



RAPPORTEUR REPORT OF SYMPOSIUM ASEAN DRUG TREATMENT: ISSUES AND CHALLENGES,

WHAT'S NEXT?

EASTERN & ORIENTAL HOTEL, PENANG

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Participation :

ASEAN Countries:

1. Cambodia
2. Indonesia
3. Philippines
4. Singapore
5. Thailand
6. Vietnam
7. Japan Embassy

International Bodies :

- i. HM Prison and Probation Service (HMPPS)
- ii. The United Nations Office on Drugs and Crime (UNODC)
- iii. Monash University
- iv. Universiti Malaya
- v. Universiti Pertanian Malaysia
- vi. Human Rights Commission of Malaysia (SUHAKAM)
- vii. Ministry of Health

Internal Agency

- i. Division Director's – Malaysian Prison Malaysia
- ii. State Director's
- iii. Director of Prison Institutions

Introduction :

The ASEAN Symposium on Drugs Rehabilitation presented an in-depth look at the evolving strategies and challenges in drug rehabilitation across various ASEAN countries, highlighting different approaches and lessons learned from key presenters. Each country and organization contributed unique perspectives on how to address the issue of substance use disorders (SUDs) within their respective criminal justice systems, providing a comprehensive view of the current state of drug rehabilitation in the region.

Objectives of the ASEAN Symposium on Drugs Rehabilitation:

1. To foster regional collaboration by bringing together ASEAN member states and international organisations to share strategies and best practices in drug rehabilitation.
2. To highlight effective treatment models through sharing best practices of successful rehabilitation approaches and to promote holistic and culturally sensitive care in drugs' treatment in correctional settings.
3. As a platform to build capacity for prison and correctional staff through focus on training and professional development for prison staff, healthcare providers, and social workers to ensure effective, evidence-based treatment.
4. To advocate for legal reforms in supporting changes in laws to prioritize alternative sentencing, such as drug courts and community-based programs, over incarceration.
5. To promote regional research by encouraging studies that provide data-driven insights to improve ASEAN drug rehabilitation policies and practices.
6. To share the best practices in reintegration and aftercare programs among ASEAN countries regarding drug-dependent prisoners.
7. To reduce stigma and discrimination via promoting inclusive policies that support drug-dependent prisoners in their reintegration and aftercare.

Thailand : From Punitive to Progressive Drug Laws: Rehabilitation programs for drug-abuse offenders.

**Presenter :Sappasit PHOOMSUK,
Medical Service Division, Department of Corrections**

Thailand's approach to drug rehabilitation has undergone a significant transformation, shifting from punitive measures to a more progressive, health-led model. This shift was prompted by the increasing rates of drug use, as seen in national surveys showing that the population of drug users aged 12-65 increased from 1.4 million in 2016 to 1.9 million in 2019, with common substances including cannabis, kratom, and methamphetamine. The 2021 Narcotics Law marked a turning point, reducing penalties for drug possession, import/export, and production for sale. Crucially, individuals caught with drugs for personal use are now viewed as victims rather than criminals, allowing courts to send them to rehabilitation centers instead of prisons.

The Thai Department of Corrections has adopted a rehabilitative approach, emphasizing programs that focus on behavior modification, life skills, vocational training, and psychological development to prepare individuals for reintegration into society.

Programs such as the Therapeutic Community (TC) and Modified Matrix Program have been introduced to provide structured interventions for drug offenders. Thailand's prison statistics are telling: as of September 2024, there were over 302,000 prisoners across 143 prisons, a large percentage of whom are serving sentences for drug-related offenses. Despite a staff-to-prisoner ratio of 1:25, which presents significant management challenges, Thailand has seen promising results in reducing recidivism rates among those who complete rehabilitation programs.

For instance, recidivism among drug rehabilitation participants dropped from 14.23% in 2019 to 5.14% in 2024, showcasing the effectiveness of rehabilitation efforts over punitive measures.

Looking forward, Thailand aims to further expand its rehabilitation efforts by establishing narcotics and rehabilitation courts, halfway houses, and more rehabilitation centers within correctional facilities. The country is placing a strong

emphasis on viewing individuals with addiction as patients in need of medical and psychological help, in alignment with its progressive drug policies.

