

Challenges in Implementing Rehabilitation for Prisoners Abusing Marijuana Narcotics (*Cannabis Sativa*)

Suwari Akhmaddhian^{1*}, Elisa Penti Yuliani², Yani Andriyani³, Sarip Hidayat⁴, and Ashhifa Roqiiqulqolby⁵

¹ Faculty of Law, Universitas Kuningan, West Java, Indonesia

² Faculty of Law, Universitas Kuningan, West Java, Indonesia

³ Faculty of Law, Universitas Kuningan, West Java, Indonesia

⁴ Faculty of Law, Universitas Kuningan, West Java, Indonesia

⁵ Faculty of Law, Universitas Kuningan, West Java, Indonesia

suwari.akhmad@uniku.ac.id

Abstract. The abuse of marijuana narcotics (*cannabis sativa*) in Indonesia has become a serious problem, damaging the lives of individuals, families, communities, and the nation. Law No. 35 of 2009 on Narcotics regulates rehabilitation as an alternative to criminal punishment for drug addicts and abusers. This study aims to analyze the regulation and the implementation of rehabilitation for prisoners abusing marijuana in Indonesia. This study applied a socio-legal and descriptive approach with a qualitative method in which the data, in the form of primary, secondary and tertiary data, were collected through observation and interviews at the Cipta Wening Foundation, Kuningan, Indonesia. The results showed that the rehabilitation regulation for drug prisoners at the Cipta Wening Kuningan Foundation was Article 54 of Law Number 35 of 2009 on Narcotics. The implementation of rehabilitation at the Cipta Wening Kuningan Foundation included the stages of assessment, counseling, classification, sharing feelings, post-rehabilitation, and mental, spiritual and social development. Based on data, there were nine people in 2025 in which rehabilitation programs prioritized a holistic approach with Islamic therapy. Meanwhile, the inhibiting factors for the implementation of rehabilitation include limited facilities, limited professional staff, limited funding, and low support from parents and the environment. The conclusion is that the implementation of rehabilitation is already regulated in the regulations, and the implementation of rehabilitation for drug prisoners at the Cipta Wening Kuningan Foundation has made a positive contribution to the process of recovery and reintegration of drug prisoners into society. The suggestion is that the government and law enforcement officers must be consistent in implementing rehabilitation as a form of alternative punishment, especially for identified drug abusers, and must support rehabilitation at the Cipta Wening Kuningan Foundation by improving facilities, providing training for professional staff, and allocating a budget for rehabilitation programs.

Keywords: Cannabis Sativa, Drug Abuse, Implementation, Rehabilitation.

1 Introduction

Indonesia is a country governed by law. Every crime is resolved through legal procedures, making the law the only means to resolve a crime[1]. Drug abuse involves the distribution of illegal drugs and is one of the most common crimes in Indonesia. According to Databoks, the number of suspects in drug-related cases in Indonesia reached 264,188 from 2020 to the third quarter of 2024, with seized evidence valued at IDR 31.87 trillion. In 2020, there were 57,459 suspects; in 2021, the number decreased to 52,224; in 2022, it rose again to 54,535; and by the third

quarter of 2024, the number of drug suspects reached 45,940[2]. According to Kompas, the number of drug cases uncovered in Indonesia through October 2024 reached 38,786, representing a 7 percent increase compared to the same period last year[3].

Drug abuse can occur among individuals of all ages, including adults, adolescents, and children, regardless of gender[4]. It is generally influenced by a combination of factors: predisposing factors, such as personality traits, anxiety, and depression; supporting factors, such as family environment; and triggering factors, such as peer influence or the nature of the drug itself[5]. The initial impact of drug abuse is usually experienced by the user, but over time, it can extend to families and communities, ultimately threatening the state and the nation. It can undermine the nation's cultural values and disrupt the fundamental principles of national life[6]. Drug crime is a serious crime because its negative impact on society cannot be ignored. The rapidly expanding distribution of narcotics, adding to the number of drug users and addicts. Accordingly, the primary focus of the government is to combat such problems[7].

