Women, Incarceration and Drug Policies in the Philippines: Promoting Humane and Effective Responses

A POLICY GUIDE

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A Policy Guide

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Introduction

In 2009, the United Nations Office of Drug and Crime (UNODC) produced a report assessing one hundred years of drug control since the 1909 Shanghai Opium Commission, where governments convened for the first time to discuss an international approach to drug-related problems.\(^1\) The report identified and recognized the negative ‘unintended consequences’ of drug control policies: the creation of a criminal black market; the shift of policy focus from public health to law enforcement; enforcement in one geographical area resulted to diversion of illicit drug production to other areas; pressure on one type of drug led to the promotion of the use of other alternative drugs; and, the marginalization of and stigmatization against persons who use drugs.\(^2\)

Almost a decade after this UNODC report, these negative consequences of drug control continue to be suffered by a growing number of women incarcerated for drug-related offences worldwide, and particularly in South East Asia. This policy guide aims to provide civil society organisations and stakeholders in the Philippines with information and policy recommendations on the situation of women incarcerated for drug-related offences.

Methodology

In 2018, the International Drug Policy Consortium, in partnership with Ozone Foundation in Thailand, LBH Masyarakat in Indonesia and NoBox Transitions in the Philippines, embarked on a project called ‘Women, Incarceration and Drug Policies in South East Asia: Promoting Humane and Effective Responses’.

The project aims to encourage reforms towards reducing the levels of incarceration of women for drug offences. The project also seeks to increase civil society engagement; gather support for proportionate sentencing and reduction of death penalty sentences

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\(^2\) Ibid
especially for low-level, non-violent offences; increase understanding of the extent and profile of women incarcerated for drug offences and its wider socio-economic consequences; and to promote alternatives to incarceration.

To these ends, the project partners in three countries in South East Asia conducted research studies on women incarcerated for drug related offences. They also provided workshops and meetings for civil society organisations involved in women’s rights, drug policy reform and prison reform. A national stakeholder consultation was held for relevant public institutions, organisations and communities to come together and discuss the research outputs while sharing their best practices, experiences and challenges as well as provide recommendations for national policy reforms. This policy guide is a consolidation of the outcomes of these project activities in the Philippines.

Global Trends on Women Incarcerated for Drug Offences

In its 2015 Global Prison Trends report, Penal Reform International found that while women comprised 6.5 percent of the world’s prisoners – over 660,000 women as of 2013 – they constitute the fastest growing prison population with particularly high rates of imprisonment for drug offences. The proportion of women incarcerated for drug offences is significantly higher than that of men, with the highest levels of incarceration of women to be found in South East Asia.³

This number has significantly increased between 2015 and 2017. The Fourth Edition of the World Female Imprisonment List states that more than 714,000 women and girls are held in penal institutions throughout the world as of September 2017. These include pre-trial detainees or remand prisoners and those that have been convicted or sentenced.⁴

While women make up only about 2 to 9 percent of countries’ total prison population, subject to some exceptions, the number of women in prison is increasing at a faster rate than the number of men incarcerated. According to the World Female Imprisonment List, between 2000 and 2017, the global female prison population increased by 53.3% compared to 19.6% for male prisoners.

The female prison population levels in Brazil, Indonesia, the Philippines and Turkey have risen particularly

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### Table 1: Highest Incarceration Rates of Women Worldwide

<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
<th>Number of Women and Girls Incarcerated as of September, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>United States</td>
<td>about 211,870</td>
</tr>
<tr>
<td>2</td>
<td>China</td>
<td>107,131 (plus an unknown number in pre-trial and other forms of detention)</td>
</tr>
<tr>
<td>3</td>
<td>Russian Federation</td>
<td>48,478</td>
</tr>
<tr>
<td>4</td>
<td>Brazil</td>
<td>About 44,700</td>
</tr>
<tr>
<td>5</td>
<td>Thailand</td>
<td>41,119</td>
</tr>
<tr>
<td>6</td>
<td>India</td>
<td>17,834</td>
</tr>
<tr>
<td>7</td>
<td>Philippines</td>
<td>12,658</td>
</tr>
<tr>
<td>8</td>
<td>Vietnam</td>
<td>11,644</td>
</tr>
<tr>
<td>9</td>
<td>Indonesia</td>
<td>11,465</td>
</tr>
<tr>
<td>10</td>
<td>Mexico</td>
<td>10,832</td>
</tr>
<tr>
<td>11</td>
<td>Myanmar</td>
<td>9,807</td>
</tr>
<tr>
<td>12</td>
<td>Turkey</td>
<td>9,708</td>
</tr>
</tbody>
</table>
Women, Incarceration and Drug Policies in the Philippines: Promoting Humane and Effective Responses

Sharply between 2015 and 2017. The Philippines is one of twelve countries with the highest rates of incarceration for women worldwide (see Table 1).

Some concerns faced by women in incarceration include mental health problems with histories of abuse and trauma, vulnerability to sexual abuse by correctional personnel and other prisoners, reproductive health care needs, being primary caretakers of young children and having to leave them, and lesser face to face contact with their families because of the location of women’s prisons. It is more also difficult for women with a history of incarceration to find work, housing and financial support when they return to their communities.5

However, despite the rising numbers worldwide and in South East Asia, since women and girls represent less than ten percent of the prison population on average, their characteristics and gender-specific needs have largely been unrecognized and ignored.

Box 1. International guidelines and recommendations for women incarcerated for drug offences

In 2016, the UN Commission on Narcotic Drugs adopted Resolution 59/5 ‘Mainstreaming a gender perspective in drug-related policies and programmes’. The resolution called for member-states to consider the specific needs of women and girls in implementing drug policies in line with the international drug control conventions, and:

‘to take into consideration the specific needs and circumstances of women subject to arrest, detention, prosecution, trial or the implementation of a sentence for drug-related offences when developing gender-specific measures as an integral part of their policies on crime prevention and criminal justice, including appropriate measures to bring to justice perpetrators of abuse of women in custody or in prison settings for drug-related offences’ (emphasis added). 6

The same resolution also instructs UN member states to draw from the provisions of the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules),7 the United Nations Standard Minimum Rules for Non-custodial Measures (the Tokyo Rules)8 and the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules).9 These include key guiding principles regarding women deprived of liberty:

The Mandela Rules:

- **Rule 1.** All prisoners shall be treated with the respect due to their inherent dignity and value as human beings. No prisoner shall be subjected to, and all prisoners shall be protected from, torture and other cruel, inhuman or degrading treatment or punishment, for which no circumstances whatsoever may be invoked as a justification. The safety and security of prisoners, staff, service providers and visitors shall be ensured at all times.

