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RESEARCH ARTICLE

Determinant factors of narcotics, psychotropic, and addictive substances abuse relapse in a drug rehabilitation centre in Indonesia

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Abstract

Background: Drug abuse (narcotics, psychotropics, and addictive substances) causes very broad and complex problems, including relapse. Relapse is a process that occurs due to several triggering factors where a person has been declared abstinence (recovered) returning to use drugs. identify the determining factors related to the recurrence of drug abuse in a drug rehabilitation center. Methods: A cross-sectional research design, involving searching literature to find results from journals and research papers that relate to a relapse of drug use and returning to rehabilitation centers. Results: Internal factors in the family such as ineffective functions and roles of the family, family imbalances and economic status also played a role. In addition to, communication within the family and, external factors, such as environmental and peer group variables as well as the use of free time. The influence of friends was a very dominant factor in causing relapse. Social and environmental pressures were the external factors more likely to cause relapse. The types of drugs used also affected the likelihood of relapse. Social support has an important role in the healing process of drug addiction. The drug often misused was shabu-shabu (methamphetamine), because of its affordability. Shabushabu is also associated with drug violence in the middle levels. Conclusion: Factors determining the relapse of narcotics, psychotropic, and addictive substances (drugs) in drug rehabilitation centers consisted of internal factors such as gender, age, knowledge and association with old friends as well as external social and environmental pressures.

Introduction

Drug abuse (narcotics, alcohol, psychotropics, and addictive substances [NAPZA]) is not a new problem in Indonesia. NAPZA are drugs or materials useful in treatment and health services as well as in science development; however, they can also cause a very detrimental dependence if misused or used without control and strict and thorough supervision (Law of the Republic of Indonesia, 2009)

In the National Medium-Term Development Plan (RPJMN), it is stated that one of the targets of the 2020-2024 RPJMN is to increase social protection for the entire population with a target of increasing the social

function index of victims of drug abuse from the 2019 score of 0.34 to 0.41 in 2024 (Bappenas, 2019). The United Nations Office on Drugs and Crime (UNODC), the world agency dealing with narcotics problems, noted that in 2017, at least 271 million people worldwide or 5.5% of the global population between the ages of 15 to 64, had consumed drugs or narcotics (UNODC, 2019).

Research conducted by the National Narcotics Board of the Republic of Indonesia (BNN) periodically every three years has shown that the prevalence of narcotics has decreased significantly from 2011 to 2019. In 2011 the prevalence was at 2.23%; in 2014, it decreased to 2.18%; in 2017, it was at 1.77% and at 1.80% in 2019. In

2019, there was an increase of 0.03% (BNN, 2019). According to Pranatha (2013), there is a positive correlation between environmental factors and the recurrence of drug use in previous abusers (Pranatha & Lastari, 2017).

Meanwhile, according to research by Sherly Aztri in 2011, negative peer groups can result in the introduction of addictive behaviour in a person. Social support has an important role in the healing process of drug addiction (Astri, 2011). According to Raharni, in 2020, various definitions of relapse cause differences in relapse rates (Astri, 2011).

The purpose of this study was to identify the determining factors related to the incidence of drug relapse in a drug rehabilitation centre.

Methods

The study design was cross-sectional and operational. Literature was used to find results from journals and research papers related to the relapse of drug use. A qualitative interview used unstructured questions with interview guidelines to gather information to determine factors related to relapse at the rehabilitation centre in Jakarta and West Java, including Bogor and Bekasi city, in Indonesia, in 2018. The population of the study was drug abusers in rehabilitation in Indonesia. A conceptual framework used in this study can be seen in Figure 1 (HL, 1974; Green, 2003).

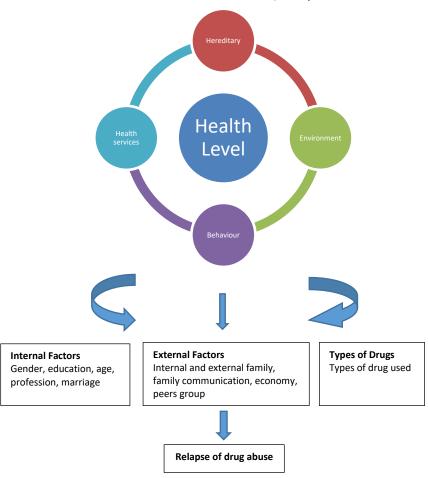


Figure 1: The conceptual framework

Ethical approval

The Health Research Ethics Commission (KEPK), National Institute of Health Research and Development, Ministry of Health, Republic Indonesia, reviewed and granted this study ethics clearance (Number LB.02.01/2/KE.269/2018). Informed consent

was obtained from all respondents prior to participation in the interview.

