

POLICY IMPLEMENTATION OF SOCIAL REHABILITATION PROGRAM IN NARCOTICS CORRECTIONAL INSTITUTION CLASS IIA BANDAR LAMPUNG



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ABSTRACT

The purpose of this study was to describe how the implementation of the social rehabilitation program at the Class IIA Narcotics Correctional Institution Bandar Lampung. This research uses descriptive qualitative research methods with data collection techniques in the form of observation, interviews, and documentation studies. The results of this study are that the social rehabilitation program at the Class IIA Bandar Lampung Narcotics Penitentiary is running well, but there are still shortcomings in resource factors such as incomplete facilities and infrastructure and inappropriate officer competence. The limitation of this research is the lack of research time to fully examine social rehabilitation activities. Researchers suggest coordinating with the prison before conducting research so that the research subject is confirmed for further research.

Keywords: Social Rehabilitation Program; Correctional Officer; Counselor



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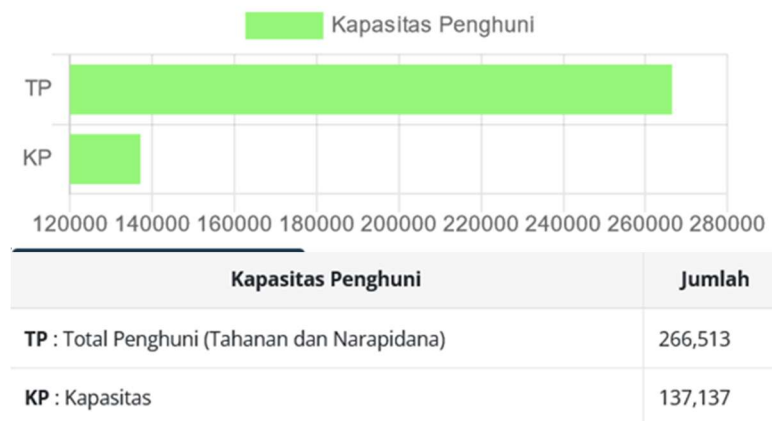
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INTRODUCTION

The background of the research is that prisons and detention centers, especially in Indonesia, are facing limitations. The factor is none other than the limited cell room facilities. On the other hand, the number of crimes is increasing, which results in an increase in the number of prisoners and detainees. As a result, prison facilities experience overcapacity. When the number of prisoners in a prison exceeds the existing capacity, this becomes a serious problem as it can thwart their development efforts. This is particularly important as the development of prisoners is the main instrument for achieving the goal of social rehabilitation and the objectives of criminal justice. Overcapacity in prisons results in adverse effects of imprisonment, such as intimidation of fellow inmates, acts of theft, inhumane treatment of the “new kid on the block”, and other harmful practices. Maxsasai Indra states that prison overcapacity can result in violations of the legitimacy that prisoners should have earned and threaten them. In accordance with the opinion of Riyan Firmansyah et al, an important element that affects the provision of health and food services for prisoners in prisons is overcapacity in the prison itself (Usman et al., 2020).

However, over time the number of criminal offenders has increased, while the growth in the number of prisons is not directly proportional to the increase in the number of prisoners, which has resulted in overcrowding. Prisons and detention centers, especially in Indonesia, are facing limitations. The factor is none other than the limited cell room facilities. On the other hand, the number of crimes is increasing, resulting in an increase in the number of prisoners and detainees. As a result, prison facilities are experiencing overcapacity. Data on the overcapacity of prisons and detention centers is presented in Figure 1.