Vietnam : Drug Treatment in Prisons

**Presenter : Mr. Nguyen Nam Trung,
Deputy Head of the Division of Health Care**

Vietnam faces a distinct set of challenges as a significant transit point for drugs, which has led to a high number of drug-related crimes. As of 2024, there are over 221,000 individuals involved in drug-related offenses in Vietnam, with the rise of new drugs and global drug crimes complicating the situation further. The harmful effects of drug use are severe, including brain damage, mental disorders, and an increased risk of various crimes.

In Vietnamese prisons, where over 56,000 inmates are drug-related offenders, drug addiction exacerbates security issues, particularly with the spread of infectious diseases such as HIV and hepatitis. Despite these challenges, Vietnam has implemented over 150 clinics staffed with about 800 healthcare professionals dedicated to treating incarcerated individuals. Treatment methods in Vietnamese prisons include general medical examinations, monitoring, family support, and lifestyle interventions for non-addicted prisoners. However, high relapse rates remain a concern due to the illegal drug trade within prisons and a lack of sufficient resources.

Vietnam continues to grapple with a shortage of trained staff and inadequate facilities, which hinders the full effectiveness of its treatment programs. However, the country is pushing for increased collaboration with families, society, and international organizations to create a supportive environment for prisoners both during and after their sentences. In particular, the government is working to enhance screening processes for incoming prisoners, increase investment in prison facilities, and promote greater awareness among prison staff to improve the overall effectiveness of drug treatment programs.

Indonesia : Indonesian's Policy for Narcotics Rehabilitation Behind The Bars

Presenter : Hetty Widiastuti

**Head Of Special Health Care and Rehabilitation Directorate
General of Corrections**

The Indonesian Policy for Narcotics Rehabilitation Behind Bars presentation details Indonesia's correctional approach to drug rehabilitation, emphasizing recent legislative and programmatic advancements. With over 50% of inmates sentenced for narcotics offenses, the country has expanded rehabilitation services across 106 facilities, incorporating medical and social rehabilitation programs. The initiative involves 858 trained staff members and partnerships with international bodies such as UNODC and the Colombo Plan.

Legislative developments include the 2022 Corrections Law, mandating narcotics rehabilitation in prisons. This law has strengthened the program's sustainability by implementing national standards and e-learning for staff training. The presentation highlights the Bangli Narcotic Prison in Bali as an example of successful rehabilitation efforts. It underscores Indonesia's commitment to reintegration through a supportive and structured approach to narcotic rehabilitation for inmates.

Philippines : Echoing Hope & Resilience – Drug Rehabilitation in BJMP Jails

Presenter : SUPT Lorelina A Mina,

**Chief of Staff of the Office,
Bureau of Jail Management and Penology (BJMP)**

In the Philippines, the Bureau of Jail Management and Penology (BJMP) oversees 483 jails, including male and female dormitories, with a population of over 118,000 as of August 2024. The majority of individuals detained in these jails are charged with drug-related offenses.

The introduction of the plea-bargaining framework in 2018 marked a significant reform, allowing individuals facing drug charges to enter rehabilitation programs instead of serving full sentences, thus helping to reduce jail overcrowding.

BJMP's drug rehabilitation efforts focus on various interventions, including the Therapeutic Community Modality Program (TCMP), drug counseling, skills training, and livelihood programs. One important framework is the Katatagan Kalusugan at Damayan ng Komunidad (KKDK). This psycho-educational counseling program addresses the personal, familial, and community impacts of drug use while promoting positive coping mechanisms and recovery skills.

Health services within BJMP jails include regular health screenings and specialized mental health services, with a team of doctors, nurses, psychologists, and psychiatrists providing ongoing care for Persons Deprived of Liberty (PDLs). Despite these efforts, BJMP faces several challenges, including overcrowded jails, limited personnel trained in specialized interventions, and weak links between the jail system and community-based support. Moving forward, BJMP aims to enhance capacity-building for program implementers, establish TC model jails as training sites, and standardize program implementation across the country. Furthermore, there is a strong call for legislation to address stigma and support the reintegration of formerly incarcerated individuals into society.

