

SHOULD AFTERCARE PROGRAMS BE IN DRUG ADDICTION SOCIAL REHABILITATION ?

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ABSTRACT

This study aims to provide answers to the high rate of relapse. The factors discussed so far regarding the relapse rate are interlata factors, namely the client's self and external factors in the family environment that influence the client to return to using drugs after leaving the drug social rehabilitation center. The Therapeutic Community and Narcotic Anonymous models as well as aftercare programs that are studied as resident behavior changers are seen from behavioral psychology theory and the token economy theory (accumulating credit points) only forms a pseudo behavior change, where former users will only behave well if they feel supervised by counselors, workers social workers or assistants from social rehabilitation homes, and if there is no supervision, they will return to poor behavior using drugs/relapse. The research methodology is a phenomenology of qualitative descriptive research methods, the selection of informants is done by purposive sampling (consisting of key informants, main informants, additional informants), data collection is done by interviews and observations, data analysis techniques use content analysis. The results show that aftercare programs can be an alternative answer to the high number of relapse cases for drug addiction social rehabilitation centers that apply the Therapeutic Community (TC) model because the impact of the reinforcement it provides gives the impression of supervision that affects resident behavior.

Key Word: aftercare, rehabilitation, relapse

INTRODUCTION

Ground Theory on behavioral change from the viewpoint of Behavioral Psychology (Pavlop, Skinner, etc.) and Social Change (Sztompka), also Talcott Parson with social adaptation strategies (AGIL) as well as the method of group work from social workers at the mezzo level, in the programs implemented at the Narcotics Social Rehabilitation Institution as the theoretical basis used in this research.

Behaviorism views human behavior as primarily determined by the external conditions of their environment and the engineering or human conditioning. This paradigm assumes that humans are neutral; the human situation and treatment experience determine good or bad their behavior. Behaviorism perceives the individual only in physical phenomena and

ignores mental aspects. Learning events merely train reflexes, so they become habits controlled by individuals.

(Wilbert Moore in Ranjabar, 2015) The critical change of social structure and definitions pointed at behavior patterns and social interaction. Wilbert included various expressions of structure in his definition of social change, such as norms, values, and cultural phenomena, making it clear that such a definition was all-encompassing. He also argues that social change is not a symptom of modern society but a universal thing in the human life experience (Ranjabar, 2015). If social changes are implemented in the home environment, it is from the behavioral view (reward *and* punishment) and the derivative

theory of economic tokens (credit collection point).

Social change in question is a change in the behavior of families who take on the role of escorts and the social workers as supervisors to maintain the behavior formed. An aftercare program is a form of supervision only. The *Therapeutic Community* (TC) model has run in social rehabs at Insyaf Orphan is not entirely run or get easing from their social workers who visit once a week for three months aftercare program runs. Supervision and assistance from social workers or escorts from Insyaf Orphan in the aftercare program became a symbol in maintaining resident behavior. It correlates with the behavioral theory, which changes behavior after learning, and economic token techniques with credit points (reward and punishment) required symbols as a reminder of behavior.

It is necessary to test for behavior changes in residents who attend the aftercare programs cause the behavior changes that occur to the resident are pseudo-behavior. Alternatively, residents only behave well under directions when a counselor or companion visits to get a good credit point, but the actual behavior will change if no one is watching or is called fake behavior. However, this opinion is contrary to behavioral theory and economic tokens (reward and punishment) because it only creates pseudo-behavior. In many cases, a companion or social worker becomes a fear symbol, so the residents' behavior must turn into excellent or obedient behavior established by social workers or escorts of social rehabilitation centers.

The conflict between behavior formed from behavioral point and economic tokens paradigm (credit points) is actual behavior, or only pseudo-behavior is still interesting to discuss. Indeed, during this behavior change if only based on reward and punishment, according to behavioral paradigm and economic tokens (credit points) in the practice of group work method Model *Therapeutic Community* (TC) is always pseudo or false behavior caused many relapse residents (relapse conditions using drugs after completing social rehabilitation). Because the resident only expects a reward in return for good behavior and avoids punishment if it misbehaves. In comparison, economic tokens (credit points) residents only display good

behavior expecting to collect points or values to get a good judgment from social workers or companions, then receive a gift or 'recovered' predicate to be free and return to the family.

Reward and punishment are not always wrong in shaping the behavior in the paradigm of behavioral and derivative theory economic token (credit collection point). Sometimes, suggestions or stimuli are needed in exchange for a limit or threat of punishment if they misbehave. The resident's good behavior can gradually settle down without expecting anything in return or avoiding punishment. These suggestions raise the resident's motivation to start doing good behaviors or following the expectations of social workers or escorts. The behavior referred is the respectful behavior of doing or participating in activities in the *Therapeutic Community* Model (TC) organized by drug social rehabilitation centers.

Researchers support the behavioral theory and economic tokens in shaping residents' behavioral changes by social drug rehabilitation and aftercare programs. After the resident returns to family environments, the researchers also agree on the theory of social change that says maintain changes in social behavior that have formed before. The research question is whether aftercare programs can answer the high relapse cases in drug social rehabilitation centers that implement the *Therapeutic Community* (TC) model? This study seeks to provide an alternative answer to high relapse rates by examining aftercare programs as an option of drug social rehabilitation centers to strengthen the behavioral changes forming during the resident's therapeutic community (TC).

