

Experience of recovering addicts undergoing the 7 steps recovery in addiction program (7-SRA) as an aftercare treatment

Experiencia de adictos en recuperación que se someten al programa de recuperación en adicciones de 7 pasos (7-SRA) como tratamiento posterior

Mohamad Isa Amat**

Universiti Sains Islam Malaysia - Malaysia
isaamat@usim.edu.my

Ku Suhaila Ku Johari*

Universiti Kebangsaan Malaysia - Malaysia
kusuhaila@ukm.edu.my

Nurfarhah Mohd Najib***

Universiti Sains Islam Malaysia - Malaysia
farhah.najib@gmail.com

Haslinda Mat Jais***

Universiti Sains Islam Malaysia - Malaysia
haslindamatjais@gmail.com

Safutra Pamidi***

Universiti Sains Islam Malaysia - Malaysia
safura_siber@yahoo.com

Muhammad Khairi Mahyuddin***

Universiti Sains Islam Malaysia - Malaysia
muhdkhairi@usim.edu.my

ABSTRACT

The high number of drug addiction and relapse rate cases among Muslim clients in Malaysia has been always imposing apprehension upon Malaysians. This underpins the fact that there are rooms for more treatment options from different dimensions to be developed as the complementary action to the existing ones. Recognizing the etiological factor of addiction is also epitomized from individual spirituality, the 7-Steps Recovery in Addiction (7-SRA) was initiated based on Islamic teaching to further addressing this issue through the self-purification and repentance (tazkiyyat al-nafs). An in depth qualitative case study research was conducted to discover the experiences of 8 recovering clients as the participants in an aftercare center to discover their experience undergone the 7 Step in Recovery in Addiction Module. The data was triangulated by using in-depth interviews, observation notes and document analyses. The findings revealed that there were two emerging themes from informants' shared experiences (pre and post intervention) which were spiritual and behavioral dimensions. 7-SRA was reported to be helpful approach for the participants in recovery process; thus 7-SRA is relevant to be employed as an evident-based practice (EBP) in drug addiction problem in particular as an aftercare treatment.

Keywords: Aftercare, Spirituality, Self-Help, Drug Addiction.

RESUMEN

El alto número de casos de drogadicción y tasa de recaída entre clientes musulmanes en Malasia siempre ha estado imponiendo aprensión a los malayos. Esto apuntala el hecho de que hay espacios para que se desarrollen más opciones de tratamiento de diferentes dimensiones como la acción complementaria a las existentes. Reconociendo que el factor etiológico de la adicción también se resume en la espiritualidad individual, la recuperación de los 7 pasos en la adicción (7-SRA) se inició con base en la enseñanza islámica para abordar este problema a través de la autopurificación y el arrepentimiento (tazkiyyat al-nafs). Se realizó una investigación de estudio de caso cualitativa en profundidad para descubrir las experiencias de 8 adictos en recuperación como participantes en un centro de atención posterior para descubrir su experiencia en el Módulo de 7 pasos en la recuperación en la adicción. Los datos se triangularon mediante entrevistas en profundidad, notas de observación y análisis de documentos. Los hallazgos revelaron que había dos temas emergentes de las experiencias compartidas de los informantes (antes y después de la intervención) que eran dimensiones espirituales y de comportamiento. Se informó que 7-SRA era un enfoque útil para los participantes en el proceso de recuperación; por lo tanto, 7-SRA es relevante para ser empleado como una práctica basada en la evidencia (EBP) en el problema de la drogadicción, en particular como un tratamiento posterior.

Palabras clave: Cuidados posteriores, espiritualidad, autoayuda, drogadicción.

