

## Implementation of Drug (Narcotics) Convicts Development Models in The Correctional Institution

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### Abstract

This research aims to examine the answers to problems related to the study of the differences in the development of the drug convicts as regulated in Law Number 12 of 1995 concerning Corrections. Accompanied by the implementation of guidance carried out by correctional officers for the drug (narcotics) assisted residents, especially drug users, these assisted residents can be re-socialized to realize restorative justice and the public can accept their presence again. There are several obstacles to coaching drug convicts, especially narcotics users. This study uses primary and secondary data. Direct interviews obtained primary data because the Covid 19 pandemic, interviews were conducted online with the Cipinang Penitentiary's narcotics. Secondary data is taken from books, magazines, journals on the development of narcotics convicts. After the data has been collected, data processing and analysis are carried out and presented in a report resulting from the research. From the research, it is concluded that there are differences in the coaching of the Narcotics criminal offenders concerning the intentions, the health conditions of the perpetrators and some of the coaching carried out in Correctional Institutions, especially medical, social, psychological rehabilitation, several things become obstacles in coaching, including the problem of apparatuses coordination, differences the understanding of the judge tends to punish, not rehabilitation, neglect of assessment.

**Keywords:** model, development, convict, narcotics.

### Abstrak

Penelitian ini bertujuan untuk menguji jawaban atas permasalahan yang terkait dengan kajian perbedaan perkembangan narapidana narkoba sebagaimana diatur dalam Undang-Undang Nomor 12 Tahun 1995 tentang Pemasyarakatan. Diiringi dengan pelaksanaan pembinaan yang dilakukan oleh petugas pemasyarakatan terhadap warga binaan narkoba (narkoba) khususnya pengguna narkoba, warga binaan ini dapat kembali disosialisasikan untuk mewujudkan keadilan restoratif dan masyarakat dapat menerima kembali kehadirannya. Ada beberapa kendala dalam pembinaan narapidana narkoba khususnya pengguna narkoba. Penelitian ini menggunakan data primer dan sekunder. Wawancara langsung diperoleh data primer karena adanya pandemi Covid 19, wawancara dilakukan secara online dengan pihak LP Narkoba Cipinang. Data sekunder diambil dari buku, majalah, jurnal tentang perkembangan narapidana narkoba. Setelah data terkumpul, selanjutnya dilakukan pengolahan dan analisis data dan disajikan dalam bentuk laporan hasil penelitian. Dari hasil penelitian disimpulkan bahwa terdapat perbedaan pembinaan pelaku tindak pidana narkoba mengenai niat, kondisi kesehatan pelaku dan beberapa pembinaan yang dilakukan di Lembaga Pemasyarakatan khususnya rehabilitasi medik, sosial, psikis, beberapa hal. menjadi kendala dalam pembinaan, antara lain masalah koordinasi aparatur, perbedaan pemahaman hakim yang cenderung menghukum, bukan rehabilitasi, pengabaian penilaian.

**Kata kunci:** model; pembangunan; narapidana, narkoba.

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## Introduction

Article 1 paragraph (2) Law Number 12 of 1995 regulates that the correctional system is an arrangement regarding the direction and boundaries and methods of fostering con-

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victs based on Pancasila, which are carried out in an integrated manner between the coach, who is fostered and the community to improve the quality of the convicts in prison, so that be aware of mistakes, improve themselves and do not repeat criminal acts so that they can be accepted back by the community, can actively play a role in development, and can live naturally as good and responsible citizens.

The provisions of Article 1 paragraph (2) above mentioned the assisted residents One of the assisted residents is a convict. A convict is a person who has committed a criminal act, and the judge has been sentenced to a criminal sanction, and the decision has permanent legal force. The convicts who are targeted for guidance are convicts who are subject to imprisonment. These convicts are placed in correctional institutions.