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• **Rule 2.** The present rules shall be applied impartially. There shall be no discrimination on the grounds of race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or any other status. The religious beliefs and moral precepts of prisoners shall be respected.

• **Rule 3.** In order for the principle of non-discrimination to be put into practice, prison administrations shall take account of the individual needs of prisoners, in particular the most vulnerable categories in prison settings. Measures to protect and promote the rights of prisoners with special needs are required and shall not be regarded as discriminatory.

The Bangkok Rules:

• **Rule 1.** In order for the principle of non-discrimination embodied in rule 6 of the Standard Minimum Rules for the Treatment of Prisoners to be put into practice, account shall be taken of the distinctive needs of women prisoners in the application of the Rules. Providing for such needs in order to accomplish substantial gender equality shall not be regarded as discriminatory.

The Tokyo Rules:

• **1.5.** Member States shall develop non-custodial measures within their legal systems to provide other options, thus reducing the use of imprisonment, and to rationalize criminal justice policies, taking into account the observance of human rights, the requirements of social justice and the rehabilitation needs of the offender.

The **Outcome Document of the 2016 United Nations Special General Assembly** (UNGASS) also addresses human rights abuses in the name of drug control, including gender-specific issues faced by women incarcerated for drug-related offences, enjoining member-states to:

“Mainstream a gender perspective into and ensure the involvement of women in all stages of the development, implementation, monitoring and evaluation of drug policies and programmes, develop and disseminate gender-sensitive and age-appropriate measures that take into account the specific needs and circumstances faced by women and girls with regard to the world drug problem and, as States parties, implement the Convention on the Elimination of All Forms of Discrimination against Women.” (para 4(g))

“Encourage the taking into account of the specific needs and possible multiple vulnerabilities of women drug offenders when imprisoned, in line with the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules)” (para 4(n))

These international guidelines and recommendations require more efforts by UN member states to ensure adequate implementation at national level.
Drug policy and the Philippines legal system

The law in force in the Philippines for drug-related offences is the Comprehensive Dangerous Drugs Act of 2002, Republic Act 9165 (the CDD Act).\(^\text{11}\) It provides penalties of fine and imprisonment for the following activities relating to ‘dangerous drugs,’ which are defined to include heroin, crystalline methamphetamine (known locally as ‘shabu’) and cannabis:

- Importation of ‘dangerous drugs’ and/or controlled precursors and essential chemicals
- Sale, trading, administration, dispensation, delivery, distribution and transportation of dangerous drugs and/or controlled precursors and essential chemicals
- Maintenance of a den, dive or resort where any ‘dangerous drug’ is used or sold in any form
- Being employees of a den, dive or resort where any ‘dangerous drug’ is used or sold in any form
- Manufacture of ‘dangerous drugs’ and/or controlled precursors and essential chemicals
- Illegal chemical diversion of controlled precursors and essential chemicals
- Manufacture or delivery of equipment, instrument, apparatus and other paraphernalia for dangerous drugs and/or controlled precursors and essential chemicals
- Possession of ‘dangerous drugs’, with the maximum penalty to be imposed if possession of dangerous drugs is found to be during a party, social gathering or meeting or in the proximate company of at least two people
- Possession of equipment, instrument, apparatus and other paraphernalia for dangerous drugs, with the maximum penalty to be imposed if possession of equipment or paraphernalia is found to be during a party, social gathering or meeting or in the proximate company of at least two people, and Use.

The penalties under the CDD Act are disproportionately severe, for example, the minimum penalty for possession of drugs (a non-violent offence) is 12 years in prison, the same as for homicide (a violent offence resulting in death, with intent).
The CDD Act also includes provisions on mandatory and random drug testing as well as compulsory treatment and rehabilitation for people who use drugs. This law has been in force since 2002 and has already accounted for most of the pre-trial or remand detainees and prisoners in Philippine jails and prisons. The Philippines has some of the highest numbers of pre-trial or remand prisoners in the world, at 75.1% of the entire prison population as of 31 March 2018, according to the World Prison Brief. Remand or pre-trial prisoners are usually detained in jails managed by the Bureau of Jail Management and Penology (BJMP) and then transferred to prisons run by the Bureau of Corrections once convicted and sentenced.

In July 2016, the Philippine National Police released Command Memorandum Circular No. 16 of 2016, on the Anti-Illlegal Drugs Campaign Plan called Project 'Double Barrel.' The Circular provides guidelines on the government’s ‘drug clearing’ strategy in the villages (barangays). The ‘lower barrel’ known as Oplan Tokhang involves the gathering of a watchlist of individuals suspected of drug use or involvement in the illegal drug trade. People on the list must either surrender or be the subject of police operations. These guidelines have resulted in thousands of arrests and over a million people surrendering themselves to police or barangay officials.

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**Figure 1. Penalties for various drug offences as compared to theft, homicide and murder in the Philippines**

<table>
<thead>
<tr>
<th>THEFT</th>
<th>HOMICIDE</th>
<th>MURDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>fine</td>
<td>6 yrs</td>
<td>12 yrs</td>
</tr>
<tr>
<td>USE OF DRUGS (2nd time)</td>
<td>POSSESSION of drugs (min)</td>
<td>POSSESSION of drugs (max)</td>
</tr>
<tr>
<td>life imprisonment</td>
<td>40 yrs</td>
<td></td>
</tr>
</tbody>
</table>


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10 NoBox Transitions Foundation, “Women, Incarceration and Drug Policy in the Philippines,” 2018

14 In July 2016, the Philippine National Police released Command Memorandum Circular No. 16 of 2016, on the Anti-Illlegal Drugs Campaign Plan called Project ‘Double Barrel.’ The Circular provides guidelines on the government’s ‘drug clearing’ strategy in the villages (barangays). The ‘lower barrel’ known as Oplan Tokhang involves the gathering of a watchlist of individuals suspected of drug use or involvement in the illegal drug trade. People on the list must either surrender or be the subject of police operations. These guidelines have resulted in thousands of arrests and over a million people surrendering themselves to police or barangay officials.
The NoBox Study on Women Incarcerated for Drug Offences

Profiles of women respondents

NoBox Philippines conducted research combining both quantitative and qualitative data-gathering to understand the experiences and profiles of women incarcerated for drug-related offences in the Philippines. The research respondents included 20 women in pre-trial detention held in a BJMP jail and 15 women who were already sentenced and imprisoned at the Women's Correctional Institute of the Bureau of Corrections.

