

Coping strategies, perceptions of the effectiveness of rehabilitation programs and intention to relapse among former methamphetamine addicts.

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This study aims to explore issues on coping strategies, perceptions of the effectiveness of rehabilitation programs and the process of their intention to relapse among former Methamphetamine addicts. A total of 59 respondents were selected using purposive sampling which made up of former addicts who are undergoing surveillance program in Sandakan and Kota Kinabalu, Sabah. The results found that, several strategies employed by former addicts in their coping style have shown possibility of relapse. The study also found that respondents were quite positive with the activities organised by Malaysia National Anti-Drug Agency (AADK). This indirectly has become a form of treatment and therapy among the former addicts. The conclusion could be explained based on Transtheoretical Model of Change by Prochaska et. al (1992).

Keyword: Coping, Rehabilitation, Relapse

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Introduction

As one of the states in Malaysia, Sabah in its own capacity has a large room to study drug addictions and relapse from multicultural perspective. Different ethnic has different perception to the use, addiction and cessation of drug addiction behaviour and rehabilitation. Based on the drugs report for July 2008, synthetic drug or ATS (Amphetamine Type Substance) is the most preferences drug among drug addicts in Sabah. This phenomenon is different in Peninsular Malaysia where drug addict prefers heroin the most. Methamphetamine (MA) is an active stimulant to the central nervous system that produces active stimulation for about eight hours. This long- term activity has ability to stimulate body metabolism in human and its function just like any other drugs like cocaine that able to produce a very high activity to addicts. Generally, methamphetamine is cheaper than cocaine and able to provide longer effects compare to other drugs. This causes many drug addicts choose methamphetamine which also called "crank", "hibility", "peanut butter", "ice" and "boo".

Drug problem has become a serious problem over the past 30 years. Various

attempts have been made to combat drugs including the forming of Cabinet Committee to curb drug (2004), the National Anti-Drug Agency, AADK (1996), establishment of the National Drug Prevention Association (PEMADAM), (1976) and the National Anti-Drug Council. Dangerous Drugs Act 1952 has also been amended several times just to impose heavier penalties on offenders of distributors, owners and drug addicts. United Nations Commission on Narcotic Drugs (UNCND) has declared that June 26 of each year as International Anti-Drugs Day, and the governments of Malaysia have declared February 19 of each year as National Anti-Drug Day.

Latest statistics on drug abuse in the third quarter of 2006 showed a total of 17,339 drug addicts were detected. There was a decrease in the number of addicts of 24.82% over the same period in 2005 from a total of 23,062 people. This number consists of 9,873 people which are 56.94% of the new drug addicts with a decrease of 7.30% compared to 10,650 persons in the same period in 2005. There were 7,466 of the total 43.06% drug addicts were detected, which has showed some decreased by 39.85% compared to the year 2005 which was 12,412 people (January-Sept.2006,NADI,AADK). Among 14 major cities, Kuala Lumpur clearly showed the highest number of addicts which were about 1,585 people, followed by George Town (1,227), Ipoh (959) and Johor Bahru (502). Many ways have been taken by the government as stated in the action drug abuse and trafficking of drugs, such as the Dangerous Drugs Act1952 (amended 2002), the Drug Dependents (Treatment and rehabilitation) Act 1983 (amended 1998), Dangerous Drugs (Forfeiture of property) 1988, Dangerous Drugs (Special Preventive Measures) Act 1985 and the Poisons Act1 952 (amended 1989) in combating drug abuse.

In addition, the government has established various agencies and organizations to combat drug addiction, such as the National Anti-Drug Agency, Drug Prevention Association of Malaysia (PEMADAM), Association of Former Drug Addicts (PENGASIH) and held a variety of programs to rehabilitate drug addicts, namely through the establishment of the Rehabilitation Centre in throughout the country.

Government have spent about RM500,000 per day which equivalent to about RM150 million a month and RM1.08 billion annually to fight drugs. Half of it is for the purpose of rehabilitation in 29 rehabilitation centres throughout Malaysia (Ramli Abdul Halim, Harian Metro, 18 / 7 / 2006). Unfortunately, even with this huge expenditure, only 20 to 25 percent of the addicts were recovered. This is a serious problem and lead to further abuse and drug addiction. Thus, it is the time to think for a new solution for this problem.

