

Psychosocial Responses of Drug User During Aftercare in Rehabilitation Center

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ABSTRACT

Background: Drug abusers are victims who must be saved through rehabilitation. Rehabilitation nursing care restores normality to drug abusers, which is carried out medically and socially. The length of time and rehabilitation methods have implications for the client's psychosocial response. Objective: This research was conducted with the aim of identifying and exploring the psychosocial responses of drug abusers during aftercare process in rehabilitation centre. **Methods:** An exploratory descriptive design was used. The sampling technique was a total sample of 32 participants who during aftercare at two rehabilitation centres in West Java, Indonesia, during the period from June to August 2023. The study tool used questionnaire. The data were analyzed using descriptive statistics. **Results:** The emotional response that many drug addicts experience while undergoing rehabilitation is that 84.4% often feel bored, 68.8% often feel sad, 34.4% often feel no peace and 46.9% often have no enthusiasm for undergoing rehabilitation. The mental response experienced by many participants was that 43.8% often felt depressed, 28.1% felt confident that they would not relapse after completing rehabilitation. The behavioral response was 40.6% often felt that they were not strong enough to obey all the rules, 62.5% often felt embarrassed by their status as rehabilitation patients and 62.5% of participants believed that the rehabilitation they were undergoing didn't make them aware of the need to undergo it live normally. **Conclusion:** More psychosocial responses are maladaptive. This is most likely an effect of the rehabilitation method used, and the length of time required to undergo rehabilitation.

Keywords: Aftercare; Drugs; Psychosocial

INTRODUCTION

Drugs are a humanitarian disaster that can destroy the foundations of life. The impact is very large and serious not only on individual users but also on families, communities, nations and countries. This is a serious threat facing the world community today, including Indonesia. The distribution and abuse of drugs occurs across national borders (UNODC, 2024), so that countries in the world face this serious threat. The distribution and abuse of drugs in Indonesia is so worrying that President Joko Widodo declared it a drug emergency. This emergency cannot be separated from the increasing number of drug cases involving users, dealers or syndicates and the losses they cause. Moreover, many of the nation's children of productive age experience drug addiction.

Drug abuse cases are a snowball phenomenon (Wahyuningtyas & Nurrilla, 2021) where hidden cases are likely to be greater than discovered cases. This is a global problem facing the world, including Indonesia. The prevalence rate of drug abuse in Indonesia in 2023 is 1.73%. This means that out of 10,000 people aged 15-64 years, 173 people use drugs. The prevalence rate of drug abuse in urban areas is greater than in rural areas. In the 2023 survey, the prevalence rate of drug abuse in urban areas for the past year is 2.10%, while the prevalence rate for ever use in urban areas is 2.77%. The prevalence rate of drug abuse in rural areas is 1.20% for past year and 1.39% for ever used (National Narcotics Board, 2024).

The above reality is a very serious threat, so hard efforts are needed that are structured, systematic and holistic in efforts to handle it. Currently, efforts to deal with drugs are still more focused on preventing and

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eradicating drugs. Meanwhile, efforts to rehabilitate drug users are still not a top priority. However, aftercare is equally important in efforts to overcome this humanitarian disaster (Analisa *et al.*, 2022; Prihadi, 2024). Drug users are victims of drug distribution and trafficking syndicates who must be saved (Ariyanti, 2017). Deciding to be rehabilitated is an extraordinary commitment for drug users to be free from the influence of drugs and live a normal life. Rehabilitation of drug users is one of the targets of the Sustainability Development Goals (SDGs) which has been jointly agreed upon by countries in the world, including the Indonesian Government (Siahaan, 2024).

Rehabilitation nursing care process is carried out to train oneself to get rid of drug addiction and not relapse. The rehabilitation process requires a long time and strong self-commitment. This condition can cause unpleasant conditions both during rehabilitation and post-rehabilitation (Susanti *et al.*, 2022; Utomo *et al.*, 2024). This can be seen from the high prevalence of relapse after rehabilitation. Forty to sixty percent of persons in general relapsed after completing detoxication and rehabilitation treatments (Kabisa *et al.*, 2021). The more potential for post-rehabilitation relapse is a challenge in the rehabilitation service process. Rehabilitation services must be able to create pleasant conditions in the process of increasing the addict's self-competence in dealing with triggers that threaten relapse. Therefore, it is important to evaluate the psychosocial response of drug addicts during aftercare in rehabilitation centre.