RESEARCH METHODS

According to Neuman (2012), "*descriptive research presents a picture a specific details of situation, social setting or relationship*" (descriptive research aims to provide a detailed picture of a social situation, social relationship or social setting). This type of research expects to describe and analyze the implementation of aftercare programs in social drugs rehabilitation centers. This research held at Permadi Putra Orphan "INSYAF" in Deli Serdang Regency. According to the ownership of the government

Technical Implementing Service (UPT) of the Ministry of Social Affairs, it also implements the aftercare programs, so the implementation of aftercare programs can be clearly described. On the other hand, researchers have researched in 2018 and 2020 in this orphanage.

The informant used in this research uses a *purposive* technique consisting of the following:

- a. Key informants know about the implementation and policymakers about aftercare programs. In this case, the key informant is the orphanage owner or manager of the social rehabilitation program of drug addiction.
- b. The primary informants are people involved in aftercare programs: social workers, counselors, and clients in aftercare programs.
- c. Additional informants are people impacted by aftercare programs, namely parents and family clients/residents.

The data collection technique in this study consists of several stages, as follows:

1. Literature studies and documentation from various journals, books, research results, and other media related to research topics, namely the implementation of *aftercare* programs in drug social rehabilitation centers under Technical Implementing Service (UPT) of the Ministry of Social Affairs ownership "Insyaf Orphanage" in addition, documentation studies to obtain secondary data about client/resident activities with counselors and social workers in *aftercare* program activities.
2. Depth interviews with research informants were selected, regarding the implementation of aftercare programs in drug social rehabilitation centers.
3. Field observations, observations based on research topics and field realities during *aftercare* program implementation in drug rehabilitation centers, and daily activities of residents/clients. The ability of aftercare program goals and obstacles experienced in implementing aftercare programs conducted by drug social Rehabilitation centers.

Data analysis techniques involve interpreting data in the form of text or images. The process of data analysis begins by studying all data from various data sources. Researchers divide

data processing steps by creating categories of information obtained (Open Coding), creating one of the categories by placing it in one theoretical model (Axial Coding), then stringing a model from a relationship between categories (Selective Coding) (Source: Creswell 2012, 274).

Data analysis techniques use component analysis techniques use contrast approaches between elements. Component analysis techniques are used in qualitative to analyze elements that have contrasting relationships in domains for dialysis in more detail. Analytical activities start by using several stages, namely: (a) the deployment of observations and interviews; (b) selection of observation and interview results; and (c) finding elements of aftercare implementation program in drug rehabilitation orphanage.

RESULT AND DISCUSSIONS

Key Informants

Name	:	Ms. N K (initials)
Job	:	Head of Social Rehabilitation Services Section

What aftercare programs are given from Insyaf Parlors in Tanjung Anom?

"There is a graphic design business unit, pre-wedding photos, and the kids are training photography skills. Besides the café and pre-wedding photos, they are still accompanied even after the program/termination. Some people can participate in the aftercare programs. The five people from the beginning were still there and could not go home because *Therapeutic Community* (TC) program still running, with incentives accompanied by counselors and social workers to see their development, by monitoring and evaluating"

When did the aftercare work?

"Since 2016 and until now (2021) is still running. The first five people happened, with three people surviving and two running away. In 2017 or 2018, we have *recruited* new counselors, and three of our people were *training* here to be counselors. We expect that they become counselors by following the programs that live in aftercare in Tanjung Anom and do not come home. After their

training, we take the test to become the Ministry of Social Affairs counselor. Then they changed the manager's program to Mr. Indra, but he *resigned* because he wanted to move to prison in 2020. The programs moved to Mr. Yunus. People attending the aftercare programs had finished from re-entry (a Three-month program). Primary programs occur for three months, and the next three months for aftercare programs. They do not stay there just for meeting/monitoring once a week, but there are activities for their recovery. After that, there is a program for counselors to further re-enter from aftercare. All those categories go from assessment to determine how many months he needs service. The service takes on two, four, or six months and three months aftercare, and people can enter it by four and six months (re-entry) or continued aftercare programs."

Is aftercare mandatory?

"It's not compulsory aftercare, just as re-entry is not mandatory. However, we offer a dorm program and are not locked up anymore. If they escaped, it was because the program is not from the hearts; if in the re-entry, it has been a volunteer. However, there already the awareness of the resident."

How many people are currently on the Aftercare Program?

"There are currently nine people because there is no compulsion here, and there are still rules, programs, etc. It is not mandatory, just as re-entry is not as compulsory as vocational. There is re-entry after the primary sections and not forced. Because in re-entry, it is not forced because it is ripe awareness. It is not locked up anymore; it is simple even if they want to run away. Sometimes, the family pushes the residents to run away from primary or re-enter programs."

According to you, what aftercare programs affect the residents?

"When the child has recovered, Insyaf Parlors still supervises the work/activities he works in the workshop. He is still careful because Insyaf still supervises it and can go home with permission. Because there they can also go home (Saturday-Sunday). Suppose there is a relapse, for example, from 10 people at most two people who relapse because it happens since 2020 all to *On Job Training* to us. Until now, there have been 14 interns in the community. The benefits of this program were for them and their parents rather than going

home get back to using drugs and return to the environment that brought them to use drugs."