As of September 2017, BJMP-managed jails house 106,217 people incarcerated for drug-related offences out of a total of 151,953 total incarcerated – this represents two thirds of all those incarcerated in BJMP jails (see Table 2). More than half of them are charged with possession. The national jail overcrowding rate is at over 600%.

Meanwhile in the Bureau of Corrections, 60% of the women in prison are incarcerated for ‘crimes related to opium and other prohibited drugs’ (1,712 out of 2,854) compared to only 15.10% of men in prison (5,888 out of 38,990). It should be noted that the number of pre-trial detainees for drug-related offences significantly increased in 2016 (see Table 4).
The NoBox Study on Women Incarcerated for Drug Offences

2 out of every 3 people awaiting their sentences are charged with a drug offense

Table 2: Number of people held in Bureau of Jail Management and Penology jails

<table>
<thead>
<tr>
<th>Overall Population</th>
<th>Drug-Related Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Males</td>
</tr>
<tr>
<td>2012</td>
<td>63,263</td>
</tr>
<tr>
<td>2013</td>
<td>65,321</td>
</tr>
<tr>
<td>2014</td>
<td>76,584</td>
</tr>
<tr>
<td>2015</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>126,946</td>
</tr>
<tr>
<td>2017 (up to September)</td>
<td>151,953</td>
</tr>
</tbody>
</table>

Table 3: Charges against people held in Bureau of Jail Management and Penology jails

<table>
<thead>
<tr>
<th>Drug-Related Charges</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use of drugs (Section 15 of RA 9165)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>485</td>
<td>512</td>
<td>687</td>
<td>982</td>
<td>1,495</td>
<td>2,275</td>
</tr>
<tr>
<td>Female</td>
<td>92</td>
<td>90</td>
<td>119</td>
<td>158</td>
<td>273</td>
<td>442</td>
</tr>
<tr>
<td>Possession of Drugs (Section 11 and 13 of RA 9165)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>10,095</td>
<td>12,199</td>
<td>15,477</td>
<td>21,832</td>
<td>34,993</td>
<td>45,166</td>
</tr>
<tr>
<td>Female</td>
<td>1,757</td>
<td>2,034</td>
<td>2,636</td>
<td>3,411</td>
<td>5,804</td>
<td>8,272</td>
</tr>
<tr>
<td>Possession of Paraphernalia for the Use of Drugs (Section 12 and 14 of RA 9165)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>1,850</td>
<td>2,329</td>
<td>3,811</td>
<td>5,166</td>
<td>9,778</td>
<td>13,486</td>
</tr>
<tr>
<td>Female</td>
<td>317</td>
<td>486</td>
<td>635</td>
<td>1,007</td>
<td>1,862</td>
<td>2,887</td>
</tr>
<tr>
<td>Sale of drugs (Section 3 of RA 9165)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>10,765</td>
<td>13,618</td>
<td>18,590</td>
<td>22,287</td>
<td>37,421</td>
<td>46,645</td>
</tr>
<tr>
<td>Female</td>
<td>2,222</td>
<td>2,874</td>
<td>3,462</td>
<td>4,056</td>
<td>6,535</td>
<td>8,492</td>
</tr>
<tr>
<td>Other Offences under RA 9165</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>688</td>
<td>799</td>
<td>2171</td>
<td>2394</td>
<td>5507</td>
<td>10,807</td>
</tr>
<tr>
<td>Female</td>
<td>151</td>
<td>150</td>
<td>351</td>
<td>467</td>
<td>1044</td>
<td>1292</td>
</tr>
</tbody>
</table>

Note: Drug-related charges refers to the number of charges of violations of RA 9165, NOT the number of people charged with violations of RA 9165. One person could be charged with multiple offenses under RA 9165.

Table 4: Number of people held in Bureau of Corrections prisons

<table>
<thead>
<tr>
<th>Overall Population</th>
<th>Drug-Related Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Males</td>
</tr>
<tr>
<td>2012</td>
<td>35,235</td>
</tr>
<tr>
<td>2013</td>
<td>36,381</td>
</tr>
<tr>
<td>2014</td>
<td>38,347</td>
</tr>
<tr>
<td>2015</td>
<td>38,987</td>
</tr>
<tr>
<td>2016</td>
<td>38,805</td>
</tr>
<tr>
<td>2017</td>
<td>38,990</td>
</tr>
</tbody>
</table>
The women who participated in the research came from different geographic, religious, educational and economic backgrounds. While a few had finished college, most of them stopped after high school. Many of them belong to the informal economy – working as tricycle drivers, street vendors, sex workers or in the service sector as security guards, janitors and call centre agents. There were also some who worked overseas or in local government.

Only three of the total 35 women interviewed for the study did not have children. Most of the women interviewed were either married or had common law partners of the same or different sex. Before they were imprisoned, many of them lived with their extended family and their parents or in laws helped with child care.

Some of the women who were interviewed reported direct involvement in the illegal drug market, while others reported no involvement at all. Those who admitted use or selling of drugs showed a variety of contexts and purposes. Some described their drug use as functional – explaining that using shabu (methamphetamine, one of the most widely used drugs in the Philippines) allowed them to stay awake at night and work or to concentrate better in school. Some admitted to selling shabu as a matter of economic necessity – to pay for a child’s medication or hospitalisation. A theme that stood out was the involvement of family members, either as motivation or as influences. Some of the women said they were not involved with drugs at all and were imprisoned based on planted evidence or were unjustly and illegally arrested.

