Application of Therapeutic Communication for Drug Addicts
Case Studies of East Java Rehabilitation Houses

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Abstract—There are about 40 rehabilitation houses for narcotic addicts in east Java. It is not enough for approximately 400 thousands narcotic users. Tragically, more than 50% of drug addicts in East java are teenagers in productive age. This research try to explore how the counselors or therapists in rehabilitation house use therapeutic communication to make them clinically free from narcotics dependence. This research try to explore the use of therapeutic communication in group dynamics known as therapeutic community (TC). This research use qualitative method in phenomenological approach based on person’s life experience. Observations and in-depth interviews technique are used to collect data. Researchers analyzed communication program in their everyday activities. Relations in group therapy and reciprocal interaction between counselors and drug addicts placed in deep consideration. Several counsellors were the research subjects. Actually, some of them were former addicts who now actively manage the establishment of a therapy house. As a finding, it can be concluded that there are two stages that applies therapeutic communication in rehabilitation program. First, the group therapy stage during quarantine period. The second is the mentoring stage or often called the after care program. This second stage is carried out after drug addicts are declared clean of the influence of drugs. Both of these stages have their own uniqueness and complexity.

Keywords—therapeutic communication, drug addicts, rehabilitation houses, counsellor

1. INTRODUCTION

Battling with any form of addictions is difficult. Addictions. In drugs or narcotics addictions, the difficulty is increasing because it involves physical, psychological and social problems. Physically, this is related to damage to the nervous system as well as some organ functions and delayed response. Psychologically, addicts experience feeling or irritation, distress, insecurity, loss of confidence, feeling tense and anxious. The consequences associated with social impact are emergence of antisocial behavior such as crime and immoral acts, social exclusion and the emergence of social stigma for the narcotics addicts [1].

Indonesian government has decided that rehabilitation process must be done for drug users to a certain limit of use. Different from previous process, drug users all go to prison through legal proceedings. This policy fosters the emergence of therapeutic houses for drug addicts. The functions of this therapeutic houses is to cure the and carry out social rehabilitation for addicts. The existence of such institutions is facilitated by the government especially by Social Department and BNN (National Narcotics Board). And the rehabilitation institution is called IPWL (Institusi Penerima Wajib Lapor – Mandatory Report Recipient Institution).

In the process of recovering addicts, te quality of the relationship between counselor and the addict is very important. To create this positive relationship, adequate communication is needed [2]. In this case, communication is needed to recognize the needs of the addicts, determine the plan of action, cooperation whose goal is the recovery of addicts. Such communication activities are included in health communication studies. There are five principles of life span health communication: (1) Change is inevitable, (2) No one point in the life span is more significant than any other point in the life span, (3) Gain and losses occur through out the life span, (4) Family and friends play a significant part of the changing role in person ability to maintain good health across the entire life span, (5) Medical education should incorporate a life span perspective that emphasises the physical, psychological, and communication changes that occur through out the aging process [3]. Based on the five criteriathat have been mentioned, the condition of addicts is socially and psychologically not pleasant. But counseling is not about making clients feel good. The main goal of counseling should be to empower clients so that they can make self enhancing decisions [4]. The counseling process is successful if it causes addicts as clients to be able to be personally independent and able to carry out social roles in society. In this case, we talk about counseling in the context of therapeutic communication. There is certain process that continuous and patterned in an effort to cure or recover in therapeutic communication namely (1) assessment process (2) physical setting (3) mental setting (4) referral process [5]. Therapeutic communication is a process developed by nurses to study clients, use planned approach, conduct interpersonal relations and focus to the client. It helps client to adapt to stress, overcomes psychological disorders and learns how to socialize others [6]. Therapeutic communication is a planned communication. The main goal of this kind of communication is to heal the client. In the case of therapeutic communication for addicts, the term nurse is not used but the term for the therapist is counselor. Among IPWL therapist and addicts there is no term ‘sembuh’ (cure) for narcotics users but the term used is ‘pulih’ (recovered) because addicts only said to be ‘clean’ or withdraw or stop using drugs but the condition for using it again is still a strong possibility.
II. THERAPEUTIC COMMUNICATION IN REHABILITATION HOUSE

The process that takes place in rehabilitation house is the handling of social behavior of addicts and is therefore called social rehabilitation. Handling this addict behavior becomes specific and unique because of the quarantine situation. Their mental condition due to drug addiction was stopped, it will lead to psychological and behavioral instability. In this case a mental disorder will occur when personality functions are disrupted so the person is incapable to do his or her daily duties properly. Mental disorder can be defined: (1) There is disturbance on psychological function that include thinking process, emotion, will, and psychomotor behavior. (2) There is group of found symptoms or behaviour clinically accompanied by distress in most cases and associated with disruption of one’s function [7].