According to Article 1, paragraph 1 of Law Number 39 of 2009 concerning narcotics, narcotics are natural or synthetic substances or drugs that can reduce consciousness, relieve pain, and cause dependence, and are classified according to the annex of the law. Although narcotics have significant benefits in healthcare, their distribution and improper consumption can harm the body[8]. Referring to the definition, the use of narcotics must be controlled and under a doctor's supervision. Unsupervised and uncontrolled use will be considered as drug abuse, which poses a threat to human safety, individually, in communities, and at the national level[5]. Given the high number of prisoners in Indonesia for drug-related offenses, legal reforms are necessary, including the implementation of rehabilitation programs as reflected in Law Number 35 of 2009 concerning Narcotics[9]. Rehabilitation is one approach to addressing drug-related crimes, which is divided into two types: medical rehabilitation and social rehabilitation. Rehabilitation is considered a more effective method than merely imposing criminal penalties. Programs for drug abuse convicts aim to restore their physical and mental health, help them overcome addiction, and prepare them for reintegration into society[10]. The approach aligns with the principle of humanization in the criminal justice system, which emphasizes recovery and the prevention of recidivism.

According to Article 14(1) of the 1945 Constitution of the Republic of Indonesia, the President grants pardons and rehabilitation, taking into account the considerations of the Supreme Court[11]. Meanwhile, Article 1, number 23 of Law Number 8 of 1981 concerning the Criminal Procedure Code (KUHAP) explains that rehabilitation is a person's right to restore their abilities, status, and dignity when arrest, detention, prosecution, or judicial processes are not legally justified or occur due to error, in accordance with the provisions of the law. Rehabilitation is a stage of recovery for

drug addicts, abusers, and victims of drug abuse, carried out through medical and social approaches, helping them to re-function as productive members of society. Furthermore, under certain conditions, rehabilitation can also serve as an alternative to criminal punishment for drug abusers[12]. Provisions regarding rehabilitation for drug abusers are part of reforming the national criminal law, aiming at preventing drug users from relapsing. Drug addicts and victims of drug abuse are required to undergo both medical and social rehabilitation[13].

The rehabilitation aims to help addicts and/or drug abusers reintegrate into society by restoring their thinking, emotions, and behavior as indicators of personality change in accordance with social norms, enabling them to interact positively within their social environment, including the rehabilitation setting[14]. Rehabilitation plays a crucial role in social and human rights, the right to life and freedom from the threat of narcotics is acknowledged and implemented as a means of preventing abuse by addicts. However, implementing rehabilitation for drug abuse inmates often faces various challenges, including limited rehabilitation facilities, insufficient professional staff, such as counselors or therapists, and significant societal stigma. Furthermore, inmates' lack of awareness of rehabilitation, along with minimal coordination between correctional institutions and relevant agencies, hampers the program's implementation. Preliminary research by Ahmad M. Ridwan Saiful Hikmat (2021), entitled 'The Effectiveness of Rehabilitation Implementation for Criminal Offenders,' indicates that the National Narcotics Agency (BNN)'s rehabilitation program for drug users has not functioned optimally. Penelitian ini mengungkap adanya berbagai kendala dalam pelaksanaan rehabilitasi terhadap pelaku tindak pidana penyalahgunaan narkotika. One of the main obstacles is the limited facilities and infrastructure, as well as constraints on investigators' abilities during the investigation process, which are caused by the lack of specialized education or training in handling the case[15]. A preliminary study by A.P. Komang Ayu Hariwangi, Simon Nahak, and I Ketut Sukadana (2019), the Implementation of the Rehabilitation Process for Drug Abusers at the Anargya Bali Foundation Rehabilitation Center, showed that the rehabilitation had several stages: the first stage (intake), the second stage (primary care), the third stage (transitional), and the fourth stage (aftercare). The obstacles lies in internal and external factors[8]. Preliminary research conducted by Muhammad Fachreza Parape, Muhadar, and Musakkir (2021), the Implementation of Narcotics Prisoner Rehabilitation at the Class II A Sungguminasa Special Narcotics Correctional Institution[16]. The study found that rehabilitation for drug inmates at the Class II A Sungguminasa Special Narcotics Penitentiary has been implemented, but not optimally. It is because the rehabilitation stages still refer to the guidelines for implementing drug rehabilitation services for prisoners and inmates at the Correctional Technical Implementation Unit, issued by the Director General of Corrections. The situation affects the success of rehabilitation programs. Given the crucial role of rehabilitation in the modern correctional system, assessing its

