

**COUNTRY PROGRESS REPORT OF DRUG CONTROL – MALAYSIA**

**1. INTRODUCTION**

Drug trafficking and abuse are serious issues confronting Malaysia. The illicit drug use has been well thought-out as a major social intimidation in Malaysia and has been declared as a threat to national security i.e. Malaysia's number ONE enemy. Malaysia's geographical location has long made it a transit country for traffickers of illegal narcotics. The international drug syndicates appear not only to use Malaysia as a transit point due to excellent air and trade links but now are also attempting to produce drugs, particularly ATS in "kitchen Labs" most of which is for export.

**2. EXECUTIVE SUMMARY**

The Malaysia drug situation is very much under control but it still remains a serious threat. Although huge financial resources have been allocated to address this problem in the form of awareness campaigns, prevention, rehabilitation, enforcement as well as the application of stringent laws with lengthy terms of imprisonment and the mandatory death sentence. Nevertheless, Malaysia like other nations globally is still affected by it. The Narcotics Crimes Investigation Department (NCID), RMP as the leading enforcement agency to counter the illicit drug trafficking activities remains and continues to be stringent and vigilant in arresting individuals involved in drug related offences.

With regards to the treatment of opiate based and other forms of drug dependence, Malaysia through the National Anti Drug Agency (NADA) has introduced the Cure and Care Model and other transformational changes since July 2010. The key concepts underlying the Cure and Care Model is that it is client centred, providing choices, without pre-conditions or legal implications and clients are encouraged to seek treatment services voluntarily. The programme is meant to be fun and easy, and priority is given to medical treatment. This concept has been widely recognized from various international organizations such as UNODC and WHO. The open concept used by the clinics has been

## **MALAYSIA COUNTRY REPORT**

regarded as the best approach and have urged other countries to follow Malaysia's method.

Looking ahead Malaysia will monitor international drug syndicates, new drugs of abuse, new drug routes and recruitment of drug couriers. International and regional cooperation will be further enhanced.

In addition drug dependents will continue to receive better access to treatment, rehabilitation and aftercare.

### **3. DRUG SITUATION REPORT FOR 2013.**

#### **3.1 Supply Reduction**

While the local drug situation remains serious and challenging, recent trends and developments are a cause for concern. Malaysia is facing a changing of drug landscape from traditional drugs such as opium, heroin and cannabis to newer psychoactive substances particularly of Amphetamine-type Stimulant (ATS) methamphetamine, ecstasy and eramin 5 etc.

The demand for ATS, and the lucrative profits generated from the trade, continues to provide ample incentive for drug traffickers to expand their illicit activities. At the same time, improved infrastructure and increased vehicle traffic which facilitate the smooth flow of licit goods, services, etc simultaneously provide opportunities for an expansion of international drug trafficking syndicates in Malaysia.

#### **3.2 Drugs Seizures**

Seizures of most drugs showed increase compared to the year 2012. Seizures of all types of drugs by the various authorities in 2013 (Table 1) are as follows:

**MALAYSIA COUNTRY REPORT**
**Table 1: Types of Drugs Seizures**

<b>TYPES OF DRUGS</b>	<b>2013</b>	<b>2012</b>	<b>DIFFERENCES (%)</b>	<b>INDICATOR ( ↑ / ↓ )</b>
Heroin Base (kg)	116.89	5.23	2135.00	↑
Heroin No.3 (kg)	558.72	364.27	53.38	↑
Heroin No.4 (kg)	87.39	47.35	84.56	↑
Marijuana (kg)	898.09	861.29	4.27	↑
Raw Opium (kg)	0.00	9.51	-100.00	↓
Cooked Opium (kg)	0.32	2.87	-88.92	↓
Cocaine (kg)	73.87	6.99	956.80	↑
Methamphetamine (syabu) (kg)	1,706.49	851.82	100.34	↑
Ecstasy powder(kg)	654.59	464.61	40.89	↑
Ecstasy tablet	395,984	772,421	-48.73	↓
Yaba pills	524,964	521,384	0.69	↑
Psychotropic pills	816,938	1,139,884	-28.33	↓
Eramin 5 (tablet)	243,112	9,424,643	-97.42	↓
Ketamine (kg)	402.58	238.88	68.53	↑
Codein (liter)	6,990.19	5,571.64	25.46	↑
Ketum (liter)	36,956.82	34,179.56	8.13	↑
Ketum (kg)	9,101.46	5,237.74	73.77	↑