Primary Informants 1

Name : Bro Y (initials)
Job : Manager Aftercare Program

Tell me the aftercare programs running in Insyaf Parlors?

"Aftercare program is the advanced program provided by Insyaf Parlors to residents who have completed the primary recovery and re-entry stages at Panti Insyaf. The goal is to reinforce the residents before returning home or their initial environment/family. I am the program manager from 2020. Before I held the aftercare program, it was originally by Mr. Indra that handled the aftercare program because of the request of some parents of beneficiaries who want his family to continue to assist INSYAF after they complete the social rehabilitation program."

What kind of parents reason?

"The parents or family reasons were the residents are stronger resist the temptation of drug use, when returning to the home environment, playmates become no longer using drugs. The term is excellent because they finish the rehabilitation in the primary stage or the reentry stage (vocational), four months and six months. It feels too soon to return home and caused the parents concerns, if not supervised by a companion from Insyaf. Either because of persuading friends or the environment or because, there are family problems."

What Aftercare programs are given in Insyaf Parlors?

"The aftercare program we provide is mentoring and supervision, so escorts or social workers still monitor their activity in the workshop or place of business. In addition, we still apply therapeutic community in their activities there, ranging from morning meetings to daily activities. It is just not as tight in the world. Instead of the parlor's freedom, we still supervise and damp because they get the basic knowledge in re-entry programs and strengthen at our aftercare programs. In addition, they are also involved in every activity we do in the Insyaf Parlors. We also invite them as a speaker to tell their stories as motivational givers. We

also provide a counselor program, so for those interested in becoming an Insyaf Parlors counselor, we also give classes as a theory, and they can also be directly in Insyaf Parlors to practice and training. We also facilitate the implementation of counselor examinations presented by the Ministry of Social Affairs to get the counselor's certificate."

Since when did the aftercare programs work?

"Since 2016 initiated by Mr. Indra until now, it is still running. Me as the program manager that handles aftercare from 2020 until now."

Is aftercare a mandatory program?

"It is not mandatory, as said earlier, but we offer the residents and their families our additional assistance programs at Tanjung Anom. Escorts and social workers carry out assistance and supervision for three months as reinforcement to recover and supervise them. They will also be involved in the nursing programs. Furthermore, there is also entrepreneurship café and other business units to provide entrepreneurial experiences such as prewedding photos, café businesses, mechanical engineering or those that are following their wishes."

According to you, what aftercare programs affect the residents?

"It is beneficial, not because I am the program manager then will be subjective. However, it can be seen from the program's benefits, such as someone being a drug addiction counselor, some becoming entrepreneurs. Furthermore, it is also useful for the family, I say so because the family first asked about this program. Mostly, residents follow the aftercare program because of fear to relapse activity."

Additional Informant 1

Name : JIL (pseudonym)
Job : Addiction Counselor former Aftercare Program

Can you tell me how to become a social counselor at Insyaf Parlors?

"I became a counselor in Insyaf in 2021, and previously I also participated in Panti Insyaf internship. It is cause those who participated in the aftercare program were helped from the parlors to become counselors. Some counselors then practice internships and enter the counselor exam in 2021, May or June. Well,

from there, I was able to recommender from Insyaf and take the counselor examination then graduated as a counselor to the drug addiction Ministry of Social Affairs."

How can you get involved in Insyaf Aftercare Program?

"My wife, who advises me, because if I go home, it must be back with the old environment. Then there was the aftercare program for three months, so I signed up to join after completing social rehabilitation in 2019. It has been a long time since the completion of social rehabilitation programs. Register to join the aftercare program again in 2020, then we joined the internship until there is acceptance of addiction counselors and finally qualified as an addiction counselor at Insyaf Parlors".

Do you voluntarily participate in this program, or is there coercion from either family, counselors, or Insyaf parlors?

"I am not voluntary because my family, especially my wife, suggested and finally forced to join. Because there's a sign of symptoms of relapse if returning home or the environment around the house. I want to be at home then find a job because losing my old job and missing my kid."

What programs do you get from three months following the aftercare program?

"The program as usual as when we in Parlors. There is a class of counselors that internships, activities, and getting involved as motivators of the experience story to the new residents, then involved the same companion, same counselor."

Does aftercare help you recover from using drugs?

"Yes, because a companion still supervises us in the same way, applying the same thing as anticipated such as morning meeting, then the group work, the difference here is more relax while doing others activities."

Does the aftercare program affect Counselor Training at Insyaf Parlors?

"It is beneficial because we know the world of drug addiction counselors, then screening the detoxification stage there is a class, so there is a mentor, the material we facilitated to internship, practice directly at Panti Insyaf. Until the counselor test registration, we also attach his writing certificate, which is helpful in certificate programs."

How much money/cost did you spend to join the program?

"The wife's expenses come from her parents because I was fired from the factory. Then the household needs are rotated from the small store to buy milk and food. If I am here, I am smart enough to save money. Our needs here are also examples for daily meals, paying for water, wifi electricity, sometimes also sent from family and even then not much, at most Rp.500,000, sometimes Rp.600,000 to cook and pay for other needs."

