

# Enhancing Psychological Well-being of Ex-drug Addicted Individuals in Semarang with Evidence-based Community Counseling

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**Keywords:** psychological well-being; ex-drug-addicted individuals; evidence-based practice; community counseling; evidence-based community counseling.

**Abstract:** Psychological well-being basically needs to be owned and developed by individuals to achieve happiness. For ex-drug-addicted people, maintaining psychological well-being will reduce the potential for relapse. Various best evidences collected to find effective treatment for ex-drug-addicted individuals. An evidence-based community counseling then generated and delivered to some ex-drug addicted individuals in Semarang. The treatment includes 8 sessions (90 – 120 mins. for each) of preventive-oriented and delivered in 4 weeks. At least 20 ex-drug-addicted participants in Semarang involved to this experiment. Psychological well-being of ex-drug-addicted individuals measured by Ryff's 54-item PWB Scale ( $r = 0.752$ ). It is found that evidence-based community counseling is proven effective to enhance ex-drug-addicted individuals' psychological well-being ( $z = -2006$ ;  $p = 0.045$ ). The conclusion is evidence-based community counseling could be an alternative treatment for using to enhance psychological well-being of ex-drug addicted individual. However, this study had some bias, such as small number of sample, simple research design, and validity of the treatment itself. Further research need to do to make the results could be generalized for broader populations.

## 1 INTRODUCTION

Although it can be said to be free from addiction, ex-drug addicts are still shadowed by the fear of relapse. Approximately 80 to 90 percent of ex-addicts experience relapse (Schwartz, et al., 2008). This can occur due to various factors. For example, if individuals are in a negative social environment where they are in contact with people who use alcohol or other drugs, they are about two and a half times more likely to relapse using alcohol or drugs (Chong & Lopez, 2008). Therefore, in the complexity of current life, maintaining psychological well-being is very important to protect a person from factors that can negatively affect physical and mental health (Hidalgo, Bravo, Martinez, Pretel, Postigo, & Rabaddan, 2010: 78). Especially for an ex-drug addict who wants to survive in abstinence.

Psychological well-being (PWB) is a concept related to what an individual feels about activities in

daily life and leads to the disclosure of personal feelings about what is felt by individuals as a result of his life experiences (Ryff, 1989; Ryff, 2014). Psychological well-being can be reflected through philosophical questions such as: (1) the extent to which a person feels their life has meaning, purpose and direction; (2) do they see themselves living according to their own personal beliefs; (3) the extent to which they utilize their personal talents and potential; (4) how well they manage their life situation; (5) how significant are their connections in relationships with others, and (6) what knowledge and acceptance do they have about themselves (Ryff, 2014). Someone who is psychologically prosperous will have immunity from stress and other negative tendencies.

Related to this, there has been found a link between the low psychological well-being of a person and the tendency to use drugs. Although it is not yet known whether the low psychological well-being affects individuals to tend to use drugs, or

precisely the use of drugs is what makes a person's psychological well-being to be low (Visser & Routledge, 2007). But what can be clearly known is the stressful life events associated with aggression that can lead to peer alienation and lead to an increase in the possibility of drug use (King & Chassin, 2008). In contrast, a study of 40 drug addicts in East Tehran showed that those who had long been in abstinence had a higher average psychological well-being score (Dogahneh, et al., 2013). This confirms the assumption that people who have high psychological well-being can maintain an abstinence period without experiencing a recurrence.

Even though psychological well-being offers important things to prevent relapse, the factual conditions in Semarang show that the implementation of assistance efforts for ex-drug addicts has not facilitated this much. Generally therapeutic community in the field has not been standardized (Ginting, Priyanti, Hilderia, & Andriansyah, 2014). In many places, available forms of community counseling are often ineffective, not supported by scientific evidence, and sometimes not in line with human rights and involuntary principles (UNODC, 2016).