This understanding is by the description of the correctional process as stated as follows: Correctionalism is a therapeutic process, in which convicts at the time of entering the correctional institution feel that they are not in harmony with the surrounding community. The Correctional System also considers that the essence of illegal acts by prisoners is a reflection of the breakdown in the relationship between life and livelihood between the person concerned and the community around him. This means that the factors causing the occurrence of illegal acts are based on these three aspects. Aspects of life are defined as the relationship between humans and their creations. Aspects of life are defined as relationships between human beings. Simultaneously, livelihood aspect is defined as the relationship between humans and nature/environment (which manifests as the relationship between humans and their jobs). Therefore, the correctional system's purpose is to restore the relationship between alive, life, and livelihood between the convicts and the community (reintegration of alive, life, and livelihood). Strictly speaking, correctional facilities bridge the process of negative life between convicts and social elements through coaching, change towards a positive life.

Guidance for these convicts by Law Number 12 of 1995 concerning Corrections is generally enforced, meaning that there is no distinction between the types of criminal acts that have been committed. The guidance regulated in this Law does not cause problems for prisoners who commit criminal acts such as theft, fraud, embezzlement of murder, rape, corruption, terrorism who are physically and psychologically healthy and normal. So that coaching can be carried out effectively. It is different from prisoners who commit criminal acts in the field of narcotics, especially narcotics users. It can be said that this narcotic convict himself has a narcotic addiction. As a result, if narcotics consumption is stopped, the person will feel physically and psychologically sick. Whereas with the arrest of the perpetrator of the narcotics crime, at that time, the person stops consuming narcotics. For inmates other than narcotics, coaching as regulated in Law Number 12 of 1995 and Government Regulation Number 31 of 1999 can be carried out effectively because the conditions other than narcotics inmates do not have physical and psychological obstacles to receive guidance organized by the correctional institution.

Meanwhile, for narcotics convicts with abnormal conditions due to addiction to narcotics substances, the implementation of guidance should not be like prisoners other

than narcotics. For coaching, a special policy or strategy is needed to implement coaching can be effective. It is hoped that restorative justice will be realized after receiving guidance, which is a condition where narcotics convicts are restored to their state when they haven't used narcotics so that the public can accept their presence again. Legal provisions regarding the correctional principle need to be implemented, and in reality, some problems require attention from the point of view of criminal law policies.

Guidance for prisoners is carried out across sectors, namely not only from the correctional institution itself but can collaborate with other parties outside the correctional institution, such as religious officers, job training centers, non-governmental organizations, or individuals, as long as parties outside the correctional facility carry out guidance along with the correctional system.

## Research Problems

Based on the description in the background of the problem, the problem is formulated as follows: 1) are there any differences in the development of narcotics crime convicts, especially narcotics users, and other convicts? 2) how do correctional officers carry out the guidance for narcotics inmates, especially narcotics users, so that these inmates can be re-socialized? and 3) are there any obstacles in the development of narcotics convicts, especially narcotics users?

## Research Method

The approach taken in this study is a normative and sociological approach, which relies on primary data by direct interviews with the convict's development section at the Cipinang Penitentiary located in Jakarta. It is supported by secondary data in the form of technical rules for the implementation of prisoner development and existing documents in the correctional institution, the results of research on narcotics crime, books, magazines, journals on the development of narcotics convicts. The data processing technique is carried out by means of the data collected systematically according to the problem to be studied, using the deductive method, which is to conclude general things to specific things. The analysis technique used in this research is an interactive analysis model.

## Discussion

### Guidance for Narcotics Crime Prisoners

Drugs abuse and trafficking demand people concern among law enforcers and society. Drugs which are basically addressed for medical matters tends to be abused recently. This abuse is harmful thus considered as unlawful. In regard to this, it is urgent to control the use and distribution of this addictive substance by law enforcers (Muntaha, 2011). Chief of National Narcotics Board in press release in the end of year 2016 said that

the narcotics abuse and trafficking are extraordinary crime that threatens the world and can be used as a weapon in proxy war to weaken a nation. Therefore, this crime must be eradicated and comprehensively dealt (BNN, 2016). Phenomenal crime must be treated exceptionally. The increasing number of drugs trafficking is in line with the growing number of its addict and abusers. Hence a comprehensive and through treatment is needed. The pattern of this crime continuously develops. Through National Narcotics Board (Badan Narkotika Nasional/BNN)), government commit a strict effort in prevention, eradication, and rehabilitation (Saefudin, et.al., 2017).