METHODOLOGY

Study Design

An exploratory descriptive study carried out at two rehabilitation centres in West Java, Indonesia. Exploratory descriptive research design combines exploratory and descriptive research methods to gain insights into a topic. The combination of both designs complements each other. Both approaches are important to accurately describe the observed patterns for better understanding and future exploration (Anggarwal, 2025).

Study Sample

Sampling in the study was conducted non-probability. This was done because it was not possible to take samples randomly and the number of samples that met the criteria was limited (Ahmed, 2024). The type of sample in this research was purposive sampling with a total of 32 clients. The samples taken were respondents who met the criteria including having status as inpatient clients in rehabilitation centres, not experiencing mental disorders, being able to communicate well, and willing to become respondents.

Study Tools

The research was conducted from June to August 2023. Research data was collected using a close-ended questionnaire in the form of a Likert scale. The questionnaire covers three aspects studied, namely emotional, mental, and behavioral response which were sub-variables of psychosocial responses in this research. The emotional response aspect questionnaire contains questions to determine the feelings experienced by residents during rehabilitation, which consists of four questions. The mental response aspect questionnaire consists of two items, namely questions related to beliefs about not relapse, and beliefs about not giving up after completing rehabilitation. The behavioral response aspect questionnaire includes five things, namely the ability to follow rules during rehabilitation, the ability to develop oneself after completing rehabilitation, response to the status of being a rehabilitation patient, and the ability to live a normal life after undergoing rehabilitation. The validity and reliability of the tool were confirmed before all the data were collected. psychosocial responses during aftercare in rehabilitation. The validity and reliability of the tool were confirmed before all the data were collected.

Data Analysis

Descriptive statistics were relied upon to analyze data using frequencies and percentages.

Ethical Consideration

The researchers obtained ethical clearance from the ethics committee of the research institute STIKes Kuningan, West Java, Indonesia with reference number 045/Lemlit/STIKKU/VI/2023 on 15th June 2023.

RESULTS

Participant Characteristics

Respondents were residents or clients who were during aftercare in rehabilitation centre. Aftercare is a follow-up rehabilitation program after completing medical rehabilitation at the National Narcotics Agency. The respondents were all male with the youngest age being 13 years and the oldest being 48 years.

Respondents' education was 9.3% had elementary school education, 68.8% had junior high school graduates, and 21.9% had high school education. More than half of respondents (56.3%) were unemployed. Respondents' occupations as much as 71.4% work in the non-formal sector whereas 28.6% still have student status. Jobs in the non-formal sector in question are labourer, traders and self-employed.

Psychosocial Response

The psychosocial response of drug user during aftercare in rehabilitation centre is divided into three scopes of response namely emotional, mental, and behavior response.

Emotional Response

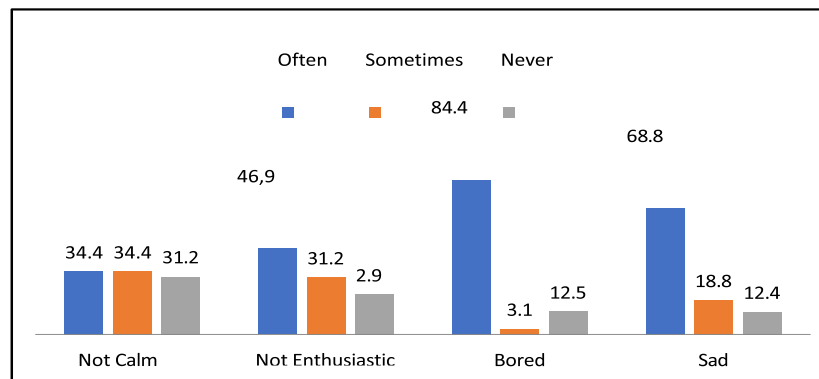


Figure 1: Emotional Response During Aftercare in Rehabilitation Center

The emotional response is many drugs user experience during aftercare in rehabilitation centre are feeling bored and sad. As many as 84.4% of drug addicts often feel bored while in rehabilitation centres and undergoing routine rehabilitation activities. In fact, as many as 68.8% often felt sad during the rehabilitation process. Apart from feeling bored or bored and sad, 34.4% of respondents also often felt uneasy during rehabilitation and 46.9% often had no enthusiasm for undergoing rehabilitation.