\*Source: Royal Malaysian Police, Royal Malaysian Custom, Malaysian Maritime Enforcement Agency and Pharmaceutical Services Division, Ministry of Health

### 3.3 Arrests of Drug Offenders

More drug offenders were arrested in 2013 as compared to 2012. A total of 128,412 persons were arrested under the Dangerous Drugs Act (DDA) 1952 as compared to 115,927 in 2012. From this data, the number of persons arrested under Section 39B which carries the mandatory death penalty was 4,301. The number of offenders under Section 39A was 9,533 and 114,578 people were arrested for committing offences under other sections of the DDA 1952. In 2013, 838 offenders were detained under the Special Preventive Measures of the DDA 1985 as compared to 813 in 2012 (Table 2).

**Table 2: Arrests of Drugs Offenders under the Dangerous Drugs Act (DDA) 1952**

<b>CASES</b>	<b>2013</b>	<b>2012</b>	<b>DIFFERENCES (%)</b>
<b>Case under DDA 1952</b>			
Section 39B	4,301	4,155	3.51
Section 39A	9,533	8,365	13.96
Other Sections	114,578	103,407	10.80
<b>Total</b>	<b>128,412</b>	<b>115,927</b>	<b>10.77</b>
<b>Case under DDA 1985 (Special Preventive Measures)</b>	838	813	3.08
<b>Total</b>	<b>129,250</b>	<b>116,740</b>	<b>10.72</b>

\*Other Sections – Section 15(1)(a), 6, 6b, 9 and 12(3) DDA

\*Source: Royal Malaysian Police, Royal Malaysian Custom

In 2013, RM94.71 million worth of assets belonging to drug syndicates were seized under the Dangerous Drugs (Forfeiture of Properties) Act

## MALAYSIA COUNTRY REPORT

1988 which is an increase of 74 per-cents as compare to RM54.42 million in 2012. Meanwhile RM6.79 million worth of assets were forfeited, a decrease of 45 % from RM12.40 million in 2012.(Table 3)

**Table 3 :Forfeiture of Property**

	2013	2012
CASES	3,185	3,210
VALUE OF PROPERTY SEIZED	RM 94,717,640.74	RM 54,425,627.15
VALUE OF PROPERTY FORFEITED	RM 6,793,060.61	RM 12,408,001.69

\*Source: Royal Malaysian Police

#### 4. CURRENT TRENDS.

Intelligence revealed that there is a changing landscape of Methamphetamine trafficking. Previously, the West African region is not known to produce ATS but has prominently become a point of origin of Methamphetamine trafficked to South East Asia including Malaysia. The Nigerian syndicates in Malaysia which used to traffic primarily cocaine and heroin, are trafficking increasing amount of methamphetamine in Malaysia by air couriers and parcel services.

Intelligence also revealed the emergence of Afghan opiates in Malaysian shore. It's been trafficked from Afghanistan to Malaysia via Islamic Republic of Iran and Pakistan by the Iranian syndicates and the Pakistani syndicates which collaborate with the Nigerians and local syndicates. In their bid to avoid detection by the authorities, they diversify their mode of transportation from using air couriers to maritime trafficking (sea cargo). Even though maritime trafficking is the least common among cases involving other modes of transportation i.e. via air and land route, by weight of seizure reveals that maritime seizure is consistently the most likely to be a large seizure (more than 6 kg). A new maritime route from Afghanistan via ports in Islamic Republic of Iran, Pakistan and India is increasingly being used by drug traffickers to smuggle the drugs especially heroin to consumer markets through Malaysia.

## **5. OVERVIEW OF THE DRUG LAW AND LEGISLATION**

### **5.1 DRUG LEGISLATION**

Drug legislation in Malaysia is comprehensive and covers both prevention and treatment and rehabilitation. This reflects the seriousness of the national efforts to curb drug trafficking and drug abuse. The existing laws are continuously reviewed to identify weaknesses and consequently enhance their effectiveness.