Drugs abuse has a large and complex dimension, either from medical, psychiatric, mental health, or psychosocial aspect (Sanger, 2013). Drug addict and abuser are "sick people". Thus, the best way to treat them is by recovering them. Drug addict and/or drug abuser are obliged to attend medical treatment by placing them in either medical or social rehabilitation. One current pattern intensively implemented is to avoid drug addicts and drug abusers from imprisonment and direct them to the treatment instead to recover the physical and psychological conditions. The treatment pat-terns appear due to the amount of potential worsening of drug addicts and abusers when being imprisoned. Initially they were imprisoned as users, once they were out and then arrested again, they became drug traffickers. This surely cannot be separated from their interaction in prisons which makes drug addicts and users exacerbated.

The placement of drug addict and abusers into a rehabilitation institution complies with the aim of Law of Drugs as mentioned in Article 127 by observing article 54, 55, and 103 and also Circular Letter of Supreme Court regulation Number 4 Year 2010 on The Placement of Drug Abuse, Victim of Drug Abuse and Drug Addicts into Medical Rehabilitation Institution and Social Rehabilitation can be used as judges' guidance to decide the rehabilitation for drug addicts and drug abusers.

For defendants who are drug-addicted can be asked by the judge to have medical treatment and/or rehabilitation. The word "can", may be defined that judge have no obligation to instruct the defendant to have medical treatment and/or rehabilitation (Hanadi, 2010). However, there are often judges' decisions that place the defendant in a correctional facility, even though it is very clear that many correctional institutions do not have rehabilitation facilities. This is a separate problem, considering that narcotics prisoners require special handling in fostering in correctional institutions.

Coaching at LAPAS (Penitentiary) in the form of guidance. According to the provisions of the Decree of the Minister of Justice Number: M.02-PK.04.10 of 1990 concerning Guidance Patterns for Prisoners/Detainees, guidance is; "Guidance includes detainees, detention services, prisoner development systems, and client guidance." Guidance for prisoners is one of the efforts that are *ultimum remidium* (last resort), which is more focused on a tool so that prisoners are aware of their actions so that when they return to society, they will be good, both in terms of diversity, socio-culture, and morals so that harmony will be created and balance in the midst of society.

Guidance for narcotics abuse convicts is generally more aimed at the health sector of drug abusers, especially those who are still dependent. The health care for narcotics Correctional Assistants (WBP) includes:

1. General health care activities, namely health care for drug convicts who are a high-risk group for contracting various types of infectious diseases, especially through sharing unsterile needles
2. Drug addiction treatment activities, which include:
  - a. Screening for the involvement of prisoners against drugs and alcohol.
  - b. Detoxification services
  - c. Identification of drug dependence
  - i. When narcotics convicts enter prisons, it is necessary to identify drug dependence to anticipate drug abuse in detention/prison.
  - d. Oral substitution opiate treatment, namely treatment with oral substitute opiates or Metadone Substitution therapy.
  - e. Emergency treatment, namely immediate action for drug abuse prisoners or prisoners who have overdosed.
  - f. Rehabilitation therapy, including Community Therapeutic, Criminon, Narcotuc Anonymous, Cognitive Behavior Therapy (CBT), Religious Therapy, and others. aims to change behavior, create self-confidence, overcome addiction, and increase faith and piety.
3. Physical health care activities include food care for narcotics prisoners, personal hygiene, sports activities, health education and efforts to prevent disease transmission.
4. Mental and spiritual health care activities include two approaches, namely mental health care through a psychological or psychiatric approach and a spiritual or religious approach. Both approaches aim to improve deviant thought patterns and behaviors, seen from religious norms and unwritten legal norms. These norms certainly have sanctions, both physical sanctions (imprisonment) in prisons through court processes and judges' verdicts, as well as moral sanctions by the community that have no time limit.

Meanwhile, other coaching programs, such as guidance in independence to prepare prisoners to integrate with the community, are still carried out based on guidance regulations in general. However, most of this coaching cannot be implemented considering the health sector's problems (dependence) faced by drug abuse convicts.

