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Exploring the Effectiveness of Counseling Intervention on Sedative Drug Addiction at Penjara Kajang

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ABSTRACT

The COVID-19 pandemic which strike Malaysia and worldwide is a nightmare for most individuals. It brought various implications that in turn change the pattern of human's life. There are some individuals who fail to adapt causing them to experience emotional disturbances that contribute to mental health problems. It also contributes to various social problems including drug abuse, domestic violence, divorce and others. Hence, this study was conducted to identify the causes and effects of sedative drug abuse as well as to examine the level of effectiveness of counseling interventions and coping strategies in solving this problem. This study was conducted qualitatively involving interview sessions and individual counseling sessions to one of the detainees in Kajang Prison who was involved in sedative drug abuse. The implementation of counseling sessions through Motivational Interviewing (MI) approach and Reality Therapy were conducted. The use of Motivational Interviewing in the initial session is seen to be effective in increasing client motivation. While the use of reality theory is seen to help clients in making decisions, plan and taking action. In conclusion, the right and proper counselling approach can help clients in the issue of drug addiction as well as the selection of coping strategies in dealing with the problems faced.

Contribution/Originality: This study uses a case study methodology that can be used as a reference for counselor, trainee counselor and students in applying the theory used in conducting counseling sessions. It contributes to the logical analysis of the effectiveness and advantages in using the theory to help the clients which facing drug abuse issues. It also conveys the best method on how to apply it to the real-world situations in solving drug abuse case.

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1. Introduction

The issue of drug addiction is not a new issue in Malaysia. Statistics obtained by the National Anti-Drug Agency (AADK) (2020) show that 35 million people involved in drug abuse in 2019. Those who use drugs are among the youth aged 19 to 39. A study by the National Anti-Drug Agency (AADK) shows that 90 percent of drug addiction cases result from smoking. This is because cigarette supplies are readily available and are available in small packs that are easy to buy and store. Initially, cigarettes were accepted as a method of treatment for painkillers, until researchers were able to prove the effects of smoking as early as the 1920s. Studies have found that nicotine is one of the drugs in cigarettes (National Institute on Drug Abuse, 2021). This nicotine causes smokers to quit smoking and become addicted. Excessive intake can cause coma, poisoning and death. Brain exposure to nicotine in adolescence is very dangerous because in adolescence critical stages of brain development and risk to try out the illicit ingredients leading to drug abuse (Yuan et al., 2015). This indicates that cigarettes themselves contain drugs.

The client is a 36 year old Muslim man of Malay descent. The client is the third child of eight siblings and they have a close relationship between them. His parents are still healthy and the client has a close relationship with both of them. He was convicted by the court and sentenced for 10 months in jail imprisonment as well as being fined for RM4, 000 in January 2020 at Kajang Prison, Selangor Darul Ehsan. The sentence being made based on the client's offense of making threats and assaulting physically causing injury to his wife. At the same time, the divorce application by his wife was approved and the Syariah court dissolved their marriage in November 2020 on the grounds of threatening to life safety. This decision gave a huge impact on his life, putting emotional pressure on the client and impaired his ability to cope with his life. The condition led the client to continue using sedative pills as a way for him to forget about this incident.

1.2. Background of the Study

The client started taking the sedative pill (lorazepam) in early April 2020. The intake of this drug was initially due to feeling stressed with the increased workload as a result of the restructuring of his company during the pandemic. He was found to have poor coping skills and stress management skills. Hence, this study was conducted to identify the causes and effects of sedative drug abuse as well as to examine the level of effectiveness of counseling interventions and coping strategies in solving this problem.

2. Literature Review

Drug addiction is a serious problem that most countries around the world are dealing with at the moment. This is a current main concern with a large increase in number of cases every year. According to the World Drug Report (2019), 35 million people worldwide abuse drugs, with only one in every seven of them receiving treatment. Since 1983, drug addiction has posed a significant concern to Malaysia. Drug addiction has a number of negative consequences in the lives of addicts. Family dysfunction is one of the ramifications. When there is persistent and ongoing conflict, neglect, and misbehaviour in a family, it is considered dysfunctional (Rashmi, 2018). Addiction leads the individual facing difficulty to hold a job, complete parental responsibilities, or be a consistent and stable presence in the house (Lander et al., 2013). Aside from that, drug addiction contributes to mental health issues. Drug misuse, according to Hoseinifar et al. (2011), creates an unpleasant condition on physical, mental, and social aspects. Body aches, poor

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social functioning, rage, despair, anxiety, poor quality of life, and low motivation, poor coping skills and reduce life satisfaction are just a few of the unpleasant consequences. In the end, it will have an impact on a person's behaviour, self-confidence, work environment, social interactions, career, and marriage life.