*Corresponding author. Faculty of Education, Universiti Kebangsaan Malaysia, 43600 Bangi, Selangor, Malaysia

** Asian Centre for Research on Drug Abuse (ACREDA), Universiti Sains Islam Malaysia 71800 Nilai, Negeri Sembilan, Malaysia

*** Faculty of Leadership and Management, Universiti Sains Islam Malaysia, 71800 Nilai, Negeri Sembilan, Malaysia

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1. INTRODUCTION

Presently, substance abuse or drug abuse is indeed being recognized as one of the biggest threats to the nation. The seriousness of drug addiction problems in Malaysia is worrying with its increase in relapse rates. From a total of 25,267 drug addicts that have registered under National Anti-Drug Agency (NADA) in 2018, a total of 17,474 were reported as the new drug addicts and more than 7793 people were reported to fall into relapse (Refer Table 1.1). The statistics generated by NADA have shown the fluctuating rate of addiction from 2012 to 2016 alone. The pattern shows the increase from year to year except in 2015 where the number of relapse rate has declined to 6,379 cases compared to the cases reported in 2014 with 8,172 cases. But the number of relapse addicts continued to increase by 2016 as many as 7,921 clients compared in 2015 (Refer Table 1.2). In 2017 alone, more than 71,307 clients were referred into rehabilitation facilities (6748 clients in institution and 64,559 in communities) to receive further treatment.

Table 1.1: Statistic of Drug Addict Reported in 2018

Case Status		Total		Average	
		Numb	%	Monthly	Day
	New Drug Addicts	17,474	69.15	1,456	48
	Relapsing Drug Addicts	7,743	29.87	645	21
	Total	25,267	100	2,101	69

Sources: NADA, 2018.

Year	New Case		Average		Total	
	Numb	%	Numb	%	Numb	%
2012	10,301	68.21	4800	31.79	15,101	100
2013	13,481	64.54	7406	35.46	20,887	100
2014	13,605	62.47	8172	37.53	21,777	100
2015	20,289	62.47	6379	23.92	26,668	100
2016	22,923	76.08	7921	25.68	30,844	100

Table 1.2: Comparison on Drug Cases Reported from 2012-2016

Sources: NADA, 2018.

Indeed, various efforts have been always being promoted in enhancing the effectiveness of existing drug treatment and rehabilitation programs. Several treatment and recovery approaches through the Evidence Based-Practice (EBP) have been adopted by the governments and non-governmental organizations, (NGOs). The treatments encompass the therapeutic community (TC), psychosocial approach, vocational therapy, cognitive and behavioural approach (CBT) as well as religious therapy such as Halaqah and the Islamic Spiritual Rehabilitation Approach (ISRA) (NADA, 2016). The Islamic Spiritual Rehabilitation Approach (ISRA) has been introduced by NADA in 2016 as another residential drug treatment option to the other conventional treatment.

Islamic approach in drug treatment has seemingly depended on the mere theological speculation, clinical observations and anthropological inquiry yet still lacks of empirical evident studies that advocate the effectiveness of this treatment (Raiya & Pargament, 2011). The studies in relation to spirituality and religiosity in substance abuse involved the confusion between spiritual and religious in terms of definitions and its interpretations from different perspectives. Burkhardt and Solari Twadell (2001) define spirituality as the experience of integrating meaning and purpose of life through oneself, others, arts, music, literature, the nature or superior power beyond humankind. In addition, they define religiosity as an understanding about one belief system or certain dogma and involvement of individual within that particular religious group. Cook (2004) defines spirituality as a universal human experience that evoked through three ways; internal subjective awareness, chemistry with others in community, and relationship with the superior power beyond humankind. For religiosity, Cook defines it as belief, religious practice and religious sentiment.

There are evidence that religiosity and spirituality play as protective factors in preventing alcohol consumption and drug use (Brizer, 1993; Hodge, 2001; Marsiglia, Kulis, Nieri & Parsai, 2005; Pullen et al., 1999; Walker, Anette, Wills & Mendoza, 2007). Moreover, religiosity and spirituality are negatively correlate with substance abuse and helpful for recovering process (Brown, 2006; Bazargan, Sherkat & Bazargan, 2004). Likewise, the lack of religion becomes a risk factor for the increased use of drugs (Khalid 2008). Nurshuhada Mohd Sabri, Wan Shahrazad Wan Sulaiman and Norulhuda Sarnon (2018) mention spiritual practice and religious rituals play as catalyzer in addiction recovery.

