

# Module of "Bebas Dari Narkoba" by Increasing Abstinence Self Efficacy through Group Cognitive Behavioral Interventions

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**Keywords:** Group Cognitive Behavioral, Cognitive Restructuring, Coping Skill, Abstinence Self Efficacy, Relapse, High Risk Situation.

**Abstract:** Researchers in their second year of research have proven that the "Bebas dari Narkoba" Module with the Group Cognitive Behavioral Concept can be used by non-psychologists in drug rehab centers to help drug users improve Abstinence Self Efficacy. In this third year, researchers follow up to see the effectiveness of the "Bebas dari Narkoba" Module provided by non-psychologists to former drug users who have returned to society, using a qualitative and quantitative approach to gain more comprehensive understanding of the modules tested. The methods used in data collection were focus group discussions with five non-psychologist counselors, in-depth interviews and the Brief Situational Confident Questionnaire to ten former drug users who had been dealing with high risk situations trigger relapse. The results show that the "Bebas dari Narkoba" Module is useful in increasing self-confidence to refuse to use drugs again after experiencing cognitive restructuring and apply coping skills techniques. The high category Abstinence Self Efficacy is shown by 70% of participants and very high category by 20% of participants and 10% in the medium category. This shows that participants are confident enough to be able to face the high risk situation encountered in the community or in the family environment.

## 1 INTRODUCTION

Drug abuse is no longer fresh news and is like an iceberg phenomenon in increasing of numbers. Various efforts have been made to address the increasing number of drug users. One is through agencies or rehabilitation centers to help users regardless of their dependence on drugs. But they remain vulnerable to relapse after leaving the rehabilitation center due to the inability of former drug users to reject the offer of using drugs again. Not yet having the right coping technique and rational mind in the face of high risk situation (HRS), the situation triggered the desire to use drugs again.

The first year of the study was to create a "Bebas dari Narkoba" module by increasing Abstinence Self Efficacy (ASE) through techniques in Group Cognitive Behavioral interventions to help drug users avoid relapse in the HRS. Through experimental tests with pretest-posttest control group design, the results showed that combining skill coping and cognitive restructuring techniques is

more effective in enhancing ASE than by giving these techniques separately.

In the first year of the study, the "Bebas dari Narkoba" Module was conducted by a psychologist, while the psychologist's rehabilitation centers were so limited that it was certain that few drug users could be treated to improve ASE. Researchers in the second year validated the "Bebas dari Narkoba" Module to be used by non-psychologists working in drug rehab centers. This second year research uses qualitative approach using focus group discussion method, module and experiential learning test. The results of a second year study proved that the "Bebas dari Narkoba" Module by increasing drug users' ASEs could be used by non-psychologists in rehabilitation centers.

In this third year, researchers intend to follow up on drug users who have been intervened by group cognitive behavior approach by non-psychologist by using qualitative and quantitative approach, in order to get a comprehensive understanding about the effectiveness of the module tested..

## 2 THEORITICAL REVIEW

Drug abuse in Indonesia has become a national threat, even the President of the Republic of Indonesia, Joko Widodo on the occasion of Anti-Narcotics Day in mid 2016 declares war on drugs. Based on the analysis of data on the prevention and eradication of illegal Drugs Abuse and Distribution (P4GN) nationally in 2010-2014 reported by the National Narcotics Agency (BNN) of the Republic of Indonesia, found that cases of drug abuse reached a total of 34,443 cases and the number of drug abusers reached 4,022,702 inhabitants 2014. The high number of drug abusers, resulting in Indonesia becoming a "target" of illicit drug trafficking. Various preventive and repressive efforts have been made by various parties but the recovery process of the drug addicts was not an easy thing. The vulnerable addicts experience relapse when returning to society and dealing with high risk situation (HRS). It takes a breakthrough solution to help drug users survive and reject drug use again. Related to this, drug rehabilitation centers need to be strengthened in the form of improving the ability of non-psychologists in rehabilitation centers in conducting an effective intervention in order to help drug users able to avoid relapse. One way to stay clean and not to use drugs anymore is to increase abstinence self efficacy (Ilgen, 2005) that is a belief to abstain / not use drugs in specific situations such as: negative emotional state, negative physical state (in a state of physical illness), or in the existence of interpersonal conflict.

In line with this, Witkiewitz & Marlatt (in Sarafino, 2006) also explained that one that can cause a relapse addict is a belief in his low ability. An individual's belief in his ability to resist and remain unconventional so that no relapse is called abstinence self-efficacy (Majer, 2004). Marlat and Gordon (in Handershot, 2011) provide that an individual who is unsure of his or her ability to resist drugs will be easier to relapse. Unlike the case with individuals who believe in their ability to resist drugs, it will be more difficult to experience relapse.

According to Hagman (2004), drug users who already have confidence in their ability to avoid drug use means having an effective skill technique. Chiang (2006) stated that addicts need to do cognitive restructuring by restructuring their irrational thoughts about the benefits of drug use such as: drugs can help solve problems, increase self-esteem, without drugs it will reduce the physical ability to work and be able to overcome various day-to-day. While Rangé1 (2012) asserted that a drug user not only requires the improvement of skill

coping skills, but it is necessary to establish a rational cognitive status.

The application of cognitive behavioral techniques can be done not only to an individual but also to a group. Bieling (2006) explained that the advantages of a grouping approach focus on openness in interaction, which is characterized by freedom of expression of thoughts and feelings, mutual trust, mutual attention, mutual understanding and mutual help. Morrison (in Bieling, 2006) mentions that the advantages gained in the cognitive behavior group approach compared to the individual is efficiency in terms of time, cost and effort.