Drug use in Islam is forbidden because it invites harm and social problems among community in the country (Kamarulzaman & Saifuddeen, 2009). Drug addiction causes losses to the country due to the loss of quality in human capital. Religious education and nurturing process by parents are very important and should be applied to ensure that children can develop an identity, resilience and subsequently be able to fortify themselves from committing offenses such as taking drug or becoming drug addict. Having a strong faith will protect oneself from committing evil and keep one's ignorance from straying far (Sattari et al., 2012).

In this case, the intrinsic motivation can be built when the client's ambiguity about the client's status in addiction and the effects of the drug on health is discussed. This discussion is intended for the client to be able to consider the differences in the effects of harm and relief derived from the drug if continuing the addiction further addressing the ambiguity. Nevertheless, the motivation to make changes or maintain recovery needs to be present in the client's self and his awareness. This intrinsic motivation is seen as a self -contained internal resource in helping clients stay recover. Interviewing Motivation (MI) approaches with passion such as Collaboration, Compassion, Acceptance and Evocation are seen to be able to build intrinsic motivation (Miller & Rollnick, 2013). The use of MI processes such as engaging, focusing, evoking and planning as strategies to ensure clients are accountable for readiness and build motivation to make changes. It can also be a bridge for clients to find solutions and strive to achieve those goals. In implementing this process, the skills of Open question, Affirmation, Reflection, Summarizing (OARS) are used to build interpersonal interactions between counselors and counselors thereby avoiding a confrontative approach.

Meanwhile, Reality theory sees human beings as individuals who have the "power to grow" and every human behavior is purposeful and comes from within a person. In other words, reality theory emphasizes on "not the way the world actually exists but more on how we perceive it to exist" which affects the conflict between the "Quality World" and the "Reality World" (Corey, 2013). Reality theory focuses on four main types of relationships that significantly need to be improved throughout a person's life namely relationships as children with parents, students with teachers, employees with employers and husbands with wives. In this case, Reality Theory was used to explore issues, understand and being a directive counsellor in helping the client to plan for his future to recover from the drug addiction.

Reality therapy specifically focuses on the behaviours perpetrated by the lack of satisfying relationships in a client's world (Corey, 2013). The focus on behaviour is not limited to actions but also thoughts, feelings, and physiology that clients possess as a way of coping with current situations. This is called 'Total Behaviour' which is the combined effort that an individual makes to go from what they want to getting them what they need (Glasser, 1998). This is to create awareness for him to leave the addiction and ready for a better change. Reality therapy is applied to a wide range of problems including addiction (Honeyman, 1990). In this case, the counsellor assures the client that success belongs to everyone. Past studies by Idris, Shaffie, and Mariamdaran (2020) have emphasized that a strong determination as well as a truly strong self-resilience is needed to stay away from

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drugs. High self -confidence and morale can set a stance and make ex -addicts less susceptible while adapting when returning to the fold of society. Reality Therapy Approach Interventions contribute significantly to the changing self -confidence of drug addicts directly.

3. Methodology

This is a qualitative study using interviews sessions as a study design. The client was chosen based on the referral that was being made to the counseling unit in Kajang Prison. This case study is based on individual counseling interventions periodically for five sessions. The data was analysed using document analysis related to questionnaires and psychometric tests. Counselors have used the application by psychometric tools namely Mental State Examinations (MSE), The Depression Anxiety Stress Scale and Stage of Change (SOC). The chosen tools was used to analyse client's appearance and behavior, emotional status, components of thought and functionality of the client's cognitive and addictions.

3.1. Application of Psychometric Tools

3.1.1. Mental State Examinations (MSE)

Appearance and behavior, emotional status, components of thought and functionality the client's cognitive during the first encounter was given attention through the use of Mental State Examinations (MSE). Mental State Examinations (MSE) is very important in the treatment and rehabilitation process to aid diagnosis in client intervention planning (Puteri Hayati, 2012). The orientation of the time, place and individual was used as the basis of the evaluation.

3.1.2. Depression Anxiety Stress Scale (DASS)

The Depression Anxiety Stress Scale was created to advance the process of determining, understanding, and measuring the emotional states commonly referred to as depression, anxiety, and stress. The Depression Anxiety Stress Scale (DASS) is a collection of three self-report scales that are used to assess negative emotional states such as depression, anxiety, and stress. The client answered the questions found in the Depression Anxiety Stress Scale (DASS) questionnaire containing 21 items.