According to the statistic, there were more than 75 percent of Muslim Malay clients dominating the graph. Therefore, the 7- Steps Recovery Program (7-SRA) was initiated and developed by Abdul Halim and Muhammad Khairi (2014) in exploring its' potential in aftercare drug treatment. Therefore, this paper is aimed to explore and discover the experience of participants' experiences before and after undergoing the 7 – SRA intervention as an aftercare program.

Residential Drug Treatment and Aftercare Program in Malaysia

The National Anti-Drug Agency (NADA) employs residential drug treatment primarily using biopsychosocial and spiritual as a treatment modality in treating recovering addicts. In 2016, NADA introduced and piloted the Islamic Spiritual Rehabilitation Approach (ISRA) in Cure and Care Rehabilitation Center (CCRC) (NADA, 2018). ISRA is a module based on self-purification and repentance of oneself towards Allah S.W.T.

ISRA module is an adaptation module from Inabah. Inabah is a spiritual approach adopted to rehabilitate people involved with drug addiction and also face juvenile delinquency problems (Abdul Manam, 2013). The origin concept of Pondok Remaja Inabah in Malaysia was taken from Pondok Pesantren Suryalaya where this type of drug rehab center uses Islamic psychospiritual approaches. The basis for the treatment approach is based on Tarekat Qadariyyah Naksyabandiah (TQN).

According to Abdul Manam (2013), Inabah approach sees that the cause of the problem are the emptiness, the forgetfulness of the heart, the weakness of faith and the impairment of *taqwa* so that one is affected by the temptation of the desire and the devil's deception. The process of treating drug addiction through this inward approach is focused on some of the main practices of repentance bath, compulsory and additional prayer (*rawatib and nawafil*), *zikir jabr* and *khafi* which performed regularly and intensively within a certain period, *qiyam al-lail* and also fasting. This practice has a very high *tazkiyat al-nafs* value and also was supported by Al-Qur'an and Sunnah.

The ISRA approach is an adaptation module from Pondok Inabah, Kuala Nerang Kedah. Cure and Care Rehabilitation Center (CCRC) Sungai Ruan was selected to pilot the module. As the module received many positive feedbacks, NADA also employs to CCRC Perlop, Perak, and CCRC Tiang Dua, Melaka. NADA (2018) asserts that this approach also will be introduced into CCRC Benta, CCRC Kampung Selamat, CCRC Karak, CCRC Jeli, and CCRC Batu Kurau (NADA, 2018).

Besides providing residential drug treatment, NADA also helps recovering addicts receive drug treatment program at community based. In fact, majority of recovering addicts who receive treatment follow up occurred at community. In 2017 alone, more than 64,559 clients were registered in received drug treatment (NADA, 2018). For community based treatment, there are two types of clients; firstly, a mandated supervision client which also known Orang Kena Pengawasan (OKP) due to court order, and secondly, voluntary client. Voluntary client referred for those clients who want to voluntarily received drug treatment on their own or being referred by family members or advice from NADA officers. For voluntary cases, NADA also provided a-halfway house program where the individuals may stay within 3 to 4 months while they searching for job vacancy nearby (NADA, 2018).

