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Reengineering Knowledge & Creativity for Global Excellence

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Reengineering Knowledge and Creativity for Global Excellence

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Foreword

The papers compiled in these e-proceedings are papers presented online at Technology, Science, Social Sciences and Humanities International Conference 2022 (TeSSHI 2022) held on 30 June 2022 at Universiti Teknologi MARA (UiTM) Cawangan Kedah, Kedah, Malaysia. With the theme, ***Reengineering Knowledge and Creativity for Global Excellence****,* the conference has brought together presenters of diverse background who shared their conceptual and empirical papers in broad areas that are subsumed under the fields of Technology, Science, Social Sciences and Humanities. These e-proceedings comprise current researches that were undertaken with the rigorous endeavour of knowledge enhancement to ensure that the world of academia will continue to flourish. It is thus hoped that readers will significantly benefit from knowledge contained in these proceedings.

TeSSHI 2022 and these e-proceedings would not have been possible without the great efforts from the presenters, and the generous support from the TeSSHI 2022 committee members and the Rector of UiTM Cawangan Kedah, Prof. Dr. Mohamad Abdullah Hemdi. A heartfelt gratitude is extended to all involved. It is hoped that these e-proceedings will be an impetus to stimulate futher studies and research that benefit the society at large.

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The Impact of *i-Pulih* Model Toward Methamphetamine Clients Recovery in Puspen Tampin, Melaka, Malaysia

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ABSTRACT

The *i-Pulih* model is one of the interventions introduced to the individuals with drug addiction problems in 2020 that provides treatment and rehabilitation programs including biological, psychological, spiritual and social component. This study aims to identify the impact of *i-Pulih* model toward methamphetamine client's recovery that still regarded as a new venture in Malaysia. In addition, Selangor was chosen to be the pioneer in the digitization system of client management using an application of *i-Pulih*. Therefore, it is very important for researchers to identify the impact of the *i-Pulih* model on methamphetamine addicts in Malaysia as methamphetamine clients dominate rehabilitation centres in Malaysia. This study uses interpretive phenomenology approach, in-depth interviews as a means of gathering information that will involve seven methamphetamine addicts from Pusat Pemulihan Penagihan Narkotik (PUSPEN) Tampin, Melaka. The findings showed that there was an impact of the *i-Pulih* model among clients in the dimension of self-efficacy and social interaction. The dimension of self-efficacy is demonstrating in term of self-alternative and self-regulation to facing recovery challenge. Meanwhile in social interaction, there was a reduction of anti-social behaviour, being socially selective, and confidence to socialize. Researchers suggested future research must provide a more in-depth analysis on the effectiveness of *i-Pulih* model in term of self-efficacy and social interactions during aftercare treatment. Expectantly, the effectiveness of *i-Pulih* model stay relevant as a current intervention in the synthetic drug abuse in line with the major focus of 2030 Agenda for Sustainable Development vision.

Keywords: *i-Pulih* model, methamphetamine abuse, social interaction, self-efficacy

INTRODUCTION

Over the past few decades and at present, there is an increasing concern over the substance abuse among youth in Malaysia. Holistically, substance abuse is defined as excessive consumption on toxic substances such as alcohol and medications. Small beverages, cigarettes, illegal or

prescribed, and over-the-counter medications are also included. Yet methamphetamine's increasing use was of special concern (Norliza et al., 2014) in Malaysia and this has been proved by the newest statistic from National Anti-Drug Agency 2020 where the usage of methamphetamine (crystal) has recorded the highest case. Crystal methamphetamine commonly known among users as crystal meth, ice, meth, and syabu that the most addictive and brain damaging drug available today. According to the UN, a record of one billion methamphetamine pills were seized in East and Southeast Asia during 2021, as crime gangs capitalised on the Covid-19 pandemic and instability in Myanmar. Currently, 8th June of 2022 in Malaysia the General Operations Force (GOF) detained a youth at Kampung Gual Pasung Hantu near Rantau Panjang and seized 10,000 methamphetamine pills worth about RM100,000. The initial investigations showed the drugs had been smuggled into the state from a neighbouring country.

