



Client's Perceptions of Drug Abusers on the Thematic Group Activities (TGA) Innovation Program at the Rehabilitation Center of National Narcotics Agency (BNN)

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Abstract. The problem of narcotics in Indonesia still requires high attention and vigilance. UNODC World Drug Report reported that 269 million people worldwide abuse drugs. In Indonesia, the drug abuse prevalence rate is above 2.5%. Thematic Group Activities (TGA) is an innovation program with individual-based intervention through a group approach throughout BNN's Rehabilitation was implemented in 2019. The purpose of the study was to determine the respondent's perception of drug abusers on the innovation program for the application of TGA and to find out the description of the implementation of TGA at BNN's Technical Implementation Unit. The research design was cross-sectional, with Focus Group Discussion (FGD) with clients at the BNN Rehabilitation in 6 (six) locations, namely the TGA program: Lido, Baddoka, Tanah Merah, Batam, Kalianda, and Deli Serdang in 2021. The research results showed that the client's perception towards the TGA program is stabilized, primary and re-entry meet individual needs. Clients understand all the goals of TGA, stabilization, primary, re-entry, TGA program, increase self-potential, self-confidence, and self-control, TGA program accommodates client needs. Client's perception of the implementation of TGA, the material is good, the client is given the same basic knowledge of the method, 70% material and 30% practice, take four classes with 4 different materials, the material delivered is following the needs, health protocols during a pandemic. The implementation of the TGA follows the rules of the Covid 19 health protocol well, presenting material, question and answer, and roleplay. Implementation of the TGA class is sufficient but not optimal, many theories, clients ask for a duration of practice. The client's perception of the TGA module is simplifying medical materials, adding broadcast materials simplifying language. C clients feel the need for legal-related materials. Materials received include infectious diseases, types of narcotics and its impact, prevention of relapse, managing emotions, and anger. Conclusion The TGA program is an innovative rehabilitation program for drug abusers that is suitable for use to accommodate individual therapy plans with a group approach in all BNN Rehabilitation Units. But it is necessary to improve the TGA program, including the module material.

Keywords: Thematic Group Activity Innovation Program (TGA) · Drug Abuse · Clients perception · Rehabilitation Center

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I. Nurlaila et al. (Eds.): ICHR 2022, AHSR 56, pp. 707–716, 2023.

https://doi.org/10.2991/978-94-6463-112-8_64

1 Introduction

The problem of narcotics in Indonesia still requires continuous attention and vigilance from all elements of the Indonesian nation. The United Nations Office on Drugs and Crime (UNODC) in the 2020 UNODC World Drug Report reported that around 269 million people worldwide abuse drugs (study in 2018). This number is 30% more than in 2009, with more than 35 million drug abusers [1]. Narcotics are substances that have the effect of dependence and decrease awareness [2]. In medical science, these substances can be used as drugs to relieve pain, but given in doses that are safe for the body. Narcotics are drugs or substances that stimulate the central nervous system causing unconsciousness [3]. According to Mardani, narcotics are substances that will make the user feel nothing [4]. In dealing with NAPZA relapse, there are egocentric Ministries and other Institutions. The Ministry of Health emphasizes medical rehabilitation, social rehabilitation is emphasized by the Ministry of Social, and BNN more thoroughly covers post-rehabilitation [5]. The National Narcotics Agency collaboration with the Center for Research on Society and Culture of the Indonesian Institute of Sciences (LIPI), conducted a study showing the prevalence of drug abuse ever used (lifetime prevalence), namely those who have used drugs at least once in their lifetime, is 2.40% or around 240 of 10,000 Indonesians aged 15–64 years or the equivalent of approximately 4.5 million people. At the same time, the prevalence rate in the last year of use was 1.80% or 180 of 10,000 Indonesians aged 15–64 years or equivalent to approximately 3.4 million. This research reports that drug abuse has penetrated the countryside, with drug use very prominent at the very productive age (25–49 years) and the prevalence rate in the last year of use is above 2.5% [6].

