

Rehabilitation Or Punishment: The Dilemma Of Law Enforcement Against Drug Users In Indonesia

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Abstract: *Law enforcement regarding drug users in Indonesia still faces a dilemma between punitive and rehabilitative approaches. This study aims to analyze the legal status of drug users under Indonesian positive law as well as the challenges in implementing a decriminalization approach through an integrated assessment mechanism. The method used is empirical legal research with a descriptive-analytical nature, combining a normative study of legislation with field facts through observation, interviews, and document analysis. The research approach includes legislative, case, and comparative approaches, while data analysis is conducted qualitatively using deductive reasoning. The research findings indicate that drug users in Indonesia's positive law occupy an ambiguous position—that of both offenders and victims in need of rehabilitation. Although Law No. 35 of 2009 on Narcotics has opened avenues for medical and social rehabilitation, its implementation has not been optimal because law enforcement officials still tend to adopt a repressive approach. The lack of clarity in decriminalization regulations leaves drug users vulnerable to criminal prosecution, leading to overcrowding in correctional facilities and low effectiveness of rehabilitation. Therefore, a reformulation of legal policy is needed that is more decisive, proportional, humane, and grounded in a health-based and human rights-centered approach.*

Keywords: drug users, rehabilitation, criminalization, decriminalization, law enforcement

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Introduction

Drug abuse and illicit trafficking continue to be major issues in 2024. This serves as a call to reflect on the policies and actions taken so far, both domestically and internationally, to address this problem. Current global data indicates that the number of drug users has reached 296 (two hundred ninety-six) million people, an increase of 12 (twelve) million compared to the previous year. This figure represents 5.8% (five point eight percent) of the global population aged 15–64 (fifteen to sixty-four) years. Meanwhile, the results of the 2023 national survey on drug abuse prevalence indicate a prevalence rate of 1.73% (one point seven percent), equivalent to 3.3 (three point three) million Indonesians aged 15–64 (fifteen to sixty-four). This data also indicates a significant increase in drug abuse among the 15–24 (fifteen to twenty-four) age group (BNN Public Relations, 2024)

Drug abuse in Indonesia is a serious issue that is not only related to criminal law but also touches on health, social, and humanitarian dimensions. For several decades, drug control policies in Indonesia have largely emphasized a penal approach through criminal justice processes and sentencing, as seen at. This approach treats drug users as criminals who must be subjected to criminal sanctions, particularly imprisonment. Yet in many cases, drug users are individuals suffering from addiction who require medical treatment and social rehabilitation to restore their physical and psychological well-being (Anggraini, 2019).

The government and relevant government agencies continue to work to combat drug trafficking, but the challenge of reducing the number of drug users remains significant. Community involvement in helping to combat drug trafficking and protecting the younger generation from the dangers of drugs is key to preventing drug abuse in Indonesia.

Regulations that can help combat drug-related crimes are essential. One of the pillars supporting the law enforcement against drug-related crimes is Law No. 35 of 2009 on Narcotics (the Narcotics Law), hereinafter referred to as the Narcotics Law. These two laws reflect the government's firm and comprehensive stance in combating drug-related crimes in all their forms.

The Narcotics Law stipulates penalties not only for addicts and abusers but also for dealers and producers. The penalties imposed are not limited to imprisonment or fines; they may include life imprisonment or even the death penalty. In this context, it is important to distinguish between criminal sanctions for drug dealers and producers who clearly cause direct harm and damage to society and drug users, who possess, store, or control drugs for their own use. Such individuals may be considered offenders if they use or distribute the drugs, but they may also be

regarded as victims if they are merely influenced by and use the drugs (Kesya and Sunny 2009).

Nevertheless, in law enforcement practice, there remains a strong tendency to impose criminal penalties on drug users. This is evident in the application of Article 127 of the Narcotics Act, which allows drug users to be sentenced to imprisonment. This situation creates a dilemma in law enforcement: whether to adopt a punitive approach as a form of repressive law enforcement or to use a rehabilitation approach that places greater emphasis on recovery for drug users. This dilemma highlights the ambiguity in criminal law policy regarding the positioning of drug users within the criminal justice system in Indonesia (Sinaga, 2021).