**Additional
Informant 2**

Name : TOR (pseudonym)
Job : Addiction
Counselor former
Aftercare Program

Can you tell me how to become a social counselor at Insyaf Parlors?

"Taking the test last year in 2020 and also recommended for the first time from the Insyaf Parlors because we had internships here."

How can you get involved in Insyaf Aftercare Program?

"Yes, following the advice from the parlors and family, especially my mother, who asked to join the aftercare program for another three months in Tanjung Anom."

Do you voluntarily participate in this program, or is there coercion from either family, counselors, or Insyaf parlors?

"At first, I did not want to do it voluntarily because my mother asked me to come along. After a while, it did not feel normal, so I just enjoyed joining the aftercare program. Because life is more peace, we wake up and clean up in the morning because of other activities. At home, there is nothing like that."

What programs do you get from three months following the aftercare program?

"There are many, for sure we still have routines like in a nursing home, starting from waking up in the morning until later in the day there is also a session to relax more. The assistant also does not monitor us every day. At least once a week, he comes to see how we are here. I also follow a program or counselor class with an entrepreneurship program. We also attend activities from the parlors and participate there."

Does aftercare help you recover from using drugs?

"It helps because we still feel supervision from the parlors while we are here. If I go home, I feel there is no supervision, no more responsibility, so my mother is afraid that I will return to the neighborhood or use drugs again because there is no supervision from the companion or the parlors."

Does the aftercare program affect Counselor Training at Insyaf Parlors?

"The orphanage facilitated it, so we were offered to accompany anyone who wants to take a counselor class. In the future, we can become a counselor at the Insyaf Orphanage. Even if you do not work as a counselor at the Insyaf orphanage, the certificate can later be used to apply as a counselor at another nursing home. Because the job opportunities are great, many counselors open community rehabilitation centers and need a certified counselor. So I was also interested and joined the counselor class until I took the counselor test from the Ministry of Social Affairs and placed at the Inshaf Parlors."

How much money/cost did you spend to join the program?

"Just personal funds, according to the needs of our lives. For food, bath needs, then pocket money. If my mother gave Rp.1,500,000 every month because I am also an entrepreneur and increased business capital, save it if there is profit from the cafe business. Now I'm working, I have my salary and can send a little money to my mother in Riau."

What are the obstacles during the aftercare program?

"I miss home. We already here for almost a year. I have been in the orphanage for six months and then three months. After that, I did not go straight home. However, we also had permission to go back to the village and took a week's leave. I miss the atmosphere here at home, so I came back here and finally worked here. Every year we go home, it has only been two years not because of Covid-19. We are just following the government's rules."

**Primary
Informants
2**

Name : JEP (pseudonym)
Job : Residents/clients
participating in the
Aftercare Program

How long have you been following the aftercare program?

"It's been more than 2 months."

How can you get involved in Insyaf Aftercare Program?

"My parents asked me to come along because afraid that I would be influenced again. There is also an offer from the orphanage when it is finished."

Is there any compulsion to join the aftercare program?

"No, because this is an offer from the orphanage manager, and it's not forced or mandatory. So for those who want to join this program."

How much money/cost did you spend to join the program?

"Just for daily life. So far, my parents have sent Rp.1.000.000/month. Yes, it is enough. We are joint ventures to buy rice and cook the side dishes ourselves. There is also our café here, so it is safer to eat. We need to do our daily needs, to take a shower, buy cigarettes, have snacks."

What programs do you get while participating in the aftercare program?

"Our program is a daily activity such as business, and then we will also participate in training from the Insyaf Orphanage. We are also invited to the Insyaf orphanage if there are events or activities. We also participate in programs from the Inshaf Parlors, such as counselor training. Other programs are routinely given, such as visits from companions, morning sessions, and at least once a week visits from our companion. To see our situation, we are monitoring it."

Did you not get changes during the re-entry program/vocational program?

"There has been a change, but yes, there was a suggestion from my family, especially my parents, that I join the aftercare program again. At first, I was a bit lazy, right? Because if you think about it later, you will come back to hang out with friends in the environment who use drugs. Our strengthening is after we leave the orphanage, God willing, we will continue here."

Do you feel any benefits after joining the aftercare program?

What kind of changes have you experienced?

"It is a change after us joining this program, of course, to maintain the routine of the orphanage then we still feel supervised by the orphanage,

so we are still taking care of ourselves because there is still supervision from the orphanage."

What are the ups and downs during the aftercare program?

"It is nice here that we still hang out with friends who are both from the orphanage. If the grief is missing the family at home, so just take it home."

Primary Informants

3

Name : WA (pseudonym)

Job : Residents/clients participating in the Aftercare Program

How long have you been following the aftercare program?

"Only 1 month train."

How can you get involved in Insyaf Aftercare Program?

My wife, especially my family, advised. If I think they are right, too, I will relapse again when I go home. If missing the family, I can go home, get permission from my companion, and return home to the Belawan area on Saturday, and come home on Sunday back again. Because it is close so you can go home every week."

Is there any compulsion to join the aftercare program?

"There is no coercion from the orphanage. They offer us for those who want to join aftercare after completing the entry-level four months. However, because my family suggested it and was a little pushy, now it has been a month since I joined this aftercare."

How much money/cost did you spend to join the program?

