GET INTERNATIONAL RESEARCH JOURNAL

# PREVALENT DRUG ISSUES AND COMMUNITY STRATEGIES IN ORIENTAL MINDORO: TOWARDS IMPROVED MORAL, SOCIAL, AND ECONOMIC OUTCOMES

**Rosalinda Caungca Mamburam**
Philippine College of Criminology (PCCR)

Corresponding Email: rcmamburam@gmail.com

Available Online: February 2026
Revised: January 2026
Accepted: January 2026
Received: December 2026

Volume IV Issue 1 (2026)
DOI: 10.5281/zenodo.18787453
E-ISSN: 2984-7184
P-ISSN: 2984-7186
GET International Research Archives

**Abstract**

This study examined the social and ethical issues surrounding drug use and abuse, emphasizing the role of community-based strategies in addressing these concerns within Oriental Mindoro, Philippines. The research aimed to explore the prevalence and impact of drug use, assess existing community strategies, and evaluate their effectiveness in fostering positive moral, social, and economic outcomes. Utilizing a quantitative research design, data were collected from sixty (60) respondents comprising community members and program staff. Findings revealed that methamphetamine and marijuana were the most commonly used substances, with usage rates of 80% and 48.3%, respectively, indicating a moderate level of drug prevalence. The major impacts of drug use identified were health problems, increased criminal behavior, and mental health issues. The assessment of community strategies yielded a mean score of 3.45, interpreted as strongly agree, indicating clear objectives, defined target populations, and structured implementation approaches. Additionally, the perceived effectiveness of these strategies in achieving positive moral, social, and economic outcomes scored mean ratings of 3.50, 3.49, and 3.53, respectively, all interpreted as great extent. The findings underscore the value of community-based interventions in combating drug problems and highlight the need for local government units to allocate resources efficiently, prioritize impactful programs, and strengthen collaborations with community organizations.

***Keywords:*** *Drug issues, Community strategies, Improved moral, social, economic outcomes*

**Recommended Citation:**

Mamburam, R. C. (2026). PREVALENT DRUG ISSUES AND COMMUNITY STRATEGIES IN ORIENTAL MINDORO: TOWARDS IMPROVED MORAL, SOCIAL, AND ECONOMIC OUTCOMES. GET INTERNATIONAL RESEARCH JOURNAL, 4(1), 115–129. https://doi.org/10.5281/zenodo.18787453

## INTRODUCTION

There are numerous social and ethical issues surrounding the use and abuse of drugs. These issues were particularly complex due to conflicting values concerning drug use within modern societies. Values were influenced by various factors, including social norms, religious beliefs, and individual perspectives. Within a single society, these diverging opinions often led to conflicts over how drug abuse should be addressed.

Understanding the historical context of public awareness and key debates about drug abuse was crucial in assessing the effectiveness of community strategies. These strategies aimed to address three key outcomes: moral, social, and economic. Since the 1960s, drug abuse has gained significant attention in the public sphere, driven by educational campaigns and government-led programs highlighting the consequences of drug use and proposing solutions.

Debates over drug legalization raised moral questions about individual freedom, responsibility, and the role of the state. Drug use in sports added complexity by sending mixed messages to the youth. Meanwhile, communities struggled with rising crime rates and economic burdens, underscoring the need for effective strategies.

Despite growing recognition of the importance of community involvement, there remained a lack of empirical research evaluating the broader effectiveness of community strategies in terms of moral, social, and economic outcomes. Existing studies tended to focus narrowly on individual interventions, with limited insights into long-term impacts and sustainability. This gap hindered a full understanding of how community-based approaches could comprehensively address drug abuse.

This study was deemed essential for several reasons. First, it examined the multidimensional impact of community strategies on drug issues, recognizing that such challenges are influenced by various interrelated factors. Second, it provided evidence-based insights to support the development of sustainable community-level prevention and intervention programs, thereby contributing to more effective and contextually appropriate solutions. Third, the study emphasized the active role of communities in shaping responses to drug abuse, highlighting the importance of social responsibility and local ownership in achieving lasting change. Lastly, by integrating moral, social, and economic perspectives, the study advocated for a more holistic and integrated framework in addressing drug-related problems, aligning with contemporary approaches to public health and community development.

This dissertation aimed to expand existing literature by providing empirical evidence on community-based strategies, thereby contributing to a more informed and strategic approach to drug prevention at the community level.

The global drug problem is a multidimensional crisis requiring equally multidimensional responses. While international efforts traditionally emphasized law enforcement, treatment, and harm reduction, the role of community-based approaches remained under explored. The United Nations Office on Drugs and Crime (UNODC) highlighted in its World Drug Report that the global supply and use of illicit drugs continued to rise. In 2021, 13.2 million people were estimated to inject drugs—18% more than previously reported. An estimated 296 million people globally used drugs, marking a 23% increase over the past decade. These trends were linked to health crises, environmental degradation, and social disintegration, particularly affecting marginalized populations.