Anyone who uses narcotics freely without a doctor's prescription is called an abuser, and it's against the law [2]. Rehabilitation is the recovery process for abusers with a certain period to correct their negative behaviour, so they can actively participate in their environment [7]. Rehabilitation for narcotics abusers is divided into two parts, namely medical and social rehabilitation. These two rehabilitations are interrelated and important for the recovery of drug abusers. Improving the system of care or rehabilitation and the quality of services as well as possible will impact the quality of individuals, families, and communities. The rehabilitation program for addicts, abusers, and victims of narcotics abuse is an effort to realize the fifth point of the President's promise, namely "Improving the Quality of Indonesian Humans", as stated in the 2015–2019 RPJMN [8] RPJMN 2020–2024 is an increase in social protection for the entire population with a target social function index of victims of drug abuse of 0.34 in 2019 increasing to 0.41 in 2024 [9]. One of the principles of drug use disorder therapy issued by the US National Institute on Drug Abuse (2012) is that no single therapy suits everyone. Every individual has different needs [10].

Therefore, treatment plans need to be prepared individually based on the results of screening and comprehensive assessments, so they can effectively accommodate the needs of each individual, not only the problem of drug dependence. Currently, the method used at the BNN Rehabilitation Center is Therapeutic Community (TC). Therapeutic Community (TC) is the main approach method used in the inpatient rehabilitation program at the BNN's Technical Implementation Unit Rehabilitation since 2002. In implementing the TC method, materials related to addiction are given in the form of classical

seminar classes that all clients must follow. Therapeutic Community (TC) is given to each client, with the same details of activities from one individual to another, such as using behaviour pruning tools, individual counselling, group counselling, seminars. General, vocational, religious sessions, therapy groups, etc., despite the necessary of each client not always the same [11]. Several studies have been conducted to assess the effectiveness of the modified therapeutic community method rehabilitation program in Lido. One of these studies is a study conducted in 2017. Teenage features (such as gender and age), knowledge, behaviour, and environmental circumstances, including mont's accupation, family harmony, smoking habit in the family, and peer friendships, and how one spends their free time are factors that are closely related to the drug [12]. However, the material provided does not use a standardized module form, and the presentation with this method is considered less effective.

Based on Octarina, the "Effective Therapeutic Community Programs" results indicate that drug abusers who undergo short-term, and long-term rehabilitation programs and counsellors state that improvements in the program need to be made to make the rehabilitation program effective [13].

Then in 2019, to find out the implementation of rehabilitation oriented to a modified therapy plan according to the changing needs of addicts and victims of narcotics abuse, BNN conducted a study on rehabilitation services that have been developed at the BNN Rehabilitation Center, which is an intervention based on individual needs through a group approach with activity design. Thematic groups (TGA) through dynamic classes. In this thematic group activity (TGA), each facilitator has ready to teach in a classroom that has been determined according to the subject matter he is teaching so that when the subject matter changes, active participants register according to their needs and actively come to the facilitator class. Clients will learn knowledge that will affect cognitive function, social function, emotional and skills. The client's progress during the program will be monitored and assessed by the facilitator and counsellor. The material obtained is adjusted to the client's needs, so it is expected to increase the client's self-efficacy even when the client has finished rehabilitation.

The purpose of the study was to find out the description and the process of implementing TGA at BNN's Technical Implementation Unit, as well as client responses to the implementation of the TGA innovation program constraints/challenges at BNN's Technical Implementation Unit.

2 Materials and Methods

TGA is a Rehabilitation method developed by the Deputy for Rehabilitation of the National Narcotics Agency in 2019, with interventions based on individual needs through a group approach to meet client needs that cannot only be met with conventional TC methods. In implementing this intervention, each client is not required to follow all the material but is adjusted to their individual needs.

This research is a mixed method, namely quantitative and qualitative, with Focus Group Discussion and a cross-sectional design of a prospective cohort to see the description, process, and results of the Thematic Group Activity (TGA) approach at BNN's Rehabilitation Unit. The research locations are at the Rehabilitation Unit of BNN RI