"Just the cost of eating daily, for bathing and cigarettes. We cook, buy rice, vegetables, and fish. At the very least, we are jointly paying for water, electricity, and wifi and it takes around Rp.800,000/month."

What programs do you get while participating in the aftercare program?

"Lots, surely we still have assistance from the orphanage. A companion who visits once a week and our activities here are still the same as in the orphanage in the morning until the

evening, just more relaxed. Monitored by the guide."

Did you not get changes during the re-entry program/vocational program?

"Change is there. I am aware that drugs are destructive. I have promised God, family, and myself not to touch anything else with drugs. It is just that sometimes when we hang out with friends, we are afraid we will fall into drugs again, so it is my family, especially my wife, and I think that my son is still young, he needs a lot of money/payment fees from his father if I become an addict, what will my child be like?."

Do you feel any benefits after joining the aftercare program?

What kind of changes have you experienced?

"For almost a month here, I think it is important to teach the benefits of entrepreneurship, and then at the orphanage several times, we are invited to be involved in the orphanage activities. We can still use our skills during reentry, such as workshop welding, automotive, or nursing home. We can still use the tools there."

What are the ups and downs during the aftercare program?

"Yes, that is it. We have to go back and forth to Belawan to meet my family on Saturday. Sometimes I miss the holidays on Saturdays and Sundays. If we are here, we are happy because the friends also know us, the companions are already close, many activities as well as entrepreneurship."

Primary Informants
4

Name : M.R.N
(pseudonym)

Pekerjaan : Residents/clients
participating in the
Aftercare Program

How long have you been following the aftercare program?

"Already three months train, almost finished."

How can you get involved in Insyaf Aftercare Program?

"Participated because parents and orphanages suggested that they join this aftercare so that it would be even more stable than going home worried that parents would return to using drugs."

Is there any compulsion to join the aftercare program?

"After thinking about it, it is perfect for joining this aftercare. After considering it and the family agreeing, I have finally joined this aftercare. So that we do not lose our habit, there is still supervision from the companion using the program from the old orphanage, but it is just lighter, not like in the orphanage at that time."

How much money/cost did you spend to join the program?

"I have been here for almost three months just for the necessities of life. Eat, pay for water, electricity, and wifi coincidentally, I also joined cafe business, if the capital was indeed yesterday, we had a joint venture of Rp. 5,000,000 for business capital to continue this café business. Then if the family needs to spend Rp.1,000,000/month, and only for two months because the third month there is already a result from this café business, I have given up on my living needs, it can also be used to save for my business when I get out of here."

What programs do you get while participating in the aftercare program?

"The mentoring program, Therapeutic Community still there, then the counselor, entrepreneurship, advanced vocational classes. Because at the entry-level yesterday, you can now continue, but the practice is like mechanic equipment, plantations, and others are in the orphanage, here only our business unit is a café and photo prewedding. If it is Covid, there is no way for the pre-wedding photo because it is forbidden to gather the celebrations, so the business off. If the business is also quiet for a while, but it is back quite a bit, there is already a profit for my living expenses that I saved a little bit because we share the results with other friends who join the joint venture for business capital."

Did you not get changes during the re-entry program/vocational program?

"There has been a change, I do not want to use drugs anymore. I'm aware of the dangers, and then this program is only as reinforcement so that it can still be monitored by our orphanage who participates in this aftercare program."

Do you feel any benefits after joining the aftercare program?

What kind of changes have you experienced?

"There are many benefits that we feel, starting from being optimistic that we will recover and getting stronger because our companions from

the orphanage are still watching our friends here, then the family is even more confident that we have completely recovered and will not use drugs again."

What are the ups and downs during the aftercare program?

"We have a lot of activities here, so you do not get bored. Then we are also taught here the skills and open a business and be independent and able to earn here. If it is deplorable, I miss my family, especially my mother at home."

Primary Informants 5

Nama : RS (pseudonym)
Pekerjaan : Residents/clients participating in the Aftercare Program

How long have you been following the aftercare program?

"Already 3 months train."

How can you get involved in Insyaf Aftercare Program?

"Yesterday, after completing rehabilitation, an offered from the orphanage to take part in aftercare, and my parents also agreed to participate, with the consideration that I was afraid that the environment at home would use drugs again, so I joined this program."

Is there any compulsion to join the aftercare program?

"In the beginning, yes, because I have felt recovered. I have been in rehab for six months. Why are you joining this aftercare in 3 months? Why are you not ready for rehab? That was my first thought."

How much money/cost did you spend to join the program?

"At least Rp.100.000/month for food, water, electricity, and wifi needs. Joint venture with nine friends in the dormitory (Tanjung Anom)."

What programs do you get while participating in the aftercare program?

"Assistance from the Social Worker or the orphanage is still there, so our activities in the home for six months are still routine, but not too strict, like in the orphanage. All of us become familiar with each other. We have known each other for a long time since I was in rehab. There are also vocational classes if you want to continue the skills that have been taught at the orphanage, there are

entrepreneurs, counselors and we have various kinds of activities here."

Did you not get changes during the re-entry program/vocational program?

"It has changed a lot, especially when I can control my emotions, I am more able to control my anger, not emotionally, then my skills may still be lacking because I am not interested in what is offered, such as wedding workshops and gardening."

Do you feel any benefits after joining the aftercare program?, What kind of changes have you experienced?