International organizations such as the UNODC, WHO, INCB, and UNDP consistently promoted comprehensive and balanced approaches that included community-based strategies. The UNODC emphasized technical support, law enforcement reforms, and community mobilization. The WHO focused on evidence-based treatment, public health

integration, and harm reduction. The INCB monitored treaty compliance and advised on regulatory matters, while the UNDP supported social inclusion and economic development through grassroots initiatives.

Despite this advocacy, a significant research gap persisted. Empirical evaluations on the effectiveness, scalability, and sustainability of community-based drug interventions remained sparse. This limited the ability of policymakers to identify best practices and hindered funding allocation. Without strong empirical support, the wide-scale implementation of these strategies lagged behind, leaving many communities without tested and effective solutions.

The Philippines faced a profound and complex drug crisis with far- reaching effects on individuals, families, and communities. Although government strategies had been implemented, their effectiveness remained controversial. The 2019 Philippine National Drug Use Survey reported that 1.8 million Filipinos aged 10–69 had used illegal drugs in the past year. Socioeconomic vulnerabilities—such as poverty, unemployment, and poor access to education and healthcare—intensified the risk of drug involvement. Government initiatives included the controversial "war on drugs," launched in 2016, which prioritized punitive measures over public health and rehabilitation. This campaign drew widespread criticism for alleged human rights violations and failure to address root causes such as poverty and lack of education. While community-centered programs such as the Balay Silangan Reformation Program and Project Sagip Batang Solvent showed promise by offering skills training and counseling, they remained limited in reach due to insufficient resources.

The punitive focus of national efforts disproportionately affected low-level offenders and failed to dismantle major syndicates. Compounded by corruption and poor inter-agency coordination, these shortcomings revealed the need for a more holistic and community-anchored approach. This dissertation responded to these issues by assessing the role and effectiveness of community strategies, offering insights that could inform policy and program development across the country.

Oriental Mindoro, reflecting the national landscape, continued to grapple with persistent drug problems despite local initiatives. Socioeconomic conditions such as poverty, joblessness, and lack of educational and health services created an environment susceptible to drug use and trafficking.

Programs like Oplan Tokhang received backlash for focusing on enforcement without sufficient rehabilitation options. While local frameworks such as the Local Anti-Drug Plan of Action (LADPA) and Barangay Anti-Drug Plan of Action (BADPA) aimed to integrate grassroots efforts, their implementation varied widely in quality and effectiveness. The Oriental Mindoro Rehabilitation and Recovery Center (OMRRC) offered structured treatment but faced challenges in terms of capacity and accessibility.

Persistent barriers included insufficient funding, lack of reintegration programs, poor coordination among agencies, and a resilient drug supply network. Public awareness initiatives were inconsistent and often failed to reach high-risk populations.

This dissertation specifically addressed these gaps by examining the effectiveness of community-based strategies in Oriental Mindoro, focusing on moral, social, and economic outcomes. By grounding its analysis in both local and broader contexts, the study aimed to inform more responsive, inclusive, and sustainable anti-drug initiatives in the province.

**Objectives**

This research aims to deeply investigate the drug issues in Oriental Mindoro, figure out how well the current community strategies are working, and then come up with some solid ideas to make things better for the community.

Specifically, this study was conducted:

1. To assess the prevalent types and patterns of drug use within Oriental Mindoro communities.
2. To evaluate the effectiveness of existing community-based strategies in addressing drug-related issues in Oriental Mindoro.
3. To propose evidence-based recommendations for enhancing community strategies to improve moral, social, and economic outcomes related to drug issues in Oriental Mindoro.

## METHODS

### RESEARCH DESIGN

This dissertation used a quantitative research design, which is a systematic approach that investigates phenomena by collecting and analyzing numerical data. This objective-driven method utilized empirical techniques such as experiments, surveys, and observations to gather measurable data. The process started out with formulating research questions and hypotheses, then selecting a representative sample, designing and implementing data collection instruments, collecting and organizing the data, analyzing the data using statistical techniques (e.g., descriptive statistics, inferential statistics), interpreting the results, and drawing conclusions based on the findings. It is important to note that while quantitative research design offers strengths like objectivity and generalizability, it may have limitations in capturing the complexity of human behavior and subjective experiences.

### *POPULATION AND LOCALE OF THE STUDY*

The study population consisted of individuals in Oriental Mindoro, Philippines, directly or indirectly affected by drug issues. Data was collected from 30 respondents within each of four distinct groups: Community Residents (including those with personal experience of drug use, abuse, or addiction, their families, and concerned community members); Community Leaders (local government officials and barangay captains involved in drug prevention and intervention); Community Organization Representatives (staff and volunteers from NGOs and community groups addressing drug issues); and Program Staff (individuals working in government agencies and organizations providing drug- related services). Each group contributed unique perspectives to the study's assessment of community strategies to combat drug issues.

It focuses on assessing the effectiveness of community strategies in combating prevalent drug issues in Oriental Mindoro, Philippines, and on improving the moral, social, and economic outcomes in the province. The choice of Oriental Mindoro as the study locale is strategic and informed by its unique context and the relevance of the research to its community.

Oriental Mindoro is a province located in the MIMAROPA region of the Philippines, known for its diverse landscapes, including coastal areas, mountainous regions, and agricultural lands. The province has a population of approximately 800,000 people, with a significant portion residing in rural communities.