Several studies have been done by various parties related to drug abuse. In Malaysia, the study of drug abuse is not only done by government agencies but also aided by the Institutions of Higher Learning (IHL), the NGOs and individuals. Among them are, Universiti Kebangsaan Malaysia, Universiti Utara Malaysia, Universiti Sains Malaysia, Universiti Malaya, Ministry of Interior through the National Anti-Drug (AADK) and the Ministry of Health (MOH), Anti-Drug Association of Malaysia (PEMADAM) and the Association of Containers Drug Malaysia (PENGASIH). Other efforts such as, the National Anti-Drug Campaign has been implemented to eradicate the drug problem. Activities such as counselling and similar activities were also conducted for the purpose of addressing the problem of drug abuse.

Mahmood Nazar Muhamed (2000), conducted a study to examine the drug rehabilitation program conducted outside the rehabilitation institutions in Malaysia. His study was to see the strengths, constraints and management of drug addicts under monitoring program. Results showed that many ex-addicts do not come to report with AADK as required. Over 186 respondents, only 73 people fully engaged in the study. By these, 20.5 % were confirmed relapse, while the rest were unable to be traced.

Azizi Yahya (2004), in his study at Taman Seri Puteri Batu Gajah, Perak and Dar-Assa'dah Complex, Kuala Lumpur examined the effectiveness of the program conducted at the institutions. A total of 79 trainees who have undergone at least 6 months of behavioural rehabilitation programs were involved. The findings showed that Vocational Programme, Co-Curriculum and Guidance and Counselling Program have less effective on them. Conversely, religious programs which have been carried out were found effective. According to Mahmood Nazar Mohamed et al. (2006) the effectiveness of institutional rehabilitation program depends upon the possibility scenario of former drug addicts to relapse. The study also showed that spirituality method such as Thoriot Qodiriyah Wan Naqsabandiyah (TQN), counselling, drug prevention education program (SLAD) and the Anti-Drug Association of Malaysia (PEMADAM) had high impact to the addicts recovery. The entire program has a different approach and different treatment in recovering former addicts. Brecht, Greenwel, and Anglin (2007) in their study among 325 teenagers who took Methamphetamine, showed polydrug approach during early intervention has less impact on the Methamphetamine addicts. The findings showed that woman who takes Methamphetamine is much likely to be highly effective. Study conducted by Daosodsai, Mark, Karen, Sara, Sopida and Qutub (2007) among students who have been identified to be involved with Methamphetamine showed that the levels of addiction decreased after

undergoing treatment in the school.

However, there are still many former addicts who relapsed and failed to free themselves from the influence of drugs after undergoing treatment at a rehabilitation centre. This raises many questions about the effectiveness of the treatment provided at a rehabilitation centre. The failure of this drug treatment may be caused by various factors. Among them is the mechanism aspects of drug addicts such as coping strategies and the process of their intention to free from drug. The effectiveness of treatment depends on the seriousness of drug addicts in the program.

According to Mahmood Nazar, Shuaib and Lasimon (1999) religious factor was preferred by ex-drug addicts to avoid them from relapse. Carver, Scheier and Weintraub (1989) found that coping strategies were also associated with drug issues, especially the "disengagement" strategy which is always associated with continuing drug use among adolescents, while the "engagement" strategy is often associated with efforts to avoid drugs and relapse after being treated.

Several variables are also found to have positive relationship with the drug abuse activities. Variables such as the lack of religious upbringing (Mahmood, Nazar Shuaib and Ismail, 1998) and dysfunctional families (Brooks, Whiteman & Gordon, 2002) are said to have positive correlation with drug activity. Hundleby and Mercer (1987) also found that there was a negative relationship among adolescents who have a strong religious upbringing and the high achievement with drug abuse. According to Mahmood et.al (1997) adolescents who are less religious upbringing are more likely to engage with social problems. In a study conducted by Farook Alomi (2004) on 200 college students involved with the Methamphetamine to see the family's role on the prevention of drug abuse among students in California also revealed that, family acceptance is an important factor that can reduce drug abuse among adolescents. While McCarthy and Anglin (1990) found that lack of support from family members significantly become the factors that encourage individuals to take drug.