implementation is essential. By understanding the various challenges, obstacles, and successes in the process, it is hoped that more effective strategies can be developed to improve the quality of rehabilitation in the future. Referring to the aforementioned background, the research questions are formulated as follows: 1) What are the regulations on rehabilitation for narcotics abuse convicts based on Law Number 35 of 2009? 2) How about its implementation at the Cipta Wening Kuningan Foundation?

2 Methodology

The study utilised a socio-legal approach, drawing on various disciplines such as law, economics, and taxation. It utilizes primary data, including interviews and observations, and secondary data, such as regulations, journals, and reports. The study also examines the legal rules applied in society using a legislative approach, analyzing relevant laws and regulations to the current legal issues. The study employed an analytical descriptive method, using systematically collected data and samples, providing a detailed and comprehensive overview of the subject under investigation, referencing relevant laws, regulations, and legal reasoning

3 Findings And Discussions

3.1 Regulations on Rehabilitation of Narcotics Abuse Convicts Law Number 35 of 2009 Concerning Narcotics

The improvement encompasses education, the economy, and public health sustainably, in line with the principles of Pancasila and the 1945 Constitution of the Republic of Indonesia. Law Number 35 of 2009 concerning Narcotics emphasizes rehabilitation as an integral part of addressing drug abuse, including for prisoners. The rehabilitation emphasizes physical and psychological recovery through a health-and humanitarian-focused approach, reflecting a shift from a repressive strategy to a more effective method of social recovery and reintegration[17]. According to Article 54, drug addicts and victims of drug abuse are required to undergo medical and social rehabilitation. The provision demonstrates that the state views drug abusers, such as addicts, as individuals in need of help rather than criminals. Medical rehabilitation focuses on overcoming physical and psychological dependence, while social rehabilitation aims to restore their social function, allowing them to reintegrate and contribute productively to society[18].

Article 55 of Law Number 35 of 2009 concerning Narcotics states that the addicts who are not yet of legal age, the parents or guardians are obligated to report them to community health centers, hospitals, or government-designated medical and social rehabilitation institutions, ensuring they receive proper treatment and care through medical and social rehabilitation programs. Narcotics addicts who are of legal age are required to report themselves, or be reported by their families, to community

health centers, hospitals, or government-appointed medical and social rehabilitation institutions to receive treatment and care through medical and social rehabilitation programs. The implementation of this mandatory reporting, as referred to in paragraphs (1) and (2), is regulated by Government Regulation. Article 56 of Law Number 35 of 2009 states that medical rehabilitation for narcotics addicts is carried out in hospitals designated by the Minister. Certain rehabilitation institutions operated by government agencies or community organizations may also provide medical rehabilitation, but only after obtaining the Minister's approval.

Article 57 of Law Number 35 of 2009 states that, besides medical treatment and/or rehabilitation, the recovery may also be carried out by government agencies or the community using religious and traditional approaches. Article 58 of the same law explains that social rehabilitation is implemented by government agencies and the community, and may include religious, traditional, or other alternative methods. The term 'former narcotics addicts' refers to individuals who have recovered physically and psychologically, while 'social rehabilitation institutions' are organizations managed by the government or the community[19].