**DATA GATHERING TOOLS**

This dissertation utilized a survey questionnaire to assess the effectiveness of community strategies in combating drug issues in Oriental Mindoro, Philippines. The tools are designed to collect quantitative data, reflecting the quantitative approach of the study.

A structured survey was used to collect quantitative data from a representative sample of community residents in Oriental Mindoro. The survey focused on prevalent drug issues, existing community strategies implemented, and the extent of these strategies in contributing to positive moral, social, and economic outcomes.

The content of the research tools is based on a thorough review of relevant literature on drug use, community interventions, and the impact of drug issues on various outcomes. The research tool was validated by subject matter experts, and the reliability was also computed by a statistician.

**DATA GATHERING PROCEDURES**

This study employed a quantitative data-gathering procedure to assess the prevalent drug issues and evaluate the effectiveness of community- based strategies in Oriental Mindoro, with the aim of contributing to improved moral, social, and economic outcomes. A structured survey instrument was developed based on the themes and gaps identified in the review of related literature.

The instrument was then subjected to a thorough validation process involving expert review to ensure content relevance and clarity. The finalized questionnaire underwent a content validation process involving three experts in the field of criminology and community development. Each of the 120 items was rated using a four-point Likert scale to assess relevance. The results showed that all items were rated as either "very relevant" or "quite valid" by all validators. This yielded an Item-Level Content Validity Index (I-CVI) of 1.00 for all items, indicating perfect agreement on content validity per item. The Scale- Level Content Validity Index, calculated using both the average method (S- CVI/Ave) and universal agreement method (S-CVI/UA), also yielded 1.00, demonstrating excellent overall content validity of the instrument.

After establishing both validity and reliability, the final version of the survey was administered to sixty (60) purposively selected respondents. The responses were encoded into a secured spreadsheet, and data cleaning procedures were applied to check for inconsistencies or errors. Missing data were minimal and addressed appropriately through listwise deletion. Throughout the process, all ethical considerations and data privacy protocols were strictly observed, including informed consent, confidentiality of responses, and secure data storage. Proper documentation was maintained during all stages to ensure the accuracy, credibility, and integrity of the data collected for analysis.

**TREATMENT DATA**

This section outlines the data treatment procedure for quantitative data collected in the dissertation, "Prevalent Drug Issues and Community Strategies in Oriental Mindoro: Towards Improved Moral, Social, and Economic Outcomes." The data treatment methods are presented per standard operating procedures (SOP) to ensure transparency, replicability, and rigor in the analysis.

The quantitative data from the survey were analyzed using SPSS (Statistical Package for the Social Sciences) version [Insert Version Number]. Descriptive statistics, including frequencies, percentages, means, standard deviations, and measures of central tendency, will be used to summarize the demographic characteristics of the participants and to present the overall distribution of responses to the survey items.

Inferential statistical techniques were employed to test hypotheses and examine the relationships between variables. The specific statistical tests used depended on the nature of the variables and the research questions. For example, t-tests, ANOVAs, and regression analysis were used to assess differences in perceptions of community strategies, drug use prevalence, and their impact on moral, social, and economic outcomes.

**ETHICAL CONSIDERATIONS**

The data that was collected from Oriental Mindoro residents, leaders, organizations, and program staff uses informed consent forms (translated into Filipino), ensuring participant understanding and withdrawal rights. Questionnaires were carefully worded to avoid harm, maintain confidentiality, and address drug use sensitively. The study includes diverse sectors (excluding minors and persons deprived of liberty), making accommodations for accessibility. Data collection respects participants and ensures confidentiality, security, and transparency. The Institutional Review Board (IRB) reviewed the study for ethical approval.

**RESULTS and DISCUSSION**

**THE EXISTING COMMUNITY STRATEGIES IMPLEMENTED IN ORIENTAL MINDORO TO COMBAT DRUG ISSUES**

This indicates that the most effective interventions in Oriental Mindoro's anti-drug campaign—drug prevention education, law enforcement collaboration, and rehabilitation—are most appreciated since they address the causes and effects of drug dependence.

**Table 1**

***The Existing Community Strategies Implemented In Oriental Mindoro To Combat Drug Issues***

| **Indicators** | **Community Member** | | **Program Staff** | |
|---|---|---|---|---|
| | **Med** | **Int** | **Med** | **Int** |
| 1. Our community has clear and well-defined objectives in addressing drug-related issues. | 3.03 | A | 3.57 | SA |
| 2. Drug prevention programs effectively educate residents, particularly the youth, about the dangers of drug use. | 3.47 | SA | 3.50 | SA |
| 3. Rehabilitation programs in our community help drug dependents recover and reintegrate into society. | 3.43 | SA | 3.52 | SA |
| 4. Community engagement is a core component of our anti-drug strategies. | 3.21 | A | 3.48 | SA |

| | | | | |
|---|---|---|---|---|
| 5. Economic opportunities such as skills training and livelihood programs are provided to discourage drug involvement. | 3.28 | SA | 3.55 | SA |
| 6. Local law enforcement collaborates with community organizations to reduce drug distribution and trafficking. | 3.45 | SA | 3.73 | SA |
| 7. Educational institutions actively promote anti-drug campaigns and create safe spaces for students. | 3.34 | SA | 3.67 | SA |
| 8. Mental health support services are available for individuals struggling with drug addiction and related issues. | 3.19 | A | 3.21 | A |
| 9. There are accessible counseling and peer support groups available for individuals and families affected by drug use. | 3.25 | A | 3.50 | SA |
| 10. Our community has a comprehensive monitoring and evaluation system in place to assess the effectiveness of anti-drug strategies. | 3.25 | A | 3.53 | SA |
| **Overall** | **3.32** | **SA** | **3.61** | **SA** |

