

Therapeutic Communication Process in Drug Abuse Rehabilitation National Narcotics Agency (BNN) Lido, West Java

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ABSTRACT

Keywords Therapeutic Communication Drug Abuse Rehabilitation Centre for Rehabilitation of the Lido National Narcotics Agency West Java Therapeutic communication is used for the drug abuse rehabilitation process. The purpose of this study was to find out how the process of therapeutic communication in drug abuse rehabilitation at the Lido National Narcotics Agency Rehabilitation Center, West Java. This study used a qualitative descriptive method with data collection techniques using interviews, observation and documentation which were carried out during the rehabilitation process. This study uses *purposive* to get subjects that are following the research objectives. The results of the study show that the therapeutic communication process carried out in drug rehabilitation is going well because there is communication between the counsellor and the client, and the client's communication with other clients. Counsellors in rehabilitation have a calling as brothers and sisters so that clients feel they have a close relationship like family. The BNN Lido Rehabilitation Center determines several activities at the work stage to assist the client's recovery process. Such as morning meeting activities, sharing feelings that were felt by the client at that time, vocational starting from cooking, broadcasting, outing or outbound, fish farming activities, hydroponic gardening, and sports together. In the third stage of work, the counsellor has a difference, namely the counsellor Bro Simon makes the client believe by instilling the principle of confidentiality or will not tell his client's problems, Bro Taufan focuses on the main problem and pays attention to the condition of his client, and Sister Oktavia imposes a reward and punishment system on her client if the client does not run and meet the criteria for a rehabilitation program.

1. Introduction

The communication approach that can be used for rehabilitation methods for victims of drug abuse so they can recover is often called therapeutic communication. Therapeutic communication is a form of communication that aims to heal (Suciati, 2019). Therapeutic communication has four stages so that therapeutic communication goes well, namely the pre-interaction stage, the orientation stage, the work stage and the termination stage (Melinda et al., 2022). Therapeutic communication plays an important role in the rehabilitation of drug abuse because the communication process always begins with an agreement between the communicator and the communicant (Padmadisastra, Patrianti, 2020)

The results of the BNN and PMB-LIPI surveys in 2019, the national-level prevalence rate of drug abuse in the past year was at 1.80% of the entire Indonesian population aged 15 to 64 years. The prevalence rate states that 3,419,188 people abuse drugs out of 186,616,874 Indonesian residents aged 15 to 64 years (Imron, 2022).

The Indonesian government created a rehabilitation program for victims of drug abuse from dependence and addiction based on Law Number 35 of 2009 which regulates Narcotics, in article 54

it is stated that narcotics addicts and victims of narcotics abuse must undergo medical rehabilitation and social rehabilitation (Indonesia, 2009).

The existence of the National Narcotics Agency Rehabilitation Center, namely the national referral centre for the implementation of rehabilitation for drug abusers or addicts. The Lido Rehabilitation Center is the first and largest rehabilitation centre owned by the National Narcotics Agency. The Lido Rehabilitation Center has a program where former drug addicts (recovery addicts) who have recovered and graduated can become counsellors (BABESLIDO, nd). In addition, clients are given vocational skills such as cooking training, workshops, making crafts and broadcasting so that when the rehabilitation period is over, they can be more productive and independent (Dorimulu & Santosa, 2019).

Previous research regarding therapeutic communication in rehabilitation to improve self-quality has stages of program flow starting with 4 stages of therapeutic communication which include the preinteraction stage, orientation stage, work stage and termination stage (Kusuma, 2021). The therapeutic communication process to improve self-quality has stages of program flow starting from screen & intake, then continued with the detoxification program, then at the entry unit and primary program and finally the re-entry program. The inhibiting factor for therapeutic communication is resistance with residents (Rahmadani, 2021). Therapeutic communication at IPWL Lighthouse Riau has obstacles such as a change in the atmosphere felt by addiction counsellors and drug addict residents (Khoirunisa, 2021). Research on therapeutic communication is limited to the use of role-plays in teaching therapeutic skills, and little research has investigated how role-plays influence students' reflections on their own practice. (Ronning & Bjorkly, 2019).