However, the intention process in individual is able to attract former addicts to relapse. Good relationship with family, personal development, career, social events and a healthy lifestyle are crucial to help addicts recover (Lasimon, 2007). Wan Rafaei Wan Abdul Rahman, Mariam Adawiyah Dzulkifli, Shariffah Rahah, Sheik Dawood and Mardiana Mohamad (2009) also suggest that the involvement of family members in the rehabilitation process can ensure addicts successful recovery.

According to Wan Rafaei et al. (2009), relationship problems with family members (Malays) and girlfriend (Chinese and Indian) are also the cause to relapse. This finding consistent with the findings of longitudinal study conducted by the National Institute of Drug Abuse (NIDA) in the United States that rebuilding relationships with family members and significant of others are important in the recovery process and to address relapse.

However, there were not many studies on the intention process to relapse among drug addicts conducted in Malaysia. This study was conducted to investigate the coping strategies used in dealing with drug abuse addiction. In addition, this study also aims to get a perception of the appropriateness of former drug Methamphetamine addiction treatment while undergoing treatment at rehabilitation centers. This study was also conducted to clarify how the intention of relapse takes place among former addicts.

Methodology

Sampling

The sampling technique used in this study was, purposive sampling technique by Bernard (2000), purposive sample derived from consideration of the study results on the types or characteristics of the sample to be obtained to meet the requirements or research purposes. The research subjects were 59 ex-addicts who are undergoing surveillance program in Sandakan and Kota Kinabalu. The locations of the interview were Sandakan and Kota Kinabalu. The age of former addicts who participated in this study ranged from 18 to 38 years. For the purpose of maintaining the confidentiality of the respondents in this study, all respondents were given a code name as follows (KK) is a respondent in Kota Kinabalu, (SS) is a respondent in Sandakan, each of the first number represents the number of respondents, while the next number represents the paragraph verbatim respondents;

KK Respondents under supervision in Kota Kinabalu.

SS Respondents in Sandakan.

Interviews Scope

The researcher has chosen to use semi-structured interviews. The questions in the semi-structured interviews were predetermined, but the answers to these questions were open, which can be extended into more depth and detail about the phenomenon studied. Interviews were made based on the following three aspects:

1. What programs have you attended at the Rehabilitation Centre?
2. What is your way to prevent getting involved in drug abuse again?
3. Have you ever intend to take drugs again?

Procedures

All interviews were conducted at the AADK agency by experienced and well trained Research Officer. Based on the scope of the interviews and semi-structured questions, the interviews in this study takes 45 to 60 minutes .Tape recorder used as an instrument for recording the data during the interview.

Data Analysis

Grounded Theory approach was used in this study to obtain the result. Transcript of interview results were analysed using software NVIVO 8 and the themes or issues identified and the categorizations were made.

Results

Perception

What are your views on the program conducted at the rehabilitation centre and during monitoring period by AADK?

Respondents expressed various views about the program during the monitoring period. Four categories of respondent's perception were an experience, filling of a good program, administrative improvement as well as provide treatment to them.

Provide experience

Many respondents agreed that the program run by the AADK is to expose the consequences if they continue to take Methamphetamine. In addition, it also helps respondents identify themselves and increase their self-esteem.

"I spend a lot of experience after joining the AADK's program, I learned a lot from this AADK officer, very suitable, for example, now I have personal goals, and personal stance".

(SS16-11)

In addition, program such as sports is also a practical way to the respondents as an indirect method that gives them the experience to forget about their addiction.

"I think this AADK program is for us to know how to stop taking that good,

like sports at mile4, we follow their activity (AADK) so that we can experience how to forget things (Methamphetamine) (SS19-7). We gain great experience like going in the forest and involved with outdoors activities"

(SS23-13)

Filling of a good program

There were respondents who identify suitable programs and gave justification of why they had positive views about the program. The contents of the program which said effective are the description of drug abuse, effects of drug abuse and awareness program. The program is seen to help them when confronted with the intent to relapse. According to KK2,

"I use what is learned during the program. Officers have asked us to come to AADK for advice and treatment if relapse or have the intention to relapse. They will provide counselling to us, I think the filling of the program is important to help us reduce stress."

Improvement and administration

Overall, the respondents felt that there was an increase in the program from year-to-year. For example, KK2 compare the previous program is rather limited and passive, but has improved with the involvement of the respondents in the external program. Respondents from Sandakan and Kota Kinabalu explained, there was increasing in the quality of AADK's program every year.