3.1.3. The Stages of Change Scale (SoCS)

The Stages of Change Scale (SoCS) that was used in this study is the Malay version of the original scale from The University of Rhode Island Change Assessment (URICA). SoCS is used to measure the level of readiness clients undergoing rehabilitation programs to make behavioral changes. SoCS is used to measure the level of readiness for change.

4. Result and Discussion

The use of the Inverted Pyramid Case Conceptualization method helps the counselor focus on the issues experienced by the client. It also helps counselor to structure appropriate actions. Schwitzer (1997) has suggested the use of the Inverted Pyramid Case Conceptualization method. Based on the events that occurred showed the client faced the issue of dependence on benzodiazepine type drugs. The situation is understood as drug

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abuse that occurs when taking medication not following the doctor's instructions. The use of sedative pills (Lorazepam) which was initially as a way to manage the stress faced has been used as a way to manage emotional stress. Increased use of sedative pills occurs when the client feels the amount prescribed by the doctor is not able to alleviate the emotions felt. Tolerance has occurred when clients need to increase the quantity of sedative pills, they normally take to get the same effect. When going through the use of sedative pills for a long period and the increase of negative events in life has had the effect of changes on the nervous system, psychology and body of the client. At this stage, the client needs a sedative pill as a way to ensure the client is carrying out normal functioning in life. This condition is identified as dependence such as failure to function when not taking sedative pills. This includes physical and psychological suspension. The use of sedative pills that led to this dependence was identified as the cause of the client's failure to adapt to drastic changes in life.

An orderly life and quality time filling in a normal atmosphere has given the client and wife space to communicate well. The personalities of the client and wife are not clearly visible and highlighted because the period of time available is only after working hours and planned holidays. The available time space is used to communicate well and the real personality is not too prominent. Nevertheless, the changes that took place during the COVID-19 pandemic period required clients, wives and children to be face to face over a long period of time. This situation results in the prominence of the real personality of the client who wants his every wish to be understood and fulfilled by his children and wife. The client demonstrates the existence of a narcissistic personality clearly when going through this situation. According to Widiyanti, Solehuddin, and Saomah (2017), the narcissistic is a reflection of individual who has experiences personal disturbance that associated with over self-actualization. Meanwhile, Twenge and Foster (2010) stated that narcissism is a personality trait characterized by grandiose and overly positive self-views.

In this first session, counselor creates conducive connections and surroundings in this session to provide a safe environment in which behavior exploration can be applied effectively. Counselor have shown unconditional acceptance in order to build a collaborative connection with client. This step in MI techniques entails establishing a rapport between the counselor and the client. This session also gives counselors an opportunity to learn more about the client's background and current issues. Clients were requested to complete Dass and SoCS self-assessments at the end of the session.

In this second session, the exploration is focused on the results of the analysis of psychometric tests that have been answered by the client. From the MSE, it was found that the client was sensitive to the orientation. The client's appearance is also appropriate and neat along with a simple emotional mode. Throughout the sessions conducted, client provided good cooperation and appropriate feedback. The client does not exhibit risky behaviors, words or thoughts towards self and others. Clearly here, the client is a sane, normal person and can undergo a counseling session. Meanwhile, the results of the DASS questionnaire showed that the client's level of Depression and Stress is at a mild level. The client's level of anxiety is at a normal level. Exploration in several sessions that have been conducted found that the depression and stress experienced by the client stems from the events experienced and the imprisonment sentence he is undergoing.

Results for client SoCS testing were identified to be at the Contemplation stage. The client received a score of 10.85 as a result of the analysis. Client are defined at this stage as persons who are unaware of or deny that they have an addiction issue, or who, even if

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they confess it, will not seriously consider making changes (Rafidi, 2020). The client is explored regarding his acceptance of the issues faced. This situation illustrates that the client has the intention and interest to change but is still not able to act. This situation indicates the client has ambivalence in deciding to stay recovering or will return to repeat old behaviors. Uncertainty of which is considered normal in any client recovery process (Miller & Rollnick, 2013). In this session as well, the client begins to express a 'change talk'. When there is 'change talk', hope and the existence of motivation are focused and amplified. It also aims to evoking and increase the client's level of confidence to stay motivated to change.