Communication is a conditio sine qua non of human existence. In the curative or healing process, in the context of communication, researchers try to find the principle of treatment ‘similia similibus curantur’ (likes are cured by likes-the law of similars). If certain medicine can cure certain diseases, it must be possible to use the same practice of language in the service of healing. There has to exist the use of language which produce healing effects. So, it then makes sense to assume that this kind of language can be learned and studied at least to a certain of degree [8]. There are two types of messages delivered by therapists in therapeutic communication to clients namely focal message and metta message [9]. Focal messages means every overt message that therapist intend to convey. While meta messages conveys an attitude about what is being conveyed in the focal message e.g., one’s tones, rhythm, postures or comfortable message or painful utterance in the sense of not making the communication atmosphere comfortable. Therapeutic relationship in advanced psychiatric/mental health nursing could be deconstructed into nine constructs: (1) Conveying understanding and empathy, (2) Accepting individuality, (3) Providing support, (4) Being ther/being available, (5) Being genuine, (6) Promoting equality, (7) Demonstrate respect, (8) Maintaining clear boundaries, (9) Having self-awareness [10]. In therapeutic communication applications can be done with several approaches, among others are Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT), Acceptance and Commitment Therapy (ACT) and Group Activity Therapy (GAT).

III. RESEARCH METHODS

In this research, researcher use phenomenology as methods. Researcher to uncover the personal experience of the subject in certain matters. In this view, phenomena always has constructed meaning intersubjectively. This methods include conceptual analysis, deep observation on praxis and analysis of language and formal logic [11]. Phenomenology try to understand the world in subjective view. By observing and indepth interviewing, researchers found qualitative data to be interpreted. The primary works of researcher is making the narrative notes from subjects. There are 7 basic characteristics of qualitative research which describe the position of phenomenological approach:

(1) Explore values in experience and human life, (2) Focus of research on the whole, not the parts, (3) The purpose of research is to find the meaning and nature of experience, not just to look for explanations or measures of reality, (4) Get a picture of life from a first-person perspective through formal and informal interviews, (5) The data obtained is the basis for scientific knowledge to understand human behavior, (6) The questions made reflect the interests, involvement and personal commitment of the researcher, (7) See human experience and behavior as inseparable entity, both between subjects and objects, and between parts and the whole [12].

Narrative inquiry approach is also used to compile and structure the interview data [13]. This approach would allow the counselors to express their personal experiences of the therapeutic process. What is done in this research is “...health communication inquiry that is concerned with the important influences on people’s health care in face-to-face communication such as health care interview, counseling session, health education efforts, care coordination, and provision of social support” [14].

Analysis design in this research based on qualitative interpretation. Field observation and information gathered from in-depth interview are the main data. Based on that finding, researcher overview the typology of the conversation pattern between the therapists and clients such as their perception towards communication process they have experienced. Qualitative interpretation analysis is also will be conducted on types and information qualification that informed in the therapeutic communication process whether it is in the form of interpersonal communication, groups, assignment presentations, regular group meetings and so on. After the existing communication patterns are described, then the next analysis is the effort to model the communication process. therapeutic communication model can be build based on competence area, appropriateness, and working function relational aspect to serve operational work of therapist’s working function personally or organizationally.