Malaysia : Drug Treatment Program by the Malaysian Prison Department

**Presenter : SUPT Adil Hazarith bin Abdul Aziz,
Corrective Division,
Malaysian Prison Department**

The Malaysian Prison Department has embraced a comprehensive rehabilitative approach through its Civilized Humane Culture Development Centre (CHCDC), which aims to reform prisons from punitive institutions to correctional environments. The core aspects of this approach include enhancing prison security, fostering a rehabilitative culture, and ensuring procedural justice. The CHCDC's mission is to develop productive individuals through effective rehabilitation in a conducive environment, emphasizing respect for human rights and procedural justice.

The department's rehabilitative approach incorporates the Biopsychosocial-Spiritual (BPSS) model, which addresses the biological, psychological, social, and spiritual dimensions of addiction. This holistic model recognizes that multiple factors and rehabilitation strategies influence addiction and mental health must be tailored to each individual's needs.

The Human Development Program (HDP) is a key component, focusing on developing inmates' attitudes, skills, and knowledge through healthcare, treatment, education, and vocational training.

The department's Therapeutic Community (TC) approach provides long-term treatment for drug addiction, incorporating group psychotherapy, behavior modification, emotional development, and vocational skills training. The HUNT module is an integrated program that combines psychoeducational therapy, cognitive-behavioral counseling, and family education to support recovery.

While the Malaysian Prison Department's programs have achieved some success, challenges such as prison overcrowding, limited facilities, and high recidivism rates persist. The department is working toward establishing specialized drug offender clusters by 2025, separating drug offenders from the general prison population to provide more targeted rehabilitation. Collaboration with various government agencies and NGOs is also a key strategy for improving the overall effectiveness of these rehabilitation programs.

United Kingdom : Best Practices for Drug Treatment in UK Prisons (HMPPS)
Presenter : Rachel Radice,
Director for Substance Misuse in the HMPPS

The UK's prison system faces similar challenges with drug use, as drug-related issues have become increasingly prevalent, particularly with the rise of synthetic drugs. As of 2024, the prison population in the UK has almost doubled since 1994, reaching 88,500, with 49% of prisoners having drug-related problems. Despite this, the UK has taken progressive steps in addressing drug addiction through community-based alternatives and comprehensive treatment strategies.

One of the key initiatives in the UK is the use of Intensive Supervision Courts (ISCs), which divert individuals with substance misuse issues away from custodial sentences and into enhanced community-based sentencing.

This approach has reduced reoffending rates by offering more rehabilitative alternatives. Another key initiative is the establishment of Incentivised Substance-Free

Living Units (ISFLs), dedicated prison wings for those who wish to live drug-free. ISFLs are present in 80 UK prisons, with plans to expand further by 2025.

The UK's emphasis on continuity of care, particularly during the transition from prison to the community, has also been a key factor in reducing recidivism. Support programs help individuals engage in community-based treatment within three weeks of their release, ensuring that they have access to ongoing rehabilitation services. This comprehensive approach has contributed to the UK's success in reducing drug-related reoffending.

University of Malaya : Relationship Between Prison Climate, Social Support, And Life Satisfaction Among Drug Abuse Inmates In Malaysian Prisons

Presenter : Dr Mohd Norbayusri bin Baharuddin , Senior Lecturer , Department of Social Administration and Justice, Faculty of Arts and Social Sciences

Dr. Mohd Norbayusri Baharuddin from the University of Malaya presented his study on the relationship between prison climate, social support, and life satisfaction among drug abuse inmates in Malaysian prisons. His research aimed to determine how prison climate and social support impact inmates' life satisfaction and assessed the role of social support as a mediator in this relationship. Prison climate, defined by factors such as inmate actions, safety rules, reintegration expectations, and interactions with officers, was found not to directly affect life satisfaction. However, social support from family, friends, and notably prison officers, significantly influenced life satisfaction, serving as a meaningful mediator. Dr. Norbayusri's conclusion emphasized the importance of improving social support within prisons to enhance inmates' overall well-being, recommending further studies to broaden the scope of the research to other prison populations.