According to SS4 and SS25, the hospitality given by the AADK officer helps them easily to accept the program.

"Like what I hear, AADK program has improved. I experienced it myself. In previous years the former addicts like me merely coming to report, now we not only report ourselves but we had to follow the program(AADK), and there were many programs made ..."

(KK2-5)

"Complete, all the AADK's programs are complete to make us realise. Officers help and watch us in all the programs. We feel appreciated taking part in their program (AADK)".

(SS4-10)

"Sometimes we are treated like family by AADK officer. They were not angry at us".

(SS25-8)

Treatment and therapy

Based on interviews, a large number of former addicts who are in a period of community supervision by the district of Sandakan AADK state programs by AADK is a form of therapy and deterrent, which helps them to forget the stress and thus reduce the intention to relapse.

"In my opinion, this program helps me reduce stress, it helps me not to take drug again and this program helps me to be healthier than before".

(SS3-5)

Coping Strategies

What is your strategy or how not to be involved in drug abuse?

Interview results revealed that there were two types of coping strategies used by the former addicts. The two strategies were: strategy of coping with the intentions and strategies for coping without intention. Coping strategies with intention refers to the strategy used by former addicts who claimed they have the intention and desire to relapse and at the same time trying to avoid their desire. Whereas, coping strategy without the intention is the strategy used by former drug addict who are still under the supervision of AADK and confessed they have no intention to relapse.

Coping strategies with intention

Coping strategies with intention divided into three categories: avoiding friends that take drugs, oneself and strengthening oneself religious beliefs.

Oneself

Some respondents acknowledged that the desire to take drugs come from themselves. Respondents said they have the intention to use drugs even during the supervision period because of themselves. For KK2, he uses repression technic as a strategy, while SS22 was more focused on sublimation.

"I try to control myself, which sometimes I really want to take drug again; I decided not to think of it. Ignoring it".

(KK2-4)

"I went to sea, fishing to get rid with the addiction, if I stayed not doing anything I will think of it. I always feel like I want to take drug again but to forget it I went to sea".

(SS22-26)

Avoiding friend who are taking drugs

Respondents who claimed to have intention to relapse almost entirely used the coping strategy of avoiding friends who are drug addicts. They feared of the emergence of a strong desire to take drug with their friends.

"I go home or another place far away from them. When I feel the intention to take drug, I will contact other PRS's and they give advice about the dangers of taking drug again, but I will run away from friends who are taking drug, I fear my intention to take drug will become very strong. That my way to avoid taking back the stuff".

(KK1-16)

"I refrain from old friends, I know many of my friends who relapse, I go far away from them (friends), sometimes even the place makes me remember how I used to take drug there, If there is an old friend, i will have intention to take drug again. But I will quickly leave".

(SS20-13).

Religion

Religious education program is one of the main components of emphasis in treatment programs. In contrast to the techniques of repression and sublimation, more spiritual approach refers to the search for peace in the desire to fight the temptation to relapse. Assistance and support from members of the religious institutions serve as moral support for them.

"Being close with family. Depends on ourselves as well. Prayer is the most important".

(SS5-12).

"I always want to take drug again, but sometimes I will join religion talk at the mosque, I feel calm at the mosque and I listen to the advice from the people there".

(SS9-13)

Coping strategies without intention

Coping strategies without the intention are divided into four categories: get busy with work, faith and get close with family.

Oneself

The main strategy is to believe that the respondents themselves are the key not to relapse. Mental strength and self-assertiveness are said to refrain them from relapse. Almost all respondents said that they are able to get rid of drug because they believe in themselves that they do not want to be involved in drug addiction.

"I never think or have intention to relapse because I believe to the promise I made not to take drug again. It is up to us to ensure a better life. But in my opinion, the principle of self must be strong so as not to take the drug".

(KK2-7).

"The main support to quit is of our own. For me, I never want to take drug again I really never wanted to take it back, I believe myself that I can forget it, it hurts when we think of the past but everything depends on ourselves".

(KK6-12).

Other coping strategy used by respondents who have no intention to relapse is work. This strategy is similar with sublimation approach.

