
**Introduction:** Malaysia adopted harm reduction (HR) as official policy in 2006 and subsequently implemented needle-and-syringe exchange programs (NSEP) and methadone maintenance therapies (MMT). Today these programs continue, somewhat in conflict with criminalisation of drug use (incarceration, corporal punishment, and police surveillance post-release from incarceration). Seven years from date of Malaysia’s HR policy inception, with funding from the Dutch government under the Community Action on Harm Reduction and the European Union funded Asia Action on Harm Reduction (Asia Action) projects, the Malaysian AIDS Council (MAC) and the Centre of Excellence for Research in AIDS (CERiA) carried out qualitative research with police officers and people who use drugs (PWUD) to determine attitudes towards harm reduction and drug use, and to elicit perspectives on better approaches in drug law enforcement.

**Methodology:** We conducted qualitative research with 20 drug user participants and 11 police officers based in police stations in various states in Malaysia (Kuala Lumpur, Pahang, and Kelantan). Based among others at the Malaysian AIDS Council, the lead author has been undertaking evidence-based advocacy and has been maintaining an advocacy log containing key events including meetings with key officials, tweets, emails and text messages that contributed to improving police awareness about harm reduction and drug evidence-based drug policy.

**Results:** In this article we summarize our approach to evidence-informed advocacy work. Our results show that police lack understanding on the efficacy and operation of harm reduction programs. They also expressed incredulity at the possibility of a drug free ASEAN region. Drug user interviews pointed to a host of police practices that constitute barriers to treatment, including abuse, corruptive practices, and failure to inform of rights. These results will also inform subsequent quantitative surveys to generate further evidence on drug law enforcement and public health implications in Malaysia.

**Discussion:** Based on the results of the qualitative research and mileage gained in advocacy, larger scale interventions involving high-level police officials may be necessary to change practices, which oppose public health evidence but are structural or are ingrained in police culture. Negative practices have the potential to seep (and in some cases, are already seeping) into other agencies in drug policy and drug control. A consolidated written drug policy would assist in mitigating these issues.

**Keywords:** drug policy, HIV, harm reduction, stigmatization, evidence-based advocacy, Malaysia