The United Nations Office on Drugs and Crime (UNODC): Evidence-Based Approaches for the Treatment of Drug Use Disorders in Individuals in contact with the Criminal Justice System

**Presenter : Dr Zin Ko Ko Lynn,
Drugs and Health Officer, UNODC**

The United Nations Office on Drugs and Crime (UNODC) focused on evidence-based approaches for treating drug use disorders in individuals within the criminal justice system. They highlighted the global challenge of drug use, with 292 million people using drugs in 2022 and 64 million suffering from drug use disorders, though only 1 in 11 people received treatment. UNODC stressed the importance of shifting away from punitive policies, common in many Asian countries, to a public health approach.

Drug dependence was described as a complex health disorder requiring comprehensive, multidisciplinary responses based on a biopsychosocial model. International frameworks emphasize the right to health for those with drug use disorders, promoting non-discriminatory, evidence-based treatment. UNODC also advocated for alternative measures to imprisonment, such as diversion to education and treatment programs, to improve health outcomes and reduce crime. Their recommendations focused on supporting evidence-based practices, increasing investments in training and research, and promoting inter-sectoral partnerships to ensure effective treatment both in prisons and post-release.

Centre of Excellence for Research in AIDS (CERIA) : Overcoming Stigma & Social Disapproval.

**Presenter : Prof Dato' Adeeba binti Kamarulzaman ,
Chief Executive Officer of Monash University Malaysia and
Pro Vice-Chancellor and President (Malaysia), Monash University
Australia.**

Prof. Adeeba Kamarulzaman from the Centre of Excellence for Research in AIDS (CERIA) presented on overcoming the stigma and social disapproval faced by formerly incarcerated individuals. She highlighted how societal stigma compounds the difficulties these individuals face, particularly in securing employment, housing, and

even basic services like motor insurance. This stigma, combined with limited social support and healthcare access, worsens health outcomes for the formerly incarcerated, particularly concerning chronic conditions such as hypertension and mental health issues. Prof. Adeeba underscored the critical importance of the first month's post-release for successful reintegration and emphasized the need for comprehensive healthcare and support systems.

Cumulative reintegration challenges often degrade both physical and mental health, increasing the likelihood of recidivism. Her presentation called for policies that reduce stigma and provide a "wrap-around" approach to reintegration, addressing needs such as housing, employment, and healthcare. Initiatives like the Rehabilitation of Offenders Act 1974 were presented as examples of how to reduce discrimination and support reintegration.

Universiti Putra Malaysia (UPM): Biopsychosocial Spiritual (BPSS) Model in Drug

Treatment by Dato' Engku Mardiah binti Engku Kamaruddin, Senior Lecturer, Faculty Of Educational Studies

The presentation from Universiti Putra Malaysia (UPM) focused on the Biopsychosocial-Spiritual (BPSS) model in drug treatment, a holistic framework that addresses biological, psychological, social, and spiritual factors. Originally conceptualized by George L. Engel, this model is gaining traction in Malaysia, where cultural and spiritual beliefs play an important role in the recovery process. The ASEAN region, with Malaysia recording the highest treatment rate in 2022, has seen varying rates of success in addressing substance use disorders, with amphetamine-type stimulants (ATS) and opioids being the most commonly treated substances. The BPSS model integrates the complexities of addiction by addressing brain chemistry, mental health issues like depression and trauma, and the crucial roles of family and peer support. Spirituality, too, is a key factor, providing emotional resilience and a sense of purpose for many individuals in recovery. The model's success lies in its capacity to offer personalized, culturally sensitive care, with multidisciplinary teams supporting the patient's journey through treatment. Challenges to the full implementation of the BPSS model remain, particularly in terms of stigma, resource limitations, and the need for

ongoing professional training. Future directions for BPSS integration include policy advocacy, research, and the use of technologies like telehealth to expand access to care.