Results

The results of this study were part of a large project on relapse among drug abusers in the drug rehabilitation centre. The population of the study was drug abusers in the Rehabilitation in Bekasi, West Java and Jakarta, in Indonesia. Information was obtained from the assistants of drug abusers in rehabilitation homes who know the condition of abusers in the drug rehabilitation centre. The factors identified that caused relapse were the following individual internal factors: negative feelings, gender and age characteristics, and knowledge. In addition, being associated with old friends who were still active addicts also contributed to relapse.

Internal factors within the family in terms of communication also had an effect, as well as external factors outside of the family, namely the clients' peer groups and their use of free time. The influence of

friends was a very dominant cause of relapse. External factors such as social and environmental pressures were more likely to cause relapse than internal factors. The types of drugs used were also associated with relapse. Social support had an important role in the healing process of drug addiction. The type of drug often misused was methamphetamine, besides being affordable.

Based on the data from the drug addiction hospital, the average number of patients treated at the rehabilitation drug centre in 2017 was 47 each month. This decreased by 19.3% from the number of patients (visitors) in 2016, which reached 57 patients every month. Figure 2 shows the comparison between the number of visitors at the rehabilitation centre hospital in 2016 and 2017: Figure 3 shows the number of methadone visits from 2011 to 2017.

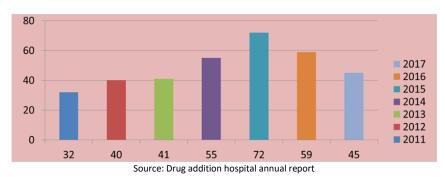


Figure 2: The average number of patients per month at the rehabilitation centre from 2011 to 2017

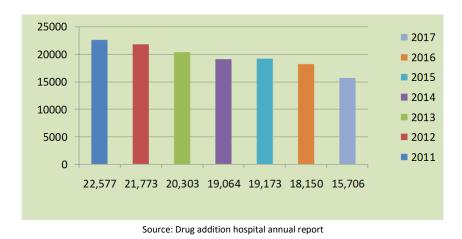


Figure 3: Number of Methadone visits 2011-2017

This decline was inseparable from the performance of other institutions, namely the National Narcotics Agency (BNN), the Police and the Attorney General's Office in referring users and abusers of narcotics to the law. This was different from 2016, where the

government, in this case, led by BNN, launched a massive rehabilitation of drug users and abusers.

The increase in visitors was due to collaboration with other institutions such as the National Narcotics Agency (BNN) related to the TC inpatient rehabilitation programme for patients with court decisions and the enactment of the Minister of Health Regulation Number 50 of 2015, concerning Technical Instructions for Compulsory Reporting of Narcotics Addicts. Financing for the implementation of mandatory reporting and medical rehabilitation for addicts, abusers, and victims of narcotics abuse shall be borne by the Ministry of Health at the Reporting Obligatory Recipient Institution and by the National Narcotics Agency at the National Narcotics Agency's Recipient Institution for Reporting.

From the rehabilitation centres in Jakarta that were visited, it was found that the rehabilitation programme used was the Biological, Psychological and Social-Spiritual (BPSS) Integrated System. The BPSS method includes biologics, which involves using drugs (medicines) that do not cause dependence. From the results of the interview and document search of the rehabilitation centre, it was found that the clients who abused drugs were mostly male, coming from middle-income families. The type of drug widely used was shabu-shabu.

At the time, in the Rehabilitation in Bekasi, West Java, there were 22 drug users, all were male. The implemented rehabilitation programme consisted of recovery materials, including spiritual methods. The recovery steps included a comprehensive programme with medical detoxification, psychiatric treatment, mental coaching, psychosocial therapy, spiritual therapy, in addition to other activities such as sports. The length of rehabilitation depended on the level of addiction with a time range of six months to a year. The type of drug mostly used was methamphetamine; the others were putaw (low-grade heroin) and marijuana. Family treatment and parental love were necessary and very important. There is a tendency for clients in rehabilitation to be provocative and temperamental. However, rehabilitation was always guided in a good direction. If clients interfered with security, they would be isolated so that they could not run away. Based on the results, it was also determined that the factors causing drug abuse are due to bad association with drug abusers.