An empirically proven model is needed to provide effective assistance. This model must be structured with involvement by people who receive intervention, integrated by explicit knowledge from those who provide intervention, in the context of available resources (Leen, Bell, & McQuillan, 2014). Because human behavior is strongly influenced by the context in which the individual is located, then to provide assistance to people in this group, counselors need to work within the scope of community counseling. Community counseling can be interpreted as a comprehensive assistance framework based on multicultural competence and oriented to social justice (Lewis, Lewis, Daniels, & D'Andrea, 2011). Counselors in the community sphere use strategies that facilitate the development of mental health both individual clients and the surrounding community. Furthermore, support within the community can also have a good impact on drug addicts. As mentioned that family, respected authority, and commitment are found to be protective factors that can reduce the likelihood of relapse (Giordano, Clarke, & Furter, 2014).

In addition, the ideal interventions to be carried out need to be supported by rigorous empirical studies. Especially for subjects who have special characteristics and there are still not many valid models to be implemented for them, practices that refer to the best evidence promise better

effectiveness. Moreover, in the last few decades, counselors have been encouraged to turn to evidence-based interventions (Hays, 2010). An evidence-based community counseling model is then designed and tested to improve the psychological well-being of ex-drug addicts. This model is a group intervention that is oriented to the prevention of relapse and the development of skills to maintain abstinence for ex-drug addicts. Intervention with group format was chosen because it has been proven effective to improve psychological well-being in drug addicts (Suresh & Sachin, 2014). Counseling in group formats was also found to be effective in reducing marijuana and alcohol use among participants who received peer support, and gained strength in social behavior (Mason, et al., 2015).

Good evidence from previous research provides efficacy about how potential group interventions are colored by community touches and tested practices for improving psychological well-being in ex-drug addicts. However, in order to obtain stronger empirical evidence regarding the combination of these interventions, further testing is needed.

## 2 METHODOLOGY

This study uses between groups experimental design. Twenty people were selected in clusters from a total of 40 ex-drug addict clients in 2 post-rehabilitation institutions in Semarang. Treatment tests focus on clients in one institution due to considerations of time visibility and permits that are more likely. The selected sample has met the criteria as: (1) having good cognitive function; (2) willing to be a research subject; and (3) get permission from the institution. The sample was then divided into experimental groups and control groups. Evidence-based community counseling was given to 10 people in the experimental group, while in 10 people the control group was given treatment as usual. The research design can be seen in table 1.

Table 1. Research Design

Pretest	Treatment	Posttest
O1	X	O3
O2		O4

Note: O1, O3 = Experiment group; O2, O4 = Control Group

### 2.1 The Treatment

The experimented treatment is evidence-based community counseling. This is a prevention and

individual development oriented intervention model given to ex-drug addict clients in the city of Semarang. This intervention consists of 8 sessions with duration per session for 90 – 120 minutes. The session is divided into 1 opening session, 4 main sessions, and 1 closing session. The session and its content in more detail can be seen in table 2. The entire session is completed after 4 weeks of treatment, each week is filled with 2 sessions with a distance of about 3 to 4 days between sessions. The instrument for measuring psychological well-being is given at the beginning of the first session and after the last session.

Table 2. Evidence-Based Community Counseling Model

Session	Intervention	Duration
1	Initial Session (IS.00)	2 x 50 mins.
2	Growth Group I Session (GG.01) • Topic: Life Goals	1 x 90 mins.
3	Discussion Session (DS.00) • Topic: Stigma of Ex-Drug Addicted People	2 x 60 mins.
4	Support Group I Session (SG.01)	1 x 90 mins.
5	Growth Group II Session (GG.02) • Topic: Self-Growth	1 x 90 mins.
6	Education Session (ES.00) • Topic: Cognitive-Behavior Relapse Prevention	2 x 60 mins.
7	Support Group II Session (SG.02)	1 x 90 mins.
8	Termination Session (TS.00)	2 x 50 mins.

