

Communication And Health In Drug Addict Rehabilitation: Criminal Instruments To Health Law Services

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Abstract

Drug abuse in Indonesia should no longer be viewed solely as a criminal issue, but also as a health, social, psychological and humanitarian problem requiring comprehensive treatment. This community service activity aimed to improve public understanding regarding rehabilitation as a health-based approach for drug addicts and to strengthen awareness of restorative justice and social reintegration. The activity was conducted at Wisma Bhisma YAKITA, Ciawi Bogor, on May 23, 2026, involving drug addicts undergoing rehabilitation, former addicts in recovery, families, healthcare workers, counsellors, academics, students, and community members. The program applied a participatory educational method integrating health communication and health law approaches. The materials included rehabilitation law, restorative justice, therapeutic communication, community-based recovery, aftercare, and the 12 Steps Recovery Program. The implementation methods consisted of interactive lectures, group discussions, motivational counselling, psychosocial approaches, experience sharing, and case-based presentations. The results showed that participants initially viewed rehabilitation mainly as an alternative punishment rather than a comprehensive recovery process. After the program, participants demonstrated improved understanding regarding addiction as a chronic health condition requiring long-term recovery, empathetic communication, family support, and sustainable aftercare. The activity also highlighted the importance of multidisciplinary collaboration among families, healthcare workers, rehabilitation institutions, communities, and law enforcement agencies in creating a humane and justice-oriented rehabilitation system.

Keywords: *drug rehabilitation, health communication, restorative justice, health law, aftercare and recovery.*

I. INTRODUCTION

The issue of drug abuse in Indonesia can no longer be viewed solely as a matter of legal violation, but also as a health, social, psychological, and humanitarian issue that requires integrated treatment. For many years, criminal law approaches have predominantly been used in handling drug addicts through arrest, prosecution, and imprisonment. This condition has caused drug addicts to be positioned as criminals, even though in reality they are individuals who need protection, assistance, and recovery. Repressive approaches alone have not been effective in significantly reducing drug abuse rates and have instead generated new problems, including prison overcrowding, social stigma against former drug addicts, low rehabilitation success rates, and increased risks of relapse and recidivism (Joyce S.H. Djaelani Gordon, 2026).

In the development of modern legal policies, drug addicts are increasingly regarded as victims of substance abuse who require continuous medical and social rehabilitation. The paradigm shift from a punitive approach toward a rehabilitative and health-oriented approach has become essential in creating a more humane, restorative, and justice-based legal system. This approach is in line with Law Number 35 of 2009 concerning Narcotics, particularly Article 54, which emphasizes that drug addicts and victims of narcotics abuse are required to undergo medical and social rehabilitation. Article 103 further authorizes judges to order rehabilitation for narcotics offenders as part of the law enforcement process.

These provisions indicate that the state has begun prioritizing health recovery rather than punishment alone. In addition to legal aspects, health communication also plays a crucial role in the rehabilitation process of drug addicts. Empathetic, educational, supportive, and therapeutic communication can help addicts build motivation to recover, improve self-confidence, restore relationships with family and society, and support post-rehabilitation social reintegration. Recovery from drug addiction is not only oriented toward stopping substance use, but also toward restoring physical, mental, emotional, social, and spiritual

well-being. Therefore, the success of rehabilitation is strongly influenced by healthy and collaborative communication among addicts, families, healthcare workers, rehabilitation counsellors, law enforcement officers, and society. Based on these conditions, Sahid University Jakarta in collaboration with Yayasan Harapan Permata Hati Kita (YAKITA) organized a Community Service Program on May 23, 2026, at Wisma Bhisma YAKITA, Ciawi, Bogor. This activity was conducted as a form of public education regarding the importance of health-based approaches in drug rehabilitation. Furthermore, the program aimed to increase public understanding of restorative justice concepts, reduce social stigma toward drug addicts, and encourage collaborative social support systems in the sustainable recovery and social reintegration process of drug addicts (Sahid University Jakarta and Yayasan Harapan Permata Hati Kita/YAKITA, 2026).

Problems

1. Drug addicts are still frequently perceived as criminals, causing rehabilitation not to become the primary approach in the recovery process.
2. Drug rehabilitation continues to face obstacles due to low public understanding, social stigma, weak health communication, and insufficient post-rehabilitation support and assistance, which increase the risk of relapse.