Efforts to provide guidance or guidance are the core of the correctional system activities, constituting a means of treating prisoners with new methods to support a new pattern of efforts to implement imprisonment to achieve a successful role for the State to re-become members of society. Coaching activities can be presented in the form of mentoring and other activities. The form of guidance and other activities will be tailored to the supervisors' abilities and the needs of the prisoners. Guidance and other programmed activities for inmates can be carried out using implementation:

1. Mental guidance, which is organized with education on religion, personality, and character, and general education which, is aimed at generating new mental attitudes after realizing past mistakes;
2. Social guidance, which can be carried out by providing an understanding of the importance of social life, and at certain times given the opportunity for assimilation and integration with outside communities;
3. Skills guidance, which can be provided with courses, training for certain skills according to their talents, which will later become provisions for life to earn a living in the future;
4. Guidance for maintaining a sense of security and peace, for living an orderly life and learning to obey rules;
5. Other guidance related to health care, cultural arts, and as far as possible introduced to all aspects of social life in the form of an imitation of the small community in harmony with the social environment outside it.

Based on the Decree of the Minister of Health of the Republic of Indonesia No. 996 Menkes/SK/VIII/2002 dated 23 August 2002 concerning implementing rehabilitation service facilities for abuse and dependence or medico, psychosocial.

1. Medical Services

- a. Detoxification

Implemented by doctors in health care facilities in accordance with statutory regulations. The implementation follows the guidelines for treating drug dependent patients set by the Directorate General of Community Health at the Ministry of Health.

- b. Maintenance Therapy

Conducted by doctors

2. Psychosocial Therapy

This is done through a non-medical approach, for example, social, religious, and others while, still coordinating with doctors at health service facilities that the government has determined

3. Reference

- a. Patients who use drugs with physical medical complications are referred to as the city/regency/provincial general hospital.

- b. Patients with psychological medical complications are referred to a mental hospital or to the psychiatry department at the nearest hospital.

Thus the mention of a correctional facility does not have the connotation of revenge or the giving of suffering. Still, coaching is the core of the correctional system's activities, and coaching is a form of activity model carried out effectively and efficiently to obtain maximum results. The formation of prisoners is a system.

Stage and Punishment or determination of the criminal punishment is a tool to achieve the goal. In identifying the purpose of concept punishment is from the equilibrium of the two main principals, that are the protection of society and protection or coaching

of the suspected criminal (Arief, 2016). Related to Punishment Concept, Agus Raharjo (2014) said:

“Giving a punishment for the convict of a crime does not only suffer the convict as introduced by retributive theory with its variations, or an effort to protect the society interest as stated by relative theory, rather, it is more to make punishment that can give a big contribution for suspects crime to realize their fault, to change their behavior and to be agent of change if it is necessary, or it can develop the consciousness to realize as God’s creatures who have a degree, solidarity or the ability to control themselves”.

To treat the drugs crime cases requires a thorough measure by viewing law aspects as well. We do not only see that drug crime (include drug abuse) as a serious threat for the society, so the convict should be punished. Seeing the fact above, we have to pay attention to the protection aspect towards individual. Punishment does not only make them cured, but how to make punishment enables them to make better person.

### **Barriers to Development of Narcotics Convicts, especially Users**

Law enforcement is not something like drawing straight line then can be finished by making laws and implementing as a machine, seemingly simple and easy like automatic ma-chine model (Raharjo, 2011). Since Indonesia’s independence, law enforcement has been a main issue in this country. Some unsolved and unfinished big cases causes society’s distrust toward law as a means to seek justice (Christianto, 2011).

Relying on the law's operation, there are always legal problems that should be valued and do not run as they are. Conditions occur what should not happen what is, in fact, what is manifested there are obstacles or obstacles to work to be what it should be. Various aspects can be applied to see the occurrence of these obstacles or obstacles, namely we can see the aspect of legislation, the interactions of various institutions involved in the application of the law, and attitudes and values that are the public law enforcers understand. The possibility of assessment for the perpetrators, who do not have to be convicted, turns out that there is no common understanding. The conditions for the suspect that can be assessed are addicts, abusers, and narcotics abuse victims. Those that cannot be assessed are dealers and dealers/couriers. However, the treatment has developed that almost all narcotics crime cases handled were assessed. Each case must be assessed so that its role in the criminal case can be identified. But another opinion is that what can be assessed are addicts and drug abusers or not involved in narcotics networks.