"Yes, I am more awake, especially controlling my emotions. One day, I got angry easily, then one day, it was so chaotic. It is safer now."

What are the ups and downs during the aftercare program?

"At least we miss our family. Indeed we are allowed to go home. However, yes, the name miss is a bit difficult to hold. It is nice that there are still many friends here, so together, we want to recover and get support from our families at home, stay enthusiastic about joining this program."

The discussion of this research began by using theories related to psychology behavioral, social change Sztompka, Social Worker Method Group Work, gap research results, and relapse data as a ground theory.

Ground Theory on behavior change from Behavioral Psychology (Pavlop, Skinner, etc.) Paradigm, Social Change (Sztompka), Parson with social adaptation strategies (AGIL), and the methods of social workers group Work at the mezzo level in programs applied in Drug Social Rehabilitation Centers became the basis of the theory used in this study.

To look up the necessary aftercare programs in drug addiction social welfare services, especially in drug addiction social rehabilitation centers using the therapeutic community and narcotic anonymous group work methods. In psychology, we used Behavioral psychology theory to change a person's behavior based on reward and punishment system, correlate to the group work methods both therapeutic community and anonymous narcotic models used. Most drug addiction social rehabilitation centers in Indonesia, using these two popular models compared to another ten models.

It can be seen from Ritonga 2020, which says that:

"There are eight models of Drug Addiction services been used by Drug Rehabilitation Centers under the auspices of the Government and NGOs, hospitals, health centers, boarding schools, churches, and drug communities care. The service models are: 1). Therapeutic Community, 2). Medical Model, 3). Minnoseta Model, 4) Electric Model, 5) Multi-Disciplinary Model, 6) Traditional Model, 7) Faith-Based Model, 8) Community-based Drug Countermeasures Model". (Ritonga, 2020)

The Therapeutic Community (TC) and Narcotic Anonymous (NA) models applied in drug social rehabilitation centers in Indonesia refer to behaviorism psychology theory that wants changes in residents, beneficiaries, or clients. To change following the directions that have been determined by social workers /escorts in drug addiction social rehabilitation centers. The expected change in behavior is good behavior with the aim of "recovering" from the status of a victim of drug abuse.

Behaviorism views human behavior as primarily determined by the conditions of the external environment and the engineering or conditioning of humans. This paradigm assumes that humans are neutral; good or bad behavior is determined by the situation and treatment-experienced by the human being. Behaviorism views the individual only in physical phenomena and ignores mental aspects. Learning events merely train reflexes so that they become habits that the individual masters.

Behavioristic *approaches* rely on the concept of stimulus and response in which an individual will behave according to the stimulus he receives, study it and then determine the response to the stimulus. *Behaviorism* is a theoretical orientation based on the premise that scientific psychology should study observable behavior (observational *behavior*). (Yusuf et al., 2012)

Behaviorist theory is better known as learning theory because all human behavior results from learning. Learning means changes in the behavior of organisms as environmental influences. *Behaviorism* does not want to question whether humans are good or bad, rational or emotional. Behaviorism just wants

to know how environmental factors control their behavior.

The *behavioristic* approach does not elaborate on certain philosophical assumptions about humans directly. Everyone has the same positive and negative tendencies; man is shaped and determined by his socio-cultural environment, all human behavior has been studied. (Corey, 2013)

Behavioristic experts consider that behavioral disorders are the result of a learning process that is wrong. Therefore the behavior can be changed by a more positive environment, so the behavior becomes positive. This behavior change gives the possibility of evaluating the client's progress more clearly. (Lubis, 2013)

Behavior can be operationally defined, observed, and measured in behavioristic theory. This proves that the behavior that has been formed in the true self can be changed through several *behavioristic* techniques that behavioristic figures, including:

Jhon B. Watson

Jhon B. Watson is the founder of the psychological approach known as *Classical Behaviorism*. His studies related to the increasing complexity of behavior in mice and the development of the nervous system, and what was observed was behavior. Watson argues that the concept of learning is to multiply the reflexes carried from birth through conditioning. (Pervine and Carvone, 2004)

Ivan PetroVich Pavlov

Ivan Petrovich Pavlov is a Russian psychologist who developed procedures for studying behavior and learning principles that greatly influence psychology. Around the 20th century, Pavlov studied gastric secretion in dogs. As part of his research, he placed food flour in a dog's mouth and measured the amount of saliva produced. After several such experiments, he found that the dog began to wander towards certain stimuli, namely: the appearance of food plates — even before the food was placed in its mouth, bringing the person carrying the food closer, and so on. Previously non-salivating stimuli (called neutral stimuli) can now elicit a slid response due to their association with food powders that automatically cause dogs to wander. This led

Pavlov to conduct necessary research into the process known as *Classical Conditioning*. (Pervine and Carvone, 2004)

The characteristic of the classical conditioning condition of neutral stimuli is that a previously neutral stimulus can elicit a response due to its equal or similar associations.