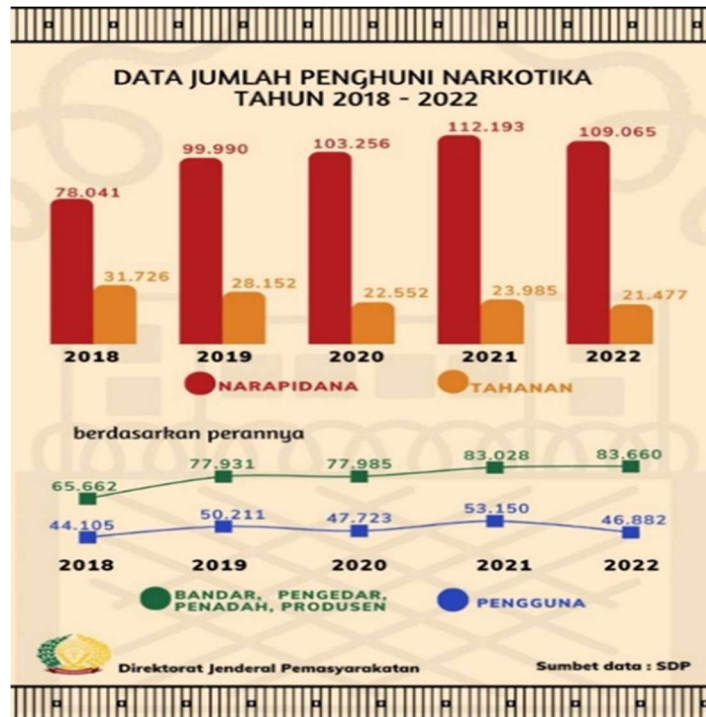
Source : smslap.ditjenpas.go.id, 2024

Figure 1
Comparison of Total Occupants to Occupant Capacity

Data released by the Ministry of Law and Human Rights in 2023 illustrates a total of 526 prisons and detention centers available in 2024, unfortunately there are 113 prisons and detention centers that have the capability to accommodate the number of detainees that meet their capacity. While the other 413 prisons and detention centers accommodate the number of detainees who exceed their capacity involving varying *crowdedness*. At maximum, these facilities are only available for 137,137 prisoners and detainees, but by February 2024 can only accommodate 266,513 prisoners and detainees. Of the total provinces in Indonesia, only 3 regions are not overcapacity, namely

North Maluku, Maluku and Yogyakarta. Meanwhile, the other regions all experience excess capacity.

In the problem of *overcrowding* in prisons and detention centers, drug cases are the largest contributor to the overcapacity of prisons and detention centers in Indonesia. The following is data on the number of prison inmates based on drug crime cases in Indonesia from 2018 to 2022:



Sumber: SDP Publik, 2024

Figure 2
Number of Drug Inmates

It is known from the Public Corrections Data Base System that the number of inmates in prisons and detention centers for drug cases has increased every year, although it has decreased slightly from 2021 to 2022. This should be a concern for the government in handling the growth rate of drug cases in Indonesia.

Article 54 of Law No. 35/2009 on Narcotics requires drug abusers to undergo two types of rehabilitation: medical and social. Then in article 55, paragraph (1) obliges people who are responsible for people who are not of sufficient age to report the case to a public health center, hospital, or social rehabilitation institution. Paragraph (2) in this article for drug abusers who are categorized as adults are obliged to report themselves or through their families to receive treatment or care at institutions that provide medical and social rehabilitation services. Furthermore, article 56 paragraph (1) emphasizes that related to medical rehabilitation, its implementation is regulated by ministerial regulations and the hospital must also be in accordance with those appointed by the minister. Likewise, social rehabilitation is regulated by ministerial regulations related to social affairs (article 59).

Minister of Law and Human Rights Regulation No. 12/2017 on the Implementation of Narcotics Rehabilitation for Prisoners and Prisoners mandates that the state must ensure that drug rehabilitation services are entitled to be provided to prisoners in State Detention Centers, Temporary Child Placement Institutions,

Correctional Institutions, Special Institutions for Child Development, and Correctional Institutions for addicts, abusers, and victims of drug abuse. Therefore, the standard of living for addicts, abusers and victims of drug abuse within prisons and correctional facilities should be improved so that they can be accepted back into the general public. According to the 3rd article (b), drug rehabilitation for prisoners and correctional detainees has the aim of restoring 3 aspects of drug dependence, where the three aspects are biological, psychological, and social aspects.