12-Steps Program and Millati Islami

The 12-Steps program of Alcoholics Anonymous (AA), developed in the mid-1930s, provides a spiritual path for individuals struggling with addiction. Although this spiritual discipline is less than one hundred years old, the 12 Steps program follows the same spiritual paths that have been utilized in established religions throughout the world. (Sandoz, 2014). The origins AA can be traced back to another organization called Oxford Group in the early 20th century in the United States and Europe which was a religious movement emphasizing self-improvement. In the early 1930's Alcoholics Anonymous was formed. Jun 10, 1935 is celebrated as the founding date of Alcoholics Anonymous are the hallmarks of AA are the Twelve Steps helps one quit alcohol and remain sober. (Branscum, 2010)

Recovery from addictions involves a daily walk on a path based upon the 12 Steps. The 12 Step program of Alcoholics Anonymous offers a daily disciplined track in spirituality which includes the traditional paths to God as devotion, understanding, service and meditation. In addition, the process of recovery based on the 12 Steps is a lifetime journey. Such a journey involves living a life based upon solid spiritual principles which promote ego deflation and the continued reduction of self-centeredness. As such, the person in recovery seeks conscious contact with the God of one's own understanding. Such conscious contact with this "Higher Power" not only assists in overcoming temptations and urges to return to drinking, but also to assist the person to be "of maximum service to God and to the people about us". (Sandoz, 2014)

Mansur Ali (2014) explained about Millati Islami (MI) in which the path of peace is a fellowship founded for Muslims suffering from addiction disorder in USA. These 12 steps are modelled based on the 12-step model of Alcoholics Anonymous (AA) framework. However, it has been amended to fit with Islamic teaching. 12 Step Group is one of the popular self-help groups in Malaysia being utilized to help recovering clients at community in Malaysia to stay recovered. As the group runs anonymously, there is no clear data to indicate it statistically in this paper.

The 7 Recovery Steps in Addiction

As 12 Step Program plays as a major influence on recovering clients at community, Abd Halim Mohd Hussin and Muhammad Khairi Mahyuddin (2014) established and found the 7 Recovery Steps in Addiction Module (7-SRA). This module is intended for Muslim clients to address recovering issues using Islamic teaching as the basis to the recovery process during aftercare program. The main objective of 7 Step Recovery Addiction Module is a continuation and follow-up program of ISRA module. There are 7 thrusts were put forth as the cardinal principles of recovering in drug treatment notably as 1) self-acceptance, 2) surrender to Allah, 3) self-knowing and confession to Allah, 4) responsibility towards mistake, 5) making effort and *tawakkal*, 6) confidence and relying to Allah and finally, 7) maintaining and improve for recovery (Abd Halim Mohd Hussin and Muhammad Khairi Mahyuddin, 2014). To date, there still no empirical studies conducted on the 7 Steps of Recovery in Addiction Module towards the recovering addicts. Therefore, the study was intended to discover the experience of participants undergoing this module as an aftercare program.

2. METHODOLOGY

Research Design

Zikmund (2003) research design is a method or procedure to collect and analyze data. In this research, the case study design was employed to collect the experiences of clients and analyzed them into themes that signified the effectiveness of the 7-SRA module. According to Ghazali and Sufean (2016), case study is an exploratory research upon a phenomenon for a particular individual or a group of individuals. Case study is also suitable to be employed to answer the research questions that are designed in how and why manner (Noriah & Abu Yazid, 2010).

Participants

Eight recovering addicts out of 12 participants of this module at Rumah Perantaraan (RP) Jalan Ipoh, Sentul were

involved voluntarily in contributing to this research. The other 4 participants were not included into the study due to time constraint, job related commitment and health condition problems. During the study was conducted, there was a total 26 recovering clients reside at Rumah Perantaraan. According to Ghazali and Sufean (2016), there is no single rule of ascertaining the total population of sampling in qualitative research, yet, usually the small sample (1-7 participants) is sufficient as long as all the participants involved are fulfilling all the criteria drawn. This research employed the purposive sampling technique.