On the other hand, various studies indicate that a punitive approach toward drug users is often ineffective in addressing the problem of drug addiction. Incarceration can actually worsen the condition of users because the prison environment does not always support the rehabilitation and recovery process. Decriminalization cannot be separated from an understanding of the criminal justice system, which determines what criminal sanctions are most appropriate to impose. Therefore, the idea has emerged to prioritize a rehabilitative approach that views drug users as victims of abuse who require comprehensive medical and social care (Handoko & Bunda, 2019).

This dilemma between rehabilitation and criminal punishment demonstrates that the handling of drug users cannot be viewed solely from a criminal law perspective. Legal policies that place too much emphasis on punishment risk overlooking the health and humanitarian dimensions of the drug problem. Therefore, a more in-depth analysis is needed regarding the actual position of drug users within the Indonesian legal system and how law enforcement can be carried out in a more balanced manner between the interests of law enforcement and rehabilitation efforts for drug users.

Based on this background, this study aims to analyze the dilemmas surrounding law enforcement against drug users in Indonesia, particularly regarding the application of rehabilitation and punishment approaches within the national criminal justice system.

Research Methodology

This study employs an empirical legal research method, which combines an analysis of legal norms with facts discovered in the field. Through this method, the study not only examines the laws and regulations governing drug users but also examines how these provisions are applied in law enforcement practice. The empirical approach allows the researcher to obtain a more realistic picture of the

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application of rehabilitation and criminalization policies toward drug users within the Indonesian legal system.

This study is descriptive-analytical in nature; that is, it aims to systematically describe the prevailing legal conditions and analyze various issues that arise in the law enforcement against drug users. Through this approach, the study seeks to explain the relationship between the legal provisions contained in Law No. 35 of 2009 on Narcotics and their implementation in criminal justice practice.

The data used in this study consists of primary and secondary data. Primary data was obtained through observation and interviews with parties involved in the handling of narcotics cases. Meanwhile, secondary data was obtained from various legal sources, such as legislation, legal textbooks, academic journals, and documents related to narcotics control policies.

In conducting its analysis, this study employs several approaches, namely the statutory approach, the case approach, and the comparative approach. The statutory approach involves examining various legal provisions governing drug abuse. The case approach is used to understand how these legal norms are applied in judicial practice. The comparative approach is used to examine the development of policies regarding the handling of drug users in various countries as a basis for analyzing legal policies in Indonesia.

Data analysis in this study was conducted qualitatively using the deductive reasoning method, which involves drawing conclusions from general legal principles or provisions— —to analyze specific issues. Through this method, it is hoped that a more comprehensive understanding can be gained regarding the dilemma of law enforcement between rehabilitation and punishment for drug users within the Indonesian legal system.

Results and Discussion

A. The Legal Status of Drug Users in Indonesian Positive Law

In Indonesia's positive legal system, drug users occupy a legally complex position and are often the subject of debate between *penal* (criminal punishment) and *non-penal* (health and rehabilitation) approaches (Kartika et al., 2015). drug users are often viewed not merely as offenders but as individuals with underlying health conditions; they are frequently individuals with legitimate health or addiction issues who need help o recover and reintegrate into society. The ethical and practical challenges faced by Indonesian law enforcement in combating drug use are reflected in this. The Narcotics Law typically regulates drug users. "Abusers" are defined as those who use drugs without proper authorization or violate legal regulations under

Article 1, point 13 of the Narcotics Law. Substance users are immediately labeled as criminals based on these criteria. According to the Narcotics Law, specifically Article 127(1)(a), it states:

“Any person who abuses Class I narcotics for personal use shall be punished with imprisonment for a maximum of 4 (four) years.”