In Bandar Lampung Narcotics Prison itself in 2022 there were 42 recidivist prisoners, then in 2023 there were 73 prisoners who recidivated drug cases. The existence of recidivists indicates that the implementation of the rehabilitation program in prison is not running optimally. Whereas the policy in Permenkumham No.12 of 2017 concerning the Implementation of Narcotics Rehabilitation for Prisoners and Prisoners has been promulgated and formed through a long policy process with the aim of the policy is to restore narcotics addict prisoners. So that an in-depth study is needed to describe how the implementation of the drug rehabilitation program and find out the factors that hinder the successful implementation of the drug rehabilitation program so that there are still recidivists in the Class IIA Narcotics Prison in Bandar Lampung.

LITERATURE REVIEW

Policy Implementation Theory

The principle of implementing a policy is a way to achieve the goals formed. Lester and Stewart in Winarno describe policy implementation as a legal management tool in which various individuals or groups collaborate in policy enforcement to realize the achievement of expected goals. Edward III's policy implementation theory develops an implementation model that is described as having a *top-down* view. Edward III includes the implementation model, as well as the impacts. Edward III's approach contains variables that determine the success or failure of policy implementation, there are 4 dimensions, namely Communication, Resources, Disposition, and Bureaucratic Structure.

Research by Fitri and Yusran (2020) departs from the problem that in West Sumatra Province, the highest case is a drug case which reaches 37.73 percent. Then at the West Sumatra provincial BNN in terms of recovery has not been implemented optimally. It can be seen that first, there is still a lack of family support for abusers (victims) who are doing rehabilitation, second because of inadequate facilities and infrastructure, third because of the difficulty of accessing rehabilitation services from remote areas. Fourth, there is still a lack of public awareness of the dangers of drugs. For this reason, research was carried out to analyze the implementation of the rehabilitation program policy in accordance with Law No. 35 of 2009 concerning narcotics. The research method uses descriptive qualitative. This research uses George Edward III's theory, and the results of the study state that the implementation of rehabilitation is not yet optimal due to the lack of communication process and inadequate supporting resources such as budget, human resources, and financial resources.

Research by Sibarani (2023) aims to analyze the implementation of the drug user rehabilitation policy at the National Narcotics Agency of Deli Serdang Regency in accordance with the Deli Serdang Regent Regulation Number 155 of 2017. This research uses George Edward III's policy implementation theory which is explored with its four dimensions, namely communication, resources, disposition, and bureaucratic structure. The results showed that the implementation of the drug user rehabilitation policy at the National Narcotics Agency of Deli Serdang Regency has not been optimally implemented because it is still constrained in several indicators, such as: the communication process

that is still lacking and inadequate supporting resources both from budget resources, human resources, and financial resources, so that there are obstacles in the implementation of the policy.

Research by Destia (2023) departs from the problem that in the Indonesian state, both local and national environments, there has been an increase in the number of drug users and dealers, especially in Riau Islands Province. So it is very important that there is more serious action in this case BNN which has the authority to recover victims of drug abuse. The purpose of this research is to find out the implementation of drug user rehabilitation at BNN Tanjung Pinang. The research method uses descriptive qualitative, analyzing this research using the theory of Van Metter and Van Horn. The results of this study indicate that the implementation of the drug rehabilitation program is running quite well with outpatient and inpatient programs, but the outpatient process experiences obstacles. The conclusion of this research is that the implementation of drug abuse rehabilitation programs at BNN Tanjung Pinang City has been running according to BNN RI Regulation No.24 of 2017 concerning rehabilitation service standards for narcotics addicts and victims of narcotics abuse.

METHOD

This research uses qualitative research. Qualitative research introduces deep and complex dimensions in the understanding of certain phenomena. Qualitative research highlights the subjective, contextual, and interpretive aspects of a problem. This method allows researchers to explore a deeper understanding of people's lives, understand historical contexts, analyze patterns of behavior, examine the functionality of organizations, and explore various social activities carefully (Hasan, 2023). This approach not only aims to produce a practical understanding of the phenomenon under investigation, but also to build a strong theoretical foundation.

In the context of this research, a qualitative approach is the main choice for researchers to gain in-depth and contextual insights into the implementation of the rehabilitation program under study. Through approaches such as in-depth interviews, participatory observation, and document analysis, researchers can better understand how the program is implemented in a real context, how program actors and participants respond to it, and what factors influence the success or failure of the program. By utilizing qualitative methodology, this research will result in a more in-depth and nuanced understanding of the dynamics of rehabilitation program implementation, which in turn can significantly contribute to the development of best practices in the field of rehabilitation and relevant public policies.