Guarte and Barriers (2007) connoted purposive sampling as a random selection of sampling units within the segment of population with the most information on the characteristic of interest. Purposive sampling is appropriate in qualitative research because the sample selected does possess the information required by researchers and to know the progress or development of a phenomenon at a particular research location. Merriam (2009) advocated that purposive sampling is good because it capable of providing the information as there is no more information needed or redundant. For this study, participants were invited to take part as in accordance with several criteria

- i. Participants for this research must be RP client that still undergoing treatment for 3 months to finish the 7-SRA module.
- ii. Participants for this research are Muslim Malay male clients who are 18 and above.
- iii. Participants for this research must be free from mental problems, HIV positive and Hepatitis C.
- iv. Participants for this research are RP clients that enter the center with full consent and partial consent for various reasons.
- v. Participants for this research must be RP clients that are in the stage of middle recovery where the individuals must have involved in drug addiction and have been undergoing a recovery program. In other word, the middle recovery drug addict must not engage in any drug intake while following the recovery program.

Table 2.0 displays the demographic information of the clients which consist of the information on age, state of origin, marital status, type of addiction, addiction period and occupation.

Code	Age	State of origin	Marital Status	Type of addiction	Addiction period	Occupation
P1	48	Kedah	Single	Heroin	24	Hotel Steward
P2	42	Kedah	Divorce	Heroin	16	Security Guard
P3	40	Kelantan	Single	Morphine	14	Unemployed
P4	39	K.Lumpur	Single	Heroin	22	Hotel Steward
P5	62	Selangor	Single	Heroin	44	Security Guard
P6	35	Kelantan	Married	Methamphetamine	7	Security Guard
P7	42	Perak	Divorce	Heroin	28	Security Guard
P8	44	Perak	Single	Heroin	30	Business

Table 2.0 Participants' Demographic Information

(Source: Data Analysis)

Research Procedures

This study was conducted at a NADA's community based treatment and rehabilitation facility which is also known as Rumah Perantaraan (RP). RP is located at Jalan Ipoh, Sentul, Kuala Lumpur. The facility located at 4-storrees shop lot building in the heart of Kuala Lumpur city. This facility is owned by Religious Department of Wilayah Persekutuan (MAWIP) and NADA renting the unit to run this project. The facility can accommodate up to 50 residents in a time. Each recovering addict stays there from 3 to 6 month as they searching permanent job. This concept of residency is quite similar to halfway house in community. A written consent was granted from Rumah Perantaraan management before the data collection procedure was made. The 7 Step Recovery in Addiction Module was delivered by primary researcher for 18 weeks period with meeting frequency for once or twice/month. The first in-depth interview session cycle were conducted prior the informants undergoing the module a week before first session was conducted. Peer-checking procedure was conducted prior second cycle of interview session. Second cycle of in-depth interview session were conducted a week after finale session took place.

Data Collection and Analysis

The main data sources for this study were derived from (a) individual in-depth interviews with recovering clients, (b) observational notes and (c) document analysis.

a) *In-depth Interview*

Sixteen interview sessions were conducted by us upon the informants individually. The interview protocol was constructed by us in line with Fontana and Frey (1994) as to impose a common statement (protocol) for all the participants. The interview sessions were conducted upon the informants was only 2 times each person after they have undergone 13 module activities that constituted to the 18 weeks period. The interview protocol led to the discussion of the following topics; exploring the experience of informants before and after undergoing the sessions and what are the emerging dimensions that were obviously helping the recovering journey for them.

b) *Direct Observation*

Direct observation is the process of incorporating open ended, firsthand information by us as observers and places at a research site (Creswell, 2012). Direct observations in this research were done by us as a team researcher towards the gestures and behaviors of the informants throughout their full involvement in module activities. This was helpful to see the behavioral patterns and real meaning of the participants when they shared their experiences after undergoing the 7-SRA module.

c) *Document Analysis*

Documents analysis method as a source of data comprises the public and private records that qualitative researchers gained that include newspaper, minutes of meeting, personal journals and letters (Creswell, 2012). This research accessed to participants' journals and activities' exercises to give the real meaning to the experiences they shared to us as the researchers.