However, the Narcotics Law also allows for a rehabilitative approach. Article 54 states that drug addicts and victims of drug abuse **must undergo medical and social rehabilitation**, rather than merely being sentenced to imprisonment. This provision provides a legal basis that drug users are not entirely viewed as criminals, but also as individuals requiring holistic care. In other words, Indonesian positive law reflects an ambivalence regarding the status of drug users: they are both *criminal* offenders and victims of addictive substance abuse. (Ariyanti, 2022)

Furthermore, the Constitutional Court, in **Decision No. 2/PUU-V/2007**, also emphasized the importance of rehabilitation for drug users as a form of human rights protection. The Court held that drug users must have access to health services, including rehabilitation, as an effort to prevent relapse and to facilitate both social and medical recovery. This decision serves as a crucial foundation for reinforcing the view that the legal approach toward drug users should be more humane and grounded in restorative justice.

However, in practice, law enforcement officials often place greater emphasis on a repressive approach. Drug users are frequently immediately detained and prosecuted without considering rehabilitation options, even though provisions exist allowing judges to issue rehabilitation rulings based on recommendations from investigators, prosecutors, or the judge’s own (Article 103 of the Narcotics Law). This highlights a disconnect between existing legal norms and their implementation on the ground.

The legal status of drug users must also be viewed within the context of a modern penal system that emphasizes the principle *of differentiated treatment*. According to this theory, offenders must be treated in accordance with the degree of their guilt, their background, and their potential for social reintegration. The equal treatment of drug users and dealers through identical criminal sanctions constitutes a misapplication of the principle of proportionality in criminal law. (Muladi, 1995)

On the other hand, the concept *of victimology* can also be used to understand the legal status of drug users. From this perspective, drug users are viewed as victims of substance dependence that impairs their will, and therefore need to be treated as subjects of state protection, not merely as objects of punishment. Thus, a *victim-oriented* approach needs to be more widely adopted in handling drug-related cases in Indonesia.

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In conclusion, under Indonesian positive law, drug users occupy an ambiguous legal position: somewhere between being a criminal offender and a victim. Although there is normative space for a rehabilitative approach, implementation on the ground remains heavily influenced by a punitive paradigm. Therefore, there is a need for a reformulation of legal policy that positions drug users more proportionally within the national criminal justice system, in order to realize substantive justice and the protection of human rights.

The legal status of drug users under Indonesian positive law can be understood from several perspectives, one of which is as legal subjects, where drug users, in a legal context, can be viewed as legal subjects possessing rights and obligations. This means they can be prosecuted and protected by the law, although their position in drug-related cases is often more vulnerable. The Narcotics Law regulates drug users within a rehabilitation framework. Certain provisions state that drug users willing to undergo rehabilitation may be treated differently from drug dealers or possessors. This indicates recognition of the user's condition as an individual in need of assistance.

In some cases, the Indonesian legal system adopts restorative principles aimed at rehabilitating drug users. This can lead to a more humane approach, centered on rehabilitation and social reintegration, rather than merely imprisonment (Ruslan Renggong, 2021). On the other hand, the legal status of drug users is also linked to the social stigma attached to them. In many cases, drug users are viewed as lawbreakers who harm society, leading them to frequently face discrimination, both legally and socially.

In the context of public health policy, drug users are viewed as individuals facing health issues. Therefore, they should have access to health care and rehabilitation services, not just law enforcement. There are differences in the application of the law toward drug users across various regions in Indonesia. Some regions may be more supportive of rehabilitation, while others place greater emphasis on law enforcement. Through these various perspectives, the legal status of drug users under Indonesian positive law can be seen as a complex issue involving legal, social, and health aspects.