"Work means not going back to drugs. During my off day, I do any kind of work such as helping with chores at home, trying to get busy so I will not think of drug again. If there is a program I will participate. Drug is no more useful to me, it doesn't bring any good. In fact it brings trouble"

(KK7-9).

Build relationships with family

One is closely linked to the family institution. Families who are willing to accept drug addicts play a role in strengthening the identity of addicts. Families are the anchors because it is associated with respondent's emotional attachment towards the family and the respondent is aware of the implications of their actions on their loved ones.

"Wife and family. My wife is the most supportive. The time I have with my children. When I think of drug, I will think of my children and my wife. What they think of me as the head of the family. There were changes when I follow the program. We fight the feeling to relapse because we have family and we are thinking of our role in the family".

(SS3-16).

"When my kid was born, I was in rehabilitation centre, I was so sad, when I see my kid I cried with happy tears because I am now changed not like what I am before".

(SS10 -14).

Religion

Coping strategy using religious factor is popularly used by former drug addicts. Besides being used by respondents who had the intention to relapse, this strategy is also used by the respondents with no intention to relapse.

"Prayers, pay attention to the family, stay away from old friends. I prayed to God to be kept away from the bad things I was in before. With prayer, our faith will be stronger and we will not be easily influenced".

(SS4-14).

Process of Relapse Intention

Have you ever intend to take drugs again?

Intention process to relapse is divided into four categories, which are, subconscious reaction, friends, family pressures and supervision. Almost half of the respondents who are still in a period of community supervision said that they intend to take drug again even on supervision period. However, there are some respondents who have no intention at all to take drug again due to the factors that give them confidence completely stop.

The subconscious reaction

The repression approach, especially the extreme, practiced by the respondents could be a trigger to the intention to take drug again. In the desire to prevent from relapse, the feelings to take drug again will occur if there are other factors that remind (cue) the former drug addicts. This situation is easily occurring especially when the respondent did not do any activities.

"I tried not to take drugs again, sir. I tried not to when there are friends asking me to take drug again. Those things have no benefits, I had enough and I realised because I had been blind for long. Honestly, no matter how we wanted to say no, there are times when we feel like we want it especially when I am alone and not doing anything, I do think of it sometimes".

(SS2-24).

"I am tired of avoiding friends, the more I avoid them the more I think of drugs. Sometimes friends that just got out of the centre who really want to avoid taking drugs again in the end taking it again. It is very difficult to always avoiding, the more we try to avoid it the more it comes to us. Synthetic drug is very powerful, it is not easy to get rid of, people said that we can get rid of it but they lied. Honestly I don't want to avoid because the more I avoid it the more I want it".

(SS1-21).

Friends

Intention process to relapse occurs from the social activities with friends, especially when they talk about events that may remind the respondents about the pleasures of taking drugs. Friends are one of the major factor contributes to many former addicts who partially recovered starts to relapse.

"In the beginning we were just talking but after many hours hanging out, we started to talk about drugs. When I hear friends talking about drugs, the urge to take it again occurs especially when friends are talking and showing you the stuff. One must be strong otherwise you will be easily influenced to take it again".

(SS1-20).

"I do not know. The desire to take back is always there. The intention was always there because I live in a place where people come to buy that stuff and many of other friends came by bringing the stuff".

(SS22-21).

There is no doubt there are friends who help them to forget about drugs and to advise the respondents to forget about the drug. According to some respondents, some friends are really in helping them to forget drugs by inviting them to get involve with sports and other beneficial activity during free time.

Family Pressure

Families who do not accept the drug addicts affect the desire of a former drug addict to relapse. Family factor is a very strong factor that triggers the beginning of the intention process of a former drug addict to relapse. According to SS2,

"If there are problems at home, I will run to my friends and tell them my problems; if I stay I will become mad because my family always get angry at me".

"Family quarrels, divorce, fights with siblings and other family problems cause stress to former addicts and this causes the intention to relapse in order to forget about their family problems".

"Family pressure can sometimes make you mad. I don't like it when they get angry, I always run away when this happen, because if I stay I will be scolded although I did not do anything wrong, so I go to my friends, I join them in whatever activities they do"

(SS4-14)

"Pressure, sometimes my father gets very angry. We are not taking drug anymore yet they keep talking about it, if I cannot stand being scolded then I continue taking it"

(SS9-17)

Supervision

AADK community supervision programs help former drug addict to forget drug addiction and help them to find career opportunities. To a small number of respondents, the lack of supervision will lead their intentions to drugs abuse.

