

## MANDATORY REPORTING PROCEDURES FOR NARCOTICS ADDICTS ACCORDING TO GOVERNMENT REGULATION NUMBER 25 OF 2011 CONCERNING THE IMPLEMENTATION OF MANDATORY REPORTING OF NARCOTICS ADDICTS

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### ABSTRACT

Mandatory reporting of drug addicts as an effort to fulfill the rights of drug addicts to receive treatment or care through medical rehabilitation and social rehabilitation. Obligations of drug addicts who are undergoing treatment or care in hospitals and other health care facilities, and medical rehabilitation institutions are required to undergo medical rehabilitation or social rehabilitation in accordance with the rehabilitation plan. The conclusion is that the role of the Mandatory Reporting Receiving Institution (IPWL) in carrying out its obligations in receiving reports of drug addicts based on Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting of Drug Addicts is to receive reports of drug addicts as mandatory reporting to provide care and treatment services for drug abusers by following therapy programs and drug addicts directly receive rehabilitation services facilitated by the government.

### 1. Introduction

Narcotics are highly beneficial substances or drugs necessary for the treatment of certain diseases. However, if misused or used inappropriately, they can have devastating consequences for individuals and society, especially the younger generation. This is even more detrimental if accompanied by drug abuse and illicit trafficking, which can pose a greater threat to the nation's life and cultural values, ultimately weakening national resilience.

Drug abuse encourages illicit trafficking, while illicit trafficking leads to widespread abuse and international dimensions. Therefore, efforts to prevent and address drug abuse and eradicate illicit trafficking are necessary, given the advancements in communication, information, and transportation in the current era of globalization.



Drug abuse usually begins with first use in elementary or junior high school, due to offers, persuasion, and peer pressure. Driven by curiosity or a desire to try, they readily accept. Subsequent offers are easily accepted. From a single use, then multiple uses, a dependency on the substance is eventually developed.

The development of narcotics crime has become a very serious threat to human life. Although narcotics are highly beneficial and necessary for medical treatment and healthcare, if misused or used in a manner inconsistent with medical standards, especially when combined with illicit drug trafficking, they can have extremely detrimental consequences for individuals and society, particularly the younger generation. They can even pose a greater danger to the nation's life and cultural values.

Narcotics abuse and crime have reached a dangerous level, as they not only cause physical and mental damage but also affect social life, which in turn can disrupt the foundations of national security and the framework of national development towards a just and prosperous society, as envisioned in the state's goals as stated in the Preamble to the 1945 Constitution of the Republic of Indonesia (hereinafter referred to as the 1945 Constitution), paragraph four.

Narcotics can hinder national development, both materially and spiritually, and therefore must be prevented. Prevention is better than cure or treatment. Prevention is crucial, even paramount. It's perfectly reasonable to immediately seek a rational solution to the drug trafficking problem, as drug crime is clearly a social problem that can disrupt the social functioning of society.

In practice, in several cases of drug addict arrests, those convicted were found not to have been involved in drug trafficking; in other words, they were simply users. In such cases, after a court verdict is issued, these users can be referred for rehabilitation, both medically and socially.

## 2. Research Method

The type of research conducted in this thesis utilizes a normative legal research method (normative juridical) supported by empirical juridical research. The use of this normative legal research method is due to the fact that this research is conducted solely through library materials or secondary data.

The data collection technique in this study utilizes a library research method. Data were obtained from various sources, including scientific journals, laws and regulations, and other documentation such as magazines, the internet, and other theoretical sources related to mandatory reporting procedures for drug addicts.

The collected data will be thoroughly analyzed using qualitative analysis or described in sentences. Qualitative analysis is based on the paradigm of the



dynamic relationship between theories, concepts, and data, which constitutes feedback or constant modification of theories and concepts based on the collected data.

### 3. Results And Discussion

#### Results

The mandatory reporting requirement for drug abusers and drug addicts was further strengthened by the issuance of Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts. This Government Regulation explains that mandatory reporting is the activity of self-reporting by drug addicts of legal age, their families, and/or parents or guardians of drug addicts who are minors, to institutions designated for mandatory reporting to receive treatment and/or care through medical and social rehabilitation.

Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts further clarifies that mandatory reporting institutions are community health centers, hospitals, and/or medical and social rehabilitation institutions designated by the Government. Mandatory reporting can be carried out by parents or guardians of underage drug addicts and adult drug addicts or their families.