Together, these presentations underscored the importance of adopting a holistic, culturally sensitive approach to drug treatment, recognizing the interconnectedness of biological, psychological, social, and spiritual factors. The symposium called for ongoing research, policy advocacy, and the removal of barriers to access to improve the lives of individuals affected by substance use disorders and to ensure sustainable, long-term recovery outcomes.

WHAT'S NEXT?

The future direction of drug rehabilitation in the ASEAN region is centered on enhancing collaboration, strengthening regional research, building capacity for staff, and advancing legal reforms to empower alternative sentencing and strategic resettlement for individuals recovering from substance use disorders. As the region faces an evolving landscape of drug-related challenges, a more unified and strategic approach is necessary to foster effective rehabilitation and recovery outcomes.

1. Regional Collaboration in Drug Rehabilitation

Collaboration among ASEAN member states is critical to addressing the shared challenge of drug use and its impact on society. Moving forward, cross-border cooperation can be enhanced through shared best practices in rehabilitation programs and mutual learning from successful interventions in countries like Thailand, Malaysia, and the Philippines.

Regional platforms like the ASEAN Drugs Monitoring Report can serve as an invaluable resource for monitoring trends, assessing policy effectiveness, and sharing rehabilitation frameworks that have been effective in reducing recidivism and promoting recovery.

In addition to knowledge-sharing, collaborative efforts could focus on creating standardized treatment protocols that incorporate the Biopsychosocial-Spiritual

(BPSS) model, which takes into account the complex interplay of biological, psychological, social, and spiritual factors.

A regional approach to drug rehabilitation will help streamline practices and enable countries to benefit from a wider pool of expertise and resources, thus enhancing the quality and consistency of care provided across ASEAN.

2. Regional Research Initiatives

To effectively combat the drug problem in the ASEAN region, there is a pressing need for more robust, region-specific research. Coordinated research efforts could focus on understanding the socio-cultural factors that influence substance use in ASEAN countries and how these factors impact rehabilitation outcomes. Research could also explore the efficacy of various rehabilitation models, including the use of alternative therapies like traditional and spiritual practices, in addition to modern medical interventions.

Research can also play a pivotal role in guiding policy development, particularly around the use of evidence-based practices in both rehabilitation and reintegration strategies.

By pooling resources for longitudinal studies and clinical trials, ASEAN countries can develop more effective, culturally appropriate rehabilitation strategies tailored to the needs of different populations. Collaborative regional research will also provide the evidence needed to push for more sustainable and inclusive drug policies that are effective in addressing the root causes of addiction.

3. Capacity Building for Staff

Effective drug rehabilitation depends not only on sound policy and infrastructure but also on the skills and knowledge of the professionals delivering services. Capacity building for staff, including correctional officers, healthcare providers, and social workers, must be a key focus in the ASEAN region moving forward. Training programs should emphasize evidence-based approaches to addiction treatment, focusing on the

integration of biological, psychological, and social aspects of care, while also fostering cultural competency to address diverse populations within the region.

Investment in capacity building can be facilitated through regional partnerships, with countries sharing expertise and training opportunities. Programs such as peer-to-peer exchanges, workshops, and regional conferences can enhance the skills of rehabilitation staff and ensure that they are well-equipped to implement the latest and most effective rehabilitation strategies. ASEAN can also explore partnerships with international organizations, NGOs, and academic institutions to provide comprehensive training programs that address both the clinical and administrative aspects of drug rehabilitation.

4. Legal Reforms for Alternative Sentencing

An essential aspect of drug rehabilitation in the ASEAN region will be the reform of drug laws to empower alternative sentencing approaches. The current punitive policies in many ASEAN countries have contributed to overcrowded prisons and have not effectively addressed the root causes of addiction. The shift towards viewing drug use as a health issue, as seen in Thailand's progressive 2021 Narcotics Law, is an example of how law amendments can support rehabilitation rather than punishment.

Going forward, ASEAN countries can advocate for legal reforms that allow for alternative sentencing options, such as diversion programs, drug courts, and community-based rehabilitation.

These alternatives will reduce the burden on the criminal justice system and promote recovery by keeping individuals out of the prison environment, which often exacerbates addiction and mental health issues.