"Indeed there are many positive changes I could feel through participation in this program. Before this I had relapse while in Kudat because of the lack of supervision and involvement in the program".

(SS9-9).

"If not because of the program, may be I will take drug again because I live in a house where people come to buy the stuff. If I am not strong enough I might be taking it again, the intention is always there but because of this AADK program I managed to be less intent and I like it. It is very dangerous sir, may be the intention to take drug again occurs if I am not participating in the program".

(SS6-16).

Discussion And Conclusions

Based on the results of respondents' perceptions towards the Rehabilitation Centre program or the AADK community supervision programs, majority of the respondents said the programs started to give them experience, which is good and beneficial to them. This indirectly has become a form of therapeutic and internal treatment to the respondent to get rid of drug addiction. Besides that, the improvement in the administration of the AADK increases their confidence on the program and on the AADK in general. These conditions increase the interest of respondents to participate in AADK's programs either in the rehabilitation centres or in community supervision.

In terms of coping, all respondents have their own strategies either if they have the intention or not to relapse. However, most respondents said that self-factor plays a major role to get rid of addiction. If they are not firm and no self-discipline, then the drug problem cannot be resolved. According to respondents, with a strong religious faith and commitment to study religion in greater depth, they have peace and guidance to turn to the right path. This finding is supported by a study conducted by Mahmood, Shuaib & Lasimon (1999) who found religious factors to be former drug of choice to stop and avoid relapse. However, there is little difference in coping strategies with the intention and no intention of involving a third

party. For respondents who have the intention to relapse, they decided to stay away from friends to prevent themselves from being influenced to take drug again. While the respondents have no intention to relapse, need families support and tried to rebuild family relationships because they want to live life as normal as well as their families. Past research has found that good family relationships and in the family involvement rehabilitation process is important (Lasimon, 2007; Wan Rafaei et al., 2009).

There are several reasons to the recurring of the intention process to relapse. Majority of respondents said the under conscious state of their desire lead the relapse process. This is because it increases the feeling of wanting to take drug if they do not have a job or activity to be done.

Thus, if respondents have a willingness to change, but still at risk for relapse, why does this happen? Is the treatment in rehabilitation centre and community supervision do not improve their assertiveness skills to say 'NO' to drugs? Based on the responses given by respondents in this study, it can be said that the main reason for relapse occurred is because the acceptance of ex-addicts to their addiction. If the factor of chemicals in the body is considered removed when they are in the Rehabilitation Centre, then psychological factor is the main cause of relapse.