Data validation

All interviews were recorded and transcribed in verbatim. The following methods were accomplished to make sure that the authenticity and trustworthiness of the data:

- ii. Peer checking: After the initial coding, the data were sent to all the informants (recovering clients) for verification. This process also assisted us during preliminary analysis to predict that the whole meaning of an interpretation is correct and precise (Merriam, 2009).
- iii. Peer review: Merriam (2009) connoted peer review as *peer examination*. The peers' feedbacks and commentaries were based on their expertise, e.g., contents, methods, processes, logistics, and other concerns.
- iv. Triangulation: Data from diverse sources of interviews, observations and documents were triangulated by employing a constant comparison method (Stake, 2010).

Data Analysis

In this research, data triangulation method has been employed to analyze the data collection of this study. Guba and Lincoln (1981), triangulation can be defined as collection of data that is multiple or one of the data collection methods is contradicting to the rest. Perone and Tucker (2003) said that the triangulation approach employs the utilization of more than one study methods or more than one data collection techniques. In this research, researcher used individual in-depth interviews with recovering counselors – clients, observational notes and document analysis. This is supported by Anglin (1993) saying that it is triangulation when there is a technique that integrates different methods such as; interview, observation and survey in the same units.

Categorization and Coding

We had analyzed the obtained data by transcribing the interviews. The transcription was coded to find the themes by using Atlas.Ti 7. The coding procedure was completed one step at the time, line by line, within each transcription to identify similar patterns in the data corpus to derive themes or new emerging themes. There were two transcriptions produced for each informant. An inductive process occurred when different themes emerged with new subthemes as the coding process took place from participant number 1 to participant number 8.

3. RESULT AND DISCUSSION

Themes	Subthemes	
	Pre Phase	Post Phase
Behaviour	Immoral deeds Low self esteem	Coping skill Self-Efficacy Ritual improvement
Spiritual	Ignorance of spiritual practice in life	Remembrance of god Accept the fate positively

(Source: Data Analysis)

Informants' experiences were divided into two stages of the transitional process which were pre phase and post phase. The two major themes of experience emerged which were behavioral and spiritual dimension. These emerging themes yielded several subthemes that explained experiences shared by the informants.

Pre-Phase Experience

i) Immoral deeds.

The majority of the informants involved in stealing, consume alcohol and deviant behaviors (drug-crime related behaviors) since the young age. In some cases, they reported they being locked-up and being jailed many times due to their criminal behaviors. Abuse different types of drugs were part of their addiction life. There were times at them being homeless and unmanaged. There were up and down of life experience like a roller coaster. This pattern continues in many years and only recently when they referred themselves to Rumah Perantaraan.

"When I was 17 years old, I left for Kuala Lumpur. I am starting drug dealings, steals and other illegal activities". [P3]

"As early as 9 years old I have been consuming drugs and glue also smoking" [P4]

"Before this I can't ... what people told... you just get lost. It's my life. I had count... during my school years. ... until I started to drink alcohol and take drugs." [P6]

ii) Low Self-esteem

All participants said that they lack of soft-skill competencies. They felt not confidence, did not know how to communicate well, negotiate and always being pessimistic to societal members when they got insulted. They easily sulked and being sensitive what people actually don't say it. They being prejudice about themselves. Nothing was good about them. Everything was seemingly didn't work properly. Internal motivational in keeping up at low point and there was no way to pull back.

"Every day we do not know how to converse properly..." [P5]

"Before this I can't ... what people told... you are get lost. It's my life. I had count... during my school years. Until I started to drink alcohol and take drugs." [P6]

"To look at myself? I don't know, I couldn't answer properly." [P7] "... Before this... I didn't know what my potentials are..." [P8]

Post-Phase Experience

i) Coping skill

Four of the informants said that they were able to come to terms relating to their personal changes and put it down to their ability of coping skills. In Medical Dictionary, coping skills are the methods a person uses to deal with stressful situation. Coping skills include a stable value or religious belief system, problem solving, social skills, health-energy and commitment to a social network.