This obligation to undergo medical rehabilitation or social rehabilitation also applies to drug addicts who are still in the judicial process, even if they have not yet been sentenced, as stipulated in Article 13 of Government Regulation No. 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts. The obligation to undergo medical rehabilitation and/or social rehabilitation also applies to drug addicts who are ordered to do so.

Placement in a medical rehabilitation and/or social rehabilitation institution, as described above, is the authority of the investigator, public prosecutor, or judge, according to the level of examination, after receiving a recommendation from a team of doctors. The provisions for placement in a medical rehabilitation and/or social rehabilitation institution also apply to victims of drug abuse.

The provisions stipulated in Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts actually empower law enforcement officials to properly investigate whether someone is a pure abuser or a true addict. If an addict is, they must immediately undergo rehabilitation for treatment.

In response to Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts, the National



Narcotics Agency issued Regulation No. 2 of 2011, the Head of the National Narcotics Agency of the Republic of Indonesia, concerning Procedures for Handling Suspected or Defendant Narcotics Abusers, Victims of Abuse, and Narcotics Addicts. In its considerations, it states that narcotics abusers, victims of abuse, and addicts who are named as suspects or defendants in narcotics and narcotic precursor criminal cases during the judicial process require special treatment through placement in medical and/or social rehabilitation institutions to receive treatment and care for their recovery.

The medical assessment and review includes several activities, including interviews, medical history, drug use history, medication and treatment history, criminal history, psychiatric history, family and social history of the suspect or defendant, observations of the suspect or defendant's behavior, and physical and psychological examinations.

The next step is a narcotics and drug precursor review. This review involves matching the suspect's identity, such as photographs, fingerprints, physical characteristics, and names/aliases, with narcotics network data stored in the database of the Deputy for Eradication of the National Narcotics Agency (BNN), analyzing related intelligence data, and reviewing other relevant minutes of the suspect or defendant's examination.

The final study conducted is a Legal Review, which includes a review of the assessment results, medical studies, and studies of narcotics and precursor networks, an examination of the application of the articles of the Narcotics Law and the provisions of Supreme Court Circular Letter No. 4 of 2010, and the preparation of a legal opinion.

The Team may request information from the suspect or defendant and other relevant parties during the assessment and study. The results of the medical assessment and study, the results of the narcotics and precursor network study, and the results of the legal study are submitted to the Team Leader. The Team Leader then holds a decision-making meeting no later than three days from the date of receipt of the assessment and study results. The Assessment and Study Team shall carry out its duties within a maximum of fifteen working days.

Suspects or defendants suspected of being drug dealers or drug precursors, and suspects or defendants proven to possess narcotics in excess of a certain amount and tested positive for drug use based on an assessment, shall remain detained at the National Narcotics Agency (BNN) detention center while still receiving medical and social treatment and care for recovery.

Article 55 of the Narcotics Law stipulates that drug addicts are required to self-report to community health centers, hospitals, and/or medical and social rehabilitation institutions designated by the Government to receive treatment





and/or care through medical and social rehabilitation. More detailed implementation of mandatory self-reporting for drug addicts is outlined in Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Drug Addicts.

#### 4. Discussion

Through the mandatory reporting program, addicts are expected to receive medical assistance, psychosocial intervention, and the information necessary to minimize their risks and obtain referrals for further treatment appropriate to their condition and needs. The mandatory reporting program is expected to make a significant contribution to mitigating the negative impacts often experienced by drug addicts.

The procedures for implementing mandatory reporting for drug addicts include several essential aspects of the mandatory reporting process, namely the determination of institutions receiving mandatory reporting, the determination of mandatory reporting teams, mandatory reporting service hours, mandatory reporting service components and procedures, rates, amounts, mechanisms, payment, and utilization of claim funds, and the issuance of self-report cards.

The primary purpose of mandatory reporting is to fulfill an individual's right to receive treatment and care through medical or social rehabilitation. Therefore, services at mandatory reporting institutions are intended not only for drug addicts but also for addicts, abusers, and victims of abuse of narcotics, psychotropic substances, and other addictive substances (Napza).

To detect drug abuse, in addition to conducting drug tests, drug addicts, both adults and minors, are encouraged to immediately report their addiction to undergo rehabilitation therapy at rehabilitation centers. This self-reporting process is called mandatory reporting. This mandatory reporting is regulated by Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts.