By enacting legal frameworks that prioritize treatment over incarceration, countries can improve long-term recovery outcomes while reducing recidivism rates.

5. Strategic Resettlement and Reintegration

A key component of successful drug rehabilitation is ensuring that individuals can reintegrate into society after their treatment. Strategic resettlement programs are

crucial for reducing relapse rates and supporting long-term recovery. ASEAN countries should focus on developing comprehensive resettlement strategies that include vocational training, employment assistance, housing support, and continuous access to healthcare services, particularly mental health support.

Reintegration programs should be holistic, taking into account the personal, social, and economic needs of individuals post-rehabilitation. Establishing halfway houses, transitional living facilities, and community-based support networks can provide a structured environment for individuals as they transition from treatment to independent living. Furthermore, policies that reduce stigma and discrimination, such as the Rehabilitation of Offenders Act 1974 in the UK, should be considered to ensure that formerly incarcerated individuals have fair access to employment, housing, and other essential services.

Conclusion

1. Most countries start to realize that drug offenders are patients who need to be treated and not criminals who are placed in prison. Countries like Vietnam and Philippines are starting to make strides and there are strong calls to amend their drug laws while Thailand has started it in 2021 followed by Malaysia.
2. In Thailand those who are arrested as drug users for personal use, the court will order them to undergo rehabilitation outside of prison.
3. Thailand began to emphasize the approach based on health led. An approach that focuses on medical treatment methods including behaviour modification, psychological development etc.
4. One of Thailand's ways forward is to establish a Drug Court and determine the direction of their recovery plan.
5. The policy of the Plea Bargaining program carried out in the Philippines involving drug offenders is said to have successfully reduced the congestion rate by drug offenders by up to 30%. Plea bargaining is where they will undergo a rehabilitation program at a drug rehabilitation center and counseling and do not have to serve a prison sentence, causing other problems such as prison overcrowding and other problems that exist as a result of the overcrowding.

6. The Philippines has established drug rehabilitation and treatment centers in several states "Kanlungan Sa Piitan" which provides space for offenders who follow the Plea bargaining program.

7. The drug rehabilitation program in the Philippines emphasizes on the Therapeutic Community program which is very similar to the TC program in Malaysia.

8. Program of Intensive Supervision Strategies in the UK where the court will directly order drug offenders to undergo rehabilitation in the community without having to serve a prison sentence. Efforts are being made to increase Community Sentence Treatment Requirements (CSTRs) not only for drug offenders but also for offenders with mental health problems.

9. HMPPS UK has introduced Incentivised Substance Free Living Units (ISFLs) where a special area will be set up in the prison to give an opportunity to any prisoner who wants and has a strong desire to live without drugs (drugs free). The environment is a supportive environment. There are currently 80 ISFLs units established across the UK.

10. HMPPS also emphasizes the importance of providing support services to ex-prisoners to engage in activities with the community within (3) months after their release.

11. The drug problem and its treatment is very complex and requires a comprehensive approach and multi-disciplinary actions such as health, environmental, spiritual, counseling and psychological and biological treatment. The diversity and existence of synthetic drugs further complicates the situation.

It is suggested that an alternative to imprisonment be provided such as a diversion program in the form of education and treatment. Judiciary and Criminal Justice bodies need to respond to provisions that help towards rehabilitation in the community such as conditional release, reasonable guarantees, parole with elements of treatment etc. and the establishment of a drug court needs to be considered.

The best step suggested is drug addiction treatment through the public health system where the Health authorities can play a major role especially in the continuation of treatment after release from prison.

In conclusion, the future direction for drug rehabilitation in the ASEAN region will require a concerted effort to foster collaboration, strengthen regional research, build

capacity for staff, reform laws to support alternative sentencing and create strategic resettlement programs. By taking a holistic and regionally coordinated approach, ASEAN can improve its drug rehabilitation efforts and support the long-term recovery and reintegration of individuals affected by substance use disorders. This will not only benefit individuals but also contribute to the overall health, safety, and well-being of ASEAN communities.











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Thank You



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