This research design is a case study that explores in depth a particular entity, such as an individual, group, organization, or activity program, within a predetermined time span. The focus is to obtain a comprehensive and in-depth description of the entity, allowing researchers to understand the context, dynamics, and relevant characteristics (Hasan, 2023).

The data sources in this research are divided into 2, namely primary data and secondary data. Primary data includes informants and research sources, while secondary data is data about officers as implementers of social rehabilitation programs, profiles of Class IIA Bandar Lampung Narcotics Correctional Institution, results of previous research, and documentation in the form of photographs of activities. There are 3 data collection techniques used, namely observation, interviews, and documentation. The data analysis technique used is using the Miles and Huberman data analysis model which is divided into 4 (four) parts, namely data collection, data reduction, data display, and

conclusions or data verification. Data validity techniques in this study only use two triangulations, namely source triangulation and technical triangulation.

RESULTS AND DISCUSSION

Observation

The results of observations made by researchers in the field include 6 aspects. The first aspect observed is related to the conditions and areas of implementation of social rehabilitation, for the place of implementation of rehabilitation is in a special rehabilitation block, so the 180 participants are placed in the block. In the block there are no rooms, so it is like a hall for the participants to rest and do activities. The situation was quite stuffy and smelly because all participants slept together in the block. The bathroom was open, and there were some puddles because the floor was damaged. There are also 2 bookcases in the block as a library.

Furthermore, starting with the morning briefing at 08.00 WIB then the officers returned to the bmkemas room to rest and chat for a while, some had breakfast. Then at 09.00 WIB, counselors from BNNP Lampung came to fill the counseling session as many as 5 counselors. Then the 2 Instructors along with the 5 BNNP counselors entered the rehabilitation block. Then Pak Muali as the instructor called the person in charge of the participants and gathered the participants to provide direction regarding today's counseling. Furthermore, they were formed according to their respective groups. Starting from group 1 and so on until group 9 with the counselors taking turns providing counseling sessions to the participants. So, the system is that one counselor takes turns teaching one group, not done simultaneously.

Then the researcher observed how the interaction between officers and rehab participants. The beginning of the interaction in this narcotics prison is at 09.00 am, namely in the counseling session. The instructor gave directions to the participants, then continued briefing by the instructor to the counselors and bmkemas staff. Then began counseling per group accompanied by 1 counselor sitting in a circle. The counseling began with a prayer of peace, then reading "The Creed" together, it seemed that the counselor was seriously teaching the participants slowly and clearly. After reading "The Creed", followed by a sharing session between the counselor and the rehabilitation participants. The counselor asked about the news and condition of each participant in each group. After the counseling session ended, it was seen that some counselors were still chatting with several participants. After that at 11.30 the officers and counselors returned to the office. In the afternoon between 12.00 - 15.00 there was no more interaction between officers and rehabilitation participants.

The researcher observed the behavior of officers in implementing the rehabilitation program for rehabilitation participants. It starts when the officers, namely instructors and addiction counselors, who are also a bmkemas staff, come to the prison excitedly. The officers were seen preparing to carry out the morning roll call with prison officials at 08.00 WIB, then the officers returned to the bmkemas office, some were busy playing cellphones and some were busy eating. At 09.00 WIB, there were 5 BNNP counselors consisting of 3 male counselors and 2 female counselors. After gathering, the instructor explained the series of counseling activities in a big and clear voice, the counselors also paid attention to the explanation, not busy on their own. Then divided into groups, so one counselor handles 1 group of 20 participants. It can be seen that the counselors teach and provide counseling patiently and pay attention to the participants one-on-one with focus. However, when the counselors were busy providing counseling,

one of the officers (bimkemas staff) went out of the block to the visiting room to help other officers because of the overflow of visitors at the visit.