Harvard, B. F. Skinner

Harvard, B. F. Skinner, is an American psychologist. Skinner researched animals. In his approach, Skinner distinguishes between responses generated by the stimulus. The concept used by Skinner is known as (Conditioning **Operant**) *Operant Conditioning*. (Pervine and Carvone, 2004)

Skinner's theory views basic behavior. It is important to look at *reinforcers*. Skinner defines a booster as *an event* (stimulus) that follows a response and enhances manifestation. Reinforcement is defined based on its effect on behavior and increased response. (Pervine and Carvone, 2004)

Operant conditioning emphasizes positive boosters such as food, money, or praise. Skinner also emphasizes the important value of reinforcement based on the release of organisms or avoidance of preferred stimuli. In this case, the response is strengthened by eliminating or getting rid of an unpleasant stimulus. The effect is to strengthen or increase the strength of the response. A painful stimulus following the response decreases the probability of the response to re-emerge, but the effect is temporary and becomes meaningless in the elimination of behavior. For this reason, Skinner has emphasized the use of positive reinforcement in shaping behavior. (Pervine and Carvone, 2004)

An emphasis on specific behaviors related to defined situational characteristics is *behavioral* assessment. This behavioral approach to assessment influenced by Skinner emphasizes three things: 1) the identification of a particular behavior often called target behavior or target response; 2) identify certain environmental factors that eliminate, hint at, or reinforce target behavior; and 3) identify certain environmental factors that can be manipulated to change behavior. (Pervine and Carvone, 2004)

One branch of a behavior modification strategy is to use a *token economy*. *The token economy* is a technique derived from *operant* behavioral theorists, B.F. Skinner. Skinner has that consequence of maintaining behavior. A *token economy* is a form of positive *reinforcement* in which a client receives a token when they exhibit the desired behavior. Once the client accumulates a certain amount of tokens, they can exchange them for *reinforcers*. Tokens serve to reinforce the behavior by *rewarding* selected behaviors. Acceptance of *contingent* tokens by showing good behavior. (Erford, 2016)

The token economy is a strategy to avoid giving reinforcement directly. Tokens are awards that can be exchanged for various clients' desired goods. Token economy aims to develop adaptive behavior through reinforcement with tokens. When the desired behavior has tended to settle, the token giving is gradually reduced.

The token economy represents the most apparent application of the principle of operant conditioning to behavioral change problems. The target behavior is selected, and reinforcement is made based on the performance of the desired response. This is consistent with a behavioral emphasis on how the environment works to individuals, as opposed to the way individuals act towards the environment. Behaviorists who examine changes in human behavior are, at their core, social engineers. (Pervine and Carvone, 2004)

It interpreted that *the token economy* is a system that rewards or strengthens clients in the form of tokens collected or exchanged for something worthwhile after the client can form the expected behavior and eliminate unexpected behavior, namely behavior according to group *work*. On this occasion, the researchers used *the token economy technique*.

Thus researchers agree that the behavioral view, in this case, the methods of social group work workers used by social rehabilitation centers with Therapeutic Community Models (TC) and Narcotic Anonymous (NA), can change resident behavior accordingly. With the desired direction from social workers, counselors, or the purpose of drug social rehabilitation centers, residents can actively participate in the program with Therapeutic

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The token economy as part of behavior change by applying reward and punishment in the form of credit points proved effective for changing the behavior of residents by the expected behavior. This is also under the results of research that has been presented by researchers before so that researchers agree that behavioral psychology with the derivatives of economic tokens can change the behavior of residents who are Follow the Model Therapeutic Community (TC) and Narcotic Anonymous (NA) programs at a drug addiction social rehabilitations.

Aftercare Program as an additional or mandatory program as part of the Therapeutic Community Model (TC) and Narcotic Anonymous (NA) in The Drug Addiction Social Rehabilitation Center became an interesting discussion in this study because not all social rehabilitation centers have aftercare programs. Regardless of the policies taken by each social rehabilitation center, based on the results of aftercare research, the program has a good response for residents, families, and escorts or social workers from the organizers of aftercare programs, namely Insyaf Parlors.

It became the focus in this research at Insyaf Permadi Putra Parlors, stating that the aftercare program successfully helped maintain "return" Residents who have completed the primary and re-entry stages of the program are both two months, four months, and six months and can maintain their behavior. For three months aftercare program followed by residents get reinforcements from escorts, social workers who monitor or supervise their every activity. The participants of the aftercare program also participated in other activities such as business

heroes (café, prewedding photo, engineering business, plantations, and others) and were still included or participated. Active in Insyaf Parlor care activities and get counselor classes. It turns out that from the results of the aftercare program, there is a drug addiction counselor who produced and has graduated from being a drug addiction counselor of the Ministry of Social Affairs and placed to work at The Insyaf Permadi Putra Parlors.

Programs run in aftercare programs as a form of supervision only. The Therapeutic Community (TC) model lived in social rehabs in Insyaf orphanages is not entirely run or get easing from escorts and workers. Social people who visit once a week for three months aftercare program runs. Supervision and assistance from social workers or escorts from Panti Insyaf in the aftercare program turned out to still be a symbol in maintaining resident behavior. It is appropriate with the behavioral theory that changes behavior after learning behavior change and economic token techniques with reward and punishment required symbols as reminders of behavior.