## 2.2 Instruments and Analysis

The psychological well-being of subjects was measured using the Ryff PWB scale of 54 items, which assessed six indicators: (1) self-acceptance; (2) positive relationships with others; (3) autonomy; (4) environmental mastery; (5) the purpose of life; and (6) personal growth. This scale uses the Likert format with a score range of 1 to 6. This scale has been tested for reliability in a population similar to the sample and the results were found to be in good category ( $r = 0.752$ ). PWB scale is given as pretest and posttest. Non-parametric test then carried out on the results of the calculation of scores obtained in both groups to find out the differences and confirm whether evidence-based community counseling is more effective in improving psychological well-

being in individual ex-drug addicts compared to treatment as usual.

## 3 RESULTS AND DISCUSSION

The results in this study found a change in scores at the level of psychological well-being of subjects from before being given treatment until after being treated with evidence-based community counseling. Psychological welfare scores of subjects in the experimental group experienced a greater increase than in the control group. The data shown in table 3 shows the changes in psychological welfare scores in each group after being treated. The average score of the experimental group changed to higher (pre = 207.1; post = 221.3), while the average in the control group tended to experience a slight decrease (pre = 209.3; post = 207.4). Change in score does not only occur in the mean in general, but also occurs in all subjects in it. This difference shows that evidence-based community counseling models have a more positive impact on improving psychological well-being compared to interventions in general.

In addition to the results of pretest and posttest measurements on each subject in each group, this study also identified changes in the scores of each component in psychological well-being. The difference in scores is seen in the mean of each component. Table 4 shows the data exposure in question. Data shows that each component of psychological well-being changes from pretest to posttest, both in the experimental group and in the control group. But a striking change occurred in the experimental group where all of the components experienced a greater change than in the control group. The biggest changes occur in the components of self-acceptance (pre = 31; post = 35.9), environmental mastery (pre = 33.8; post = 36.5), and positive relationships with others (pre = 32.8; post = 35.1).

Descriptively, this shows that the evident-based community counseling model given to the experimental group proved to be more effective than the treatment as usual given to the control group in improving the psychological well-being of the subjects. In addition, the results of hypothesis testing also show results that are not much different. In the 5% error level, the mann-whitney test results showed a significant difference between the scores of the experimental group and the control group ( $Z = -2.006$ ;  $p = 0.045$ ). In summary, the results of testing hypotheses can be seen in table 5.

Table 3. Differences Between Each Groups

Experiment Group					Control Group				
Subject	Pretest		Posttest		Subject	Pretest		Posttest	
	Score	C	Score	C		Score	C	Score	C
E1	184	M	210	M	C1	220	H	217	H
E2	216	H	224	H	C2	195	M	197	M
E3	195	M	233	H	C3	222	H	223	H
E4	220	H	228	H	C4	186	M	188	M
E5	233	H	246	H	C5	211	M	214	M
E6	211	M	224	H	C6	207	M	198	M
E7	198	M	203	M	C7	244	H	232	H
E8	158	L	170	M	C8	211	M	214	M
E9	236	H	243	H	C9	190	M	193	M
E10	220	H	232	H	C10	207	M	198	M
Mean	207,1	M	221,3	H	Mean	209,3	M	207,4	M

Note: C = Category: L = Low; M = Medium; H = High

Table 4. Pretest dan Posttest Data for Each Psychological Well-Being Component

Component	Eksperimen (n=10)				Kontrol (n=10)			
	Pre.	C	Post.	C	Pre.	C	Post.	C
Self-acceptance	31	M	35,9	M	35,5	M	34,7	M
Positive relations with others	32,8	M	35,1	M	33,8	M	33,8	M
Autonomy	34,3	M	34,9	M	34	M	33,9	M
Environmental mastery	33,8	M	36,5	H	34,6	M	33,9	M
Purpose of life	37,1	H	38,7	H	37,8	H	37,8	H
Personal growth	38,1	H	40,2	H	33,6	H	33,3	M

Note: C = Category: H = High; M = Medium

Table 5. Significance Differences of Control and Experiment Group

Data	Group	N	Mean	Mann-Whitney U	Z	p
Pretest	Experiment	10	208,2	48.500	-0,144	0,909*
	Control	10				
Posttest	Experiment	10	214,35	23.500	-2,006	0,045**
	Control	10				

