

Drug-Free Workplace Policies and Program on HIV and AIDS 2007-2008

Research Paper No. 2009-02



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Abstract

Drug abuse remains to be a pervasive problem that transcends geographic, demographic or socio-economic boundaries. As of 2004 according to the Dangerous Drugs Board, about 6.7 million Filipinos have used illicit and addictive substances. Most of those who engage in substance abuse are young workers.

Pursuant to the provisions of Republic Act 9165 (The Comprehensive Dangerous Drugs Act of 2002) and Department of Labor and Employment Department Order No. 53-03 (Guidelines for A Drug-Free Workplace Program in the Private Sector), the DOLE continues to implement and supplement the activities initiated since the passage of the Law. The guidelines serve as basis for formulation and implementation of company policies in private companies.

However, information on the components and status of implementation of workplace-based policies and programs cannot be accurately captured by the current monitoring mechanism for OSH conditions.

The survey was conducted to assess the responses, programs and activities being done by the private sector in providing a drug-free workplace. The paper discusses the process of policy and program development of respondents. The major preventive interventions, including the main reasons for the absence of workplace initiatives are outlined in the paper.

The survey is purposive, targeting clients and recipients of all technical assistance and services from the OSHC, Self-assessment survey forms were

distributed to participants of all OSHC training courses and learning sessions during the reference period January 2007 to September 2008.

From January 2007 to September 2008, survey questionnaires on workplace drug-free policy and program were distributed to 3,082 companies. Only 561 (18.2%) companies and organizations have responded to the questionnaire. Out of this, 436 companies belonged to the private sector. Two hundred forty one (241) are small scale establishments based on the number of their employees.

The number of establishments with drug-free workplace policy (284 out of 561; 51%) is almost equal to those companies that have not formulated one (277 out of 561; 49%). The most commonly cited reasons for not formulating policies were as follows: "drug issue was not a priority in the workplace"; "not relevant to the workplace" and "financial reasons". For establishments with drug-free workplace policies, only 60% followed the process of bipartite formulation of the drug-free policy. Less than a third of the respondents adhered to the provision of DO 53-03 specifying that the drug-free program shall be integrated into the workplace OSH programs.

The most commonly implemented component of drug-free workplace programs was drug testing noted to be implemented by 209 out of 284 establishments. However, only 10% adhered to the guidelines directing establishments to conduct unannounced schedule of testing. Random selection of workers was being implemented by only 36 out of the 209 companies with drug testing activities.

There is an urgent need to strengthen further DOLE's programs and activities to increase the number of workplaces addressed by preventive programs of partners other than the DOLE. The relatively lower compliance rate of small and medium-scale enterprises should be noted as an important policy issue. The DO 53-03 requires that the drug-free policy is jointly formulated by workers and employers. The finding that only 60.5% have accomplished this should be corrected immediately. Another immediate concern is the response the workplace drug-free policy and program are not a priority or not relevant in the companies. Furthermore, there was noted a general inconsistency in the implementation of the different components of the drug-free workplace policies and programs among the companies.

Advocacy, a supplement effort to enforcement, is an effective approach to increase compliance to occupational safety and health standards, including DO 53-03. This strategy should target the traditionally egregious sectors, as well as employers, employees and OSH practitioners.