II. MATERIALS AND METHODS

This Community Service Program employed a participatory educational method using health communication and health law approaches. This method was selected because the issue of drug abuse is not only related to legal violations, but also involves health, psychological, social, and recovery aspects of drug addicts as a whole. Through the participatory approach, participants were not only passive recipients of information, but were also actively involved in discussions, reflections, question-and-answer sessions, and experience sharing, creating more open and communicative interactions. This approach aimed to build understanding, increase awareness, and reduce stigma toward drug addicts as individuals who require recovery and social support.

The program materials were designed comprehensively by integrating legal, health, communication, psychological, and social perspectives. The first topic discussed the legal paradigm of drug rehabilitation, namely the transition from a punitive system toward a recovery-oriented system. Participants were provided with an understanding of the legal foundations of rehabilitation based on Law Number 35 of 2009 concerning Narcotics, particularly Articles 54 and 103, which emphasize that drug addicts are required to undergo medical and social rehabilitation. The material aimed to strengthen participants' understanding that rehabilitation constitutes a form of legal protection and healthcare service for drug addicts. Furthermore, the activity discussed health-oriented rehabilitation approaches emphasizing sustainable physical, mental, emotional, social, and spiritual recovery. In this context, therapeutic and empathetic communication became essential topics because the recovery process is strongly influenced by communication patterns among addicts, families, counsellors, healthcare workers, and the surrounding social environment. Judgmental communication may reinforce stigma and feelings of inferiority, whereas supportive and empathetic communication can increase motivation for rehabilitation and long-term recovery. Another important topic presented was the concept of restorative justice in handling drug addiction cases. This approach emphasizes that drug-related problems should not be resolved solely through punishment, but also through individual recovery, restoration of social relationships, and reintegration into society. The activity also highlighted the significant role of families and communities as primary support systems in rehabilitation processes. Family support was considered crucial in fostering emotional stability, self-confidence, and acceptance among former drug addicts.

Participants were also introduced to community-based recovery and aftercare programs as integral parts of long-term rehabilitation. Rehabilitation does not end when an addict leaves a rehabilitation institution; rather, it must continue through post-rehabilitation assistance, support groups, counselling, and social development programs to minimize the risk of relapse. In addition, the 12 Steps Recovery Program was introduced as a community-based recovery model emphasizing honesty, personal responsibility, peer support, spiritual recovery, and sustainable behavioural change. The implementation of the program involved

several methods, including interactive lectures, group discussions, recovery experience sharing, motivational counselling, psychosocial approaches, participatory question-and-answer sessions, and visual education through presentations and case studies. Interactive lectures were used to provide basic knowledge regarding drug rehabilitation, while group discussions and sharing sessions were intended to encourage open communication and active participant engagement. Psychosocial approaches and motivational counselling were applied to help participants understand the importance of emotional support and motivation in the recovery process of drug addicts. Overall, this activity adopted a multidisciplinary approach integrating legal, health, psychological, communication and social perspectives. Legal perspectives were used to explain rehabilitation policies and legal protection, health perspectives were applied to understand rehabilitation as a recovery process, psychological perspectives were used to analyse mental conditions and relapse risks, while communication and social perspectives were employed to develop empathetic interactions and strengthen social support in the reintegration process of drug addicts into society.

III. DISCUSSION

The results of the activity showed that most participants initially understood rehabilitation merely as an “alternative punishment” within the criminal justice system. This perception indicates that the public understanding of drug addiction is still strongly influenced by a punitive paradigm, in which drug addicts are often seen primarily as lawbreakers rather than individuals experiencing health, psychological, and social problems. Through the educational program, participants began to recognize that addiction is a chronic and complex condition that cannot be resolved only through punishment. Addiction requires long-term recovery, continuous assistance, and multidimensional support involving families, healthcare workers, rehabilitation institutions, communities, and law enforcement agencies. The discussion also revealed that rehabilitation should be understood as a comprehensive health recovery process. It is not limited to stopping drug use, but also includes restoring physical health, mental stability, emotional balance, social functioning, and spiritual awareness. This understanding is important because many addicts experience not only substance dependence, but also social isolation, family conflict, loss of self-confidence, psychological distress, and difficulty returning to society. Therefore, rehabilitation must be designed as a holistic process that helps individuals rebuild their lives, develop healthier coping mechanisms, and regain their role as productive members of society.