“Parang bangungot yung nangyari sa akin kasi ang mga anak ko nagkahawa-hiwalay (What happened was like a nightmare because my children were separated from each other),” laments Silima, 45.
The NoBox Study on Women Incarcerated for Drug Offences

Access to justice

The study highlights the experiences of women during arrest and detention. The women shared stories of practices of extortion and corruption when they were arrested and detained. These practices are described as:

1) “palit ulo” which means being arrested “in exchange for the head” of someone else in order for the arresting authorities to meet a certain “quota”;
2) “tanim droga” or evidence planting; and
3) “areglo” or extortion.

"Pag alam naman na walang pera, wala namang pakialam. Unlike pag malaki ang nahuli (If they know that you don't have money, they don't care. Unlike if you’re a big fish),” Aileen, 37, narrating how the police never tried to extort from her because they knew she couldn't afford it.

Many incarcerated women come from poor and marginalised communities, thus a large number of them do not have the economic means to hire a lawyer and are often unaware of their legal rights. This places them in a vulnerable situation where they may be pressured into signing statements without full knowledge of the legal implications in the absence of any legal counsel, while adding further delays in the criminal justice process.18

The extremely high number of people charged for drug-related offences has resulted in clogged court dockets, over-burdened Public Attorneys (also known as ‘public defenders’) and a generally slow criminal justice system characterised by unnecessary delays, all of which contribute to the high numbers of pre-trial detainees awaiting the resolution of their cases. Indeed, the research respondents reported having their trial dates frequently rescheduled to the point that the period of their pre-trial detention may have already exceed the imposable sentences of the crimes they were charged with. Overcrowding in the courts, in turn, greatly contributes to prison overcrowding.

"Hindi na safe ang mga tao ngayon, tataniman ka ng droga” (People are not safe today, they will plant drugs on you), Madel, 48, says, narrating that she spent 9 months in jail despite never selling drugs.

The respondents perceived the courts and public attorneys to be inefficient and unable to deliver justice. They also narrated stories of corrupt and abusive practices when they were arrested. Many of them believed that those who were able to secure the services of private lawyers had a better chance of attaining justice.

Box 2. BEST PRACTICE EXAMPLE: Paralegal training in female jails: The lipstick brigade of Mandaue City and Cebu City Jails

Among the services offered in BJMP jails, the study conducted by NoBox noted the existence of paralegals. Paralegal aides are trained by NGOs such as the Humanitarian Legal Assistance Foundation (HLAF) in partnership with the BJMP to help their fellow detainees to articulate their access to justice and legal concerns to jail officials. The paralegal aides undergo a series of trainings to provide them with basic legal knowledge and skills.

In Mandaue City and Cebu City Female Jails, the paralegal aides are called the ‘lipstick brigade’. They help bridge the gaps in legal services that many pretrial detainees in Philippine jails do not have access to. If the paralegal aide programme were to be institutionalised in all BJMP jails, this could help provide access to justice for thousands of pretrial detainees, including women incarcerated for drug offences.

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References:


Prison overcrowding

All stakeholders, including both prison officials and detainees, are concerned with the alarming rates of prison and jail overcrowding. This problem impacts all aspects of their everyday lives, including the health of the women in detention, their access to justice and delivery of services. Overcrowding also affects the capacity of the jail and prison officials to perform their duties as there is always a lack of personnel and many of them are tasked with multiple assignments or roles.

Facilities and access to services

The facilities and services available to women in jails and prisons vary. In the Philippines, women are detained in facilities for women only. Some of the detention facilities for female pre-trial detainees are in entirely separate locations from the male jails while some share a common jail complex or compound with the male detention facilities. Once convicted and sentenced, women are imprisoned in correctional facilities exclusively for women which are built in different locations from the men's prisons.

There is no standardised needs-assessment process in the jails and prisons in the Philippines. Consequently, the services and facilities are not standardised either, and some services available in one jail or prison may not be available in another. Fortunately, the gaps in services and facilities are met thanks to the involvement of civil society organisations who provide healthcare, livelihood trainings and education, to name a few. Nurses and doctors visit the jails twice a month, and there is generally a medical officer and nurses in the prison. They provide medical consultations and public health lectures. There are free vaccines and HIV testing but the prisoners report that the medicines are insufficient.

<table>
<thead>
<tr>
<th>Service or Facility</th>
<th>Jail (BJMP)</th>
<th>Prison (Bureau of Corrections)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dormitories</td>
<td>The jail has three dormitories with about 1,500 inmates, including one that houses the elderly, those perceived by the detainees as women in same-sex relationships, and those with mental health concerns.</td>
<td>18-hectare complex with numerous dormitories: Dorms 1 to 12, Dormitories A to D, the Reception and Diagnostic Center (RDC), and the Therapeutic Community (TC) dorm. Other facilities include a gym, study area, laundry area, and a 'mothers ward'.</td>
</tr>
<tr>
<td></td>
<td>As in the jail, the dorms have specific assignments. Detained foreign nationals are placed in Dorm 8 while women who are pregnant or have just recently given birth are assigned to the mothers' ward.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Women who give birth inside the prison are allowed to keep their child until the child is six months old or up to one year if they have no family outside prison, after which the child will be entrusted to a family member outside the detention facility or, if none are available, a social worker.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Newcomers are first brought to the RDC where they typically spend a year, after which, if their case involves any type of drug offence, they are moved to the Therapeutic Community (TC) dorm.</td>
<td></td>
</tr>
</tbody>
</table>
### Service or Facility

<table>
<thead>
<tr>
<th>Daily Schedule</th>
<th>Jail (BJMP)</th>
<th>Prison (Bureau of Corrections)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06:00</td>
<td>Wake up</td>
<td>04:00 to 05:00 – Wake up for prayers</td>
</tr>
<tr>
<td>07:00</td>
<td>Roll call</td>
<td>05:30 – Roll call</td>
</tr>
<tr>
<td>08:00</td>
<td>Morning session with behavioral shaping tools</td>
<td>Dorm keeper decides schedule in between four other head counts: 08:30, 11:00, 16:00 and 18:00.</td>
</tr>
<tr>
<td>09:00</td>
<td>Free time</td>
<td></td>
</tr>
<tr>
<td>10:30</td>
<td>Head count</td>
<td></td>
</tr>
</tbody>
</table>

Lunch

12:30 – Head count
13:00 – Afternoon session for tasks and activities
17:30 – Head count

Dinner

Film Showing

22:00 – Final head count
22:30 – Lights out

04:00 to 05:00 – Wake up for prayers
05:30 – Roll call
Dorm keeper decides schedule in between four other head counts: 08:30, 11:00, 16:00 and 18:00.