The anti-drug initiatives in Oriental Mindoro deliver significant benefits and impact at various levels. To drug dependents, access to rehabilitation and mental health services means lower relapse rates and enhanced quality of life. To society at large, lower drug prevalence translates to real dividends—less crime and improved public health—while economic empowerment initiatives offer alternative and legal livelihood opportunities. Secondly, the establishment of strong monitoring systems ensures that the interventions are responsive and dynamic to changing challenges, resulting in a long-term sustainable model for success in combating substance abuse.

**The Extent Of Contribution Of The Community Strategies To Positive Moral Outcomes**

Table 2 presents the extent of the community strategies in contributing to positive moral outcomes in terms of reducing stigma. When looking at the results of the table, an overall of 3.23 for community members and 3.76 for program staff indicates that community members see the extent of the strategies for reducing stigma related to drug use as moderate, while program staff see the extent of the strategies as great.

Table 2

***The Extent Of Contribution Of The Community Strategies To Positive Moral Outcomes***

| Indicators | Community Member | | Program Staff | |
|---|---|---|---|---|
| | **Med** | **Int** | **Med** | **Int** |
| 1. Community programs help reduce the stigma associated with drug addiction. | 3.38 | GE | 3.63 | GE |
| 2. Anti-drug initiatives promote understanding and compassion towards recovering drug users. | 3.34 | GE | 3.62 | GE |
| 3. Awareness campaigns educate residents on the importance of supporting individuals struggling with addiction. | 3.52 | GE | 3.76 | GE |
| 4. The community encourages open discussions about drug-related issues to eliminate social discrimination. | 3.43 | GE | 3.60 | GE |
| 5. Former drug users feel more accepted and supported by the community. | 3.08 | ME | 3.62 | GE |
| 6. Support groups for recovering drug users contribute to reducing feelings of shame and social isolation. | 3.21 | ME | 3.59 | GE |
| 7. Media campaigns portray recovering drug users in a positive light, helping reduce societal stigma. | 3.28 | GE | 3.55 | GE |
| 8. Community leaders actively speak out against the social discrimination of drug users and advocate for their reintegration. | 3.26 | GE | 3.67 | GE |
| 9. Schools and educational programs work to change negative perceptions of individuals with a history of drug abuse. | 3.45 | GE | 3.69 | GE |
| 10. Local organizations provide resources and support for families of drug users, helping to alleviate stigma within households. | 3.31 | GE | 3.44 | GE |
| **Overall** | **3.23** | **ME** | **3.76** | **GE** |

This indicates that the strategies receiving the highest mean—such as schools and educational programs that work to change negative perceptions, awareness campaigns, community-led discussions on drug-related issues, and leadership advocacy—are viewed as crucial in reducing the stigma surrounding drug use. These approaches were rated highly because they emphasize education, dialogue, and social inclusion, which are fundamental to shifting public perception and dismantling discriminatory attitudes. From the community members' perspective, educational institutions play a vital role (3.45) in correcting misconceptions about individuals with a history of substance use by fostering empathy and promoting factual understanding.

These strategies are effective because they not only humanize recovering individuals but also create environments that facilitate open communication, social acceptance, and reintegration. By reducing shame and social isolation, they empower recovering drug users to seek help and participate in society more confidently. The benefits extend to families and the wider community as well, fostering stronger social cohesion and a more inclusive, health-oriented approach to addiction. Ultimately, these efforts contribute to a moral shift in the community—transforming the narrative around drug use from one of condemnation to one of understanding, support, and recovery.

**The significant difference on the extent these community strategies contribute to positive moral outcomes between the two groups of respondents**

It presents the comparative analysis of the contribution of community strategies to positive moral outcomes along the various factors along with the type of respondents. The two types of respondents include community members and program staff. The three aspects that contribute to community strategies are reducing stigma related to drug use, promoting social inclusion, and strengthening community values.