Mental Response

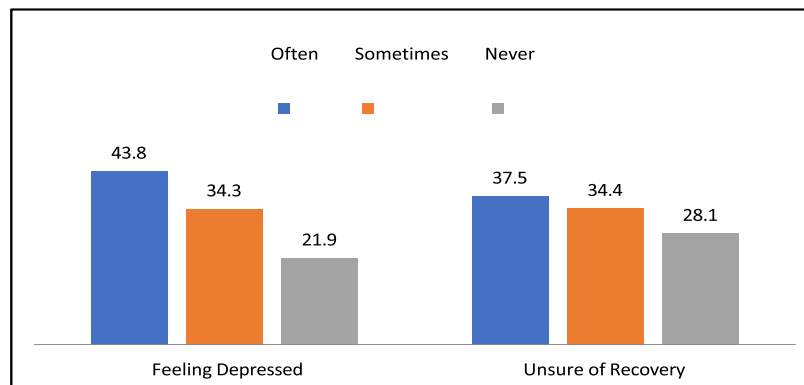


Figure 2: Mental Response During Aftercare in Rehabilitation Center

The mental response was that many respondents experienced during aftercare in rehabilitation centre was that their thoughts often felt depressed (43.8%). Apart from depressed thoughts, it turns out that as many as 37.5% felt that the rehabilitation process, they were undergoing was not sure that they would not relapse. Meanwhile, only 28.1% felt confident that they would not relapse after completing rehabilitation.

Behavioral Response

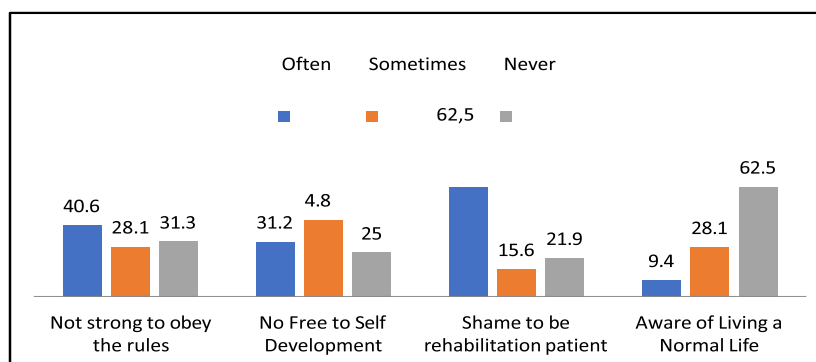


Figure 3: Behavioral Response During Aftercare in Rehabilitation Center

The behavioral response that many respondents experienced aftercare in rehabilitation centre was that they were often not strong enough to obey all the rules applied in the rehabilitation centre (40.6%), sometimes they felt that while undergoing rehabilitation they were not free to develop themselves (43.8%), often feel embarrassed by their status as rehabilitation patients (62.5%), and the rehabilitation process they are undergoing does not make respondents aware of living a normal life (62.5%).

DISCUSSION

Addicts are basically victims of narcotics abuse that violate government regulations (Hamamah, 2021) and must be restored through a rehabilitation process in accordance with the mandate of the law. One of the objectives of the narcotics law in Indonesia is to ensure the implementation of medical and social rehabilitation efforts for people who abuse and/or are addicted to narcotics (Hartono *et al.*, 2023). Rehabilitation still tends to focus on the medical aspect. Whereas the social rehabilitation aspect has a big effect on healing. Inadequate social rehabilitation can leave individuals unprepared for social integration which later increases the risk of relapse (Abdurrahman *et al.*, 2024). In the study, a description of the psychosocial responses experienced by participants during rehabilitation was obtained. This psychosocial response indicates that psychosocial aspects should not be ignored. The psychosocial response that many participants complain about boils down to boredom. Boredom will give rise to various negative responses. This is confirmed by the research results Park, Lim & Oh (2019), there was a causal link between boredom and performance, individuals who felt bored were more likely to come up with unique ideas than those who did not feel bored. This effect remained significant even after controlling positive and negative moods.

Boredom does not occur due to one cause but rather an accumulation of external and internal factors in the individual. This is in accordance with what was stated by Ndeti, Nyamai and Mutiso (2023), boredom can be caused by a lack of external stimulation or by internal factors such as a lack of motivation or a sense of purpose. It can arise from routine tasks, repetitive activities, or lack of novelty, which can result in a sense of time dragging or feeling stuck in a monotonous routine. Addiction is found due to difficulty in adjusting to the environment (Yolita *et al.*, 2022). Feeling bored indicates the participant's ability to adapt to the situation and environmental conditions they experience. Negative feelings are one of the internal factors that can cause someone to relapse.