The researcher observed the rehabilitation activities carried out by the participants. The participants' activities began with morning prayers at 04.15, but the activities were carried out independently because there were no officers to supervise. Then proceed with cleaning yourself, some of them immediately go back to sleep. After that at 06.30-08.00 carry out breakfast and morning roll call, this activity is carried out without officer monitoring, only through the duty team officer. Then the rehabilitation participants' activities continued with morning exercise, exercise was carried out independently in the block, but because it was not supervised, many participants did not carry out morning exercise activities and continued to sleep. After that at 09.00-11.00 the counseling session continued. In this counseling session there were participants who were enthusiastic about following it, but many were lazy and busy with their own activities. Furthermore, the activities were carried out independently, some were busy telling stories, some were busy cleaning, some were sleeping until at night the activities were carried out independently. Researchers observed that even though they lived side by side with 180 people, most of them were silent and reluctant to socialize or anti-social.

Researchers observed aspects of facilities and infrastructure supporting social rehabilitation program activities. First are general facilities such as cleaning facilities, electrical installations, air circulation systems, lighting systems, and clean water availability systems. Everything has been fulfilled, but there are some that are still inadequate such as the lighting system, so during the day the block looks dark because little sunlight enters. Then the problem of water availability is still lacking, this is because all 180 rehabilitation participants are placed together in a special rehabilitation block, while there are only 6 bathrooms, so the participants have to fight over water when they want to take a shower. Furthermore, special infrastructure facilities, such as waiting rooms, counseling rooms, crisis intervention rooms, inpatient rooms, bathrooms / toilets, kitchen rooms, fire prevention and response, oxygen cylinders, and communication devices are still not fulfilled. Only the bathroom, pharmacy or medical action room, ambulance, and administration room are fulfilled.

Interview

The results of the interview were divided into 6 aspects according to the dimensions of the George Edward III (1980) and Ackermann & Steinmann (1982) theories. The results of the interview from the communication aspect show that the daily activity schedule for the participants of the social rehabilitation program from Monday to Sunday made by the Class IIA Bandar Lampung Correctional Facility is in accordance with the Guidelines for Narcotics Rehabilitation Services for Prisoners and WBP in UPT PAS in 2018, namely the schedule of social rehabilitation activities with the Therapeutic Community method. In conclusion, the suitability of the prison as a technical implementation unit is in accordance with the direction of the center because it meets the communication indicators, namely clarity, consistency, and transmission.

Then from the resource aspect, it is known that in accordance with the regulation on the Standards for Organizing Correctional Rehabilitation Services for Prisoners and Prisoners of Addicts, Abusers and Victims of Abuse of Narcotics, Psychotropic Substances and other Addictive Substances (NAPZA) in UPT Pemasyarakatan in 2020 the number of counselors compared to participants is 1: 10 or at least 1: 20, while the number of counselors from BNNP Lampung is only 5 people and the number of participants is 180 people where the ratio is 1: 36. Then related to the competence of rehabilitation officers

where's divided into two types, namely BNNP Lampung and prison officers. BNNP Lampung officers are in accordance with the expertise and competence of a counselor, in accordance with the statement from Informant RH, counselor, as follows:

"My first qualification is having attended training, then various experiences in the field of rehab so I have handled several clients." (Interview with Informant RH, Counseling Officer, Friday, April 19, 2024).

Meanwhile, the competence and expertise of prison officers related to social rehabilitation in accordance with the findings of researchers that there is only 1 officer who has received training from the Directorate General of Corrections, while other officers have never attended training.

Furthermore, the disposition or attitude aspect of an implementer, namely the problem of incentives was found because according to George Edward III, the existence of incentives can encourage the enthusiasm of implementers to carry out their duties, such as the statement from Informant RH, this counselor who received incentives from the implementation of the social rehabilitation program, the following statement:

"Yes, it has to do with motivation, of course I am more excited, especially the greater the amounts of incentives provided, the more enthusiastic I am." (Interview with Informant RH, Counselor Officer, Friday, April 19, 2024).

It is different with prison officers, namely binkemas staff, work staff, and prison doctors where they do not get incentives from these activities. The following is a statement from Informant M, the Instructor interviewed:

"So correctional officers, especially binkemas staff, do not receive incentives at all, so they are voluntary. So, I see that the officers here do not work optimally because they have to focus on the main job and it seems to interfere with the officer's main job." (Interview with Informant M, Instructor, Friday, April 19, 2024).