NADA has organised a numeral of programmes over the years to elevation awareness about drug abuse. Under the Dangerous Drug Act (Treatment and Rehabilitation) 1983 legislation, one stop centre was the first drug treatment and rehabilitation programme that provided treatment and rehabilitation, but the drug addict was forced to participate due to legal proceedings. The implementation of a one-stop centre has been criticised because 70 to 90 % of drug addicts' relapse, provided little medical care, and treated them like criminals (Tanguay, 2011). After 23 years of implementing one-stop centres were harm reduction programmes like methadone maintenance treatment (MMT), needle and syringe exchange programmes (NSPs) introduced. The goals are to reduce the spread of HIV/AIDS in Malaysia. The treatment and rehabilitation approach has gradually shifted toward a health approach. As a result of the success of the harm reduction programme, former Prime Minister Dato' Sri Mohd Najib Abdul Razak renamed the one-stop centre Narcotics Drug Treatment or PUSPEN in 2009. The new branding of the drug treatment centre demonstrates that the government is aware of society's negative perceptions of drug addicts. As of now, the government has stated that it views drug addiction as a health issue rather than a security or criminal issue. As a result of the success of the harm reduction programme, former Prime Minister Dato' Sri Mohd Najib Abdul Razak renamed the one-stop centre Narcotics Drug Treatment or PUSPEN in 2009. The new branding of the drug treatment centre demonstrates that the government is aware of society's negative perceptions of drug addicts. As of now, the government has stated that it views drug addiction as a health issue rather than a security or criminal issue. Hence, the government underwent a transformation period in 2010, during which it carried out voluntary services and transformed the branding and services of drug treatment and rehabilitation centres. As part of the Government Transformation Programme (GTP), the new image of a drug treatment centre has been divided into several divisions known as the Cure & Care project, which promotes human rights, health issues, and the development of government services (Mohamed & Marican, 2014; National Anti-Drugs Agency, 2012).

Recently, in 2020 NADA organized the *i-pulih* model to continue spreading awareness and conducting the drug prevention programs. The *i-pulih* model is focuses on biological, psychological, spiritual and social to the client through several major component such as counselling, social support, psycho-education, psycho-spiritual, health education, family programs, skills training and career placement, recovery trainer, as well as recreation. Through the *i-Pulih* Model, individuals with drug addiction problems can be treated for rehabilitation through the Community Treatment and Rehabilitation Program at 109 AADK facilities or through the Institutional Treatment and Rehabilitation Program at 30 Narcotic Addiction Rehabilitation Centers (Puspen). In addition, Selangor State Government is a pioneer state in the implementation of the digitization system for the management of drug addicts through the *i-Pulih* application. "Through the *i-Pulih* Treatment Program Digitization Transformation approach, more non-governmental organizations (NGOs) and government agencies in Malaysia extremely support to eradicate drug abuse issue.

According to the United Nations, youth is individual between the ages of 11 till 29 (United Nations Department of Economic and Social Affairs, 2013). In Malaysia, the youths aged between 19-39 years are monopolized in drug abuse activities, which is 83,401 people or 65.0 % during 2020 (NADA, 2020). Meanwhile methamphetamine (Crystalline) is the most widely abused drug at 74.8 % followed by amphetamine and methamphetamine (Tablet) at 11.6 % and 13.1% respectively in 2020.There is a sufficiently of programmes seek to actively engage youth by increasing their agency and impacting the personal and environmental risk and protective factors that influence their risk of

experiencing harms from substance use (Catalano et al., 2019). However, there is a lack of available research that clarifies the essential components that produce those positive effects. This could be due, in part to the diversity of positive youth development efforts and the varying quality of evaluations conducted in this regard (Catalano et al., 2019; Greenwald, 2008; Bonell et al, 2016; Melendez-Rorrez et al, 2016). Hence, this present study aims to identify the impact of *i-Pulih* model toward methamphetamine client's recovery that still regarded as a new venture in Malaysia.