Returning to the core issue, one of the main problems with the Narcotics Law is the unclear and contradictory procedures of drug abusers, victims, and addicts. Other regulations become biased and difficult to understand due to this unclear and ambiguous status. This has significant practical consequences, particularly for those who abuse drugs. (Hiariej, 2022)

The provision of social and medical rehabilitation for drug addicts and abusers is one of the areas affected by these unclear and contradictory procedures. One of

the objectives of enacting this legislation, as stated in Article 4 of the Narcotics Act, is to provide medical and social rehabilitation programs for those who abuse drugs and become addicts. Drug abusers and addicts are required to undergo social and medical rehabilitation programs pursuant to Article 54 of the Narcotics Act.

A person who abuses narcotics does not meet the criteria for receiving medical and social rehabilitation as set forth in Article 4 of the Narcotics Law, according to the interpretation of Article 54 of the same law. Article 103 of the Narcotics Law uses different language from Articles 4 and 54 in the same law. This is where a judge may decide whether to sentence an individual for a narcotics-related criminal offense based on their need for treatment and care. Many labels (abuser, addict, and victim of narcotics abuse) are used interchangeably in the same context, namely the provision of medical and social rehabilitation.

This ambiguity is confusing not only in the context of criminal sentencing but also in discussions regarding rehabilitation services. For example, the terms “drug user” and “victim of drug addiction” are used in Article 127 of the Narcotics Law. Unfortunately, the term “drug user” is only found in reference to “drug users as victims” in paragraph (2) of that Article, which states that the court must respect the provisions of Articles 54, 55, and 103 of the Narcotics Law when rendering a decision.

Addicts, drug abusers, victims of drug abuse, and patient receiving narcotics for medical purposes are four (or more) categories of people who use drugs according to the Narcotics Law. The term “drug addict” describes a person who has developed a dependency on drugs due to continuous use or abuse (Eddyono, 2016), at both the mental and physical levels. On the other hand, those who use narcotics illegally or without valid authorization are considered abusers. Furthermore, a person is considered a victim of narcotics abuse if they unknowingly consume narcotics as a result of being forced, intimidated, deceived, tricked, or persuaded to do so. We were unable to find a definition for “patient” at . However, according to Article 53 of the Narcotics Law, a patient is someone who, with a doctor’s permission, may possess, store, and transport narcotics in specific quantities and types for therapeutic purposes. (Eddyono, 2016)

The legal status of narcotics users under Indonesian positive law is strictly regulated by laws aimed at controlling the circulation and abuse of narcotics. Narcotics users are considered to be in violation of the law, but there are differences in legal treatment between users, addicts, and dealers.

Regulations regarding narcotics in Indonesia are governed by the Narcotics Law. This law regulates various aspects related to the distribution, use, and abuse of narcotics, whether for medical or non-medical purposes. Narcotics users in a non-

medical context are considered lawbreakers. Under Indonesian positive law, narcotics users can be categorized into several groups:

1. *Occasional* users: those who intentionally use narcotics for recreational or personal purposes without authorization.
2. Narcotics addicts: Those who experience physical and psychological dependence on narcotics.

The Narcotics Law distinguishes between drug users and drug dealers, as users are considered to require rehabilitation, while dealers are viewed as criminals who must be punished more severely. Articles of the Narcotics Law stipulate various penalties for drug users. Article 127 of the Narcotics Law, among other things, states that the use of Category I, II, or III narcotics without a valid doctor's prescription constitutes a criminal offense punishable by imprisonment. The maximum penalty for offenders involving Category I narcotics is four years' imprisonment, for Category II narcotics is two years' imprisonment, and for Category III narcotics is one year's imprisonment. Additionally, the legislation provides alternatives to imprisonment, such as rehabilitation programs, for drug users who have been designated as addicts or victims of drug addiction. The need for medical and social rehabilitation for drug users and victims of drug addiction is emphasized in Article 54 of the Narcotics Law. This rehabilitation process may be initiated either voluntarily by the offender or by court order. Users who have been proven to be victims or are struggling with drug addiction may be offered rehabilitation options by law enforcement agencies, including the police, prosecutors, and the courts.