The absence of incentives can reduce the spirit of work, plus prison officers not only take care of social rehabilitation programs but also other prison activities such as prison visiting services.

In the bureaucratic structure, it was found that the hierarchy shown was in accordance with Edward III's theory, namely through tiered stages. Regarding fragmentation or division of tasks, it is in accordance with Edward III's theory, as evidenced by the division of tasks in the Social Rehabilitation Program Team Decree and when in the field officers also carry out their duties in accordance with their respective duties and functions. Then related to complexity, prison officers themselves are quite difficult to work optimally because this social rehabilitation program activity is an additional task while their main duties must continue, as said by the Head of Binkemaswat Sub Division below:

"Sometimes the orders given clash with the main duties of the prison officers themselves". (Interview with Mr. Gerry Tri Aryadi, Head of Binkemaswat Section, Thursday, April 18, 2024).

So, prison officers must be smart in managing their time so as not to interfere with their main duties.

The next aspect regarding resources, through observations and observations made by researchers on facilities and infrastructure in Class IIA Narcotics Prison Bandar Lampung in the activities of the social rehabilitation program, the main facilities and

infrastructure for carrying out activities already exist and are considered to be able to run such as special rehabilitation blocks and rehabilitation activity rooms, but are not fully maximized because there is no counseling room and the special rehabilitation block is still combined with the rehabilitation activity room where this makes the implementation of social rehabilitation activities not conducive.

And finally, the interorganizational aspect of the Class IIA Bandar Lampung Narcotics Prison cooperates with BNNP Lampung to assist in the implementation of social rehabilitation program activities. During the program, the cooperation relationship is very good where the prison prepares all the needs needed by BNNP Lampung counselors, and BNNP Lampung counselors also answer the call of the prison by working seriously. Evidenced by the following statement from Informant RH, counselor:

"So far we have a very good relationship with prison rehabilitation officers. All the needs we need are immediately prepared by the prison officers." (Interview with Informant RH, Counselor Officer, Friday, April 19, 2024).

Likewise, one of the Informants M, Instructor said that:

"So far so good, they want to obey the directions from us as hosts, and they are quite serious in rehabilitating these participants." (Interview with Informant M, Instructor, Friday, April 19, 2024).

Similarly, with health services, the Polyclinic of Class IIA Narcotics Correctional Facility Bandar Lampung cooperates with Abdoel Moeloek Hospital located in Bandar Lampung, the referral system is implemented if the illness suffered by prisoners cannot be handled by the prison polyclinic due to the limitations of more sophisticated tools and limited medical equipment. The relationship between the prison and Abdoel Moeloek Hospital is very good, as stated by Informant RP, the prison doctor as follows:

"Our relationship with Abdoel Moeloek Hospital is quite good, so the hospital is ready to receive sick prisoners from narcotics prisons and is immediately handled." (Interview with Informant RP, Prison Doctor, Monday, April 22, 2024).