This research is different from previous research because it is to find out how the therapeutic communication process is carried out in drug abuse rehabilitation at the Lido National Narcotics Agency Rehabilitation Center. The selection of the Lido National Narcotics Agency Rehabilitation Center West Java is a national rehabilitation centre owned by Indonesia because the Lido National Narcotics Agency Rehabilitation Center has an important role in rehabilitation programs that can cure drug addicts and have programs for clients who have recovered can become counsellors and have many rehabilitation activities.

2. Method

This research uses descriptive qualitative. Qualitative descriptive is the process of describing qualitative research containing quotations of data (facts) found in the field to provide support for research results (Anggito & Setiawan, 2018). Researchers want to describe the process of using therapeutic communication with victims of drug abuse.

To obtain data analysis, the first thing to do is to make direct observations of the client's recovery process by the counsellors. Furthermore, the researcher will conduct in-depth interviews with the provisions of the key informant, namely purposive (Saleh, 2017). The criteria are determined based on those who have a relationship with the implementation of therapeutic communication, namely counsellors who have worked for more than 5 years to obtain in-depth information. The final step is that the researcher will document the communication process in rehabilitation carried out by the client.

3. Result and Discussion

The results of research on therapeutic communication conducted at the Lido National Narcotics Agency (BNN) Rehabilitation Center in West Java used group communication and counselling with counsellors. The informants who were the source of the research consisted of 3 counsellors Bro Taufan, Bro Simon, and Sister Oktavia and their 3 clients namely BM, DV and BGS. Counsellors have the nicknames of brothers and sisters so that clients and counsellors have a close relationship like family. The BNN Lido Rehabilitation Center implements a procedure where clients who will carry out rehabilitation are first placed in a detox-house, this is intended so that clients are accustomed to the condition of not using prohibited substances. After completing the detoxification, the client will be moved to another house to enter the rehabilitation process by carrying out a predetermined program of activities. The therapeutic or rehabilitation communication process at the BNN Lido Rehabilitation Center in West Java is carried out in the orientation phase. This phase is a preparatory period for the

primary phase. This primary phase aims to enable clients to socialize, experience self-development and increase psychological sensitivity by carrying out various activities such as vocational cooking, making crafts, and broadcasting, namely clients are given knowledge about basic videography techniques such as shooting techniques from various angles and also lighting, this activity aims to foster client interest in working and being productive in the community, outing or outbound, cultivating catfish and hydroponic gardening and preset therapeutic sessions. and the re-entry phase has the goal of facilitating clients to be able to socialize with outside life after undergoing treatment in the primary phase. Clients carry out rehabilitation with the counselling process with the counsellor and carry out various activities.

The BNN Lido Rehabilitation Center regarding the rehabilitation period is no longer determined for six months the client is required to carry out rehabilitation. However, the client's rehabilitation period is determined according to the initial treatment plan that has been approved by several professionals and counsellors at the BNN Lido Rehabilitation Center. If the client has had significant changes and has carried out all the specified program criteria, the client can be declared to have completed the rehabilitation period, of course, with consideration and discussion between staff, counsellor and client.

1) Pre-Interaction Stage

At this stage, the therapeutic communication process carried out by the three counsellors has established an initial communication system where the counsellor will seek information about the client's personal data, examine medical records for psychiatric development, and ask the staff or other professionals who previously handled clients. As well as seeking information about the beginning of substance use and conducting an *assessment* with the family regarding the problems the client has, and finding out about the weaknesses and strengths of the client through observing the evaluation of the treatment plan. One of the counsellors will ask questions about the 10 weaknesses and strengths of his client.

2) Orientation Stage

This stage is carried out by the three counsellors in the orientation phase by introducing themselves to the client as the counsellor who will be responsible for the client's rehabilitation by asking a few simple questions so that the client responds by introducing himself. At this stage, the counsellor discusses the program to be carried out by the client during the rehabilitation period with a focus on the main problems.

As well as the counsellor will provide real information to the client, such as conveying greetings from the family and providing support so that the client is enthusiastic about carrying out the rehabilitation process in the next few months, this support provided makes the client feel cared for and feel confident in the counsellor. This is an effort to maintain or maintain a trusting relationship, counselors must be open, honest, and sincere, accept clients as they are, keep promises and respect clients (Fitriarti, 2017).