Challenges in Implementing Decriminalization in Indonesia's Drug Policy

A comprehensive definition of assessment involves collecting detailed information about clients at the beginning, middle, and end of a program. Typically, three methods are used to gather information about clients: medical tests, interviews, and observations. One innovative approach to criminal law enforcement regarding drug abuse is integrated assessment.

Efforts to help drug addicts understand where their addiction began and how severe it is form the core of integrated assessment. Their level of involvement in drug trafficking networks is also used to identify individuals suspected of drug abuse. Do they also work as couriers and dealers in addition to being drug addicts? It is also important to examine the suspects' history to determine whether they are repeat offenders or if this is their first drug-related offense. (Diah Pratiwi et al., 2022)

Under the leadership of the National Narcotics Agency (BNN), an Integrated Assessment Team was formed. As a law enforcement team, the BNN and the Indonesian National Police are tasked with enforcing the law against drug abuse. As a medical and health team, the assessors consist of specialists in

forensic medicine, psychology, and general medicine. The following are “the individuals entrusted with the duties and authorities as set forth in Article 9 of the Joint Regulation of the Chief Justice of the Supreme Court, the Minister of Law and Human Rights, the Minister of Health, the Minister of Social Affairs, the Attorney General, the National Police Chief, and the Head of the National Narcotics Agency”:

1. One of the duties of the Integrated Assessment Team is to conduct an analysis of individuals caught in the act and/or involved in illicit drug trafficking or drug abuse. b. To conduct an assessment and analysis of the individual’s physical and psychological condition, and to provide recommendations for treatment and rehabilitation programs as referred to in paragraph (1)(a).
2. The Integrated Assessment Team referred to in Article 8 paragraph (1) has the authority to:
 - a. At the request of an investigator, to examine the circumstances underlying the arrest of a person suspected of being a dealer, addict, or victim of narcotics abuse.
 - b. Based on the type of substance consumed and the circumstances underlying the arrest at the scene of the incident, to determine the criteria for the severity of narcotics abuse; and
 - c. To provide treatment and rehabilitation plans for victims of narcotics abuse and addicts as referred to in subparagraph (b).

Two separate yet complementary teams, the Legal Team and the Medical Team, collaborate to evaluate suspects. The National Narcotics Agency (BNN) coordinates with the Attorney General’s Office of the Republic of Indonesia, the National Police, the Ministry of Health, and the Ministry of Law and Human Rights (BAPAS) to identify a Central-Level Integrated Assessment Team (TAT) for cases involving children. Teams of varying sizes and compositions are formed by the Provincial National Narcotics Agency (BNNP) in consultation with the Provincial/District/Municipal Health Office, Regional Police/Resort Police, High Prosecutor’s Office/District Prosecutor’s Office, and Regional Office of the Ministry of Law and Human Rights (Kanwilukumham)/Correctional Center (BAPAS).

The workload and case volume determine the appropriate number of teams. Members of the medical and legal communities collaborate as an “Integrated Assessment Team.” In accordance with recommendations from the Ministry of Health for the Central Assessment Team and from the Heads of Provincial/District/Municipal Health Offices for Assessment Teams at the provincial/district/municipal level, the Medical Team consists of general practitioners, psychiatrists, forensic specialists, and/or psychologists. This team

also includes at least two individuals from Mandatory Reporting Reception Centers (IPWL) that have been certified by the Ministry of Health.”

Each member of the legal team consists of one (1) person from the following agencies: “the Indonesian National Police (POLRI) (appointed by the Director General of Narcotics IV, the Provincial Police Director General of Narcotics, or the Head of the District Police Narcotics Unit), the National Narcotics Agency (BNN) (as an investigator , or another official appointed by the Deputy for Eradication/Head of the Provincial Narcotics Agency (BNNP)/District Narcotics Agency (BNNK)), the Attorney General’s Office (as a designated prosecutor), and, in the case of a child suspect, the Ministry of Law and Human Rights (BAPAS).”