The use of MI processes such as engaging, focusing, evoking and planning as strategies to ensure clients are accountable for readiness and build motivation to make changes. It can also be a bridge for clients to find solutions and strive to achieve those goals. In implementing this process, the skills of Open question, Affirmation, Reflection, Summarizing (OARS) are used to build interpersonal interactions between counselors and counselors thereby avoiding a confrontative approach. Next, in an effort to help change the client's behavior, reality therapy through the Want, Doing, Evaluating and Planning (WDEP) strategy was used to achieve the goal of becoming well being. In general, the client's goals are in the range of improving the quality of health, strengthening relationships, building strengths or locus of internal control, accountability and enjoying life. By using this approach, the client is helped to identify real wants or needs in life. The client also states the treatment that has been taken to achieve that want or need. Next the client is helped to assess the treatment and its success. Once the assessment is made and requires a change in behavior, then change planning and action is done. The implementation of the MI approach that has been done has resulted in the movement of the client's level of change.

The client has identified the strengths that he has in managing a group of employees. This success was also given recognition and emphasis as a driver to change motivation. The client also acknowledged that the confidence and composure he had at the time was a factor for him to efficiently make decisions and manage various situations. The client also brings out a 'sustain talk' by expressing his commitment to always take care of his emotions through religious practices and zikr that he had learned in religious classes. Client is guided to perform "relaxation" techniques through breathing when feeling tense emotions. Client is also assigned to perform the relaxation technique 5 times a day throughout the week. It is an effort to familiarize the client with the technique when going through an emotionally tense issue in the third session.

The client initially experienced ambiguity regarding his addiction status had received intellectual literacy regarding his addiction status. This awareness results in the client's acknowledgment and self-acceptance of the addiction issue which he is experiencing. With the MI process, the client also able to express changes in talking and sustains in talk coming from intrinsic motivation. Behavioral changes are addressed with the use of reality therapy. Client was seen to use identity in managing relationships. The client has identified that previous behavior is not able to achieve the "Quality World" that he wants. Reality therapy strategies have been able to help clients to bring the "Reality World" closer to the "Quality World". The client is able to express his sense of confidence to manage stress and take responsibility for the behaviors that have been performed.

The client has found that it is necessary to accept the situation that occurred as a result of the decision that has been made. He felt confident to go through all the challenges and

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obstacles in his future life. Client is also helped to plan and take appropriate action in managing life. The client has been rational about the situation he is experiencing now and will focus on existing family relationships such as parents and siblings. The 'SAMIC3' approach was used in evaluating each planning performed. The client will relate the planning to be done whether it is simple, attainable, measurable, and immediate, controlled by him, committed to, and continuously done (Corey, 2013). In the context of relapse prevention, client was exposed related to H.A.L.T (hungry, angry, lonely, tired) as a condition that puts the client at risk if in such a situation especially an attack in the emotional aspect which is a major risk factor for relapse in fourth and fifth session.

4.1. Treatment Outcome

The client also stated the progress he felt when practicing relaxation techniques as well as religious practices and remembrance when anger management improved, and misunderstandings did not occur during the previous week. This statement is supported by the officer in charge of the class and control in his placement block. The client begins to show a friendly character towards a friend in the room as opposed to the experience narrated by a previous situation (Behavior). The client is able to understand the meaning of assertive in the aspect of thinking about a situation or issue that has been and will be experienced (Cognitive). The client feels that these changes need to be maintained in order to enjoy the happiness of himself and his family. Clients can also feel happiness and calm from the changes made (Affective). The client's insight can be seen in his progress when the client expresses the opportunity that his family members have always given him all this time. He now realizes as a sign of their love for the client. Challenges and encouragement from imprisoned friends are stated as a training ground for clients to face the real situation outside later. The theme of "Negative Emotions" as a risk factor for relapse has been restated and "Assertive" cognitive change becomes an effort for client to maintain a level of recovery. Efforts to establish positive relationships and social skills are an opportunity that client can think of as a change that will strengthen the protection factor for client in the future. Client can show changes and progress from each session such as a willingness to change from the Contemplation Stage to the Preparation Stage.

4.2. Follow-Up

The client successfully committed to engaging in five counseling sessions. This situation reflects the client's willingness to make changes to the issues he is facing. The client has also been able to express his awareness of the drug addiction he is going through. In the behavioral aspect, the client acknowledges that his desired desires require an adaptation to actions and thoughts that will meet his basic needs. The client is also aware that past experiences can no longer be changed, and the current situation requires the client to make appropriate planning. Client has demonstrated motivation and awareness of drug addiction status. The client has also acknowledged the issue and begun to think about actions that are and will be taken to address the issue such as the practice of zikr and emotional control. With such increased motivation and awareness, clients are recommended to rehabilitation officers to be involved in anger management classes and relapse prevention classes. The client's presence in the class will help him gain important input as a guide in controlling his actions and behaviors after release.