Malaysia's drug laws are found in six (6) major statutes. They are:

- i. The Dangerous Drugs Act 1952;
- ii. The Poisons Act 1952;
- iii. The Drug Dependents (Treatment and Rehabilitation) Act 1983;
- iv. The Dangerous Drugs (Special Preventive Measures) Act 1985; and
- v. The Dangerous Drugs (Forfeiture of Property) Act 1988
- vi. The National Anti-Drugs Agency Act 2004

### **5.2 PRIME MINISTER'S DIRECTIVE NO1 –THE CABINET COMMITTEE ON THE ERADICATION OF DRUGS AND ITS SUB-COMMITTEES**

The Cabinet Committee on the Eradication of Drugs was established in 2004 in accordance with Prime Minister's Directive No 1. Under this Committee, currently there are three (3) Sub-Committees. The aim of these committees is to oversee and review the implementation of the National Drug Control Strategy and to ensure its effective implementation.

The three sub-committees act as the working group and suggests new policies for implementation or reviews existing policies. The Cabinet Committee makes the final decision and on any changes in policy.

The three (3) Sub-committees currently focus on the core areas are:

- i. Prevention Education and Publicity – chaired by the Minister of Communication and Multimedia
- ii. Law Enforcement – chaired by the Minister of Home Affairs.
- iii. Treatment and Rehabilitation – chaired by the Minister of Health

## **MALAYSIA COUNTRY REPORT**

This system is replicated at the state level and reaches into the district level. By a directive issued by the Prime Minister in April 2007, Members of Parliament can chair meetings at the district level committees, and thus play an important role at the local community to prevent drug abuse.

### **6. DEMAND REDUCTION PROGRAMMES**

#### **6.1 DRUG TREATMENT & REHABILITATION**

Malaysia is one of the few countries in the region that has developed a compulsory rehabilitation program for drug dependents. The objective of the treatment and rehabilitation program is to enable drug dependents to overcome the physical and psychological addiction to drugs and to thereafter live a drug-free lifestyle. Another rehabilitation centre is in the form of open access service which known as Cure & Care 1Malaysia Clinic.

The National Anti-Drug Agency implements four (4) methods of treatment and rehabilitation namely:

- i. Rehabilitation in the Institution (Cure & Care Rehabilitation Centre) ;
- ii. Rehabilitation in the Community (Cure & Care Service Centre, Caring Community House) ;
- iii. Open-Access Services (Cure & Care 1Malaysia Clinic) ; and
- iv. Rehabilitation through career (Cure & Care Vocational Centre)

A suspected addict can be detained for a period of 14 days for urine and medical examination to ascertain his status. If he is certified to be an addict and the recommendations in the social report proposed by the Anti Drugs Officer, the magistrate can either sentence offenders to an institutional rehabilitation program or place him under the supervision of a Rehabilitation Officer/Anti-Drug Officer in the community.

There were about 5,136 drug dependents who had undergone treatment and rehabilitation at the 18 Cure & Care Rehabilitation Centres (CCRC) in 2013. The National Anti-Drug Agency has introduced a new approach from institutionalized

## MALAYSIA COUNTRY REPORT

rehabilitation to an open approach (Open Access Services) with the setting up of the Cure & Care 1Malaysia Clinics or (C&C 1Malaysia Clinic) in July 2010. As of July 2010 until December 2013, a total of 38,124 clients visited and received various services at the C&C 1Malaysia Clinic throughout the country. A total of 12,807 clients underwent the inpatient treatment, 11,023 clients received outpatient treatment and 14,294 people visited C&C 1Malaysia Clinics for advocacy.

For community rehabilitation program, the agency has introduced the CCSC and CCH to offer treatment and rehabilitation in the community settings. In 2013, 2,011 of clients (residential) received treatment in 56 CCSC throughout the country while 114,454 clients had received treatment at 76 CCH.

The Government has established twelve (12) C&C 1Malaysia Clinics since the first clinic started operation at the end of 2010. The role and functions of these centres are as follows:

- i. Provides open access services to drug dependents, drug users, co-dependent, employers and individuals with drug problems to seek treatment and counselling from medical specialists/psychiatrists at anytime;
- ii. Drug dependents or drug users do not have to go through the legal procedure/implications and clients come voluntarily.

To date, the Government has also established 56 Cure & Care Service Centres (CCSC). The role and functions of these centres are as follows:

- i. To plan and implement drug preventive programs at the district level;
- ii. To provide facilities for drug treatment and rehabilitation for volunteering drug addicts;
- iii. To provide counselling and advisory services to those who require such services;
- iv. To manage and determine the rehabilitation program that would best suit the clients. These clients are referred to the centre by the police or themselves volunteering for treatment and rehabilitation;
- v. To provide follow-up services to those addicts who are mandated under the Supervision Program and for those who have completed their program at the Government Treatment and Rehabilitation Centres.