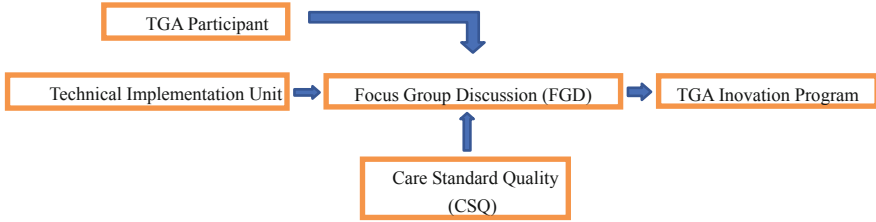


Fig. 1. Conceptual framework

in 6 (six) locations: Lido Rehabilitation Center, Baddoka Rehabilitation Center, Tanah Merah Rehabilitation Center, Batam Rehabilitation Workshop, Kalianda Rehabilitation Workshop, and Deli Serdang Rehabilitation Workshop in 202 [14, 15]. The target population is all clients, facilitators, and management of the Technical Implementation Unit Rehabilitation owned by BNN RI. The affordable population is all clients undergoing a rehabilitation program for 6 (six) months, facilitators of Basic Seminar and TGA classes, and management involved in the TGA method. The samples of this study were clients who were in the primary phase, representatives of the facilitators from each module of the Basic Seminar and TGA, and representatives of the management involved in the TGA method who met the inclusion criteria and were willing to participate in the research to the end. The Checklist for Service Quality (CSQ) instrument is a tool to evaluate programs to improve service quality [16] (Fig. 1).

The sample of this study is human. Ethical clearance has been obtained through the Health Research Ethics Commission, Health Research and Development Agency (KEPK-BPPK), No. LB.02.01/2/KE.479/2021. Each study sample will be given a detailed explanation of the aims and objectives of the study to be carried out and asked to fill out and sign a Statement of Willingness to be a Study Sample and sign an informed consent. Confidentiality will always be maintained and reporting and validation of all study samples (clients, facilitators, and management) have met the inclusion criteria.

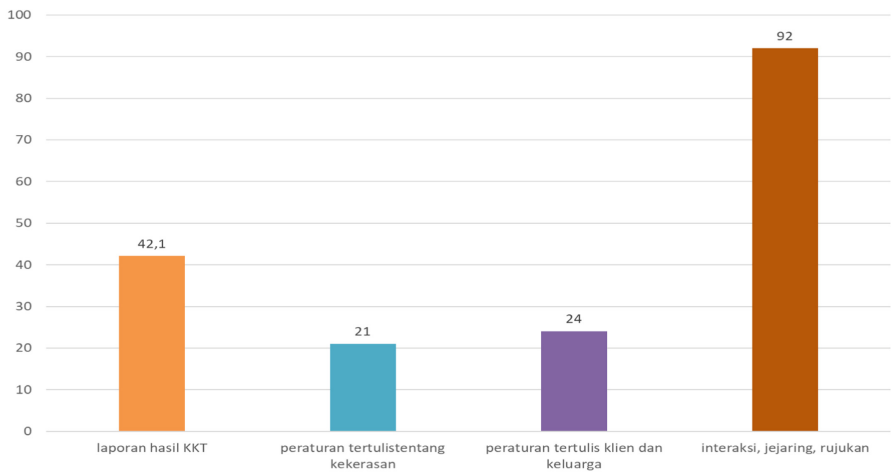
3 Results

Respondents consisted of representatives of the Management of the Rehabilitation Technical Implementation Unit consisting of 19 representatives of Management, as shown in Table 1, The highest percentage of respondents was from Lido and Kalianda rehabilitation center with the same percentage 31.6%. Most respondents are male 68.4% and the highest percentage of characteristics management was sub-medical coordinators at 36.8%.

Based on the results of the CSQ analysis which consists of 5 domains, Components in the Physical Environment, Administration Handling, Service Processes, Interaction with the Environment and Networks and Physical Environment Referrals, the average has been carried out, but for the availability of reports on the results of inspections on the implementation of TGA it is still 42.1%. Administrative Handling: There are written regulations that must be implemented in the event of a sudden episode of violence only in the range of 21%. There are written regulations to handle the complaints of Clients and

Table 1. Demographic characteristics of management respondents

Rehabilitation Center	n	Percentage
Lido	6	31,6
Badoka	2	10,5
Kalianda	6	31,6
Deliserdang	2	10,5
Batam	2	10,5
Tanah Merah	1	5,3
Gender		
Male	13	68,4
Female	6	31,6
Management		
Medical Coordinator	3	15,8
Social Coordinator	3	15,8
Sub Medical Coordinator	7	36,8
Sub Social Coordinator	8	31,6
	19	100

**Fig. 2.** CSQ based on the components of the TGA results

their families, only 24%. Service Process Components, Interaction with Environment, Network and Referrals the percentage is quite high 92% (Fig. 2).