---

### Task and Activities

The women are assigned to different departments which will determine the activities and tasks they will do:

- Tasks including housekeeping, kitchen, grounds maintenance.
- Alternative Learning System (ALS) – for elementary or high school classes
- TESDA – vocational courses

Numerous programmes and activities are available ranging from recreational to religious, the ALS and livelihood activities.

The women may also be assigned some tasks.

The women also elect their own officers.

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### Food

Most of them were satisfied with the food, saying there was even meat available.

Some opt to buy from the canteen.

Some have food brought by their families.

Despite the large prison population, the women did not register any complaints about the food.

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### Hygiene and Laundry

Allowed only one bucket of water for bathing per day and one bucket of water for laundry.

Water is available to store in their water buckets from 05:00 to 09:30 and 16:00 to 19:00.

The water containers are valuable and some secure them with padlocks and lids due to incidents of water theft.

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### Sleep

Space is very limited, most sleep on the floor with a pillow and blanket, some have mattresses and sleeping mats (banig), others sleep on cardboard.

Every resident of the TC dorm is assigned a mattress and space to place it.

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### Medical and Legal Services

Nurses and doctors visit twice a month for consultations and public health lectures.

Free vaccines and HIV testing available.

Medication available for mentally-ill inmates.

Paralegal services available from inmates trained by an NGO.

There is a medical officer (physician) and 3 nurses. But the women have complained that there are not enough medicines available.

One of the respondents reported having witnessed 15 deaths in her seven years in the prison. The causes of death include tuberculosis, diabetes, heart disease, stroke and cancer.

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20 There are numerous activities and programs available to the women in prison, ranging from recreational to the religious, from those provided by the government to those provided by civil society organizations and academic institutions. Some of the activities and programs reported include: being part of a 100-member choir; the “ALIVE Program” (Arabic Language and Islam Values Education) for Muslims, which is taught for 2 hours daily; the Alternative Learning System (ALS) program is also available for the inmates to complete their elementary or high school education. Livelihood activities include card-making, dressmaking, and crafting accessories made from beads. Learning activities include a “life healing choices” program, which included motivational messages and peer sessions. The women can choose which activities they want to engage in, subject to availability (some, like ‘electronics’, are not regularly offered) and the approval of the prison personnel (NoBox Transitions, Women in Incarceration and Drug Policy in the Philippines, 2018).
Family and visitation

The correction facilities for women sentenced for drug offences are located in Metro Manila and in Mindanao, which may be very far from their homes and families. The distance and the cost of travel often limit visitation, which can very painful for the women in detention. Some of the research respondents have expressed fear of being abandoned by their families or their husbands. The cancellation of visitation privileges after a breach in the prison’s security protocol was met with sadness and frustration.

“Narealize ko na pag malayo sa pamilya dito, kailangan magpakabait kasi importante ang dalaw (I realized that if you’re far from your family, you need to be obedient because visits are important),” says Mabel, 47, explaining how far her family already has to travel to visit her and the need to be obedient and disciplined so as not to compromise this ‘privilege.’

Treatment of pregnant women

The research showed that the jails do not have a standard practice for the treatment of pregnant detainees. Some jail personnel are kinder than others. One interviewee recounted being handcuffed while giving birth until her mother pleaded with the security detail. She was not allowed to recuperate in the hospital and had to rely on fellow detainees to take care of her, while her baby had to be immediately given to her mother. Some respondents shared that some jail personnel allowed the new-born to stay in the administrative offices and even helped take care of the infant while the detainee mother participated in jail activities. Women who give birth while imprisoned are allowed to keep their infants for six months although in some cases, women who do not have families can keep their new-born child for one year, after which the child will be entrusted to a social worker.
Stigma and discrimination

Women incarcerated for drug-related offences experienced different layers of stigma and discrimination. This may start with the families and the communities they come from who view them as ‘immoral’ for being involved with drugs. They may also experience discrimination from service-providing organisations while they are detained, and this hampers their access to some services. Being a woman may also affect how the justice system perceives them and their involvement with drugs. The reaction from the justice system may be either leniency as acts of mercy towards them as women but may also lead to harsher treatment for going against what is expected of them as good Filipinas. The view of women incarcerated for drug offences as ‘immoral’ and ‘indecent’ also affects how they will be reintegrated back into society after imprisonment.

Aspirations and Hopes

The women shared their hopes and aspirations, starting with more physical space to move and do their daily activities. They also look forward to the time spent with their families. They look forward to re-joining them when they are released. They also hope to find regular employment or a source of income such as a small business after they have served their time. They vowed to not return to their involvement with drugs once they are released and reunited with their families.

Jaya, 38, decided to be a drug ‘runner’ (i.e. courier) when her daughter had an illness which required “3 injections per day, which cost Php 10,500.00.” She received Php 500.00 for each successful delivery of shabu, and this allowed her to pay for her daughter’s medical expenses throughout the five months of her illness.
Policy Challenges and Concerns

In light of the research study on women incarcerated for drug-related offences in the Philippines, as well as during discussions with national stakeholders, several policy challenges and concerns were highlighted, and are presented below.

The right to counsel and access to legal aid

Right to counsel

Every person accused of committing a crime has the right to be duly represented by counsel and this right is guaranteed for all, including those who do not have the means to pay for legal services. These provisions are particularly relevant for women incarcerated for drug-related offences in the Philippines since most of them do not have the financial means to pay for a lawyer to defend them in court.

In the Philippines, the Public Attorney’s Office (PAO) is tasked with extending free legal assistance to indigent persons in criminal and other cases. However, as of 2017 there were only 1,668 PAO lawyers for the entire country and each one was handling an average of 504 cases in court.21

There is a need for the government to hire more public attorneys and build their capacity to provide gender-sensitive, humane and competent legal assistance for women incarcerated for drug offences.