### 6.2 GOOD PRACTICES

The Cure and Care 1Malaysia Clinic is an important landmark in Malaysia's response to drug use and HIV/AIDS. The objectives and activities of the operational model in drug rehabilitation centres confirm the shift from punitive approaches to harm reduction models and they have been recognized as good practices by the World Health Organization (WHO). The recent changes also confirms that a new paradigm shift is emerging, where a variety of treatment options that best meet clients' needs are available for them to choose from within these government-operated institutions.

## 7 DRUG PREVENTION PROGRAMMES

Primary prevention programs involve prevention education in schools and dissemination of information to the public. The programs are aimed at insulating members of society, especially youths, from falling prey to the drug scourge.

The activities carried out in 2013 fall into these broad categories:

- Drug Free Family
- Drug Free Education
- Drug Free Workplaces
- Drug Free Community
- Public awareness
- Anti-drug Volunteers

### 7.1 Drug Free Family

#### i. Family On Alert

Family on Alert program is a program in the form of lectures, recreation and activities that involves family. This program aims to ensure a happy family program implemented to families at risk in order to address the drug problem more effectively.

### 7.2 ii Drug Free Learning Institutions

## MALAYSIA COUNTRY REPORT

### i. **SHIELDS**

This program referring to motivational camp aimed to increase awareness and empowering the students' resilience of those between (13 to 18 years), identified in the risk of drug abuse. The objective of this program which are to identify the students involved in drug abuse, promote awareness and knowledge about the dangers of drugs and their effects, cultivate a good attitude and practices and adopt a healthy lifestyle and strengthening the capacity and commitment to school and families in guiding their students' drug-related problems

### ii. **Tomorrow's Leader**

Programs are conducted for undergraduates in institutions of higher learning (universities, colleges and other training or technical institutions) to raise awareness among the students in the form of lectures, group training and student activities.

## 7.3 **Drug Free Workplaces**

This program is in the form of lectures, urine screening tests, recreation and exhibition. National Anti-Drugs Agency functions to make sure the employer in all public, private and agronomy sectors implement the program in accordance with NADA guidelines

## 7.4 **Drug Free Community Programmes**

### i. **National Service Training Program (NSTP)**

The main objective of this program is to ensure that youths have the skills to practice healthy lifestyle for themselves and in helping others. The module focuses on basic knowledge about drugs and their effects on health, to create awareness and skills on making informed decisions and goals in life, to provide life skills and coping with stress.

### ii. **Peers Against Drugs - *Rakan Anti Dadah (RADA)***

The National Anti-Drugs Agency introduced a club-like project, Friends against Drugs for the youths (RADA), which covers the urban towns or rural areas of the country. It aims in enhancing life skills of this vulnerable group to be more resilient in saying no to drugs. Youths

## MALAYSIA COUNTRY REPORT

can act as the *ears and eyes* of the community in protecting their environment from drugs and other drug-related activities. Membership drives are carried out in the country to entice youths to join the “club” whereby healthy lifestyle activities are formulated and implemented.

**iii. Womens’ Alliance Against Drugs (MAWADAH)**

MAWADAH is a volunteer program to assist women in the agency to address the drug problem as an exclamation program and anti-drug campaign from house to house. The objectives of this program are to provide knowledge and understanding to women about their roles in combating the drug problem in the society, to provide skills to women to help family members from getting involved in drugs and mobilizing women actively participate in prevention programs and drug treatment in the community.

**iv. Success, Maturity, Active, Rationally and Responsibility (SMART)**

These programs are targeted to youth at risk in the form of enhancing the skills, knowledge and awareness about the dangers of drugs and to instil positive way of life in creating drug-free youth.

**National Anti-Drugs Day**

This program is celebrated on February 19 every year to note that the drug is still a major threat to the country and health.

**v. MAHABAH (*Masjid Hentian Bebas Dadah*)**

Mosque as one stop centre in eradicating the drug menace is a religious approach in spreading antidrug messages and promoting healthy community without drugs. Mosque as a platform to give talks and religious activities that creates awareness on the ill effects of drug abuse. These activities cater to Muslims and it is government’s fervent hope that religious approach could also helps as one of preventive measure tools.