Article 103 of Law Number 35 of 2009 concerning Narcotics states that a judge handling the case may: (1) order the individual to undergo treatment and/or care through rehabilitation if they are found guilty; or (2) order the individual to undergo treatment and/or care through rehabilitation even if they are not found guilty. The duration of treatment and/or care for addicts under paragraph (1) a is considered part of the sentence served

Article 127, paragraph 3, states that in the case of an abuser referred to in paragraph (1) who is proven to be a victim of narcotics abuse, the individual is required to follow medical and social rehabilitation. Law Number 35 of 2009 emphasizes preventive and curative approaches, with the state responsible for providing early rehabilitation services for children and adults. The reporting obligation reflects a shared responsibility among individuals, families, and the community. Rehabilitation is not merely an alternative to punishment; it is a matter of human rights and fosters cross-sector collaboration among rehabilitation institutions, hospitals, families, and law enforcement to support recovery and social reintegration.

3.2 Rehabilitation for Narcotics Abuse at the Cipta Wening Kuningan Foundation

The rehabilitation process at the Cipta Wening Kuningan Foundation is carried out systematically, with several interrelated stages. Each stage aims to rebuild the physical, mental, and social well-being so they can live independently and responsibly. The approach focuses on physical recovery, psychological, and spiritual aspects. The results of an interview with Mr. Mukdiana, S.Sos.I, CH explained that clients who are rehabilitated as inpatients must live within the foundation's premises. The number of clients rehabilitated from 2022 to 2025 fluctuates annually. In addition to those who are hospitalized, there are also those who are treated as outpatients, such as motorcycle gangs, XTC, Wara-Wiri, etc. The outpatient program includes boxing training.

Table 1. Rehabilitation Client Data.

Year	Total client	
	Man	Woman
2022	3 people	21 people
2023	9 people	7 people
2024	17 people	3 people
2025	8 people	1 people

Thus, the rehabilitation at the Cipta Wening Kuningan Foundation reflects the essence of Karl O. Christiansen's theory of relative punishment, which emphasizes that punishment should have a positive impact on the future of the offender and society. The rehabilitative approach focuses on recovery, personal development, and social reintegration, aligning with the principle to ideally contribute positively to society, rather than imposing physical or punitive measures without fostering behavioral change. The interview with Mr. Mukdiana, S.Sos.I, CH found the inhibiting factors: first, inadequate facilities that do not fully comply with the standard operating procedures; second, insufficient allowances for living costs or daily meals; third, limited professional staff, such as medical personnel; and fourth, challenges related to parents and the surrounding environment. Many parents may be upset or unwilling to support their children fully. For example, a child is forced by their family to leave before completing the full four-month program. To address the problem, the foundation has established an MOU with families to prevent premature withdrawals. Additionally, societal stigma toward addicts poses a significant challenge as well. One

major issue is the limited facilities and infrastructure, which do not fully meet the standard operating procedures for rehabilitation. Supportive facilities, such as counseling rooms, medical equipment, activity spaces, and basic necessities for participants, remain inadequate. In addition, the foundation experiences a shortage of professional staff with specialized competencies in rehabilitation, including doctors, psychiatrists, psychologists, and addiction counselors. Financial constraints also present a considerable obstacle. The foundation struggles to cover participants' daily needs, including meals, basic care, and operational costs for rehabilitation activities. Family support, which is crucial for successful rehabilitation, is not always available. In some cases, families fail to actively assist in the recovery process, and participants may be prematurely withdrawn from the program. To address this, the foundation has implemented a Memorandum of Understanding (MoU) with families to ensure participants complete the rehabilitation process. Finally, the social environment surrounding participants often poses additional challenges. Many individuals return to unhealthy environments after rehabilitation, which can increase the risk of relapse. These combined factors highlight the complex nature of implementing effective rehabilitation and the need for comprehensive support from facilities, professionals, families, and the wider community.