From the literature review of the researched documents and journals, it was found that the factors that caused relapse consisted of internal and external factors. Internal factors consisted of negative feelings and economic factors, while external factors consisted of social pressure and the environment; in this case, the people around them reminded them of the time when they were drug addicts. Factors related to the occurrence of drug abuse among high school students in Bekasi City were individual, namely gender, age and knowledge, as well as communication within the family

and environmental factors outside the family such as their association with peers and use of free time. The influence of friends was very dominant in causing relapse.

Discussion

Factors causing relapse are individual internal factors such as gender, age and knowledge. This is in accordance with research by Endaria in 2017. Factors that cause relapse in residents consist of internal and external factors. Internal factors include negative feelings and economic factors, while external factors include social pressure and the environment; in this case, this was due to the people around clients who reminded them of the time when they were drug addicts (Munthe, 2018).

The study was successful in bringing out the most common risk factors of substance use disorders (SUDs) which are linked to low socioeconomic status. The inability of addicts to progress with their rehabilitation, given the alarming 92% of clients' relapsing, was related to social pressure as a prime deterrent to successful remission (Shalina *et al.*, 2020). Significantly higher relapse episodes were present with increasing age, *Muslim* religion, if they had ever been married but were since separated or divorced, poor literacy, current unemployment, living in a nuclear rather than joint family, initiation to drugs at an early age, longer duration of drug abuse and no follow up (M *et al.*, 2013).

Based on the Minister of Health Regulation number 50 of 2015, the Ministry of Health is responsible for financing the medical rehabilitation process for addicts, abusers, and victims of narcotics abuse who come voluntarily and have received a court decision to undergo medical rehabilitation at a medical rehabilitation facility determined by the Minister. Medical rehabilitation for patients who are still in the legal process (suspects and defendants) can be financed by the Ministry of Health as long as they have not received funding from other institutions (Ministry of health, 2015).

According to Daru Dewi in 2008, the factors that cause relapse and changes in behaviour, attitudes, thoughts and feelings experienced by an abuser are personal. External factors that cause relapse turned out to have a stronger influence than internal factors (Dewi, 2008). In addition, the research results are also supported by Raharni (2006). Factors related to the occurrence of drug abuse among high school students in Bekasi City were namely individual factors such as gender, age and knowledge. Communication within the family environment and environmental factors outside of the family, including association with peers and the use of

free time, were also factors (Raharni, 2002). Based on the results of research by Ayu (2016), it is known that the influence of friends is very dominant in causing relapse (Ayu, 2016).

However, this is not in accordance with the research from Kurniawan and colleagues in 2017, from which it was determined that there is no relationship between family circumstances and drug relapse behaviour in residents at the *Tanah Merah* BNN Samarinda Rehabilitation Center (Kurniawan *et al.*, 2017).

Alauddin (2017) revealed that in order to maintain the recovery process, social support from family, friends and even from the post-rehabilitation agencies is very important. The availability of supporting facilities helps clients change, such as religious coaching programmes that make them think positively and the damping house which can be used at any time. A damping house is a place that provides inpatient follow-up guidance services for abusers, abuse victims and drug addicts who have finished carrying out rehabilitation therapy services. It helps them carry out their social functions, which prepares them for returning to their family and community environment. The client's family must be more careful in acting and speaking to the client so as not to cause disappointment to the family, which at any time can trigger the client to use drugs or relapse (Ramadani, 2017). Muttaqin (2005) showed that the variables related to opiate relapse were education level, marital status, hepatitis status, duration of use, and method of use. The most dominant variable is hepatitis status, as hepatitis sufferers have a greater risk of relapse than non-hepatitis sufferers (Muttagin, 2007).

According to Eric and colleagues, in 2021, the results showed a higher prevalence of relapse among patients with SUD (59.9 %). The multivariate analyses indicated that people with SUDs, who were living only with their mothers, had a greater risk of relapse compared to those who were in the presence of both biological parents (Eric *et al.*, 2021). Factors related to women relapsing were determined from conducting qualitative in-depth interviews guided by open-ended questions. Most women reported being poly-drug users, followed by methamphetamine/ amphetamines, heroin, cocaine, and alcohol (Sun, 2007).

Conclusion

Factors determining relapse in the rehabilitation centre included individual internal factors and external factors. Internal factors consist of negative feelings, gender, age and knowledge, and internal factors in the family such as family functions and ineffective familial

roles, economic status, and communication. External factor includes having a continued association with a peer group of active addicts. The influence of friends is very dominant in causing relapse. The external factors that mostly caused recurrence were social and environmental pressures. The type of drug used is also related to relapse. The type of drug often misused is shabu.

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