"... Then, try to find the means on how to solve the problem. What can be done once a problem arises" [P2]

"Previously whenever there is a problem however slight, turn to drug for appeasement. Presently any queries I meet my friends to avoid trigger and support" [P3]

"I was never one to listen to others' cautioning. But now anyone who wants to have a say I can lend an ear at the same time I can also air my anxiety." [P4]

ii) Self-Efficacy

Self-efficacy is the belief in one's own ability to successfully accomplish something (Brown, 2013). Self-efficacy beliefs determine how people feel, think, motivate themselves and behave. A strong sense of efficacy enhances human accomplishment and personal well-being in many ways. They include cognitive, motivational, affective and selection processes (Bandura, 1994). This means how a person can make a judgment in deciding the best option to take in facing any given situation (prospective). Participants had experienced more positive attitude and behavior changes. They learnt how to manage and sustain a good attitude.

Now I am more determined to obey only God" [P1]

"I'm happier then I was before, because I can go anywhere without dreading the outcome". [P2]

"We take what is rightfully ours. The wrong ones discard them.

Anything not related to us don't even bother with it" [P3]

iii) Ritual improvement

For theme behaviour, in this phase the respondents stated that they had plans to maintain abstinence. All respondents stated they would be a good Muslim. They missed they prayers throughout they addiction life and they didn't care about it. Religiosity and spirituality topics were such awkward for their life before. Unlearn their mistakes, learn the 7 Step module and relearn their prayers and Quran recitation was a blessing for them to ease their recovery journey here at Rumah Perantaraan.

"Once this session is over, I want to do an upgrading of all that I had missed. So I will give my best and diligently upgrade my prayers. It's the most important of all, the prayers." [P1]

"I practice the steps, the way of living, following the schedules. Because I have someone to guide me. From then, I decided

to step away from drugs and to never get influenced again.” [P8]

“I don't know... but there are changes. Like... going to the mosque...I perform prayers” [P7]

2) **Spiritual Dimension**

Pre-Phase Experience

For the spiritual theme, the 3 respondent realized that they are very far from religious practices. Some of them do not pray and read the Al-Quran. Even their live was very far from Islamic way of life. Among 4 respondents, 3 of them response that they do not or rarely pray and have a low insight to religious practices before enters RP:

i) Ignorance of spiritual practice in life

They never been fasting in Ramadhan and perform daily prayers. Even they performed it, it has been long time and they abandoned their basic responsibility as a vicegerent of Allah on the earth. Their spiritually empty and this emptiness were filled their wrong belief about themselves, drugs was the only way for them to fill their happiness in life. For them, spirituality and religiosity were considered as taboo.

“..... we didn't perform our prayers... We have religion. How good my religious?” [P3]

“Very less. I did, but often forget.” [P4]

“Before this I rarely pray.” [P8]

Post-Phase Experience

i) Remembrance of God

For the spiritual theme in the post phase, there was a very clear and significant component to increase the level of faith in God. Furthermore, this faith was subjective to measure, but based on the perseverance of the informants in their worships. Continues in practicing religious practices can also be used to measure the level of faith. In addition, their reliance on God can also be attributed to their level of faith. Here are some examples of interview results that have been conducted.

“There are five times of prayer in a day. So we must follow that. ”When we have prayed, we perform zikr and all that..”[R5]

“So between us and Allah. Allah wants to give us long life to. So if we can worship anything. Remember him, what we do, we pray what all. We ask him. The tranquillity of our soul, our health is. Did she have ... we all went with it. ”[R6]

“... to recover my spirit, I would recite zikr.”“Now, I pray more.”[R8]

4. **CONCLUSION**

The 7-SRA module received very positive feedback from the data collected from the pre and post experience shared by the 8 respondents in which the pertinent themes highlighted were behavioral and spiritual in nature. The findings of this study support that psycho-spiritual approach is another intervention that complements the holistic and multidimensional perspective in the treatment of addiction (Kissman & Maurer 2002, Priester, Scherer, Steinfeldt, JanaMasri, Jashinsky, Jones, & Wang, 2009, Rioux, 1996).