Another important finding of the activity was the central role of health communication in supporting rehabilitation success. Participants learned that the way families, counsellors, healthcare workers, and communities communicate with addicts can directly influence their motivation and recovery process. Judgmental, blaming, or stigmatizing communication may create shame, fear, resistance, and loss of confidence among addicts. Such communication can also increase the risk of relapse because addicts may feel rejected and unsupported. In contrast, empathetic, supportive, educational, and therapeutic communication can create a sense of acceptance, build trust, strengthen motivation, and encourage addicts to remain committed to the recovery process. The activity further emphasized that communication in rehabilitation should not only transmit information, but also create emotional safety and social support. Effective health communication requires active listening, respect, non-judgmental attitudes, simple explanations, and encouragement. Families and rehabilitation counsellors need to communicate in ways that help addicts understand their condition, accept responsibility, and develop hope for recovery. In this context, communication becomes a therapeutic instrument because it supports behavioral change, emotional healing, and social reintegration. Participants also gained a deeper understanding that rehabilitation does not end when an individual completes treatment in a rehabilitation centre. Recovery is a long-term process that must be continued through aftercare programs, support groups, counselling, family involvement, community assistance, and social reintegration. Without adequate aftercare, former addicts may return to high-risk environments, experience emotional pressure, or lose access to supportive networks. These conditions can increase the possibility of relapse. Therefore, aftercare is an essential part of rehabilitation because it helps former addicts maintain sobriety, strengthen coping skills, rebuild social relationships, and adapt to everyday life after treatment.

Family and community support were also identified as decisive factors in long-term recovery. Families play an important role in providing emotional support, supervision, encouragement, and acceptance. However, families also need proper education so that they do not use blaming or punitive communication patterns. Communities also have an important role in reducing stigma and creating inclusive spaces for former addicts. Social rejection may prevent former addicts from returning to school, work, family life, and community participation. Therefore, the success of rehabilitation depends not only on the individual addict, but also on the readiness of the family and society to support reintegration. The restorative justice approach became another important point in the discussion. Participants understood that drug addiction cases should not always be handled through punitive mechanisms because imprisonment does not necessarily address the root causes of addiction. Restorative justice offers a more humane approach by emphasizing recovery, accountability, restoration of social relationships, and community involvement. In this framework, drug addicts are encouraged to take responsibility for their actions while also being given opportunities to recover and return to society. This approach is more consistent with the principles of health law, human dignity, and social justice.

The 12 Steps Recovery Program was also introduced as a community-based recovery model that supports long-term healing. This program emphasizes honesty, self-reflection, personal responsibility, spiritual growth, peer support, and continuous behavioural change. Participants viewed this model as relevant because addiction recovery often requires support from people who have similar experiences. Peer support can reduce feelings of loneliness, strengthen motivation, and provide practical examples of successful recovery. Therefore, community-based recovery programs can complement formal rehabilitation services by providing continuous social and emotional support. Overall, the discussion showed that effective rehabilitation requires a paradigm shift from punishment to recovery. Drug addicts should not be treated solely as criminals, but as individuals who need structured assistance, health services, legal protection, family support, and community acceptance. The activity demonstrated that health communication, restorative justice, aftercare, and community-based recovery are interconnected elements in building a humane and sustainable rehabilitation system. This integrated approach is expected to reduce stigma, prevent relapse, and support the social reintegration of former drug addicts into society.

IV. CONCLUSION

Drug abuse problems should be viewed as issues of health and humanity rather than merely criminal matters. Rehabilitation approaches based on health law are considered more effective than punitive approaches because they encourage the physical, mental, emotional, social, and spiritual recovery of drug addicts. Health communication also plays an important role in supporting rehabilitation success through empathetic, educational, supportive, and therapeutic approaches. Support from families, communities, rehabilitation institutions, healthcare workers, and law enforcement agencies constitutes a major factor in creating a humane and justice-oriented rehabilitation system. This Community Service Program demonstrated that the recovery of drug addicts requires multidisciplinary collaboration, sustainable aftercare programs, community-based support, and a paradigm shift from punishment-oriented approaches toward recovery and social reintegration.



Fig. 1. Health Law Presentation on Drug Addicts and Communication Models in Drug Addiction Recovery Activities at YAKITA Rehabilitation Center, Ciawi Bogor. The session discussed the

transformation of approaches toward drug addicts from punitive criminal perspectives to health-based rehabilitation services, including therapeutic communication, restorative justice, aftercare, and community-based recovery models. Participants actively engaged in interactive discussions regarding the importance of empathetic communication, family support, and social reintegration in supporting sustainable recovery processes for drug addicts



Fig. 2. YAKITA Drug Addiction Recovery Community, Families, and 12 Steps Therapy Instructors Participating in Drug Addiction Recovery Activities. The activity emphasized the importance of family involvement, peer support, and community-based therapeutic approaches in supporting sustainable recovery and social reintegration for former drug addicts.

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