Table 3

*Comparative Analysis of the Contribution of Community Strategies to Positive Moral Outcomes along the Various Factors along the Type of Respondents*

| **Contribution of Community Strategies Positive Moral Outcomes** | **Type** | | | | **Mann-Whitney Z- Value** | **Test Statistics p- value** |
|---|---|---|---|---|---|---|
| | **Community Member** | | **Program Staff** | | | |
| | **Med** | **Int** | **Med** | **Int** | | |
| Reducing Stigma Related to Drug Use | 3.23 | ME | 3.76 | GE | -3.990 | 0.000* |
| Promoting Social Inclusion | 3.27 | ME | 3.64 | GE | -1.818 | 0.069 |
| Strengthening Community Values | 3.44 | GE | 3.71 | GE | -1.400 | 0.161 |

**The Actions of Enhancing Policy Effectiveness, Program Sustainability, And Community Engagement Strengthen Multi-Sectoral Interventions Against Drug Abuse**

To address the drug abuse problem in Oriental Mindoro, it is recommended that local authorities implement integrated multi-sectoral programs involving health, law enforcement, social welfare, and community stakeholders.

Expanding access to rehabilitation and mental health services is essential to manage health and psychological impacts. Community-based crime prevention efforts should be strengthened alongside family support programs to reduce social disruption. Public awareness campaigns targeting youth and vulnerable groups must be culturally sensitive and focused on methamphetamine and marijuana risks. Lastly, establishing a provincial monitoring system and supporting further research will improve the effectiveness of interventions and policy development.

**Enhance Mental Health Services Within Anti-Drug Programs**

To strengthen anti-drug efforts in Oriental Mindoro, it is recommended that local government units and community stakeholders enhance mental health support services by increasing resources, training, and accessibility tailored to vulnerable populations. Efforts should be made to improve community engagement and awareness through inclusive communication strategies, ensuring that program benefits are understood and accessible to all residents.

Continued support for drug education, law enforcement partnerships, and livelihood initiatives should be maintained and expanded to sustain their positive impact. Furthermore, implementing regular monitoring and evaluation will help identify gaps and improve program effectiveness. Future research should explore community perceptions in greater depth and assess the long-term outcomes of these interventions to inform policy and practice.

## CONCLUSION

Based on the findings, the following conclusions are drawn:

Drug abuse in Oriental Mindoro continues to be a critical issue, with methamphetamine and marijuana use reported at 80% and 48.3%, respectively, reflecting a moderate but significant prevalence (median score of 3.18). The consequences are substantial, as over half of affected individuals experience health deterioration (51.7%) and rising crime rates (50%). Additionally, mental health decline (43.3%) and family disruption (26.7%) highlight the broader social and psychological impacts of drug abuse. These findings indicate an urgent need for coordinated, multi-sectoral interventions that address not only substance use but also its associated health, social, and community challenges. However, this study is limited by its reliance on self-reported data and a geographically selective sample, which may affect the generalizability of the findings and suggests caution in extrapolating results to the entire province.

The community in Oriental Mindoro actively implements a variety of anti- drug strategies focusing on prevention, rehabilitation, and support, with strong endorsement from both community members and institutions. High mean scores (3.32–3.76) for drug education, law enforcement collaboration, and livelihood programs indicate these interventions are well-received and effectively target vulnerable groups such as youth, recovering users, and low-income families.

However, mental health support services scored lower (3.19–3.21), revealing a critical area in need of improvement. The discrepancy between program staff's more favorable ratings and comparatively lower community member ratings suggests gaps in awareness or engagement that may affect program reach. These findings underscore the strengths of current community efforts but also highlight the necessity to enhance mental health services and improve community participation. The study's reliance on self-reported perceptions and the limited geographical scope may restrict the generalizability of these conclusions.

Community-based strategies in Oriental Mindoro have demonstrated significant progress in fostering positive moral outcomes, particularly in stigma reduction, social inclusion, and values reinforcement. Both community respondents and institutional stakeholders consistently rated these initiatives favorably, with strong confidence in the effectiveness of awareness campaigns, reintegration programs, and values education. Youth-focused interventions and multi-sector collaborations involving schools, businesses, and faith groups have been especially impactful in promoting social acceptance of recovering individuals and strengthening community ethics. However, the study's reliance on perception-based data and limited scope suggests caution in generalizing these results province-wide and indicates the need for further empirical evaluation.

The findings indicate a statistically significant perceptual gap between community members and program staff regarding the effectiveness of anti-drug strategies in Oriental Mindoro, particularly in stigma reduction ($Z = -3.990$, $p = 0.000$), with program staff expressing substantially higher confidence. Although no significant differences were found in perceptions of social inclusion and community values, the consistent trend of more favorable ratings from program staff suggests a disconnect in how the outcomes are experienced or understood by different stakeholders. This disparity may stem from the staff's closer involvement and deeper knowledge of program goals, while community members may lack sufficient awareness or engagement. These perception gaps may weaken community buy-in and the long-term sustainability of anti-drug initiatives if left unaddressed. The study's reliance on subjective perceptions and its localized scope are limitations that may affect the generalizability of these conclusions.

The study reveals that anti-drug strategies implemented in Oriental Mindoro have yielded positive outcomes in reducing crime rates, enhancing family relationships, and promoting community cohesion. Both community members and program staff affirm the effectiveness of these initiatives, with the most impactful strategies identified as law enforcement coordination, family counseling, and neighborhood watch programs. However, a notable perceptual gap persists, with program staff consistently rating these outcomes more favorably than community members—particularly in crime reduction. This suggests a disconnect that may be attributed to differences in awareness, involvement, or access to information about program execution and results. Community members' relatively lower evaluations of drug-free zones, barangay interventions, and community forums indicate specific areas where visibility and grassroots engagement need improvement. A key limitation of this conclusion is its reliance on self-reported perceptions, which may not fully reflect objective outcomes, and its geographical focus, which may constrain broader applicability.