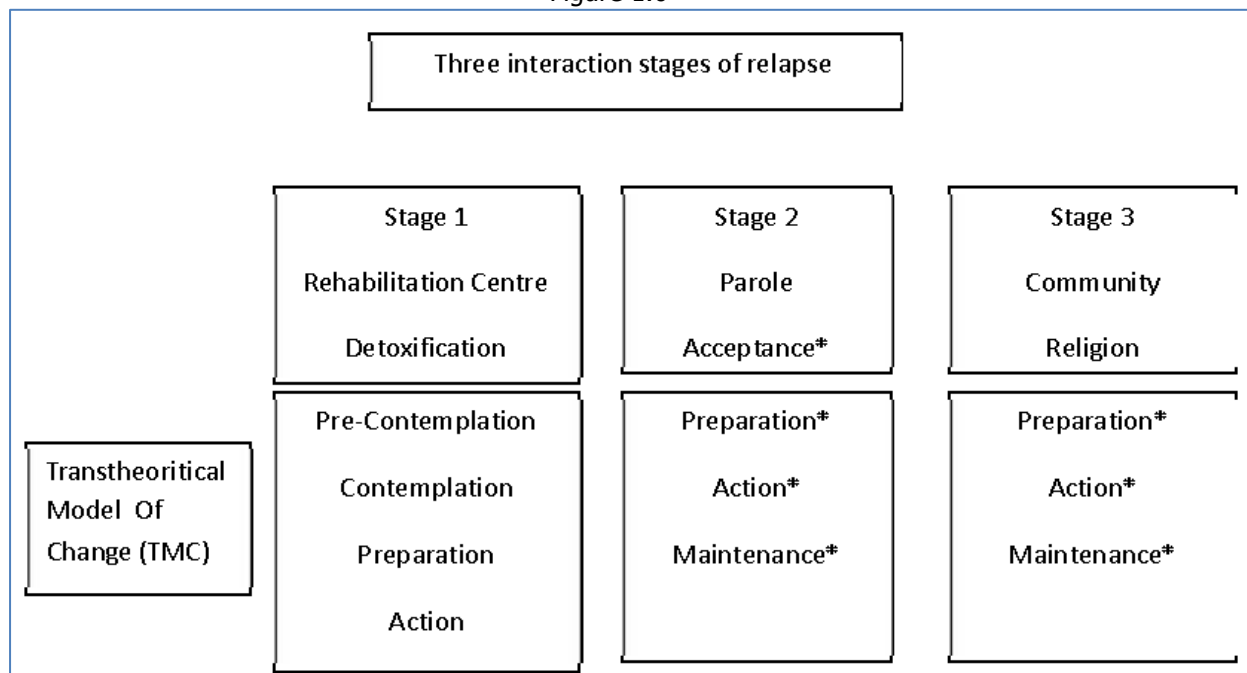
Based on psychoanalysis approach, the study also found that many respondents admitted that they are still addicted but are using the repression and sublimation techniques to keep in control. Such methods are less effective because it is temporary and more aggravating. It is because the former drug addict must have mental strength and confidence in dealing with their subliminal needs. The former Drug addicts should also adopt this technique repeatedly without complacent. Relapse occurs when they failed to practice the technique on a regular basis (constant), especially when they are facing with problem.

Those who were successful in preventing relapse are those who accept the fact that they are addicts and are willing to get help particularly in a form of religion. Religious associated with positive elements. The main thing in religious approach is, the former addicts must first accept their weaknesses before seeking help from their Gods. As an example, Muslims prayers involved receiving elements such as "My Lord, I am weak and need your help" and for those who are Christians, "Father, I have sinned". In consequence, former drug addicts who are still in denial are more prone to relapse than those who submit to the will of their weaknesses and try to get help. Family and friends are also referred to as a source of support for drug addicts. However, this support system has its own risks, namely

a situation in which family problems and friends who are still trapped in drugs dependence can lead them to drug addiction.

Addicts relapse situation can be explained by the level of readiness to change, as highlighted in theories Trans theoretical Model of Change (TMC) (Figure 1.0).

Figure 1.0



The study concludes that, the drug interactions are divided into three stages, while at the Rehabilitation Centre, parole and community. Two main functions of the Rehabilitation Centre are to build strength and psychological detoxification to addiction. Based on the theory of TMC, Rehabilitation Centre is able to work in helping former addicts to switch from pre-contemplation stage through to action. The researchers believe that the key to reducing relapse is to work on parole stage. At this stage, counselling can be done to help them improve coping strategies of repression to the level of acceptance. When the former addicts' coping strategies change to acceptance, the possibility for them to achieve the action and maintenance level are brighter than those who are still on the repression and sublimation.

One scenario that can be used to explain the above assumption is in a situation where former addicts using repression and sublimation in addressing the desire to relapse. They are likely to be aggressive acts such as punching a wall, shouting and acting violently or passively as crying to prevent the urge to take drugs. Family or friends will feel scared or sceptical to assist and support them in which these individuals might not be expected. However, former drug addicts using acceptance as their coping strategy will admit to their

family and friends about their desire to take drug again and might be getting support and help from family and friends to eliminate their desire.

An important implication of this study is to help the responsible parties especially AADK in identifying the problems that arise on a former drug addict who is still in a period of community supervision. Perceptions of the former drug addicts towards the rehabilitation program itself can be a positive reaction to enhance the effectiveness of AADK's program. AADK should focused more on current conditions in helping former addicts from relapse.

Therefore, all parties must provide strong cooperation in combating drug abuse in Malaysia. It requires commitment and support of all stakeholders including governments, NGOs and communities. Former addicts are still useful individuals to society and country. They need continuous support from all parties to have a second chance and enhance their skills of assertiveness and self-appreciation to faced challenges in life.

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