Participants complained that they were bored of undergoing aftercare nursing due to the monotonous routine of activities and the long rehabilitation process. According to the National Institute on Drug Abuse (NIDA), addiction treatment should last at least 90 days to be effective (American Addiction Centres, 2024). Even the rehabilitation program for drug abusers in Indonesia was established in the National Narcotics Agency Regulations Republic of Indonesia Number 1 of 2019 in article 12-point c, it is stated that the minimum rehabilitation program is 6 months and a maximum of 12 months. Feeling bored during rehabilitation can indicate an inability to control negative feelings. Negative feelings are one of the internal factors that can trigger a relapse (Raharni *et al.*, 2022). Many of the participants' psychosocial responses were negative due to the location of the rehabilitation centre being far from the participant's place of origin and

being in a quiet environment. The distance effect on mental response to environment (Hepdarcan *et al.*, 2021). This long distance gives the impression that participants maintain their distance from the social environment. This further strengthens the negative response. Research result by Wong, Yang and Liu (2023), that social distance was negatively related to emotions and risk perception.

Despite the many negative psychosocial responses, there were important elements obtained by participants. The important elements related to the awareness of rediscovering the purpose of life and spiritual awareness. This element was very important as capital to be able to reintegrate participants back into their families and communities. It was also reinforced by various research results. Masanda *et al.* (2021), identified three elements that are considered important in the reintegration efforts of participants back to their families and communities, namely (1) finding a better purpose and meaning in life through spiritual improvement; (2) family-oriented treatment; and (3) having holistic and dynamic activities. Addiction is a changing disease that there isn't just one single cause but rather, a highly complex illness that develops when many different factors come together (Batta, 2018). Generally, addicts are considered to be unable to make informed choices or regain control over their lives (Klingemann, 2020). To be able to improve one's abilities, the aftercare service approach must be more personally specific due to each person has a different background related to using drugs. The ability to cope with stress is very important for clients. Lack of this ability can increase the risk of relapse. Uyun's research results (2023) found that residents of drug rehabilitation centres still return to using drugs when experiencing stress.

The rehabilitation service approach model has an impact on participants. In this study, different approaches were obtained. Each rehabilitation centre has its own unique service approach model. There were two approaches applied, namely the therapeutic community approach and the religious approach. Different approaches can inspire different changes in daily life that have an impact on the client's quality of life (Song *et al.*, 2024). The development of rehabilitation programs is very important to prevent relapse and improve the quality of life of clients. Rehabilitation therapy methods complement each other. These therapy methods are essential to help clients. Therefore, rehabilitation programs must be able to provide effective guidelines for clients, such as how to control emotions, how to deal with work environment pressure, how to socialize well in society (Hossain, 2023). A personal approach is more focused on the ability to be responsible for oneself. To achieve that, emotional support, social skills and an increasingly high understanding of the dangers of drugs are needed. These three components are needed to improve the ability to overcome relapse and resolve various problems after rehabilitation (Rahayu *et al.*, 2024).

Limitation

There were several limitations in this research, including the small number of participants. This is related to the policy regarding rehabilitation programs where participants who have completed rehabilitation at National Narcotics Board are distributed to several rehabilitation institutions for aftercare programs. Another research limitation is the research method used. It was based on the researchers' considerations, where the results of this research are used as a basis for developing further research using various research method approaches.

CONCLUSION

The study emphasizes the psychosocial responses experienced by patients during rehabilitation. The results obtained there were three psychosocial responses found, namely emotional, mental and behavioral responses. The emotional response that was often experienced by respondents was feeling bored and sad. This emotional response was the main response that underlies other responses. The consequence of the mental response was that many respondents experience depression and were unsure of recovery. In addition, emotional responses also had an impact on behavioral responses. The behavioral responses that were often experienced by participants were being ashamed of their status as drug rehabilitation patients and being unable to comply with carrying out their roles in society.

The three types of psychosocial responses that were mostly maladaptive were caused by many factors. There were two main factors that influenced the maladaptive psychosocial responses, namely factors within the respondent and factors of the rehabilitation centre. The main internal factor was the compulsion to undergo rehabilitation. While the factors of the rehabilitation centre that influence it include the location of

the rehabilitation centre, the length of the rehabilitation process and the generalist approach. Future research could explore tailored psychosocial interventions that address boredom and emotional distress during rehabilitation. Additionally, comparative studies on different rehabilitation models may help optimize relapse prevention strategies.

Recommendation

To prevent negative impacts from processes and methods, there are several recommendations that need to be followed up and developed, including: rehabilitation methods emphasize a specific, personal approach according to the client's background; It is necessary to strengthen skills related to stress and adaptation in living life in society and the workplace after rehabilitation; post-rehabilitation monitoring and follow-up needs to be optimized by involving the active participation of social capital. The research results can be used as a basis for the development of science and technology in rehabilitation services by developing various research models.

Conflict of Interest

The authors declare that they have no competing interests.

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