1. An Integrated Assessment Team is formed to evaluate individuals who have or are suspected of having abused narcotics, whether defendants or convicts. This team includes:
 - a. A Medical Team consisting of Psychologists, Forensic Experts, Physicians, and Mental Health Professionals from IPWL, Law Enforcement, and Professional Organizations;
 - b. A Legal Team consisting of representatives from the Ministry of Law and Human Rights, the Attorney General’s Office, the National Narcotics Agency, and the Police. The Medical Team referred to in point 1.a must consist of at least two members. The Medical Team consists of a psychiatrist, a forensic specialist, or a psychologist who, if unavailable, may conduct the evaluation with the assistance of another medical professional who has received specialized training in this field. A forensic expert or psychiatrist shall act as the chief physician of the team, as referred to in point 1.a. A physician with expertise in drug abuse issues shall act as the team leader. The Minister of Health or the Head of the Provincial, Regency, or City Health Office may propose a Medical Team as referred to in paragraph 1.a to the National Narcotics Agency, the Provincial National Narcotics Agency, or the Regency/City National Narcotics Agency (BNN/BNNP/BNNK) in accordance with their respective jurisdictions.

The BNN/BNNP/BNNK, as one of the components of the Integrated Assessment Team, establishes the Medical Team. Taking into account the workload, primary duties, and functions of their parent agencies, the BNN/BNNP/BNNK establish the Medical Team’s work category. In order for the BNN, BNNP, or BNNK to assign specific personnel to handle a case, they must first notify the leadership of the relevant agency, organization, or institution via a notification letter. A notification letter is issued for each case handled to conduct an examination, with a copy sent to the head of the local health office. If

necessary, the Medical Team's term of service may be extended, but it is valid for a maximum of one year.

2. Roles of Participants in the Integrated Assessment Medical Team 2. The Medical Team adheres to the code of ethics and works professionally within its area of expertise. Medical and behavioral evaluations, as well as recommendations for treatment and rehabilitation plans, fall under the authority of the Medical Team. The purpose of medical and psychological evaluations, as well as recommendations for treatment and rehabilitation programs, is to:
 - a. determine the severity of existing medical conditions, whether a person uses life-supporting devices or not, whether they use drugs or not, their criminal record, their family and social background, and their mental health;
 - b. apply diagnostic criteria (PPDGJ III or ICD-10) to arrive at a actionable diagnosis; and
 - c. In accordance with relevant standards, recommending treatment and rehabilitation for drug users. A physical examination, medical history, and comprehensive assessment using the mandatory reporting form/medical rehabilitation assessment issued by the Ministry of Health; and rapid urine tests, as stated, are part of the Medical Team's medical and psychological evaluation of suspects and former inmates.

If further evaluation is required, a more comprehensive psychiatric evaluation, psychological evaluation, rapid urine test, and other diagnostic support examinations may be necessary. Except in extraordinary circumstances, the Medical Team must conduct the evaluation in a private room away from family members, other professionals, or law enforcement to collect sufficiently accurate data and maximize the validity of the findings.

Individuals under the age of 18, those with cognitive or mental health issues (such as trauma) that impair their ability to communicate, and those with language barriers are considered special cases. The Medical Team may invite family members or other experts authorized by them or the authorities to accompany the individual during the evaluation in specific cases.

Regarding the processing time for the assessment and examination as referred to in paragraph 2, it shall be a minimum of one working day and a maximum of two working days from the date the Integrated Assessment Team receives the application file. As Chair of the Integrated Assessment Team, the Head of the BNN/BNNP/BNNK receives the case review results from the Chair of the Medical Team or their representative. If the assessment results require additional research, a research plan may be prepared no later than 6 (six) days after the Integrated Assessment Team receives the application file, with the

approval of the Chair of the Integrated Assessment Team, outside the timeframe specified in paragraph 7.