It is necessary to test for behavior changes that occur in residents in aftercare programs because it could be that the behavior changes that occur to the resident are pseudo-behavior or residents. Only behave well or under directions when a counselor or companion visits to get a good grade or credit point, but the actual behavior will change if no one is watching or is called fake behavior. However, this opinion contradicts behavioral theory and economic tokens (reward and punishment) because it only creates pseudo-behavior. Make a symbol. In this case, such companion or social worker conducts judgment as a symbol of fear; then residents behavior turn into a behavior. Good or obedient to changes in behavior that have been established by social workers or escorts of social rehabilitation centers.

The conflict between behavior formed with a behavioral point of view and economic tokens (credit points) is actual behavior, or only pseudo-behavior is still interesting to discuss because indeed, during this behavior change if only based on reward and punishment by behavioral understanding and economic tokens (credits points) in the practice of methods. Group work Model Therapeutic Community

(TC) and Narcotic Anonymous (NA) are always pseudo or false behavior so that many relapse residents (relapse conditions using drugs after completing social rehabilitation). Because the resident only expects a reward in return for good behavior and avoids punishment if it misbehaves. At the same time, economic tokens (credit points) are only behaviors that display good behavior in the hope of collecting points or values to get a good judgment from social workers. Alternatively, escort and get a gift or get the predicate 'recovered' to be free and returned to the family.

It is not always rewarding, and punishment in behavioral and behavioral derivative theory economic token theory (credit collection point) is terrible in shaping the expected behavior. Sometimes, suggestions or stimuli are needed in exchange for a limit or threat of punishment if they misbehave. Gradually, good behavior or behavior is expected accordingly by the worker. Social people can settle down without expecting anything in return or avoiding punishment. These suggestions give rise to motivation as a resident driver to start doing good behaviors or following the expectations of social workers or escorts. The behavior referred to here is the respectful behavior of doing or following activities in the Therapeutic Community Model (TC) and Narcotic Anonymous (NA) organized by drug social rehabilitation centers.

If we look at the results of previously conducted research on aftercare programs organized by several drug social rehabilitation centers, it does have a positive and supportive response from the programs. The residents passed Model Therapeutic Community (TC) and Narcotic Anonymous (NA) programs. Strengthening from aftercare program is the assistance and supervision carried out by escorts or social workers as assessors of good behavior from residents to maintain behavior that has been done. Formed during this stay awake during aftercare program activities and hope when the residents return to the home environment or play environment, the place of work remains Maintaining his excellent behavior and no longer using drugs.

Research suggests that the role of social workers is still relatively minimal. Social Workers play a role from the intake stage,

assessment, rehabilitation process to the advanced level of development. Following the spirit in the Ministerial Regulation on accreditation of social welfare institutions, it is time for every parlor to make maximum use of professional social media. Social workers have a background in employment education, social/ social welfare level DIV / Bachelor. It is expected that with services based on science, values, and social work, service quality will improve. However, although the role of social workers professional needs to be put forward, the role of social volunteers and social welfare personnel (with a background in other disciplines outside social work/ social welfare), Still very much needed. It is hoped that good cooperation in the team will make the service more effective. (Widodo, 2012)

As stated above, further coaching is essential to ensure client independence. The principle of social services is to help people who can help themselves (help people *to help themselves*). Moreover, the paradigm from the parlor approach to the family/community approach needs to be carefully resized. Therefore, further coaching should get greater attention, not just in the rehabilitation process, where the client has integrated into the family and its community. (Widodo, 2012)

Research conducted (Marbun et al. 2012) title: the role of social welfare institute(LKS)in handling the abuse of Napza in Java Barat. Hasil research that drug abuse prevention carried out various LKS is quite varied, but not all institutions do rehabilitation activities. Generally, institutions conduct prevention, advocacy, further guidance, and referral activities.

Research conducted by Maulida and Khairulyadi 2019. In this title, Relapse In Post-Rehabilitation Drug Addicts (Case Study in Addicts in Yakita Aceh). The results showed that the incidence of relapse in addicts was influenced by two factors, namely internal and external addicts. Internal factors include the personal characteristics of addicts to negative pressures received such as emotional management and rehabilitation programs that tested. In contrast, external factors include the admission of family, friends, and the addict's environment after the addict runs rehabilitation. The negative stigma from external addicts makes addicts more likely to *relapse*.

Based on research, the aftercare program becomes one of the answers to the success of the program and reduces relapse of residents who have completed their rehabilitation in social rehabilitation. Aftercare programs become an alternative can be the answer. The policy regarding aftercare programs in each drug social rehabilitation center becomes mandatory or part of the Model Therapeutic Community (TC) and Narcotic Anonymous (NA) program. Simply as an additional activity offered to residents who have completed their rehabilitation in a social rehabilitation facility or due to family requests, residents consider costs incurred for aftercare programs' operation.

RESEARCH LIMITATIONS

Depth research is needed in the field of Drug Addiction Social Welfare Services to answer why there is still a high rate of *Relapse* (Clients who have undergone rehabilitation program and declared recovered, returning to using drugs after being discharged from a drug social rehabilitation center). This research is limited to only models—further research is needed on families and relapse resident communities.

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CONCLUSION

The aftercare program is an alternative answer to the high case of resident relapse that applies the Therapeutic Community (TC) model because strengthening it gives the impression of surveillance that affects resident behavior. Strengthening behavioral changes from behavioral views and economic token theory and social changes in the family environment

of former residents by taking on the role of companion/social worker as Supervisors in the home environment become symbols or alarms that make former residents behave well.

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