The findings demonstrate statistically significant perceptual disparities between community members and program staff regarding the effectiveness of Oriental Mindoro's anti-drug strategies, particularly in crime reduction and community cohesion, with program staff perceiving the interventions as more effective. While no significant difference was observed in the area of family relationships, the overall trend points to a consistent disconnect between institutional confidence and community perception. This gap, if left unaddressed, poses a threat to program credibility, community trust, and long-term sustainability. A limitation of this conclusion lies in the study's reliance on perceptual data, which may not fully capture the objective effectiveness of interventions and could be influenced by varying levels of awareness or involvement among respondents.

The study confirms that Oriental Mindoro's community-based anti-drug strategies have generated substantial moral and economic benefits, particularly in reducing healthcare costs, enhancing workforce participation, and promoting economic development. Both community members and program staff reported high levels of agreement on these outcomes, with institutional stakeholders showing slightly higher confidence. The success of these strategies is largely attributed to integrated efforts involving public awareness campaigns, skills development, public-private partnerships, and community-based support systems. Although the observed rating disparities are not statistically significant, they indicate areas for further improvement in terms of program visibility and grassroots engagement. A noted limitation of this conclusion is its dependence on self-reported data, which may not fully capture the long-term or indirect impacts of these strategies.

The findings demonstrate a strong consensus between community members and program staff on the positive economic impact of Oriental Mindoro's anti-drug strategies, particularly in reducing healthcare costs, enhancing workforce participation, and stimulating economic development. The absence of statistically significant perceptual

differences (p-values ranging from 0.191 to 0.215) indicates a shared understanding and appreciation of these benefits among stakeholders. The consistently high mean scores from both groups (community: 3.42–3.50; staff: 3.60–3.63) reinforce the perceived effectiveness of the interventions. However, reliance on perception-based data remains a limitation, and future studies should incorporate objective economic indicators to validate these findings and strengthen policy implications.

**REFERENCES**

Advanced Psychiatry Associates. (2024, October 2). Breaking the cycle: Understanding and addressing Substance abuse. *Advanced Psychiatry Associates*. https://advancedpsychiatryassociates.com/resources/blog/substance-abuse-addiction-harm-reduction-mental-health-treatment-recovery-prevention

Aisyah, S., Widyaningsih, H., Harsono, I., Anurogo, D., & Andarmoyo, S. (2024). The Influence of Economic Factors, Access to Health Services, and Social Support on Drug Abuse Prevention and Treatment Efforts in Urban Communities in East Java. *West Science Social and Humanities Studies, 2*(01), 86-95.

Alegría, M., Frank, R. G., Hansen, H. B., & Sharfstein, J. M. (2021). Transforming mental health and addiction services: Steps to improve outcomes for people with addiction. *Health Affairs, 40*(1), 75–83. https://doi.org/10.1377/hlthaff.2020.01530

Amista, N. F. P., & Peters, B. (2020). Screening for the Severity of Illicit Drug Use among the "Tokhang" Responders in the Philippines: Basis for Community-Based Drug Rehabilitation Program. *Asian Journal of Humanities and Social Studies (ISSN: 2321-2799), 8*(4).

Andrilla, C. H. A., Moore, T. E., Patterson, D. G., & Larson, E. H. (2020). Geographic distribution of providers with a DEA waiver to prescribe buprenorphine for the treatment of opioid use disorder: A United States national study. *Journal of Rural Health, 36*(1), 108–116. https://doi.org/10.1111/jrh.12399

Arenga, I. M. (2022). Personality Tendencies, Family Dynamics, Spiritual Connectedness and Extent of Drug Dependency: Bases for Psycho-Spiritual Intervention Program. *International Journal of Multidisciplinary Research Analysis, Education, and Development*, *5*, 50.

Aubut, V., Goyette, M., Flores-Aranda, J., Saint-Jacques, M., Pronovost, F., & Bertrand, K. (2023). A community-based case study of the co-construction of an online intervention with gay and bisexual men who use substances. *Journal of Community Practice, 31*(1), 44-62.

Avengoza-Almadrones, R. J., & Babala, J. K. A. (2024). Level of Implementation of Drug Rehabilitation Program, Treatment and Intervention for Persons Who Use Drugs (PWUD) in Basud, Camarines Norte, Philippines. *International Journal of Multidisciplinary: Applied Business and Education Research, 5*(4), 1240-1249.