The Kuningan Regency Government must actively support the implementation of rehabilitation for drug abuse at the Cipta Wening Kuningan Foundation as part of a holistic approach to addressing narcotics issues, in accordance with Kuningan Regency Regulation Number 2 of 2018 concerning the Prevention and Handling of Abuse and Illicit Trafficking of Narcotics, Psychotropics, and Other Addictive Substances. As a social institution with extensive experience in providing community-based, spiritual, and psychosocial rehabilitation services, the Cipta Wening Kuningan Foundation plays a strategic role in helping addicts achieve full recovery and reintegrate productively into society. Local government support in the form of partnerships, facilitation, and capacity building is essential for establishing an effective and sustainable rehabilitation system. The Kuningan Regency Government must provide concrete assistance, including strengthening cross-sector collaboration with the Social Services Agency, Health Services, the National Narcotics Agency (BNNK), and law enforcement officials. The government should also provide funding or facilitate operational budgets to improve service quality, including upgrading facilities and hiring qualified medical personnel and professional counselors. In addition, it is important to increase the capacity and training of the foundation, ensuring rehabilitation methods remain effective and meet national standards. Public outreach and education are also critical to reducing societal stigma against drug abuse victims and encouraging active participation from families and communities in the recovery process. Finally, empowering clients after rehabilitation through job training programs, employment opportunities, or support for productive businesses ensures sustainable reintegration into society.

Based on the previous discussion, when linking to legal system theory, Lawrence M. Friedman's perspective on legal systems provides a useful framework. According to Friedman, the success of a legal system can be assessed through three components. The first component, legal structure, refers to the law enforcement officials or legal apparatus whose primary functions include lawmaking, fostering and disseminating legal culture, enforcing the law, and administering the legal system efficiently and effectively, all of which are carried out by responsible government authorities [20]. The institution involved is the Cipta Wening Foundation. Legal substance is the resulting regulation, encompassing all types of legal rules, both written and unwritten. The regulation on Cipta Wening rehabilitation is Article 54 of Law Number 35 of 2009. Legal culture is the social thought and social influence that determines how the law is applied, ignored, or even abused. The programs implemented by the Cipta Wening Kuningan Foundation are divided into 3: Spiritual, Mental, and Social development.

Based on these three elements, the author believes that the weakest aspect among legal structure, legal substance, and legal culture is the legal structure. The facilities and infrastructure at the Cipta Wening Kuningan Foundation do not meet nationally established standards for rehabilitation services, in terms of quality and quantity. In addition, there is a shortage of professional staff, including counselors, psychologists, medical personnel, and social workers. Budget constraints and limited government support affect the quality of services and the well-being of staff, potentially disrupting the continuity of effective and humane rehabilitation programs. Moreover, the Kuningan Regency Government's weak involvement in supporting rehabilitation implementation serves as an indicator of a dysfunctional legal structure. In reality, regional governments, as local stakeholders, should play a strategic role in supporting policies, providing budgets, and overseeing the implementation of social rehabilitation. The lack of strong synergy between regional governments and rehabilitation institutions indicates that the legal structure is not well-functioning. They cannot establish a legal system that is functional, just, and rooted in humanitarian values.

4 Conclusion

The rehabilitation of narcotics abuse in Indonesia is regulated through a combination of national laws, ministerial regulations, police regulations, and local policies. Article 54 of Law Number 35 of 2009 provides the legal basis, while the Minister of Social Affairs Regulation Number 9 of 2017 sets national standards for social rehabilitation. Police Regulation Number 1 of 2014 and National Narcotics Agency Regulation Number 11 of 2014 outline procedures for handling addicts and victims in rehabilitation institutions, complemented by Regulation Number 6 of 2022 on sustainable rehabilitation. At the local level, Kuningan Regency Regulation Number 2

of 2018 addresses prevention and control of narcotics abuse, and the Minister of Health Decree Number 2415/MENKES/PERS/XII/2011 guides medical rehabilitation. Together, these regulations form a comprehensive framework for implementing and standardizing rehabilitation services in Indonesia. In this context, laws and regulations consistently support the implementation of rehabilitation for drug abuse. In 2025, the Cipta Wening Kuningan Foundation rehabilitated nine convicts, demonstrating a holistic and humanistic approach to recovery. The program addresses not only medical needs but also mental, spiritual, and social development. However, its implementation faces several challenges, including limited facilities that do not fully meet national SOP standards, a shortage of professional staff, financial constraints, low parental support, and social and environmental factors.

