) physical and psychological intervention; 8) economic support; 9) familial and spiritual formation; 10) and social acceptance, helped redeem their lost personal sense of dignity, social respect and acceptance, and become a productive and significant individual members of their particular families and their beloved community. The restoration of the sanctity and dignity of life demands greater openness, volunteerism, respect, sincerity and discipline from each of the persons involved in the rehabilitation program. There is a need to intensify the program further by constantly evaluating it and, if necessary, consider to revise it, all for the benefit of the participants. It will be well-achieved if all the sectors of the local community would have a concerted and unselfish effort to support the program regardless of political color or affiliation, religious background, economic interests and social biases. After all, restoration of the sanctity and dignity of life of anybody is of primal importance. An obvious limitation of this research is that it was conducted only within one particular local community. If future researches of similar nature will be conducted in other localities with other sets of low-risk drug-users surrenderers, the issue can be discerned more precisely. Researchers also recommend greater exposure for the dynamic participation of future researchers in the implementation of KKDK in local communities. Lastly, the researchers recommend to include in future research the participation of the local churches to provide description of an all-sector participation within local communities in the rehabilitation of their low-risk drug-users surrenderers.

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