Disagreements within the Integrated Assessment Team (Team Assesmen Terpadu/TAT) can be seen from several cases handled. Some should be assessed but not assessed, and some are not supposed to be assessed but should be assessed. This occurs in addition to a lack of coordination and regulations that they find irrelevant to implement. So that the initiative to make a breakthrough, which considers all suspects in the assessment.

Law enforcers admit that integrated assessment regulations are still good and out of sync between one regulation and another. This makes law enforcers "confused" in the implementation phase. The implementation of various regulations regarding assessment and rehabilitation that have been made is still not optimal. Article 7 paragraph (1) of Mutual Laws stated that the medical implementation and/or social rehabilitation as states: "For prisoners who are included in the category of Narcotics Addicts and victims of Narcotics Abuse, and are not dealers or dealers or couriers or producers, medical rehabilitation and/or social rehabilitation can be carried out in prisons or detention centers and/or medical rehabilitation and/or rehabilitation institutions appointed by the Government."

Integrated assessment in drugs crime cases is relevant with the development of handling pattern of drug abuse and narcotics trafficking worldwide. In World Drugs Report 2016 mentioned that: The excessive use of imprisonment for drug-related offences of a minor nature is ineffective in reducing recidivism and overburdens criminal justice systems, preventing them from efficiently coping with more serious crime. The provision of evidence-based treatment and care services to drug-using offenders, as an alternative to incarceration, has been shown to substantially increase recovery and reduce recidivism.

Facts in the field show that there are still addicts or pure narcotics users who have been caught red-handed by BNN and placed in detention centers without treatment. Often the perpetrators choose to be sentenced to imprisonment because they are informed that rehabilitation treatment is expensive.

The judge's decision by placing addicts and narcotics abusers in a remand center or prison does not make it good but has a great potential for the opposite. For residents in the correctional facility are drug users who are serving criminal sentences in prison. This occurs because drug users are sentenced to criminal penalties, even though rehabilitation punishment is better for drug users. This is often not done. Up to now, prisons and detention centers have been questioned for their effectiveness in guiding prisoners, especially narcotics convicts. This is certainly not a good achievement for prisons and detention centers. Even prisoners undergoing training in a correctional institution can still control their crimes from within the prison walls. Associated with Integrated Assessment in cases of narcotics crime in line with the spirit of criminal law reform. Elucidation of Article 101 of the Criminal Procedure Code Plan adopts a double-track system of punishment, which requires that in addition to the perpetrator of a criminal act to be subject to criminal sanctions, he may also be subject to various acts (treatment). However, the tendency of the criminal justice system to end the result is to convict the perpetrator.

Barriers related to coordination and cooperation, because in addition to police investigators, there are also investigators from the BNN. This is certainly not in sync with the idea of the police being ineffective in eradicating narcotics crime, so the issuance of Law Number 35 of 2009 concerning Narcotics to be granted investigative authority. Besides, of course, this will be a duet mechanism for narcotics law enforcers together with the police agency (Alin, 2020). Both must coordinate with each other and inform each



other when they have started investigating the narcotics crime (Anggriawan, 2019). Even though the two must coordinate with each other, they have given a signal or indication of the police's inability to carry out their duties and authorities in carrying out investigations of narcotics crimes properly. Meanwhile, PPNS is also an investigator who is authorized by Law Number 35 of 2009 concerning Narcotics, but as coordinator and supervisor remain on the POLRI investigator's side as outlined in Article 7 paragraph (2) of Law Number 8 of 1981 concerning the Book of Law, Criminal Procedure Code (KUHAP).