Behavioral Dimension

Based on the data presented, prior to the intervention of the 7-SRA treatment, participants shared that they were all had involved in immoral deeds such as stealing, consuming alcohol and committing deviant since their young age. Nurshuhada Mohd Sabri, Wan Shahrazad Wan Sulaiman and Norulhuda Sarnon (2018) also mention familiarizing in chanting of Allah's names is helpful to recovering clients from co-dependent towards substance use. The meaningful behavior change occur as the participants chanting of Allah's names preventing from substance use and openness to receive positive reinforcement for change. Upon receiving the treatment, the positive feedbacks were obtained as they have figured out the behavioral changes happened within themselves as they started to improve their religious ritual, regain self-efficacy and self-esteem. In this sense, spirituality has a significant share in catalyzing the behavioral changes and potentially increasing the social competencies. This is in line with the fact that spirituality has association with the change of self-efficacy of individual (Mason, 2009). Hitzhusen (2006) also has justified that spirituality does affect in the transformation of behavior. Carrette & King (2005) highlights that spirituality has become the 'brand label' for the search for meaning, values, transcendence, hope and connectedness in modern societies. Therefore, 7-SRA is effective in assisting participants' behavioral change and thus making it easier for them to practice the positive behavior and thus be helpful in recovery process.

Psychospiritual Dimension

Based on the data presented, prior to the intervention of the 7-SRA treatment, participants admitted that they were all in the state of ignorance in the course of the spiritual practices in life. Upon receiving the treatment, the positive feedbacks were obtained as some of them have realized the importance of remembrance of God (Dhikr) in drug addiction recovery process. This shows that 7-RSA program has successfully awakened the spiritual faculty of clients from being spiritually ignorant to the state of recognizing the need of dependency to God in recovery. According Abdul Manan (2013), the process of treating drug addiction through this inward approach is focused on some of the main practices of *zikir jahr*

and *khafi* which performed regularly and intensively within a certain period of time, *qiyam al-lail* and also fasting. These practices have a very high *tazkiyat al-nafs* value and supported by Al-Qur'an and Sunnah. *Taqarub* and *mahabbah* to Allah (remembrance of God) are indeed important as the ways to encounter the whisper of *Satan* (demonic influence) who always persuades human beings to the neglectful state that lead to physical and spiritual damage (Ahmad & Fatah, 2011). The capacity of establishing the external locus of control by being positive in accepting fate in life by the drug addicts in recovering process is highly associated with the role of spiritual awakening. This is supported by Marsiglia et al. (2005) underpinning that religion has been associated with positive drug-related by functioning as internal control factor. In this sense, faith has often acted as the much-needed catalyst to abstain from drug use (Badri, 2009; Ali-Northcott, 2012; Gilliat-Ray, Ali, & Pattison, 2013; Ali, & Gilliat-Ray, 2012). Therefore, from the psychospiritual dimension aforementioned above, 7-RSA treatment is relevant to be one of the interventions in drug addiction as it has successfully unveiled the ignorance of drug addicts towards the importance of spiritual practice in life and being positive in accepting fate in life by possessing the internal locus of control.

In conclusion, 7- Steps Recovery in Addiction treatment (7-SRA) that is spiritually focused has successfully awaken the spiritual awareness and catalyzed the behavioral change of the participants based on their experiences before and after the intervention being made. The dimension of spiritual awareness demonstrated by the participants highlights the act of remembering God and being positive in accepting fate (Qada' and Qadar) as the keys for keeping them in abstinence while in term of behavioral change, participants are said to become more insight to employ the right coping skills while encountering the triggers, to possess the agreeable self-efficacy and willingly to improve their ritual practices in timely basis. Thus, it is relevant to assert that 7-SRA intervention is evidence-based and proven to be effective on the respondents involved in helping them in recovery process from drug addiction problem. As this approach is helpful as continuation of ISRA module in institution, the 7-SRA can be a sustainable program in community as more huge number of clients need greater follow ups and upgrade their religious knowledge and practice.

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