5 Recommendation

The government and law enforcement must strengthen their commitment to using rehabilitation as an alternative punishment for drug abusers, conducting assessments objectively and professionally. Effective coordination among the judiciary, BNN, the Ministry of Health, rehabilitation institutions, and the community is essential for a smooth and sustainable recovery process. In addition, to improve rehabilitation at the Cipta Wening Kuningan Foundation, the Kuningan Regency Government should enhance facilities, train professionals, allocate sufficient funding, and educate participants' families to prevent premature intervention.

Authors' Contributions. ALL AUTHORS CONTRIBUTED

References

1. T. A. Riyanto, "Fungsionalisasi Prinsip Dominus Litis dalam Penegakan Hukum Pidana di Indonesia," *J. Lex Renaiss.*, vol. 6, no. 3, pp. 481–492, 2021, doi: 10.20885/jlr.vol6.iss3.art4.
2. N. Muhamad, "Ada 264 Ribu Tersangka Narkoba di Indonesia 5 Tahun Terakhir," 2024. [Online]. Available: <https://databoks.katadata.co.id/demografi/statistik/6734674123077/ada-264-ribu-terseangka-narkoba-di-indonesia-5-tahun-terakhir>
3. R. P. Jati, "Kasus Narkoba di Indonesia Meningkat, Jakarta Paling Rawan," 2024. [Online]. Available: <https://www.kompas.id/artikel/kasus-narkoba-di-indonesia-meningkat-jakarta-paling-rawan>
4. L. N. V. Sari, M. Misran, and N. Fitria, "Pembinaan Terhadap Anak Pelaku Penyalahgunaan Narkotika di Lembaga Pembinaan Khusus Anak (LPKA) Kelas II Banda Aceh," *JARIMA J. Ilm. Mhs. Huk. Pidana Islam*, vol. 1, no. 1, pp. 65–78, 2025.
5. A. M. R. S. Hikmat, "Efektivitas Pelaksanaan Rehabilitasi Terhadap Pelaku Tindak Pidana Penyalahgunaan Narkotika," *J. Pemuliaan Huk.*, vol. 3, no. 2, pp. 39–64, 2021, doi: 10.30999/jph.v3i2.1439.