## 3 METHODS

### 3.1 Research Design

This research uses qualitative and quantitative approach as the research design

### 3.2 Participants

Participants involved in the study were 5 (five) counselors who had applied the "Bebas dari Narkoba" Module, 10 (ten) former drug users who had followed the module while still undergoing a recovery process at the rehabilitation center and had returned to the community and were dealing with high risk situation.

### 3.3 Data Collection

Data collection is done through several methods, namely focus group discussion (FGD), in-depth interview and giving the scale of Brief Situational Confident Questionnaire (BSCQ).If any, should be placed before the references section without numbering.

#### 3.1.1 FGD

The guidance in conducting FGDs involves the counselor's experience in applying the "Bebas dari Narkoba" Module using the cognitive behavioral group and informing counselors about the abstinence conditions of the participant self efficacy after returning to the community and dealing with the high risk situation.

### 3.1.2 In-depth Interview

In-depth interviews are conducted against former drug users, with the aim of identifying cognitive restructuring and the effectiveness of applying coping skills when dealing with the high risk situation contained in the "Bebas dari Narkoba" Module, when the former drug users back to the community and dealing with HRS. The results obtained are processed through verbatim analysis. In-depth interview guides include:

- Participants experience facing HRS when returning home / community.
- Situations that can trigger relapse.
- Thoughts while facing of the situation.
- Techniques used to avoid relapse.

### 3.1.3 BSCQ Scale

BSCQ scale which has been tested in terms of validity in the first year of research, aims to measure individual beliefs about their ability to remain abstain or refuse drug use in the face of high risk situations (HRS). BSCQ score analysis using 5 (five) categorization that is very high, high, medium, low, very low.

### 3.4 Data Analysis

Qualitative and quantitative descriptive analysis were used as data analysis

## 4 RESULTS

### 4.1 Focus Group Discussion (FGD)

FGD shows data that:

- "Bebas dari Narkoba" modules can be applied by counselors (non psychologists) because they have clear, concrete, measurable guidance and are proven to increase abstinence self efficacy among drug users.
- The "Bebas dari Narkoba" module can be applied to drug users from adolescence to adulthood.
- The application of a group module with sharing activities is valued to help participants to open up and understand the concrete steps they can take when facing HRS from other peers' experiences, as well as the opportunity to encourage mutual support.
- Experience sharing activities when applying modules in the form of groups is considered very

helpful drug participants / users to open up and provide support to other participants.

### 4.2 In-depth Interview

Based on in-depth interview obtained data:

- There is a shift / change / restructuring in the cognitive ex drug user about the drug and its benefits: the drug initially is everything (especially in solving the problem at hand), shifts to the destructive of life (drugs do not solve problems, destroys and robs them of their happiness) .
- 80% of participants using 3 techniques from 5 trained coping skills, self talk (no use of drugs, will spend more time to be trusted, I have a future, drugs will damage me back, I can survive without drugs, God will guide me to survive), avoid (leave old friends fellow drug users, avoid meeting with them, do not call and / or accept invitations of fellow drug users, choose not to go home to avoid situations exposed to the environment friends fellow users used to gather), and distract (doing other activities when suggestions such as playing with children, watching movies, cleaning motorcycles, contacting counselors)
  - 20% of participants who use endure techniques, in addition to these three techniques, by not giving attention to friends who are using drugs, prefer to focus on talking and playing cards.

### 4.3 Skala Brief Situational Confident Questionnaire (BSCQ)

Results obtained from the BSCQ Scale, which indicate how much participants' beliefs to refuse to use drugs are as follows:

- 70% of participants had ASEs in high category, even 20% in very high category, indicating that participants rated confident of being able to deal with HRS encountered in the community or in the family environment.
- 10% of participants showed ASE in the moderate category; showed enough confidence to be able to refuse to use drugs again after returning to the community, only very unsure to refuse to use drugs again when dealing directly with drugs.

### 4.4 Other Factors

Other factors that also play a role in supporting the success of participants are not relapse, able to refuse to use drugs again are:

#### 4.4.1 Internal Factors

- A strong determination to prove to parents and the surrounding community about changes in self (already clean / not using drugs anymore). Some participants stated strong willpower will persist by using self talk as often as possible.

- Take the decision to be in the safe circle of hanging out with counselors, following regular religious activities with new friends, who are not drug users.

#### 4.4.2 External Factors

- Acceptance and trust given by the family to former drug users.

- The time available for the counselor to open up and listen to any complaints or concerns at any time

### 5 CONCLUSIONS

The results of this study indicate that the cognitive behavioral approach that became the basis of the "Bebas dari Narkoba" module successfully increased the abstinence of self efficacy of former drug users to avoid relapse. This is in line with the opinion of Rangé (2012) that a drug user not only requires increased coping skills but needs to build a rational cognitive status in order to be able to resist drug use again. According to Martin & Pears (2012), cognitive behavioral group as a form of therapy is generally performed by a professional, in this case is a psychologist, who has undergone education and mastered the principles of cognitive behavior approach. This study proves that counselors at non-psychological rehabilitation centers were able to understand cognitive behavioral concepts to help improve the abstinence of self-efficacy of former drug users.

But even so, researchers are aware that in order to use this module extensively, it is necessary to increase the number of counselors who receive training for trainers (TOT) of the "Bebas dari Narkoba" Module. It also requires commitment from the managers of drug rehabilitation centers to apply this module as an integral part of the existing programs in the rehabilitation process so that counselors have intense experience, which can improve their skills in applying the module accurately.

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