The results of the rehabilitation centre of the National Narcotics Agency (BNN) Focus Group Discussion (FGD) consisting of 6 six rehabilitation centers can be seen in the following Client and Management Matrix.

From the results of the Client FGD, as shown in Table 2, it was found that the TGA Program was useful and accommodated the needs of each individual in the stabilization, primary, and re-entry phases. In addition, the TGA Program increases self-potential, self-confidence, and self-control. In implementing good material, clients are given the same basic knowledge, with a composition of 70% theoretical material and 30% practical (Roleplay). The implementation of the TGA follows the rules of the Covid 19 health protocol well (maintaining distance, washing hands, and wearing masks). The TGA material includes infectious diseases, addiction, types of narcotics and their effects, prevention of relapse, managing emotions and anger.

From the FGD, the Management of the TGA Program is good because it sees the client's needs with an approach in terms of strengthening client knowledge and skills. In addition, the TGA Program is useful in fostering communication with families and their environment. The TGA material is well-structured, and each client is given basic knowledge, divided into two materials, namely mandatory material and optional material according to the standards of the Deputy for Rehabilitation of the National Narcotics Agency. The program (TGA) is an Innovation Rehabilitation program for drug abusers that is suitable for use to accommodate individual therapy plans with a group approach in all BNN Rehabilitation Units (Table 3).

4 Discussion

Based on the analysis results, CSQ consists of 5 domains, namely components of the Physical Environment, Administration Handling, Service Processes, Interaction with the Environment and Network and Physical Environment Reference, the average has been done. The percentage of these components of Service Process Components, Interaction with Environment, Network is quite high 92%, but for the availability of reports on the results of inspections on the implementation of TGA it is still 42.1%; Regulations of Administrative Handling written that must be implemented in the event of a sudden episode of violence only in the range of 21%; and also regulations written to handle the complaints of Clients and their families, only 24%

The concept of TGA intervention is the two-way interactive learning that requires involvement from facilitators and all participants [17]. Evaluations for new interventions were thoroughly addressed to ensure the healthiness of the rehabilitation centres, improve client's experiences, decrease relapse rate, and evidence the development of intervention programs for behavioural changes [18]. From the FGD, the Management of the TGA Program is good because it sees the client's needs, with an approach in terms of strengthening client knowledge and skills. In addition, the TGA Program is useful in fostering communication with families and their environment. The TGA material is well-structured, each client is given basic knowledge, divided into two materials, namely mandatory material and optional material, according to the standards of the Deputy for Rehabilitation of the National Narcotics Agency.

The TGA program is an innovation program suitable for drug abusers to accommodate each individual's needs in the stabilization, primary, and re-entry phases. TGA

Table 2. FGD Matrix of BNN Rehabilitation Centre Client

	Babes Lido	Baddoka	Kalianda	Deliserdang	Batam	Tanah Merah
TGA Program	Good TGA program, meet client's need	TGA Program is beneficial for Clients	The TGA program meets the needs of clients, anger management, fostering healthy relationships, focal, group therapy	TGA program enhances knowledge, group approach, Individual needs	TGA program to strengthen knowledge and skills for clients.	TGA program, useful for communicating with families and their environment
Implementation	TGA material is well-structured each client is given basic knowledge	Client's career talent program, Baddoka Collaboration with BBI	Penyebaran Information dissemination via WAG. The facilitator must explain to the facilitator as well as the head and management	Implementation of TGA according to SOP. Excellent service for out-of-school rehabilitation with the Education Office	Children's rehabilitation program in collaboration with local schools and nature conservation	Moving classes from several primary and there are seminars and TGA. Covid 19 health protocol rules
Module	TGA material is well-structured TGA innovation is developing the entrepreneurship module	The TGA module was obtained from Babes Lido and made additions in terms of mental development	The TGA module consists of compulsory material and elective material.	TGA materials are programmed according to the standards of the Deputy for Rehabilitation	Rolling modules and coaching in tandem with trained facilitators	Self-esteem module, relapse prevention. There is re-entry for anger management

Program was useful and fulfilled the needs of each individual. The concept of TGA is that interactive learning activities in the classroom involve all participants [19].