METHODOLOGY

Setting and participants

The present study was conducted in government rehabilitation centre namely 'Pusat Pemulihan Penagihan Narkotik (PUSPEN) Tampin, Melaka*'.* PUSPEN is a drug rehabilitation centre that provides treatment and rehabilitation programs to any individual who has been certified as a drug dependent by any Registered Medical Officers. Any individual who has been confirmed as a drug addict will be recommended by rehabilitation officer to undergo treatment and rehabilitation at PUSPEN either voluntarily under section 8 (3) (a) of the Drug Addicts (R&P) Act 1983 or by court order under section 6 (1) (a) of the Drug Addicts (R&P) Act 1983. PUSPEN also accommodate for admission of adolescents under the provisions of section 9 of the Drug Addicts (R&P) Act 1983.

In this study, purposive sampling was used in this study (Palinkas et al., 2015; Etikan et al., 2016) to find individual who have been through similar experiences so that cohesive information can be gathered. The informants were seven methamphetamine clients who undergo treatment and rehabilitation at PUSPEN Tampin, Melaka. The main criteria for the informants are they have a broad experience in methamphetamine abuse, a youth addicts, and frequently enrolled rehabilitations centre due to methamphetamine abuse. Entirely clients who took part in the interviews were male and were aged between 19 and 28 years. Most informants were Malaysian citizen and they had on average 2 children. The majority of education level of these informants are high school and two of them are bachelor degree and diploma. Meanwhile, majority of these informants are from Selangor, two from Johor, and one from the state of Melaka. The longest duration of addiction period for a participant is 20 years. While the other informants are five years, four years, and two years. Referring to the number of rehabilitation centres assigned for treatments, only one mentioned four centres. Meanwhile the other had been receiving treatment in three and one centres for rehabilitation. Data collection conducted between February and March 2022. Once informant had been selected, an appointment was then arranged with those who agreed to participate.

Table 1 Background of Informant n=7

Informant	Age	Education	State	Marital Status	No. of child	Addiction period	Number of rehab center enrolled
A	19	High School	Melaka	Single		5 years	3
B	20	High School	Johor	Single		5 years	4
C	24	Diploma	Selangor	Single		2 years	3
D	23	High School	Selangor	Single		4 years	1
E	26	High School	Selangor	Divorcee	1	4 years	1
F	29	Bachelor Degree	Johor	Married	1	2 years	1
G	28	High School	Selangor	Married	2	20 years	1

Procedures

The study's objective was explained to the informants or clients who were receiving therapy services by their counsellor. Informants who expressed interest in the study had the choice of contacting the research team directly or permitting their counsellor to share their contact information with the research team. The researchers told counsellors about the study and those who exhibited interest acknowledged permission for their contact information to be shared with the research team. A research team went on to enlighten the study's objective to the clients and they gave their informed consent directly. Researchers emphasised that informant was entirely voluntary and would be conducted in a face-to-face in-depth interview. The interviews lasted between one and half hour. Interviews were transcribed verbatim from audio recordings.

Analysis

The interviews were transcribed and made available to the interviewees so that they could confirm the accuracy of the transcripts. These were analysed by the study authors, who communicated via email and met two times to discuss on the data. Thematic analysis was used to analyse interview transcripts in NVivo Version 12. Thematic analysis is a technique for identifying common themes and sub-themes in participant data (Braun & Clarke, 2014). Researchers followed Braun and Clarke's (2014) process which transcripts were read to familiarise themselves with the data before generating the first codes. The primary codes were then examined, refined, and specified after being searched for themes. All of the researchers met on a regular basis throughout the analysis to discuss developing themes and sub-themes and to address any coding discrepancies. The final themes and subthemes were discussed by the entire research team to identify any inaccuracies in the coding methodology as well as any researcher bias. The research was integrated at the theme level, with similarities and differences between the themes investigated allowing for triangulation assessment.