Access to legal aid

Legal aid services from law school, legal aid centres, lawyers’ organisations, bar associations and legal NGOs in the Philippines should be extended to offer legal assistance to women charged with drug offences. However, just like the public attorneys, legal aid providers also need to be capacitated on providing gender-sensitive and humane legal assistance which take into consideration the specific needs and conditions of women and girls who are incarcerated for drug offences.

Box 3. International guidelines and recommendations on access to legal aid

The right to have legal representation and to have access to free legal assistance is guaranteed in the International Covenant on Civil and Political Rights and was further reinforced in the Revised Standard Minimum Rules for the Treatment of Prisoners or the Mandela Rules, which provides:

‘If an untried prisoner does not have a legal adviser of his or her own choice, he or she shall be entitled to have a legal adviser assigned to him or her by a judicial or other authority in all cases where the interests of justice so require and without payment by the untried prisoner if he or she does not have sufficient means to pay. Denial of access to a legal adviser shall be subject to independent review without delay.’ (Rule 119 No. 2, Revised Standard Minimum Rules for the Treatment of Prisoners).

The UNGASS Outcome Document also includes provisions on the right to a fair trial and access to legal assistance, exhorting member-states to:

‘4.o Promote and implement effective criminal justice responses to drug-related crimes to bring perpetrators to justice that ensure legal guarantees and due process safeguards pertaining to criminal justice proceedings, including practical measures to uphold the prohibition of arbitrary arrest and detention and of torture and other cruel, inhuman or degrading treatment or punishment and to eliminate impunity, in accordance with relevant and applicable international law and taking into account United Nations standards and norms on crime prevention and criminal justice, and ensure timely access to legal aid and the right to a fair trial’ (emphasis added).

In an Information note for criminal justice practitioners on non-custodial measures for women, the UNODC called on judges, prosecutors and the police to ensure that those who appear before them who cannot afford a lawyer and/or are vulnerable are provided with access to legal aid. This is one way with which criminal justice practitioners can contribute to ensuring that the specific needs of women in the criminal justice system are met.

Guideline No. 9 of the United Nations Principles and Guidelines on Legal Aid outlines the specific steps that states need to take to ensure access to legal aid for women:

‘Guideline 9. Implementation of the right of women to access legal aid: States should take applicable and appropriate measures to ensure the right of women to access legal aid, including:

(a) Introducing an active policy of incorporating a gender perspective into all policies, laws, procedures, programmes and practices relating to legal aid to ensure gender equality and equal and fair access to justice;

(b) Taking active steps to ensure that, where possible, female lawyers are available to represent female defendants, accused and victims;
Alternatives to incarceration

Alternatives to incarceration can help reduce the overcrowding of jails and prisons. Overcrowding of jails and prisons is a consequence of the imposition of harsh criminal penalties for low-level drug-related offences, the overuse of pre-trial detention, and the increased number of drug-related arrests as a result of intensified government ‘anti-drug’ operations.22

In the Philippines, a huge percentage of those incarcerated for drug-related offences are in pre-trial detention or still awaiting sentencing. This is despite the provision in the Tokyo Rules that pre-trial detention should be a means of last resort.23

As a response to the problem with overcrowded prisons, the Philippine Supreme Court issued Administrative Order A.M. No. 18-03-16-SC, which provides for the adoption of a plea-bargaining framework for drugs cases. Guidelines were issued in April 2018, enabling those charged with small-scale possession of illicit drugs such as cannabis or shabu to be given a lower penalty. The guidelines also allow diversion to treatment and rehabilitation when there is an admission of drug use or after testing positive in a urine test.24 While the plea-bargaining guidelines are expected to help decongest jails and court dockets in the country from drug cases, the criteria remains strict especially for small-scale selling (only those selling up to 0.99 grams of shabu and up to 9.99 grams of marijuana will also be allowed to enter into a plea bargain deal). It also remains unclear where many of these people will be diverted to and the quality of treatment that will be provided. Some have been diverted to community-based treatment in their own local government units while some have been diverted to residential treatment centers.25

Box 4. International guidelines and principles on alternatives to incarceration

Section III of the Bangkok Rules focuses on the need to ensure non-custodial measures for women, in particular:

- **The provisions of the Tokyo Rules shall guide the development and implementation of appropriate responses to women offenders. Gender-specific options for diversionary measures and pretrial and sentencing alternatives shall be developed within Member States’ legal systems, taking account of the history of victimization of many women offenders and their caretaking responsibilities. (Rule 57)**

- **When sentencing women offenders, courts shall have the power to consider mitigating**
factors such as lack of criminal history and relative non-severity and nature of the criminal conduct, in the light of women’s caretaking responsibilities and typical backgrounds. (Rule 61)

- The provision of gender-sensitive, trauma-informed, women-only substance abuse treatment programmes in the community and women’s access to such treatment shall be improved, for crime prevention as well as for diversion and alternative sentencing purposes. (Rule 62)

The UNGASS Outcome Document includes a paragraph dedicated to alternatives to incarceration and punishment:

‘4.j Encourage the development, adoption and implementation, with due regard to national, constitutional, legal and administrative systems, of alternative or additional measures with regard to conviction or punishment in cases of an appropriate nature, in accordance with the three international drug control conventions and taking into account, as appropriate, relevant United Nations standards and rules, such as the United Nations Standard Minimum Rules for Non-Custodial Measures (the Tokyo Rules)”.

The UNODC Information note on non-custodial measures for women also emphasizes the need for pre-trial alternatives to be implemented for women offenders whenever appropriate and possible. The Note calls on prosecutors and judges to ensure that bail amounts are fair, and the economic situation of women is given due consideration. Alternatives to monetary bail should also be given some thought. The Note also outlines opportunities for non-custodial measures in the trial and sentencing stages, stating further that non-custodial alternatives to punishment are especially appropriate for minor drug-related offences. Sentencing alternatives should be applied whenever possible in such a way as not to separate women offenders from their families and communities. Courts are enjoined to take note of the women’s specific characteristics, including mitigating factors like the absence of a previous criminal record and the non-severity of the supposed criminal conduct in light of women’s caretaking responsibilities and background.