Note. \*p > 0,05; \*\*p < 0,05

This finding basically confirms the superiority of evidence-based community counseling compared to conventional interventions. Because an intervention based on evidence will clarify the effects of a treatment so that its use in practice results in a belief in better effectiveness (Konstam, Cook, Tomek, Mahdavi, Gracia, & Bayne, 2015). Besides that the integration between research findings and practice will provide a deep understanding of an intervention. This alignment can help develop professional confidence (Beidas & Kendall, 2010). Professional self-confidence in question is trust in using interventions found through empirical decision-making processes. The results of this study have at least temporarily provided empirical evidence that the model used in a positive impact on improving the psychological well-being of ex-drug addicts.

In technical cases, when compared to the counseling model that is generally applied in the

field, this Evidence-Based Community Counseling model has a standard time in the implementation of each session. This may affect the effectiveness of the intervention. It was stated in a study that the implementation of community therapy was found to be often ineffective due to internal factors such as non-standardization of the time of intervention implementation (Ginting, Priyanti, Hilderia, & Andriansyah, 2014).

Another reason that can explain the effectiveness of the model is related to the approach used in the model. CBT has been used extensively to influence various variables. The use of CBT in counseling and psychotherapy has reliably been able to be used in a variety of different cultural settings and contexts (Beck, 2011). Several systematic studies have shown the reliability of CBT in being the best intervention for ex-drug addicts (Klimas, et al., 2014), or for increasing psychological well-being (Heijden,

Abrahams, & Sinclair, 2017). With the high level of trust in CBT, the effectiveness of the intervention is certainly no doubt.

Other studies have suggested that to provide effective results in improving psychological well-being, interventions with narrative or behavioral approaches appear promising (Ruini, Masoni, Otolini, & Ferrari, 2014; Weiss, Westerhof, & Bohlmeijer, 2016). Through this trial of the Evidence-Based Community Counseling model, it was found that the cognitive-behavioral approach also had a significant impact on improving psychological well-being, especially for ex-drug addicts. These results certainly provide support for similar studies that use cognitive-behavioral approaches to improve psychological well-being (Yazdanbakhsh, Merzai, Dehghan, & Mahmoudi, 2016).

However, methodologically the number of samples used in the prototype model trial can be said to be too small. Limitations of time and resources make testing done limited in one community. In addition hypothesis testing is carried out using non-parametric statistical methods which do not require the assumption of normal distribution. This makes the test results obtained despite being proven to be empirically effective, still cannot be generalized to a wider population. Therefore, it is necessary to have more samples to be able to generalize the findings.

Furthermore, confidence in the treatment effects that appear in the results of the trial of this model may not escape bias, given that some internal validity is poorly maintained. Internal validity refers to how reliable the effect of a treatment is to influence a variable (Creswell, 2015). Some things like implementation that are not standardized between each session, the implementation of one or two sessions that are interrupted by the community authority, and the duration of several sessions that are not adhered to may cause bias in the test results. It is important for future researchers to be able to control this internal validity before testing the model to get a more optimal measurement result.

#### 4 CONCLUSIONS

In the end, the findings of this study stated that the evidence-based community counseling was a better model for improving psychological well-being in individual ex-drug addicts compared to general treatment. As evidenced by the comparison with treatment as usual, psychological well-being in experimental subjects experienced a significant increase in measurements after treatment. Thus, the

evidence-based community counseling might be considered as an alternative for efforts to help ex-drug addicts to improve their psychological well-being.

However, these results contain several biases such as too few samples, controls on less stringent treatment, and various other internal validity problems. In addition, some things have not been clearly ascertained in this research, as it is still unknown whether positive changes in the score of psychological well-being can last longer or are only temporary, and whether whether psychological well-being increases really correlates with the longer period of abstinence an ex-drug addict. Therefore, further research is needed to ensure this, of course with more rigorous research methods.

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