If additional research is required, preliminary diagnostics and evaluations are conducted. Conduct integrated evaluations for addicts, drug abusers, and victims of drug abuse who are currently under investigation, prosecution, or trial in accordance with the technical guidelines established by the Head of the National Narcotics Agency (BNN).

The Integrated Assessment Team consists of prosecutors from various levels within the agency, comprising medical and legal experts appointed by the heads of regional government units in accordance with decisions by the National Narcotics Agency, the Provincial National Narcotics Agency, and the District/Municipal National Narcotics Agency.

1. Supreme Prosecutor's Office Level
 - a. Director of Narcotics Crimes
 - b. The Deputy Director for Pre-Trial Proceedings at the Narcotics Directorate and several prosecutors.
2. High Prosecutor's Office Level
 - a. Assistant for General Criminal Cases (person in charge)
 - b. Head of the Narcotics Section
3. District Prosecutor's Office Level
 - a. District Attorney (in charge)
 - b. Head of the General Criminal Division
4. District Attorney's Office Branch Level
 - a. Head of the District Attorney's Office Branch (person in charge)
 - b. Head of Technical Affairs and 1 prosecutor.

As part of the Legal Team, the prosecutor assigned to the Integrated Assessment Team (TAT) is responsible for determining whether a suspect or minor is a drug addict, victim, or dealer; this analysis must take into account the results of any laboratory tests conducted on evidence seized during the arrest; and finally, the prosecutor must collaborate with the Medical Team to coordinate treatment recommendations.

When a person is arrested or caught in the act of distributing narcotics or illegal drugs, it is the responsibility of the Integrated Assessment Team and the Legal Team to determine what occurred. At the same time, the Medical Team is responsible for recommending rehabilitation and treatment programs for the patient and conducting the necessary medical and psychological evaluations.

In the event of an arrest or a person being caught in the-act as a victim of drug addiction, an addict, or a dealer, the Integrated Assessment Team is authorized to assess the circumstances surrounding the arrest, the nature of the substances used, the circumstances surrounding the arrest, and the severity of drug use to propose a treatment plan.

Technical issues related to the role of the prosecution in handling drug abusers and addicts are further regulated in Attorney General Regulation No. PER-029/A/JA/12/2015. This regulation covers:

1. Case handling at the pre-prosecution stage
2. Handling of cases at the prosecution stage
3. Enforcement of court decisions/rulings
4. Supervision and reporting

The Integrated Assessment Team consists of:

1. Legal Team
 - a. Mastery of laws and regulations related to the assessment of perpetrators of narcotics-related crimes, as follows:
 - 1) Narcotics Law (No. 35 of 2009)
 - 2) The National Narcotics Agency is regulated by Presidential Regulation No. 23 of 2010.
Regulation on the Implementation of Mandatory Reporting of Narcotics Dependence (No. 25 of 2011)
 - 3) Supreme Court Circular Letter No. 4 of 2010 on the Rehabilitation of Former Victims of Narcotics Abuse, Victims of Narcotics Abuse, and Narcotics Addicts
 - 4) No. 3 of 2011 Supreme Court Circular on the Placement of Drug Abusers in Medical and Social Rehabilitation Institutions
 - 5) Guidelines for the Treatment of Victims and Addicts in Rehabilitation Facilities, as established by the Attorney General's Office of the Republic of Indonesia (Note: Per-029/A/JA/12/2015).
 - B
 - 6) The following are joint regulations formulated by the following Indonesian government officials: the Chief Justice of the Supreme Court, the Minister of Law and Human Rights, the Minister of Health, the Minister of Social Affairs, the Attorney General, the National Police, and the Head of the National Narcotics Agency.
 - 7) Procedures for the Admission of Persons Suspected of Being Drug Addicts or Victims of Drug Addicts, as well as Defendants, to Rehabilitation Facilities, as regulated by the Director General of the National Narcotics Agency (No. 11 of 2014).
2. Profiling

The term "criminal profiling" refers to the practice of drawing conclusions about an individual based on their demographic information (age, gender, ethnicity, etc.), physical attributes (weight and height, physical abnormalities, etc.), and behavioral traits (motivation, lifestyle, fantasies, victim selection process, etc.). The field of criminal psychology employs behavioral and psychological concepts to draw conclusions about the characteristics of apprehended criminals.