Prison conditions

In the Philippines, overcrowded prisons pose a challenge for treating prisoners with respect for their inherent dignity and value as human beings, especially in the case of women. The lack of space and resources in jails and prisons have resulted in little or no access to basic personal hygiene – e.g. lack of drinkable water – healthcare and other basic services. This situation places women prisoners at risk of contracting infectious diseases and makes them vulnerable to abuse from both fellow prisoners and jail personnel. There is therefore an urgent need to make better and more systematic use of alternatives to incarceration at various stages of the criminal justice system, such as diversion and other non-custodial measures.

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26 Ibid, p. 4
28 Ibid
29 For more information about various models of diversion away from incarceration and/or the criminal justice system, see: International Drug Policy Consortium, International HIV/AIDS Alliance & Asian Network of People Who Use Drugs (2016), A public health approach to drug use in Asia: Principles and practices for decriminalisation, https://idpc.net/publications/2016/03/public-health-approach-to-drug-use-in-asia-decriminalisation
In 2014, the Supreme Court of the Philippines initiated the formation of the Task Force Katarungan at Kalayaan (Task Force on Justice and Freedom), to help speed up the resolution of criminal cases of pretrial detainees. This Task Force is a committee composed of judges, jail officials, prosecutors, public attorneys and other criminal justice institutions tasked to meet regularly to review criminal cases through a set of criteria and take necessary actions to decongest both jails and court dockets.

The Task Force was pilot-tested in one jail, and the Supreme Court reported that it has ‘significantly contributed to the resolution of cases of inmates at the Manila City Jail’. This success in Manila City Jail led the Supreme Court to call for its replication in other jails of the country.\

As a result, the Task Force was replicated in the city of Pasig where it was convened by the Executive Judge of the Pasig City Regional Trial Court. The Task Force meeting in Pasig city not only discussed means to decongest the Pasig City Jail, but also issues and concerns on the welfare of its detainees.

Convening a similar Task Force in other cities in the Philippines would provide a venue for criminal justice institutions to coordinate and protect the rights of detainees to access to justice, as well as to help decongest overcrowded jails.

The Bangkok Rules specifies approaches to women who use or are dependent on drugs and held in prisons or detention facilities in rule 6 (4):

‘Research in a number of countries has found that a large proportion of women entering prison have a drug dependency. Drug offences are one of the most common category of crimes committed by women and drugs are often key to women’s offending behavior. Some research also indicates that women prisoners are more likely to be addicted to harder drugs than male prisoners. It is therefore important to diagnose any treatment needs for drug dependency on entry to prison, in order to provide the requisite healthcare services, as early as possible during detention and imprisonment, taking into account that drug dependency is a recognized underlying factor that can lead to conflict with the law and therefore to re-offending following release, if left untreated.’

The UNGASS 2016 Outcome Document also requests member states to:

**a. take a health-centred approach to drugs:**
"Recognize drug dependence as a complex, multifactorial health disorder characterized by a chronic and relapsing nature with social causes and consequences that can be prevented and treated through, inter alia, effective scientific evidence-based drug treatment, care and rehabilitation programmes, including community-based programmes, and strengthen capacity for aftercare for and the rehabilitation, recovery and social reintegration of individuals with substance use disorders, including, as appropriate, through assistance for effective reintegration into the labour market and other support services." (para 1(i))

b. ensure voluntary access to treatment:

"Encourage the voluntary participation of individuals with drug use disorders in treatment programmes, with informed consent, where consistent with national legislation, and develop and implement outreach programmes and campaigns, involving drug users in long-term recovery, where appropriate, to prevent social marginalization and promote non-stigmatizing attitudes, as well as to encourage drug users to seek treatment and care, and take measures to facilitate access to treatment and expand capacity". (para 1(j))

"Promote effective supervision of drug treatment and rehabilitation facilities by competent domestic authorities to ensure adequate quality of drug treatment and rehabilitation services and to prevent any possible acts of cruel, inhuman or degrading treatment or punishment, in accordance with domestic legislation and applicable international law". (para 4(c))

c. implement measures to minimise the health and social harms associated with drug use:

"Invite relevant national authorities to consider, in accordance with their national legislation and the three international drug control conventions, including in national prevention, treatment, care, recovery, rehabilitation and social reintegration measures and programmes, in the context of comprehensive and balanced drug demand reduction efforts, effective measures aimed at minimizing the adverse public health and social consequences of drug abuse, including appropriate medication-assisted therapy programmes, injecting equipment programmes, as well as antiretroviral therapy and other relevant interventions that prevent the transmission of HIV, viral hepatitis and other blood-borne diseases associated with drug use, as well as consider ensuring access to such interventions, including in treatment and outreach services, prisons and other custodial settings, and promoting in that regard the use, as appropriate, of the technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users, issued by the World Health Organization, the United Nations Office on Drugs and Crime and the Joint United Nations Programmed on HIV/AIDS". (para 1(o))

d. ensure access to treatment in prisons and detention:

"Ensure non-discriminatory access to health, care and social services in prevention, primary care and treatment programmes, including those offered to persons in prison or pretrial detention, which are to be on a level equal to those available in the community, and ensure that women, including detained women, have access to adequate health services and counselling, including those particularly needed during pregnancy". (para 4(b))

"Enhance access to treatment of drug use disorders for those incarcerated and promote effective oversight and encourage, as appropriate, self-assessments of confinement facilities, taking into consideration the United Nations standards and norms on crime
**Stigma and discrimination**

Different institutions in the criminal justice system can help mitigate the stigma and discrimination experienced by women in incarceration for drug-related offences in the Philippines.

Judges, prosecutors, and lawyers can make interventions before women are sent to trial or to prison by facilitating access to legal aid, diverting women offenders from prosecution, helping prevent excessive pre-trial detention and ensuring that gender-specific needs are taken into consideration during trial and sentencing.