The result supported by this study is, One of the principles of drug use disorder therapy issued by the US National Institute on Drug Abuse (2012) is that no single therapy suits everyone. Every individual has different needs [20]. Therefore, treatment plans need to be prepared individually based on the results of screening and comprehensive assessments so that they can effectively accommodate each individual's needs, not only drug dependence. Currently, the method used at the BNN Rehabilitation Center is Therapeutic Community (TC) which is given to each client, with the exact same details of activities from one individual to another, such as using behaviour pruning tools, individual counselling, group counselling, seminars. General, vocational, religious sessions, group therapy, and others, even though the needs of each client are not always the same.

According to Marion Malivert, with the title "Effectiveness of Therapeutic Communities: a Systematic Review". The result study shows that the "therapeutic community" approach is successful in helping abusers become abstinence, although abusers are still susceptible to relapse due to other variables, besides psychiatric illnesses and lack of

Table 3. FGD Matrix of Management BNN Rehabilitation

	Babes Lido	Badoka	Kalianda	Deliserdang	Batam	Tanah Merah
TGA Program	TGA program is good, useful, accommodates client needs	TGA program in primary and re-entry	TGA program is stabilized, primary and re-entry, meeting individual needs	The client understands the purpose of TGA, both stabilization, primary, re-entry	The client understands the purpose of TGA, both stabilization, primary, re-entry	TGA increases self-potential, self-confidence, self-control
Implementation	Good material, clients are given the same basic knowledge	Methods 70% theory and 30% practice. Take 4 classes with 4 different materials	The material delivered is in accordance with the needs, health protocols during a pandemic.	Covid 19 health protocols are good at keeping a distance, washing hands and wearing masks	Implementation of health protocols, presentation of materials, questions and answers, roleplay	The implementation of the TGA class is sufficient, a lot of theory, needs to be added to the duration of practice
Module	Medical materials are more simplified, plus broadcast materials	The language of the material or the provision of material is more simplified	TGA materials are infectious diseases, addiction, types of narcotics and the impact of their use	Need material related to Law	Materials include infectious diseases, addiction, types of narcotics and their effects, prevention of relapse, managing emotions, anger	Prime material, <i>self as team, Relapse prevention, Re-entry anger management</i>

education [21]. According to the Deputy for Rehabilitation of the National Narcotics Agency for 2019, “Trial of the Moving Class Implementation in the Context of Developing the Rehabilitation Center to Become a Center of Excellence (COE)”. The results show that thematic and classical group activity can increase behaviour change. However, the Thematic Group Activity method can better understand narcotics clients than the classical method. According to Riza, the study concludes that MMT cannot solely rely on pharmacology for retention but should also promote informed access to take-home doses [7]. According to the findings, multidimensional family therapy is a promising substitute for residential care for young people with substance use and co-occurring disorders. The findings are significant because they believe that teenagers who meet the requirements for residential treatment cannot be effectively handled in a non-residential [22]. Based on Octarina Perspectives on Narcotics Abusers and Addiction Counselors. The study concludes that modified therapeutic community programs are less effective and need to be improved. The ineffectiveness of the rehabilitation program will result in former abusers using drugs again (relapse) after leaving rehabilitation. Recurrence occurs because of low self-efficacy [13].

The limitation of this study is that clients over 18 years old are in the primary phase and have attended four basic Seminar modules and at least 2 KKT modules per the TGA

Guideline. Clients with compulsory status have received a court decision. Clients who have a history of physical illness or severe mental disorders and cannot read and write in Indonesian were not included.

5 Conclusion

The TGA program is an innovation program suitable for drug abusers to accommodate each individual's needs in the stabilization, primary, and re-entry phases. TGA Program was useful and fulfilled the needs of each individual. In addition, the TGA Program increases self-potential, self-confidence, and self-control individual therapy plans with a group approach in all BNN Rehabilitation Units.

Acknowledgements. Thank you for BNN, Deputy for Rehabilitation Dra.Riza Sarasvita, MHS, PHD, for providing direction and Funding support for this research. To the Head of the Post-Rehabilitation Directorate for Rehabilitation, the Head of BNN RI's Rehabilitation Unit at 6 (six) locations, namely: Lido Rehabilitation Center, Baddoka Rehabilitation Center, Tanah Merah Rehabilitation Center, Batam Rehabilitation Workshop, Kalianda Rehabilitation Workshop, and Deli Serdang Rehabilitation Workshop which has played a role and facilitated in the implementation of the TGA research.

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