3) Work Stage

The work stage is the stage where the counsellor and client will work together to overcome the problems experienced by the client. This stage of work is carried out by the client during the rehabilitation period from the character-building process to socialization with the community or program group. At this stage, the counsellor will hold counselling on a scheduled basis and can monitor the progress of the clients, outside of the regular schedule of the counselling process the counsellor also does not hesitate to start a chat with the client. This counselling process is carried out by allowing the client to convey all the problems or obstacles encountered during the rehabilitation process. At this stage, most clients tell their problems regarding their fear of the future, their fear of not being trusted by their families again and the views of society on them after completing the rehabilitation period.

At this stage, some various programs or activities must be carried out and the criteria met by the client to proceed to the next phase, which includes morning meeting activities where these activities have the aim of forming attitudes, togetherness, honesty and courage in speaking in front of other clients. Vocational activities or skills are training such as weaving, cooking, making handicrafts from bottles or clay, and broadcasting, then there are activities from hydroponic gardening to fish farming

with the bio floc system. In addition, there are outing activities to keep clients from getting bored with carrying out the rehabilitation process.

The three counsellors at this stage have differences in counselling with clients, including:

- a. Bro Simon will be an active listener and paraphrase the problems presented by his clients, make clients believe by not telling the problems experienced by clients and make clients have a sense of solidarity and help each other, and provide opportunities for clients to determine solutions to problems he faced.
- b. Bro Taufan at this stage will first pay attention to the client's health condition and feelings and bro Taufan will focus on the main problems experienced by his client. Bro Taufan's warm and caring attitude towards clients will make clients feel cared for and valued (Anggraeni, 2022).
- c. Sister Oktavia at this stage will apply a reward system in the form of praise and provide punishment in the form of not being able to contact the family for some time if the client does not complete the program criteria or is lazy in running the program.

At this stage, the client conveys the many benefits felt during rehabilitation by carrying out various activities during the rehabilitation period. As initially, the client has a lazy personality in carrying out their worship during the rehabilitation process they have performed the five daily prayers and congregation, then they are regular in carrying out their daily activities, and they can control their emotions well.

4) Termination Stage

This termination stage is the last in carrying out therapeutic communication. The three counsellors at this stage conduct a temporary evaluation of the changes in behaviour experienced by the client during the rehabilitation period and discuss the client's treatment plan. At this stage, it is also explained that the client still needs to carry out the rehabilitation period because they remember the treatment plan determined at the beginning and the use of prohibited substances that they have consumed for quite a long time and the results of the evaluation are also conveyed to the client's family. Several clients felt sad and disappointed because of this decision, but the three counsellors provided support so that the clients remained sincere and enthusiastic in carrying out the rehabilitation process.

The therapeutic communication process in drug abuse rehabilitation carried out by the three counsellors has made the client believe in telling the problem and conveying his wish to recover soon and return to his family, then will help him determine a way out and the patient is given full rights to make decisions for the problems faced by the client. In addition, many clients experience the benefits when carrying out rehabilitation by carrying out various existing activities.

The results of this study answered the purpose of the study, namely to describe how the therapeutic communication process was carried out in drug abuse rehabilitation at the Lido National Narcotics Agency Rehabilitation Center, West Java. This study shows how the rehabilitation process is carried out by the Rehabilitation Department of the Lido National Narcotics Agency in West Java by using therapeutic communication, namely group and individual communication with counsellors, clients also carry out rehabilitation by carrying out predetermined activities.

4. Conclusion

Based on the results of the study, it can be concluded that the therapeutic communication process carried out in drug abuse rehabilitation at the BNN Lido Rehabilitation Center in West Java shows that therapeutic communication is not only carried out with interpersonal communication but with other communication activities such as seminars, outing activities and various other activities. has been determined by the BNN Lido rehabilitation site. This research also contributes to understanding how the process of therapeutic communication in drug abuse and the dangers of drug use can affect health and life in the future.

To get maximum results from this study, future researchers are expected to be able to increase the number of informants so that the data and information obtained are more-complete and detailed.

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