**vi Anti-drug Volunteers (1Malaysia SQUAD)**

Anti-drug Volunteers (1Malaysia Squad) was established on 4<sup>th</sup> July 2011 in line with the recommendations of the Honourable Datuk Seri

## MALAYSIA COUNTRY REPORT

Hishammuddin Tun Hussein, former Minister of Home Affairs. It is also the 7<sup>th</sup> commitment of the Ministry of Home Affairs which is to enhance the wave of volunteerism. The main objective of the 1Malaysia Squad establishment is to ensure that all the volunteers will act and work as a team to help the government in drugs related problems. The idea is that caring volunteers could help at the grass root in the fight against drug abuse within their community.

Antidrug volunteers provide assistance and support (psychological and emotional) for those who have drug problems to seek treatment or rehabilitation at NADA's facilities. This is done by executing home visit and outreach activities that have impacted good results in NADA's transformation programs. The empowerment of volunteerism had proven that the visibility of people helping other people in need has increased the antidrug activities nationwide. Furthermore, as of today, the membership has risen to 219,933 people since its establishment and gaining attention from all walks of life including the professionals (lawyers, teachers, lecturers, journalists, broadcasters, business executives and many others) to join the wave of anti-drugs volunteers.

Other than that, as agent in promoting NADA's services delivery, 1Malaysia Squad has demonstrated their idealism by organizing and co-organized programs and activities with NGOs and local councils in their capacity to achieve drug free community. The establishment of 1Malaysia Squad that comprises of six (6) antidrug volunteer associations also attests cost effective for NADA in providing the best services to people at large. By merging six associations under one umbrella and branding, activities and programs implemented are now efficiently cost saving.

### **vii. Programs or activities in conjunction with Religious/Cultural Festival**

In conjunction with religious or cultural festivals, anti-drugs activities or programs are also conducted during the celebrations to ensure that

## MALAYSIA COUNTRY REPORT

the antidrug messages and awareness on living a healthy life without drugs are well received all over the country.

### **7.5. Public Awareness**

The concept of prevention programs is to provide education programs that can provide knowledge and enlighten the public on the dangers of drugs. Drug prevention program in the form of anti-drug public awareness and publicity have been carried out throughout the year 2013 which aims to educate, enlighten and get community support to fight against drug abuse. Along with the trend and the current technology, the use of various media such electronic media, print media and social networking can help to convey information effectively.

## **8. OVERVIEW OF ACTIVITIES WITH NON GOVERNMENT ORGANISATIONS, PRIVATE SECTOR AND MASS MEDIA**

Activities with non-governmental are carried out on drug prevention activities, aftercare and in the social re-integration of addicts into society. Some of the organisations are PEMADAM involved with prevention, PENGASIH assisting HIV/AIDS infected addicts, PENDAMAI and Malaysian Care assisting addicts. Other community based organisations like the Neighbourhood Committees, Village Development and Security Committees, Women's Organisations, Youth organisations also participate in drug prevention activities.

Private sector involvement is through their support of national level anti-drug campaigns and particularly in supporting drug prevention programmes in the workplace.

Private sector participation has also been encouraged in the production of posters, leaflets and billboards promoting the anti-drug message.

Media involvement in Malaysia has been through the participation of the Ministry of Information providing coverage for national and international conferences and events, launch of campaigns, television and radio talk shows.

## **MALAYSIA COUNTRY REPORT**

### **9. ROLE OF PARLIAMANTARIANS**

In this regard, Members of Parliament and State Assemblymen have an important role to play in supporting and nurturing community based organizations to actively participate in anti-drug efforts. These measures include:

- i. providing leadership and support to community based organizations;
- ii. providing financial support;
- iii. providing networking/linkages between government and community based organizations;
- iv. help to form links between private sector and community based organizations;
- v. mobilize local resources to deal with emerging drug trends;
- vi. enhance civic awareness on the dangers of drugs;
- vii. inform the public on new initiatives and facilitate community acceptance eg. methadone program, use of syringes, condoms etc; and
- viii. alert the community of new trends of drugs.

### **10. CONCLUSION**

Much has been achieved by close interagency cooperation between enforcement, regulatory, treatment agencies and other support services within Malaysia. Nevertheless, the Government continues to improve its machinery to combat the threat of drugs which is still considered a security problem. Malaysia believes that the only way to solve the drug problem is through multi-disciplinary approach and in partnership with all sectors of society in the country and by strengthening cooperation with its neighbouring countries.. Malaysia will continue to cooperate with the international drug control, law enforcement and other international organizations to stem illicit trafficking of drugs.

**MINISTRY OF HOME AFFAIRS**

**MALAYSIA**

**2 MAY 2014**