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5. Conclusion

This study has implications for the understanding of the effects of sudden lifestyle changes causing the occurrence of emotional stress to a serious degree. The failure of individuals to govern various aspects of life in terms of finances, social relationships and personal emotions has caused individuals to become increasingly immersed in this issue. In such cases, the individual should examine all the circumstances that have taken place and acknowledge the changes that are being experienced. Individuals can also see this situation in a broader perspective because this pandemic has involved various parties around the world. The use of Motivational Interviewing in the earliest sessions is seen to affect awareness and increase client motivation. While the use of reality therapy choice theory is seen to be able to motivate clients to make decisions, planning and action in making changes.

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Conflict of Interests

The authors did not have any conflicts of interest throughout the course of the study.

References

Corey, G. (2013). *Theory and Practice of Counseling and Psychotherapy*. (9th Ed). Belmont, CA: Brooks/Cole, Cengage Learning.

Glasser, W. (1998). *Choice theory: A new psychology of personal freedom*. New York, NY: Harper & Row.

Honeyman, A. (1990). Perceptual changes in addicts as a consequence of reality therapy based on group treatment. *Journal of Reality Therapy, 9*, 53–59.

Hoseinifar, J., Zirak, S. R., Shaker, A., Meamar, E., Moharami, H., & Siedkalan, M. M. (2011). Comparison of quality of life and mental health of addicts and nonaddicts. *Procedia-Social and Behavioral Sciences, 30*, 1930-1934.

Idris, A., Shaffie, F., & Mariamdaran, S. D. (2020). Kesan Modul Intervensi Pendekatan Terapi Realiti terhadap Perubahan Keyakinan Diri Berubah dalam kalangan Penagih Dadah (Effects of the Reality Therapy Intervention Approach on Changes in Self-Confidence among Drug Addicts). *Jurnal Pembangunan Sosial*, *23*, 79–92. https://doi.org/10.32890/jps2020.23.5

Kamarulzaman, A., & Saifuddeen, S.M. (2009). Islam and harm reduction. *International Journal of Drug policy*, *21*(2). 115-8.

Lander, L., Howsare, J., & Byrne, M. (2013). The Impact of Substance Use Disorders on Families and Children: From Theory to Practice. *Social Work Public Health, 28*(0): 194–205. doi: 10.1080/19371918.2013.759005

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Miller, W. R., & Rollnick, S. (2013). *Motivational interviewing: Helping people change* (3rd edition). Guilford Press.

National Anti-Drug Agency (AADK). (2020). *Buku Maklumat Dadah*. ADK. https://www.adk.gov.my/wp-content/uploads/Buku-Maklumat-Dadah-2020.pdf

National Institute on Drug Abuse. (2021). Cigarettes and Other Tobacco Products DrugFacts. National Institute of Health (NIH). shorturl.at/foD23

Puteri Hayati, M. A. (2012). *Kemahiran dan pengurusan kes-kes kaunseling*. Penerbit Universiti Malaysia Sabah.

Rafidi, J. M. (2020). *Manual S.o.C.S: Ujian Penilaian Tahap Perubahan dan Motivasi Klien* (Cetakan Pertama). Pusat Latihan AADK.

Rashmi, P. (2018). *Dysfunctional Family – Characteristics and Effects*. Parenting. https://parenting.firstcry.com/articles/dysfunctional-family-characteristics-and-tips-to-overcome-its-effects/

Sattari, M., Mashayekhi, S., & Mashayekhi, S. (2012). Islam and Addiction. *Pharmaceutical sciences, 18*(3), 151-158

Schwitzer, A. M. (1997). The Inverted Pyramid Framework Applying Self Psychology Constructs to Conceptualizing College Student Psychotherapy. *Journal of College Student Psychotherapy*, *11*(3), 29–47. https://doi.org/10.1300/J035v11n03_05

Twenge, J. M., & Foster, J. D. (2010). Birth cohort increases in narcissistic personality traits among American college students, 1982-2009. *Social Psychology Personality Science*. 1, 99–106. doi: 10.1177/1948550609355719

Widiyanti, W., Solehuddin, M., & Saomah, A. (2017). Profil Perilaku Narsisme Remaja serta Implikasinya Bagi Bimbingan dan Konseling. *Indonesian Journal of Educational Counseling*, *1*(1), 15–26. https://doi.org/10.30653/001.201711.3

World Drug Report. (2019). *35 million people worldwide suffer from drug use disorders while only 1 in 7 people receive treatment*. shorturl.at/inpM0

Yuan, M., Cross, S. J., Loughlin, S. E., & Leslie, F. M. (2015). Nicotine and the adolescent brain. *The Journal of Physiology,* 1-16.

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