Mandatory reporting is the self-reporting of adult drug addicts, their families, and/or parents or guardians of minor drug addicts to mandatory reporting institutions to receive treatment and/or care through medical and social rehabilitation.

Article 54 of the Narcotics Law states that drug addicts and victims of drug abuse are required to undergo medical and social rehabilitation. Drug abusers (if adults) or their parents (if minors) must immediately complete this mandatory reporting so that they can undergo medical and social rehabilitation. The





surrounding community must initiate this mandatory reporting activity to quickly achieve a drug-free environment.

The Mandatory Reporting Regulation for Drug Addicts aims to fulfill the rights of drug addicts to receive treatment and/or care through medical and social rehabilitation; to involve parents, guardians, families, and the community in increasing responsibility for drug addicts under their supervision and guidance; and to provide information for the government in establishing policies to prevent and eradicate drug abuse and illicit trafficking.

Mandatory reporting is carried out by reporting drug addicts to the Mandatory Reporting Receiving Institution. Reports are submitted to institutions other than the Mandatory Reporting Receiving Institution; the officer receiving the report forwards it to the Mandatory Reporting Receiving Institution. Addicts who have complied with the mandatory reporting are required to undergo medical and/or social rehabilitation in accordance with their rehabilitation plan. Medical rehabilitation can be implemented through outpatient or inpatient care, according to the rehabilitation plan, taking into account the assessment results. Social rehabilitation can be implemented both inside and outside of social rehabilitation institutions in accordance with a rehabilitation plan, taking into account the assessment results.

Drug addicts who have completed rehabilitation are provided with guidance and supervision, involving community participation. This guidance and supervision are implemented by the Ministry responsible for social affairs and the National Narcotics Agency.

Drug addicts who have reported themselves to an Institution Receiving Mandatory Reports and have undergone an assessment will be issued a self-report card. After completing the mandatory report, a rehabilitation plan is developed, agreed upon by the drug addict, their parents, guardians, or family members, and the management of the Institution Receiving Mandatory Reports.

Drug addicts who have completed their mandatory reporting are then required to undergo medical or social rehabilitation according to the established rehabilitation plan. Healthcare facilities serving as Mandatory Reporting Receiving Institutions (IPWL) in Indonesia are still limited and do not yet reach or reach hidden groups.

Indriana, Counselor for the Rehabilitation Institution Strengthening Section of the North Sumatra National Narcotics Agency (BNNP), stated that currently, healthcare services for drug addicts are still minimal and limited. Therefore, a cross-sectoral meeting with relevant agencies aims to expand and expand the number of IPWLs available. With IPWLs, drug addicts and abusers can be treated quickly, enabling them to recover and stop using drugs that are harmful





to their health. By exchanging views with agencies involved in the care and treatment of drug abusers, IPWL services will be expanded.

The limited health facilities give the impression that programs to reduce drug abuse will be somewhat hampered and will only reach those who self-report. Addicts who self-report are generally those who have participated in methadone therapy (PTRM) programs, meaning they have not yet reached the hidden group. Therefore, going forward, programs that can support the mandatory reporting program through the Out Reach Center (ORC) and One Stop Center (OSC) service systems are needed to reach hidden groups. It is hoped that these two programs to support the mandatory reporting program will be successful and will not only reach the general public but also hidden groups.

## 5. Conclusion

The mandatory reporting procedure for drug addicts, based on Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts, is an activity carried out by drug addicts who are of legal age or their families, or parents or guardians of drug addicts who are under legal age, to an institution that accepts mandatory reporting to receive treatment or care through medical rehabilitation and social rehabilitation.

The provisions of criminal sanctions for drug addicts who fail to comply with mandatory reporting according to Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting for Narcotics Addicts may be subject to criminal sanctions as stipulated in Article 131 of the Narcotics Law. Anyone who knowingly knows but fails to report a drug abuser is subject to a maximum prison sentence of 1 (one) year or a maximum fine of Rp. 50,000,000.00 (fifty million rupiah).

The role of the Mandatory Reporting Receiving Institution (IPWL) in carrying out its obligations in receiving reports of narcotics addicts based on Government Regulation Number 25 of 2011 concerning the Implementation of Mandatory Reporting of Narcotics Addicts is to receive reports of narcotics addicts as mandatory reports to provide care and treatment services for narcotics abusers by participating in therapy programs and narcotics addicts directly receive rehabilitation services facilitated by the government.

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