RESULTS

Self-efficacy

Self-efficacy is an important element for a client achieving success and self-improvement. Self -efficacy formulate our self -perception and ability to succeed in a particular situation. These beliefs as determinants of how individual think, behave, and feel. Furthermore, self -efficacy is highly related to an individual’s confidence to achieve a desired planning or success in life. The highest level of self -efficacy is divided into two elements (1) alternative to face the recovery challenge and (2) self-regulation in recovery challenge.

Self-alternative to face the recovery challenge

Self-alternative to face the challenge of recovery reflect the informant's behavior to deal with the allegations of recovery later. The challenge of recovery remains ubiquitous and unavoidable. However, honesty, courage, rational justification, and cognitive composure are quite crucial for facing recovery challenges in the real world. Here we can see no more aggressive behavior, emotional instability, and internal rebellion among informants.

> *The challenge remains there… the stigma is confirmed too … very quiet normal phenomena but I can stand it a little…. I think that would've been a lot of smiles because I know what my past is look alike, I am what I’m today and now I can change… The obstacles are not my triggered in recovery… I must accept any pounds feeling down… be quiet and calm…*
>
> Informant A (07022022) 108-115

To achieving success, I have to reassuring friends and family that I am ready to change, reassuring them that the methamphetamine is my enemy… I have to go out and achieving success so that I think if other people can succeed, I can succeed too

Informant B (10022022) 146-157

I knew from the way they (counsellor) spoke, and they were genuine. They wanted to help, I'd dealt with counselling for myself throughout the years and I've just never clicked with any. The challenge outside still visible ……. as long as it has nothing to do with me as long as I do not mess up…. if people ask for help, if possible, ok, I'll help, I don't want to go back to meth anymore.

Informant C (07032022) 273-282

Recovery challenge is a quite normal…God is near to us and to him we are sharing everything hopefully my behaviours changed a lot. I've become more able to thinking and listen and I'm not just trying to control the situation completely and allow me to speak with knowledge…. It's calmed a lot of our situations down a lot faster than what it would've.

Informant D (08032022) 135-144

What we are learning is we try to keep our minds busy and shifting our minds to other interesting hobby…I need to think deeply before taking any action… positive thinking indeed… if you don't have that knowledge, it might be easy to fall… but it's been a year I think that experience is useful…

Informant E (09032022) 142-150

Rejection or condemnation from outsiders is an opportunity for us to be better ahead …from the most despicable evil to the most respectable… I have my strategy near here, which is to be the best….

Informant F (14032022) 243-246

Reflect to the past, there are many allegations and it has been a process of trying to adapt and translate some skills that I already had in terms of engaging recovery challenge…. constant grief brings us to the addiction back….

Informant G (15032022) 153-156

Self-regulation in recovery challenge

As already stated, the allegations of recovery offered opportunities for clients to practice strategies within their knowledge to deal with it. According to the interviews, most informants stated that if they despair with the allegation of recovery then it is not difficult to recover ahead. The strength that they have comes from the *i-Pulih* component such as therapy, vocational workshops, etc. because it helps the cognitive, emotional, and behavioral of informants to remain positive.

What I've gotten out of it is just understating the benefit of therapeutic community class. I never seen it as anything, now I realise the affects it then has on my own life, society, it gives me strength… religious classes also changed my destiny, learn about prayer and being kind to all friends and family getting sent things to understand it. I never knew any of it that's the only way I can be thankful for the i-Pulih programme…

Informant A (07022022) 149-152

Religious program, social support and Therapeutic community programme among the effective programme because there is a knowledge approach to recover from our own counsellors, prevention programme avoid us from boredom…I feel like for myself it was really vital. I was in a place where I was really confused, and they provided answers and resources for me and just made me feel really at ease and supported and not alone...