IV. GROUP COMMUNICATION

Interview process is the beginning of rehabilitation process. On this first phase, the counselor doing interpersonal communication to examine the eligibility or appropriateness of client candidate. This procedure should be done. The eligibilities for a client candidate are: (1) the criteria relates to maturity, personality and productive age, client candidate must be aged 17-45 years old, In certain cases, there are also some people with ages exceeding a bit of the limit, but it all decided by the team, (2) does not suffer from dangerous infectious disease, by non-verbal and physical observation, and (3) does not suffer from acute mental illness. Criteria 2 and 3 are used because they are aware of the possibility that the client may disturb and interfere the group therapy process. If there is an infectious disease and mental illness in a client candidate then it should be solved first handled and completed by authorized institution outside the rehabilitation house. This is done so it will not results in dual diagnosis.
Primary care or residency is the next process as the main handling of clients to be free from drug use. The main activity carried out is well known as TC (Therapeutic Community). Rehabilitation house management create activities that try to restore the lives of addicts in normal daily activities. This is not easy to implement because basically at the same time the addicts try to release their dependence on drugs. Usually they overcome their problems by running away from reality using narcotics. Now, they have to live normally in groups without using drugs while overcoming their addiction. The have to get used to it because they live in quarantine situation. If they succeed in overcoming this situation, basically they have been freed from narcotics use for three months (based on the rules for handling addicts in rehabilitation house).

The first phase in rehabilitation process of is adjustment process. The addicts as clients should know the whole treatment process. The treatment plan is delivered to the addicts in full and detailed. At first, addicts will be accustom to overcoming their pain in addiction by detoxication or by habituation. After client adjustment process is complete, the client will take full participation in the rehabilitation institution. At the first time, addict as client will be placed on the division of institutional work. If the number of administration staff and counselor is adequate usually departemental membership can be in: (1) Kitchen department, (2) Lanscape department, (3) Housekeeping and maintenance department, (4) Expeditor department, (5) Mental spiritual department, (6) Gastronom department. Te existence of this division of work varies from a rehabilitation house to another according to its need and feasibility.

The form of social rehabilitation that is to be achieved is to restore bad habit of the addicts to their normal lives. Normal life means that socially addicts can carry out their social functions in daily interactions that have been disrupted because of the effects of drug use. Their entry into rehabilitation house shows that they are not living a normal life. There are usually three ways they enter a rehabilitation institution: (1) Institutional reference, by accepting clients from BNNK or Local Police. If there is an individual caught using drugs with the limit of 1 gram of methamphetamine, 300 gram of marijuana, 10 pills of inox, or 1 gram of heroin, they will be categorized as addicts and taken over to Mandatory Report Recipient Institution. (2) Through web of foundation or therapy house or social media, which gives information to the society about rehabilitation house. This can encourage members or friends of addicts to take the srvine of the institution because they want to see the addicts freed from thir addiction (3) Society reach out, this activities conducted by the counselor that functioned as field worker. They will contact and communicate with contact person in drug addicts area. Using their information, it is expected that there will be addicts that want to be recovered and becomes therapy house’s client to get rehabilitation treatment. There are special cases that indicate the presence of addicts who personally find personal awareness to recover from their addiction.

On the recovery process, what is done by by the counselor is instilling the desire to change from drug dependency situation tobeing free. They have felt for themselves how they behave in social deviant behaviour when they become addicts. Dependence on narcotics make them physically, mentally and socially ill. They get sick when they attacked by narcotics addiction. Psychologically, they live in negative images and hallucinations. Socially, they may be involved in crime and violence, losing the warmth of relationships with spouses or family members, or even they ostracized and stigmatized.

Rehabilitations houses unite them in a history of same negative experience. They are encouraged to recover together in one community or group. Therefore, they always use the term family for rehabilitation house to show togetherness. In activities carried together, they always mention their names followed by the recognition of ‘I’m addict’. Counselor motivate and stimulate addicts to learn and take lesson from bad experiences of the past when they became addicts. This group communication activity takes place patterned in daily activities scheduled for three months.

The daily scheduled activity are dseigned to develop the social functions and social responsibilities of addicts where initially neglected due to the influence of narcotics on their social behavior. All activities are packed in an atmosphere that fosters self awareness of social existance and self-worth. Always questioned “What is taken from today life lessons”. All addicts are encouraged, persuaded and stimulated to express themselves before others in the context of individuals and departemental assignment. In this daily activities, a form of joint or collective learning methods applied to client to support their’ recovery. Each individuals takes various duty or assignment as a person or member of department grouping. Addicts are encouraged to be active part of the ‘family. Some clients who have arrive first or are considered senior in terms of experience then become role model for another clients. What is developed in a rehabilitation house is the principle of openness, supportive atmosphere in communication and full participation of its members.