NVIVO 14 Data Processing

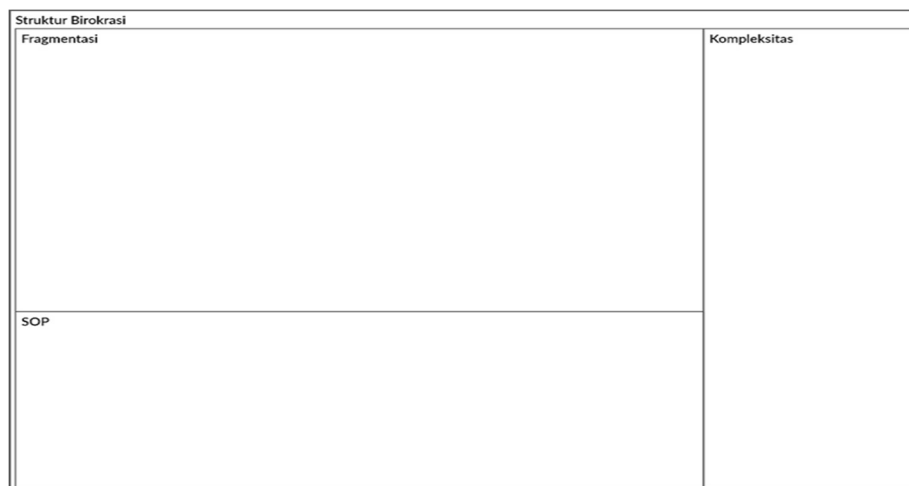
The results of the analysis of the *Word Frequency Query* resulted in the word "Rehabilitation" appearing frequently. Then there is the word "Program" which often appears as well. It can be concluded that the Rehabilitation Program is the theme in this study, this is in accordance with the title raised by the researcher regarding the Implementation of the Social Rehabilitation Program Policy at Class IIA Narcotics Prison in Bandar Lampung. Then the words that often appear are also the words "Counselor", "Officer", "Doctor", "Staff", and "Bimkemas". This means that counselors, officers, doctors, and staff act as implementers in the implementation of social rehabilitation programs, where these implementers are the subject of this research. Furthermore, there is the word "Lapas" which means that the implementation of the social rehabilitation program is carried out in prisons or correctional institutions. Then there are the words "prisoners" and "participants" which mean that the implementation of social rehabilitation programs is aimed at prisoners, wbp, or in rehabilitation programs called participants in Class IIA Narcotics Prison Bandar Lampung.



Source: Data Analyzed, 2024

Figure 3
Word Frequency NVIVO 14

Analysis using NVIVO 14 shows that in the communication dimension with its 3 indicators, namely clarity, consistency, and transmission, the clarity indicator is the most discussed by informants, meaning that informants are quite clear about the implementation of this social rehabilitation program. Meanwhile, the transmission and consistency indicators are still low, meaning that this section is not widely discussed by the informants the researchers interviewed. This is evidenced by the communication hierarchy chart where the transmission and consistency columns are not as extensive as the clarity column. Furthermore, it is proven again in the communication *project map* where there are 4 informants, while 1 informant, namely the BNNP counselor, does not show an arrow from the transmission *code* to the BNNP counselor informant *code*, which means that the BNNP counselor informant never discussed communication transmission at all during the interview.



Source: Data Analyzed, 2024

Figure 4
Bureaucratic Structure Hierarchy Chart

From the results of the hierarchical chart above, in the aspect of policy implementation, researchers observed the implementation of the social rehabilitation program from the perspective of the bureaucratic structure which includes fragmentation, SOP, and complexity. In the hierarchical chart above, it can be seen that the fragmentation dimension is the most dominant, meaning that respondents, namely officers and especially rehabilitation participants, said a lot about the fragmentation or distribution of officer responsibilities. In accordance with the results of the interview, it is known that each officer has different responsibilities, although there are prison officers who double as instructors and as servants for visits or visits from WBP families. Meanwhile, the SOP and complexity section is still low, meaning that respondents did not discuss much regarding the SOP for implementing the rehabilitation program and the complexity between officers that occurred during the program activities.

CONCLUSION AND SUGGESTION

The social rehabilitation program has been implemented for a long time and still continues today, and has even become a routine activity agenda every year. In Class IIA Narcotics Correctional Facility Bandar Lampung, the social rehabilitation program activities carried out are quite good. By dissecting through the theories of George Edward III and Ackermann & Steinmann, the social rehabilitation program at the Class IIA Bandar Lampung Narcotics Prison can be said to be quite good in implementing its activities. By looking at the theoretical factors used, namely communication factors, resources, disposition, bureaucratic structure, resources, and inter-organizational. However, in terms of resource factors, in the Bandar Lampung Narcotics Prison there are still many shortcomings such as incomplete facilities and infrastructure, the competence and expertise of many officers who have not received rehabilitation training.

It is better if prison officers do not double as rehabilitation officers as well, but the social rehabilitation program must have its own officers, so that they can focus on carrying out rehabilitation activities optimally. This social rehabilitation program is very useful for changes in drug addict prisoners because this social rehabilitation program improves prisoners from all aspects, be it medical, social, spiritual, ethical, to vocational prisoners. In the future, researchers hope that the social rehabilitation program can continue to be improved and maximized both from the central government and down to its technical implementation units.

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