Barry, C. L., McGinty, E. E., Pescosolido, B. A., & Goldman, H. H. (2014). Stigma, discrimination, treatment effectiveness, and policy: Public views about drug addiction and mental illness. *Psychiatric Services, 65*(10), 1269–1272. https://doi.org/10.1176/appi.ps.201400140

Belone, L., Tsethlikai, M., Rae, R., & Wallerstein, N. (2020). Strengthening resilience among Native American youth: Participatory evaluation of culturally grounded substance use prevention programs. *American Journal of Community Psychology, 66*(3–4), 383–393. https://doi.org/10.1002/ajcp.12451

Berwick, D. M. (2020). The moral determinants of health. *JAMA, 324*(3), 225–226. https://doi.org/10.1001/jama.2020.11129

Centers for Disease Control and Prevention (CDC). (2022). *Substance Use Prevention: Primary Prevention*.

Cheah, P. K., Unnithan, N. P., & Raran, A. M. S. (2020). Rehabilitation Programs for Incarcerated Drug Offenders in Malaysia: Experience-Based Perspectives on Reintegration and Recidivism. *The Prison Journal, 100*(2), 201-223. https://doi.org/10.1177/0032885519894656

*Children Amplified Prevention Systems (CHAMPS) | Global coalition to address synthetic drug threats*. (n.d.). https://www.globalcoalition.us/node/50

Choi, E. D., Link, P. A., & Calloway, Z. T. R. (2022). Community coalitions for youth drug prevention: A multi-site study of community-based prevention programs. *Journal of Community Psychology, 50*(7), 2311-2329. https://doi.org/10.1002/jcop.22715

*Developing national work plans for implementing drug use prevention programs | Global Coalition to Address Synthetic Drug Threats*. (n.d.). https://

Dunlop, A., Dooley, J., & Roberts, B. (2021). Comparative analysis of harm reduction strategies in Canada and the United States. *International Journal of Drug Policy, 92*, 103107. https://doi.org/10.1016/j.drugpo.2021.103107

Ezell, J. M., Walters, S., Friedman, S. R., & Bolinski, R. (2021). Stigmatize the use, not the user? Attitudes on opioid use, drug injection, and harm reduction in rural communities. *Social Science & Medicine, 268*, 113654. https://doi.org/10.1016/j.socscimed.2020.113654

Frank Jay T, E., Darius Jhon, C., Vincent, B., Aljie, P., Raven, M., Jay, D., & Rose, D. (2024). The Effectiveness of the Anti–Drug Program to Drug Reformists of Barangay Bato and its Effect on Their Human Well–Being. *Asian Journal of Education and Social Studies, 50*(3), 40-53.

Hafford-Letchfield, T., McQuarrie, T., Clancy, C., Thom, B., & Jain, B. (2020). Community Based Interventions for Problematic Substance Use in Later Life: A Systematic Review of Evaluated Studies and Their Outcomes. *International Journal of Environmental Research and Public Health, 17*(21), 7994. https://doi.org/10.3390/ijerph17217994

Halsall, T., Mahmoud, K., Pouliot, A., Iyer, S. N. et al. (2022). Building engagement to support adoption of community-based substance use prevention initiatives. *BMC Public Health, 22*, 2213. https://doi.org/10.1186/s12889-022-14496-9

Heijdra Suasnabar, J. M., & Hipple Walters, B. (2020). Community-based psychosocial substance use disorder interventions in low-and-middle-income countries: a narrative literature review. *International Journal of Mental Health Systems, 14*, 74. https://doi.org/10.1186/s13033-020-00405-3

Jackson, D. S., Tiako, M. J. N., & Jordan, A. (2022). Disparities in addiction treatment: Learning from the past to forge an equitable future. *Medical Clinics of North America, 106*(1), 97–110. https://doi.org/10.1016/j.mcna.2021.08.005

Jamrozik, E., & Selgelid, M. J. (2020). *Ethics and drug resistance: Collective responsibility for global public health*. OAPEN Library. https://library.oapen.org/handle/20.500.12657/39538

Kelly, J. F., Greene, M. C., Bergman, B. G., & Hoeppner, B. B. (2021). Peer-based models in community substance use disorder interventions: Opportunities and challenges. *Journal of Substance Abuse Treatment, 123*, 108247. https://doi.org/10.1016/j.jsat.2020.108247

Kirkbride, J. B., Anglin, D. M., & Colman, I. (2024). The social determinants of mental health and disorder: Evidence, prevention, and recommendations. *World Psychiatry*. https://doi.org/10.1002/wps.21445

Krawczyk, N., Buresh, M., Gordon, M., Fingerhood, M., & Agus, D. (2021). Community engagement in opioid response strategies: Quality, inclusivity, and impact. *Substance Use & Misuse, 56*(7), 987–995. https://doi.org/10.1080/10826084.2021.1885047

Lasco, G., & Yarcia, L. E. (2022). The politics of drug rehabilitation in the Philippines. *Health and Human Rights, 24*(1), 147. https://doaj.org/article/33d979d3f7f64392800bc1c6cf590fbd

Maghsoudi, N., Tanguay, J., Scarfone, K., Rammohan, I., Ziegler, C., Werb, D., & Scheim, A. I. (2021). Drug checking services for people who use drugs: a systematic review. *Addiction, 117*(3), 532–544. https://doi.org/10.1111/add.15734

Marsden, J., Stillwell, G., Jones, H., Cooper, A., Eastwood, B., Barlow, S., & Degenhardt, L. (2019). Psychosocial interventions for opioid use disorder: A systematic review and meta-analysis. *Addiction, 114*(4), 599–612. https://doi.org/10.1111/add.14417

Masanda, A. B., Cabrera, G., Andal, A. B., Delariarte, C., Tanganco, G. J., & Balbuena, A. F. (2021). Program evaluation of a Community-Based drug rehabilitation center: the perspectives of the persons who use drugs (PWUDs). *TAZKIYA, 9*(2), 164-176.