This issue of authority implies an institutional polemic that deserves attention because authority concerns institutional prestige, and there are always preventative efforts to reduce the power; reducing power can lead to the wrong perception of the institutions that accept the reduction. Institutions can be deemed incapable of and incapable of exercising power given to them; in fact, they have never provided adequate accountability according to society's expectations, especially since this authority concerns power. The elimination of power is a show of power; the result is institutional arrogance and structural egoism. It will disrupt the process of a comprehensive, integrated criminal justice system (Adjie, 2003). The existence of such a broad authority for investigating the National Narcotics Agency as regulated in Law Number 35 of 2009 concerning Narcotics, namely the capacity for social and medical rehabilitation carried out by the community; developing laboratory; enter into bilateral, multilateral, regional and international agreements; also authorized to carry out investigations, arrest, and make reports on the implementation of duties (Herindrasti, 2018), then, the National Narcotics Agency's investigative authority tends to deviate from the principles of the Criminal Code in criminal law. Considering the description of the investigative authority in the criminal justice system on the handling and eradication of narcotics crime, of course, it cannot be separated from the context of a discussion on criminal politics. Investigations carried out by two different institutions after the issuance of Law Number 35 of 2009 concerning Narcotics led to various new problems such as overlapping authority, no coordination between institutions, and the emergence of ego sectoral inter-agency, which implied not optimal eradication of narcotics in Indonesia. Therefore, it is necessary to revise the Narcotics Law to make investigations more integrated under one roof and one door so that there are no problems caused by overlapping investigative powers.

Narcotics user addicts get convicted in the sense that actions in the form of rehabilitation need attention to medical healing aspects; in other words, they need to get medical care, but it becomes an obstacle to its availability. Currently, officers' situation at the Narcotics Penitentiary is not sufficient to make the Narcotics Prison like other prisons running well and optimally, such as the need for doctors and medics to provide treatment for narcotics prisoners has not been implemented properly. This concerns the lack of supporting facilities and infrastructure. Currently, medical rehabilitation at the Cipinang Class IIA Narcotics Prison, Jakarta, has not been able to be carried out optimally because the polyclinic equipment is incomplete to carry out the stage of treatment for prisoners.

Especially in the treatment of infectious diseases to prevent transmission to fellow prisoners.

Rehabilitation or medical treatment, of course, must be following what is required of the perpetrators of narcotics crime, where there are reasons for the perpetrators to commit crimes, presumably a cure for the disease, the medicine must match that cause. It is suspected that the abuse of narcotics and psychotropic substances is motivated by reasons, namely (Sudarsono, 1992):

1. To prove courage in committing dangerous acts such as speeding and associating with women;
2. Demonstrate actions that challenge parents, teachers, and social norms;
3. Facilitate distribution and facilitate sexual acts;
4. Releasing from loneliness and gaining emotional experiences;
5. Seek and find meaning in life;
6. Fill in the emptiness and loneliness of life;
7. Eliminates anxiety and frustration of life;

According to Dadang Hawari's research, that among the factors that play a role in the use of narcotics and psychotropic substances are:

1. Anti-social and psychopathic personality factors;
2. Mental conditions that are easy to feel disappointed and depressed;
3. Family conditions which include family integrity, parents' activities, parent-child relationships;
4. Peer groups; and Narcotics and psychotropics themselves are easy to obtain, and there are official and unofficial markets for integrated rehabilitation programs.

The background or reasons for narcotics abuse offenders in conducting treatment or rehabilitation programs are not thoroughly studied. Therefore, it is often irrelevant to the needs of the perpetrators who have become prisoners. Prisoners are required in general/general, even though the backgrounds for the reasons are different. It requires treatment in rehabilitation and medical or social treatment, which requires an individual character.

The system of punishment known as the double-track system was not completely kicked down. Judges in imposing a sentence tend to sentence imprisonment, which can be unity between crime and action (punishment and treatment). The consequence of this is that the convict is sentenced to imprisonment but is actually in a state of illness that should be rehabilitated, especially health, which is not accomplished, can endanger the convict's life. Judges' decisions that are dominated by criminal sanctions are an example of having influenced the mindset that action sanctions are only a complementary sanction. Even though the room has been given to choose the sanction to be imposed, the judge will choose a criminal sanction. Inaccuracies in the formulation or application policies will increase crime because the imposed sanctions do not provide a deterrent effect or benefit. In connection with the applicable criminal system (double track system), criminal sanctions and actions are ideally placed in an equal position/level not because of the

assumption that criminal sanctions should take precedence over other sanctions. The policy for imposing sanctions should be determined by the suitability of the nature of the sanctions with the perpetrator's characteristics and actions. Thus, this hinders efforts to develop specifically for narcotics criminal offenders, which should be individual regarding the judge's understanding of the criminal system known in Indonesia's positive criminal law.