Prison officials could adopt gender-sensitive practices to address the specific needs of women prisoners. Legislators and policy makers may remove mandatory sentencing and provide the judiciary with discretion to take into account the circumstances of the offence, and the vulnerability and care-taking responsibilities of women offenders. Legislators and policy makers may also introduce reforms to remove criminal penalties for certain drug-related activities, such as drug use and simple possession for personal use.\(^\text{32}\)

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**Box 7. Addressing stigma and discrimination against women accused of drug offences**

Article 1 of the UN Convention on the Elimination of All Forms of Discrimination against Women defines discrimination against women as ‘any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field’.\(^\text{33}\)

In its 2018 World Drug Report, the UNODC noted that, ‘While there is little evidence to determine whether there is discrimination against women (in comparison with men) at the sentencing level, some studies suggest that judges and other criminal justice officials do not consider gender inequalities. This is based, in part, on the misconception that the principle of equality before the law does not allow accounting for the distinctive needs of women in order to accomplish substantial gender equality’.\(^\text{34}\)

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\(^{32}\) Ibid p. 19

The stigma and discrimination faced by women incarcerated for drug-related offences also extends to their own families and communities and many of them risk rejection and being ostracised even after their period of incarceration is over, making it much more difficult for women to be reintegrated back in society after imprisonment. This has led the UNODC to conclude that: 'What is clear is that women's contact with the criminal justice system has more negative consequences on them than it does on men, exacerbating both their economic vulnerability and their social exclusion'. 35
A National Stakeholders’ Consultation was held in Metro Manila on 31 July 2018, during which the research study results were shared by NoBox Philippines with various stakeholders including representatives from the National Headquarters of the Bureau of Jail Management and Penology, the Correctional Institute for Women, Quezon City Jail Female Dormitory, the Philippine Commission on Women, the Commission on Human Rights, as well as the UNODC and civil society organisations and academic institutions dealing with women’s rights and the rights of people deprived of liberty.

The data provided in the study conducted by NoBox Philippines as well as the discussions at the National Stakeholders’ Consultation highlight support for the need to review existing laws and policies which have caused the imprisonment of a disproportionate number of women for non-violent, low-level drug offences, placing them in situations where they are most vulnerable to abuse and discrimination.

International human rights instruments discussed in this guide, notably the 2016 UNGASS Outcome Document, constitute useful documents upon which civil society organisations and government institutions in the Philippines who are working to help protect the rights of women incarcerated for drug offences could anchor their policy advocacy. However, the negative consequences of drug control affecting thousands of women in the Philippines incarcerated for drug offences will only be addressed when the voices and experiences of these women – and their human rights and fundamental freedoms – are placed at the centre of national drug policies and criminal justice reform.

Furthermore, while more still needs to be done to protect the rights of women incarcerated for drug offences in the Philippines, some notable good practices that have been initiated by civil society and the governments. These are presented in Boxes 2 and 5 and deserve to be replicated and institutionalised.

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Various suggestions for improvement were identified at the National Stakeholders’ Consultation to address ongoing policy gaps and concerns. The following recommendations build upon these suggestions, for which financial and other resources are needed to ensure their implementation:

1. **Build the capacity of stakeholders on women, drug policy and incarceration:**

   a) Identify organisations and groups who can propose and initiate changes to improve the criminal justice system

   b) Conduct capacity building trainings and workshops to understand and respond to drug-related issues for all relevant stakeholders, including police, criminal justice officials (judges, prosecutors, lawyers), prison staff, as well as civil society working on gender, human rights, criminal justice and drug policy issues.

2. **Improve access to evidence-based services:**

   a) Develop and standardise needs-assessment tools for women in detention

   b) Developing effective drug treatment and rehabilitation systems, both in detention centres and in the community, based on international guidelines promoted by the UNODC, WHO and UNAIDS

   c) Advocate for support for rehabilitation and social reintegration of people with drug dependence among communities and the private sector.

3. **Monitor and improve prison conditions:**

   Develop and standardise evaluation tools for detention centres and ensure the monitoring of policies, programmes and activities being rolled out in detention centres, in particular:

   a) Compliance with human rights obligations and use of a human rights approach to jail and prison management

   b) Gender-sensitive and gender-responsive policies, interventions, facilities and services in line with the Bangkok Rules and the Mandela Rules

   c) Implement a ‘Model Female Jail or Prison’ project as an example of good practice to be replicated elsewhere in the country.

4. **Reduce overcrowding in detention centres:**

   Examine the following possible strategies:

   a) Consider various modes of early release of people deprived of liberty for a long period of time and who may have already served their minimum sentences

   b) Only use pre-trial detention as a last resort, and solely for violent offenders

   c) Design and implement diversion mechanisms for drug-related offences upon arrest, sentencing and during incarceration – in particular for pregnant women and women with dependent children. In case women are incarcerated, develop programmes that seek to address the needs of their children

   d) Consider removing criminal penalties for drug use, drug possession for personal use and possession of drug paraphernalia

   e) Training of paralegals to identify inmates whose cases at risk of delay due to issues in the court process.

5. **Improve coherence in the government and civil society response:**

   a) Strengthen collaboration among various government agencies, especially the different pillars of the criminal justice system, Department of Health, Department of Social Welfare and Development, Philippine Commission for Women, and Dangerous Drugs Board to ensure a more coordinated response to drugs issues, in particular as it relates to the incarceration of women

   b) Develop a unified mechanism and guidelines to coordinate the various governmental policies and programmes related to women incarcerated for drug offences

   c) Strengthen collaboration among various government agencies to collect better data on women incarcerated for drug offences (in
particular the profiles of the women, and their needs in relation to health, children, etc.).

d) Improve coordination of activities and services provided by civil society organizations to prevent unnecessarily duplicating actions and thereby wasting resources and space.

6. Conduct further research on women, drugs and incarceration:

a) Explore further research initiatives to better understand the impacts of drug policy on women.

7. Improve aftercare services

a) There are currently very few services, if any, that support the reintegration of women after they are released from jails and prisons. In this regard, there is a need to ensure provision of opportunities for continuity of skills building, livelihood training, and education from their time in detention; referrals to housing assistance or transportation to their homes; continuity of health services such as HIV treatment and drug treatment and rehabilitation; and employment.
Acknowledgments

For their very helpful input, suggestions and encouragement, the author wishes to thank Gloria Lai and Marie Nougier of the International Drug Policy Consortium (IDPC); Coletta Youngers of the Washington Office on Latin America (WOLA); and Ma. Inez Feria and Patrick Louis B. Angeles of NoBox Transitions Foundation Inc. in the Philippines (with special thanks for the infographics and charts).