

## **Alleviating issues surrounding people with substance use disorder in Indonesia: a transdisciplinary research effort**

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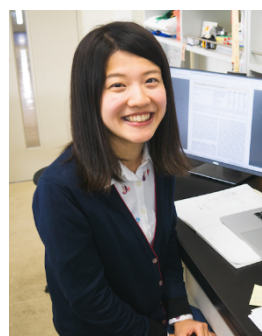
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Substance use disorder (SUD) is a leading contributor to global burden of disease. In Indonesia, evidence for psychotherapy for SUD with potential widespread implementation is scarce, and any standardised modality is unavailable. This fact may absolve policymakers to incarcerate people who use drugs (PWUD) under the ‘War on Drugs’—a recent trend among populist leaders in Southeast Asia. Such precarious condition pushes PWUD into a negative spiral of marginalisation.

To alleviate the situation surrounding people with SUD, we developed a community-based psychotherapy termed Indo-DARPP—Indonesia Drug Addiction Relapse Prevention Program—a scalable, workbook-guided, provider-friendly group therapy. One focal point is peer support; sessions are provided by peer counsellors—i.e., people with lived experience of SUD—with optional facilitation by healthcare workers, via online telemedicine to circumvent the pandemic. In a transdisciplinary research effort involving academia, medical practitioners, peer-run organisations, and government health sector, we collaborated with eight hospitals, primary health centers, and rehabilitation services to conduct a nationwide randomised controlled trial.

This chapter will firstly touch upon the cultural and legal history of drug use in Indonesia, before unraveling the precarious condition of PWUD under recent punitive policies. Then, we will present the rationale to employ vital features of therapeutic services (autonomy, peer involvement) to meet the needs of people with SUD.

We will outlay the adaptation from a Japanese reference program, Indo-DARPP development within the Indonesian context, and present the pilot study result on acceptability and feasibility. Lastly, we will propose a transdisciplinary trial design to pragmatically assess the effectiveness of Indo-DARPP in the local reality and deliberate on challenges in future implementation. A successful result may pave a way toward nationwide standardisation, thus establishing a humanistic effort to help people with SUD instead of criminalisation.



**Chika Yamada** is a postdoctoral fellow at the Center of Southeast Asian Studies (CSEAS), Kyoto University. She earned her PhD in Kobe University, Japan, in the field of global health. Her research work for the past six years focuses on mental health, stigma reduction with peer involvement, and drug addiction, especially in the East and Southeast Asia region. Her published books concerned on the advocacy and psychotherapy for people with addiction, with academic papers in the field of public health published in international journals. Her aspiration is to promote meaningful involvement of people who use drugs themselves in health programs and policymaking regarding drug use in Indonesia—‘nothing about us without us’—and encourage policymakers to steer away from criminalisation of people who use drugs.