In connection with the capacity of prisons, where the occupants are already over capacity, the placement of the prisoners is not strictly separated or tends to all be mixed, there is no distinction between the types of crimes committed. This has great potential for disease transmission and difficulty in preventing the spread of disease. As with the current Covid 19 pandemic, it has the potential to be infected. Drug abuse in correctional institutions is not only carried out by prisoners in drug cases but also by non-drug case convicts, this is because dealers, users, dealers, and non-drug cases are placed into one which makes it easier for them to make transactions and expand their network. Drug abuse is often called a social disease, meaning that this abuse occurs as a result of social interaction with people who use drugs or as a result of friendship with active drug addicts. This disease is generally contagious if a strong moral self-system does not fortify the individual.

The problem that becomes an obstacle is applying criminal individualization, in this case, rehabilitation concerning medical/mental health, which needs to be carried out personally, intensively, and continuously. Given that perpetrators, especially narcotics addicts, are classified into mental and behavioral disorders due to psychoactive substances (mental and behavioral disorders due to psychoactive substance use). Drug addiction is a complex disease characterized by an unbearable urge to use a drug (Craving), and therefore there is a strong effort to acquire it, although some of the consequences are known.

## Conclusion

There are several conclusions that can be drawn based on the discussion above, namely:

1. Guidance for prisoners has broadly known in four stages: The first stage, research on the prisoner's self, including the causes of committing an offense. In the second stage,  $\frac{1}{3}$  of the criminal period and there is already a tendency for *insyaf* (realizing) and repairs to start to be implemented by the security medium; in the third stage,  $\frac{1}{2}$  of the criminal period, there is improvement and progress so that assimilation is possible, and the fourth stage,  $\frac{2}{3}$  of the sentence is possible to be released on condition.
2. Development of narcotics prisoners, especially users, includes General health care activities, namely health care for drug convicts who are a high-risk group for contracting various kinds of infectious diseases, especially through unsterilized shared needles. Drug dependence treatment activities include screening for prisoners' involvement in drugs, detoxification services, identification of drug dependence, oral

substitution opiate care, emergency care, rehabilitation therapy, health care activities, and mental and spiritual health care activities.

3. The obstacles that develop narcotics prisoners at Cipinang Narcotics Prison include coordination and cooperation between agencies, the authority to handle apparatuses, lack of facilities and infrastructure, especially health facilities; there is no common view, especially the tendency of judges to sentence imprisonment only (even though users are more precise or more require rehabilitation, and correctional institutions experiencing Over capacity).

## Suggestions

After conducting studies in this study, the following suggestions are given:

1. In the legislation product, there is a regulation that confirms that in the criminal system for drug users it is ensured that the criminal sanction for them is rehabilitation, not prison.
2. Handling narcotics crime involving various law enforcement agencies requires good coordination and cooperation between institutions authorized to deal with narcotics abuse.
3. Recognition of the assessment activities at the investigation/ investigation stage, it is hoped that the judge will adopt in his decision, the decision regarding the duration of rehabilitation simultaneously/or can be in line with the length of imprisonment for imprisonment.
4. To open the widest possible public participation to collaborate in preventing, handling, and implementing punishment in rehabilitating narcotics users. In this case, it also concerns supervision during the handling process, to the implementation of imprisonment or rehabilitation of inmates already in a correctional facility, including previously various preventive activities.
5. Building a community culture with the awareness that narcotics abusers need to be supported, not given criminal sanctions, except when drug dealers must have a united attitude to eradicate them. At the same time, the law enforcement culture is developed together with a spirit of drug eradication, prevention, and punishment/rehabilitation as work to save the nation's children as the next generation; it is necessary to keep law enforcement "peaceful" and even make it a project regarding drugs.

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