McCann, T. V., & Lubman, D. I. (2022). Engaging youth in substance use prevention: The role of participatory design and culturally relevant practices. *Health & Social Care in the Community, 30*(1), e1–e9. https://doi.org/10.1111/hsc.13442

McGinty, E. E., Kennedy-Hendricks, A., & Barry, C. L. (2019). Stigma of addiction and mental illness in public opinion and policy. *Psychiatric Services, 70*(5), 447–449. https://doi.org/10.1176/appi.ps.201800332

Mo, H., Du, M., Jiang, L., & Mo, G. (2024). The Origin and Development of Anti-Drug Social Work in Chinese Mainland. *Asian Journal on Addictions, 2*(1), 17-17.

Navarro, Z. (2024). Teachers' Drug Prevention Facilitation and Elementary Learners' Capacity. *Nexus International Journal of Science and Education, 1*(1).

O'Gorman, A. (2020). *Community Drug Projects: Responding to drug-related harms from a community development approach*. Citywide.

Opara, I., Leonard, N. R., Thorpe, D., & Kershaw, T. (2021). Understanding neighborhoods' impact on youth substance use and mental health outcomes in Paterson, New Jersey: protocol for a community-based participatory research study. *JMIR Research Protocols, 10*(5), e29427.

Paramjit Singh Jamir Singh, Azlinda Azman, Thajun Rashadiah, & Shankar Durairajaa. (2023). Assessment of Community-Based Drug Rehabilitation Models Towards the Decriminalization of Drug Use. *Malaysian Journal of Social Sciences and Humanities (MJSSH), 8*(12), e002649. https://doi.org/10.47405/mjssh.v8i12.2649

Prince, A. (2024). *Use of a Community-Based Mentoring Program to Reduce Juvenile Delinquency and Crime in Adolescents* (Doctoral dissertation, Walden University).

Rebusquillo, S. (2020). Barangay Anti-Drug Abuse Council's (BADAC) Drug Clearing Program: Basis for the Development of Community Rehabilitation Program for Drug Surrenderees. *JPAIR Multidisciplinary Research, 40*(1), 32-55.

Riang, S., Pathak, P., Kaur, S., Kaur, R., Yadav, D., & Narayan, S. (2024). Empowering Women to Combat Drug and Alcohol Issues through Participation in Local Self-Governance: A Study. *Journal of Drug and Alcohol Research, 13*. Article ID 236299. https://doi.org/10.4303/JDAR/236299

Scher, B. D., Chrisinger, B. W., Humphreys, D. K., & Shorter, G. W. (2024). Exploring drug consumption rooms as 'inclusion health interventions': policy implications for Europe. *Harm Reduction Journal, 21*(1). https://doi.org/10.1186/s12954-024-01099-3

Schlag, A. K. (2020). Percentages of problem drug use and their implications for policy making: A review of the literature. *Drug Science, Policy and Law, 6*, 1–10. https://doi.org/10.1177/2050324520904541

Smith, J., & Anderson, K. (2023). Community-based drug prevention programs and their economic benefits. *Journal of Social Policy & Prevention, 45*(2), 112–128. https://doi.org/10.1016/j.jsp.2022.06.004

Soelton, M., Saratian, E. T. P., & Wuryandari, N. (2021). Prevention of drug abuse by improving entrepreneurial skills. In *Proceedings of the International Conference on Community Development (ICCD), 4*(1), 260–267. https://doi.org/10.2991/iccd-21.2021.37

Stevens, A., Keemink, J. R., Shirley-Beavan, S., Khadjesari, Z., Artenie, A., Vickerman, P., Southwell, M., & Shorter, G. W. (2024). Overdose prevention centres as spaces of safety, trust and inclusion: A causal pathway based on a realist review. *Drug and Alcohol Review, 43*(6), 1573–1591. https://doi.org/10.1111/dar.13908

Tracy, K., & Wallace, S. P. (2016). Benefits of peer support groups in the treatment of addiction. *Substance Abuse and Rehabilitation, 7*, 143–154. https://doi.org/10.2147/SAR.S81535

Trang, N. T., Hoe, H. D., Anh, N. H., Thuy, D. T. T., & Bart, G. (2024). "If they get out of drug rehab centers, they're on their own": Opportunities and challenges for people released from compulsory drug rehabilitation centers to communities in Vietnam. *International Journal of Drug Policy, 128*, 104443.

Valente, T. W. (1995). *Network models and interventions*. Guilford Press.

Wallace, B., Varcoe, C., & Holmes, C. (2021). Towards health equity for people experiencing chronic pain and social marginalization. *International Journal for Equity in Health, 20*(1), 128. https://doi.org/10.1186/s12939-021-01487-4