By using factual evidence and conducting objective assessments, the scientific approach of psychology organizes the creation of psychological profiles into a systematic method. Doing so assists law enforcement in making more accurate predictions about criminal behavior, identifying and supporting arrests, and facilitating further interaction with suspects. The three primary objectives of criminal profiling are outlined by Holmes and Holmes (2008):

- a. To provide authorities with information regarding the social and psychological evaluation of the perpetrator;
- b. To provide authorities with an assessment of the offender's mental health; and
- c. To provide interview tips and techniques for dealing with the offender. Criminal investigative analysis, criminal personality profiling, and criminal profiling are terms that describe the process of compiling a list of characteristics exhibited by a criminal offender.

Demographic information, personality traits, and behavioral patterns of the perpetrator are included in the criminal profile. When compiling a criminal profile, it is important to consider the following: physical evidence found at the crime scene; victimology, or the study of victims; *modus operandi*, or whether the crime was planned or unplanned; and a signature, or any traces the offender may have left behind. One way to view the steps involved in creating a criminal profile is as the opposite of making a clinical diagnosis.

After psychologists have gathered enough information about a criminal's personality to complete a criminal profile, they will provide behavioral evidence to characterize an unknown individual. After gathering empirical evidence about a person's behavior through psychological assessment, a psychologist will make assumptions about that person's behavior when formulating a clinical diagnosis.

3. Investigation

A criminal investigation is defined as “an action taken by an investigator to search for and uncover an incident that may serve as evidence of a criminal offense in order to determine whether an investigation may be conducted in accordance with the procedures prescribed by this law” (Article 1(5) of the Criminal Procedure Code).

The description of the investigation above is based on the provisions contained in the Criminal Procedure Code (KUHP). When a suspect is being questioned as part of an investigation, the purpose of the questioning is to establish the suspect’s identity and background. Research approach: The modern drug epidemic poses an increasingly significant threat to Indonesia’s existence as a nation and a people.

Conclusion

The concept of decriminalizing drug users in Law No. 35 of 2009 on Narcotics has not been explicitly and clearly regulated, although there is normative recognition of medical and social rehabilitation for addicts and victims of abuse (Articles 54–59). This ambiguity leads to a dualistic approach in law enforcement—between penal (punitive) and non-penal (rehabilitative) approaches—resulting in inconsistent practices on the ground.

The absence of norms explicitly regulating the decriminalization of drug users for personal consumption has left users vulnerable to criminalization, even though they should be positioned as victims and subjects of recovery. This contradicts the principle of *ultimum remedium* and the objectives of modern criminal law, which prioritize restoration rather than mere retribution.

The repressive law enforcement against drug users has resulted in prison overcrowding, social stigmatization, and low rehabilitation effectiveness, as users spend more time serving prison sentences than receiving medical and social recovery. The integrated assessment system and mandatory reporting system, which should serve as instruments of decriminalization, have not been fully implemented.

A legal revision of Law No. 35 of 2009 is necessary to explicitly accommodate the concept of decriminalizing drug users, by clearly distinguishing between users for personal use and those involved in illicit trafficking. This revision should include:

- a. The addition of provisions that explicitly exclude users from the criminal justice system,
- b. Strengthening of a health-based rehabilitation system,

c. Harmonization of national policies with a public health approach as implemented in countries such as Portugal and Canada.

This legal reform aligns with a progressive legal paradigm and a human rights-based approach, which positions users as subjects who must be protected, not punished. This policy reformulation is a crucial step toward building a fair, humane, and science-based narcotics legal system grounded in an interdisciplinary approach that integrates law, health, and social sciences.

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