Counselor gives feedback, reinforcement, or assessment in discussion in daily meeting session activities. The counselor holds two journals for clients who are under his supervision, namely the client journal in his daily activity participation. The second journal is a more personal psychological record. There are cardinal rules applied, which are no sex, no violent, and no drugs. The basic rules that must be followed are do not disturb other people’s belongings. This rules is emphasized because it is often underestimated in relations between individuals which are actually a violation of privacy. These violations include using clothes or other people goods, sleeping on someone else’s bed, asking for cigarettes, putting things in an improperly appropriate place. They are not allowed to touch each other carefully/randomly because of the possibility of differences in sexual orientation. If there is violation, the client will receive the consequences. The form of consequences may be a warning in a meeting usually in a confrontation session or may be ask to do certain actions that are useful for individual or groups. Counselor will not say that they get punishment but always call it whether they wan to get help to solve the problem.

From observation carried out, there are several general group and joint activities inside the rehabilitation institution.
Counselors participate actively as organisator, facilitator and counselor. They called the activity as session and this sessions is different for each institution. The forms of group activity include (1) **Wellness.** This is a morning sport activity in the to improve or take care of health and life enthusiasm of the addicts to face a new day. Expression of excitement in the form of verbal and nonverbal messages are always seen and assessed by counselors. They will stimulate the existing situation. Properness and appropriateness are always a major consideration because the main goal of all activities in group are good social behavior. (2) **Functions.** As responsible members of community, clients must maintain cleanliness of the environment. In general, the environment of the yard and inside the house is a shared responsibility. Landscape department responsible in yard cleanliness. Room cleanliness, bed and kitchen are the responsibility of the kitchen and house keeping department. Counselors with chief and crew of department evaluate the overall environment in morning general inspection (GI). (3) **Morning meeting.** This is activity led by counselor in charge to evaluate what happened before: What’s the existing problem? ‘The family’ will discuss to make decisions to solve the problem. All members of community is allowed to participate to give their ideas. Members who were chosen on the previous night meeting chose today’s theme by providing specific description. (4) **Seminar or Class.** In seminar session, counselor gives motivation or education to clients based on their capabilities or competence. Topic of seminar can be various from individual character building and drugs category and impacts, psychological personal improvement or religious matters. In this session, sometimes they also invite outside speakers such as psychologists or religious leaders. (5) **Confrontation.** Confrontation is a forum create to remind each other between member of community. They may take improper or inappropriate actions in their daily activities. Other members will remind the perpetrator. All actions are carried out with the principle of openness and supportive atmosphere. The process start with a client sees another client doing and act in improper way that make him feel uncomfortable,. The first thing he do is to confirm the action. If the accusation or reprimand is accepted then the confronted client will confirm the error and promise to correct his actions. (6) **Clients Presentations.** This session is a follow up session or continuation after another session. After vocational, class or seminar session, clients have specific task that must be presented at the forum in front of class in the presence of friends. The counselor duty is to stimulate the client to be assertive and want to practice and develop themselves personally or in certain competencies or expertise. (7) **Care and Concern.** This session is done to developed personal kill of the client based on certain necessity. Usually this activity relates with 12 steps in NA (Narcotics Anonymous) which are relates with commitment to recover, helping other addicts, developing healthy social relations and improved manageable lives. All clients can participate and give opinion or statement about te topic, the solution, improvement etc. The problem raised can be anything. What matters is the problem is related to clients needs. (8) **Drop Guild.** Sometimes clients need a forum to to disclose his mistakes for several reasons. Maybe he needs comprehensive understanding and forgiveness from all member of community. He can use this session for this purpose. On the other hand, counselors can use this session to raise client mistake issues that need to be explain in general. The purpose of this session is for mutual understanding, the search of collective solutions and a sense of community togetherness. (9) **House Meeting.** This session is used to solve problems to be addressed together. There maybe related to a day program that must be changed, or the type of department added or reduced due to certain interests. ‘Case conference’ is other terms used by other social rehabilitation institution. (10) **Vocational Session.** This session is used to improve the ability or clients skill to get opportunity to find job, to work and earn income. The resource person is an expert who masters the field of work. The field of work can vary, such as agriculture, livestock, trade, creative work and so on. Concelors usually consider the interests, talents and requests of clients.