6. H. Wirayuda, A. A. Dewi, and M. M. Widyantara, "Upaya Rehabilitasi bagi Penyalahguna Narkotika oleh BNNK Gianyar," *J. Konstr. Huk.*, vol. 3, no. 2, pp. 252–258, 2022, [Online]. Available: <https://www.ejournal.warmadewa.ac.id/index.php/jukonhum>
7. M. T. Siahaan and S. Sonia, "Juridical Analysis of Narcotics Crime Case Handling At The Putussibau District Court," *J. Integr. Law Stud.*, vol. 1, no. 1, pp. 1–12, 2025.
8. I. B. G. B. Mahaputra, "Upaya Penanggulangan Tindak Pidana Penyalahgunaan Narkotika," *J. Analog. Huk.*, vol. 4, no. 3, pp. 311–315, 2022.
9. C. N. Sitompul, M. Ekaputra, W. Trisna, and Z. Zaidar, "Penerapan Rehabilitasi terhadap Penyalahguna Narkotika dalam Upaya Mengurangi Over Kapasitas di Lembaga Pemasyarakatan Kelas I Medan," *J. Huk. Bisnis*, vol. 13, no. 02, pp. 1–8, 2024, doi: 10.47709/jhb.v13i02.3690.
10. H. Arianto, "Upaya Mengurangi Overload Penghuni Lembaga Rehabilitasi Bagi Penyalahguna Narkotika," *Forum Ilm. Indonusa*, vol. 20, no. 1, pp. 41–45, 2023.
11. D. M. Landung, "Kewenangan Presiden Dalam Pemberian Grasi Berdasarkan Sistem Ketatanegaraan Indonesia," *Lex Adm.*, vol. 8, no. 4, pp. 36–44, 2020.
12. N. K. Putri, A. Salam, A. Ramadhan, M. Mulitalia, and M. Anasti, "Pengaruh Teori Rehabilitasi Terhadap Kebijakan Pemidanaan Di Indonesia: Tinjauan Pustaka," *JIMMI J. Ilm. Mhs. Multidisiplin*, vol. 1, no. 2, pp. 210–224, 2022.
13. Y. Yuli W and A. Winanti, "Upaya Rehabilitasi Terhadap Pecandu Narkotika Dalam Perspektif Hukum Pidana," *ADIL J. Huk.*, vol. 10, no. 1, pp. 136–149, 2019, doi: 10.33476/ajl.v10i1.1069.
14. M. Fajar, "Penerapan Rehabilitasi Medis dan Rehabilitasi Sosial atas Penyalahgunaan Narkotika Bagi Diri Sendiri," *J. Sos. dan Teknol.*, vol. 2, no. 5, pp. 406–416, 2022.
15. R. Widiastuti, S. Zein, and S. Sudarto, "Analisis Yuridis Hambatan Penyidikan Tindak Pidana Penyalahgunaan Narkotika Berdasarkan Undang-Undang Nomor 35 Tahun 2009 Tentang Narkotika," *Iblam Law Rev.*, vol. 4, no. 3, pp. 126–136, 2024, doi: 10.52249/ilr.v4i3.501.
16. M. F. Parape, M. Muhadar, and M. Musakkir, "Implementasi Pelaksanaan Rehabilitasi Narapidana Narkotika di Lembaga Pemasyarakatan Khusus Narkotika Kelas II A Sungguminasa," *Petitum*, vol. 9, no. 2, pp. 113–126, 2021, [Online]. Available: <https://uit.e-journal.id/JPetitum/article/view/1112>
17. S. Sutarto, "Penerapan Rehabilitasi Medis Dan Rehabilitasi Sosial Terhadap Korban Penyalahgunaan Narkotika Ditinjau Dari Teori Pemidanaan Relatif," *J. Penegakan Huk. Indones.*, vol. 2, no. 1, pp. 115–135, 2021, doi: 10.51749/jphi.v2i1.18.
18. D. Ma'dika, B. Madiong, and W. Santing, "Efektivitas Pelaksanaan Rehabilitasi Dalam Penanganan Tersangka Penyalahgunaan Narkotika," *Indones. J. Leg. Law*, vol. 7, no. 1, pp. 17–25, 2024, doi: 10.35965/ijlf.v7i1.4611.
19. A. A. Pratama, "Kewajiban Rehabilitasi bagi Pecandu Narkotika berdasarkan Putusan Hakim," *J. Hukum, Polit. Dan Ilmu Sos.*, vol. 1, no. 1, pp. 13–28, 2023, doi: 10.55606/jhps.v1i1.1705.
20. C. Fata, Z. Mahmudi, M. Toriquddin, and A. Rouf, "Efektifitas Peraturan Dirjen Bimas Islam Nomor 189 Tahun 2021 Tentang Pelaksanaan Bimbingan Calon Pengantin Perspektif Teori Sistem Hukum Lawrence M. Friedman (Studi Di Kantor Urusan Agama Blimbing Kota Malang)," *Kabilah J. Soc. Community*, vol. 7, no. 1, p. 37, 2022.

Open Access This chapter is licensed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits any noncommercial use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this chapter are included in the chapter's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the chapter's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.