This Primary or Residency Care step is lasts variously for 2 to 3 months. Basically if this step is followed well, then client would be on clean state. This is means total abstinent for 2/3 months. Next phase is the transition phase or halfway house that provides opportunities to clients to work, school, or involved in vocational activities on the afternoon. On the last phase, after care, for 2/3 months clients may stay outside of rehabilitation facility. Clients also encouraged to join the group meeting that supports self-help such as NA and AA meeting. On this phase, clients also expected to join individual or group counseling so their development or constraints can be monitored. Recovery from addiction can be mirrored from the stopped usage (clean) and the life quality improvement for the addicts.

### IV. INTERPERSONAL COMMUNICATION AS PERSONAL THERAPY

Counselor know the condition of client through personal interviewing during the therapy process. In the first rehabilitation phase, counselor evaluated and assessed the client’s addiction condition. By using multiple drug screen test, they can estimate the type of drugs consumed by the clients and also the physical effects. They can also predict the socio pathological behavior based on the type of drug use. In general, there are three kind of effects arising from drug use: (a) causes of hallucinations (halusinogen), (b)stimulants and as (c) anti-depressants. The negative effects of drug must be eliminated by detoxification.

In this occasion, listening is the most important tool in personal therapy. It enables the client to participate more fully in the therapeutic endeavour. The clients also feel encouraged to be active in relationship and easy to identify their feeling. The counselor’s expertise is needed to dig and exploring individual tendencies in addicts to open up and develop their individual potential. This is necessary to face real life challenge after the therapeutic process in rehabilitation house is complete. The skill of counselor in probing can foster the ability of addicts to understand themselves. In this case, the counselor’s empathy ability is needed to make the addict comfortable in expressing himself or self disclosing. Successfull personal therapy can encourage addicts to find their way of recovery by finding ‘the higher power” to help the process of ‘healing. What is
meant by higher power is the main force outside the individual which strongly encourages the individual to recover. From the observations and in-depth interviews, there are several components or subject that can become higher power: (1) Trust and believing in religious activity. Especially, when it relates with eschatology which relating to death and eternal life. (2) Sincerity and the seriousness of the family members or close friends in helping the recovery process. Wives, relatives or close friends can be in this important position. (3) The birth of children who become new members in the family of addicts. The purity and innocence of the baby may be the main cause of the addict’s recovery process.

The search, achievement and reinforcement of the higher power is explored through empathetic therapy with the counselor. Related to therapy in this interpersonal communication context is elements of openness, willingness, suportiveness and availability. The empathetic expression of counselor should be encouraged without blaming, judging or belittling. Nonjudgemental attitude can be describe as interaction as human being. It means talking to the client as a neighbour or friend rather than as a counselor or expert. In the case of counselor as ex-addicts, the comnication process can be a kind of sharing common experiences in background and mutual adversities. Individualized care is mediated through knowing the addicts so they feel valued and respected. It is important because if an error occurs the addicts can feel discrimanated or stereotyped.

V. CONCLUSION

The success of rehabilitation house in managing the therapeutic process depends on adjusting to the ever-changing environment because its existence depends on external institutional context. Smart managerial implementation can reduce shortages in providing physical facilities, sufficient number of staff and counselors. Likewise, counselors must develop their competencies and expertise to achieve healing goals. Intensified presence and capacity to handle continually new and unpredictable experiences are requirement to be established. Active listening is not just only hear but must attending and attentive. When counselors give proper attention or appear interested makes addicts feel understood and make the subsequent healing process easier.

It appears in general that former drug users as counselor have roles like other addictive counselors. Although there are rehabilitation institutions who place them only as social volunteers, in reality they have a central important position. Some of them are even initiators or founders of social rehabilitation institutions. Their advantage is that hey have direct and deep understanding of narcotics. In some functional positions like in social outreach their role is irreplaceable. Of course this dos not apply to all former addicts. Those who succeed in overcoming their personal problems and developing themselves so they have personal capacity. Then their self concept grow along with the healing and abstinence process. They are clean and have a strong will to heal and become healers. But actually there is no term “cured”, they can only be called recover. Therefore, they always try to keep on recurring and always do relapse prevention. The do it not only for themselves but also for others in institutions.

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