Informant B (10022022) 201-206

The 12 steps of recovery class are my favourite session…. we define several elements to our recovery…. I feel like I'm not definitely aggressive anymore. It's not non-existent, it's still there, but he calms down a lot quicker… recovery requires sense of guilt and a sense of change… the steps are clean and it's easy to follow… this taught me about honesty, drugs are an expression of our heart too…. I would like to use this knowledge outside…

Informant C (07032022) 321-330

Sewing therapy encourage me to express my creativity especially in making sofa and cloth… I learned new things… religious class also frequently taught me to close to the family…. social support programme brings change of me from being a quiet till to be able to communicate my feelings more effectively

Informant D (08032022) 179-181

Therapeutic community class changed me a lot because there is an increment of myself - confidence, self -discipline, and communication…I also preferred relapse prevention class that taught me to control ourselves outside…health class also important to me because definitely I'm aware to the impact of substance abuse.

Informant E (09032022) 167-171

Therapeutic community class formulating my confident level… counselling class taught me how to reduce my negative behaviour and emotion…I really like a teamwork approach here….

Informant F (14032022) 159-167

Oil palm project is my main favourite intervention here…made me calm and forget the past… perhaps I can learn to work on abandoned oil palm plantations later… religious class bring me close to the god…What's going on my little mind, maybe there's things that I feels like I can't tell anyone maybe I'll be able to tell somebody else. But now I was saying the right thing and how I was handling it was the right way. I don't want to make things worse,

Informant G (15032022) 171-17

Social interaction

In PUSPEN Tampin, there are various backgrounds of clients enrolled in methamphetamine recovery programme. Majority of clients perceived that participating in *i-Pulih* recovery model contributed positive and quality social interactions. Specifically, they noted that they developed new skills to reduce anti-social behaviour, being socially selective and confidence to socialize.

Reduction of anti-social behaviour

Through this reduction of anti -social behaviour, informant didn't have much friends before enrolled PUSPEN Tampin. Now, they are more comfortable with the new circles of friends. The

isolation during addiction period was reflected upon, emphasising the importance of having someone to speak with regularly and provide support for themselves. Clients also described that the support they received in PUSPEN Tampin contributed to improved mental health and wellbeing. Informant stated.

> *Here are being populated by several backgrounds of clients and meet up…making quality friends is not difficult here… Just knowing that this place is not a prison … when I'm sitting here all sorts of things, I learn… I'm okay but I don't know how much more of this I can go through before I'm not okay". Just being able to tell her that actually made me feel a lot better*
>
> Informant A, (07022022) 157-160

> *I learnt several improvements during recovery phase recently when I am noticing more open communication around feelings and emotions with the other clients. I've started friends with all clients even if some are not close…*
>
> Informant B (10022022) 211-217

> *I slowly learning to talk with other clients and frequently they will say to me, "I'm feeling like this, can I write it down?" Before this, I would slam the door and if my siblings were to ask me, I would just scream and there would be no words, there would be no communication, there was no understanding of each other of what we were both trying to get out of the emotion side of things…*
>
> Informant C (07032022) 260-268

> *Before this, if I'm outside I always was a very quiet, cautious and shy to meet other people… Here, definitely I come out of this shell a lot. Definitely able to communicate my feelings more effectively and not just identifying my own emotions but other people around…*
>
> Informant D (08032022) 115-120

> *I'm so messed up with my isolation period during the ''ice' 'addiction. I am truly upset with my anti-social behaviour… So, here my friends not to see me as a bad child, which is how I sees myself… I think it definitely opened up that space for me. I think at the start I was very hesitant to talk to them about it because I didn't know what to say…*
>
> Informant E (09032022) 121-126

> *Here many new friends voluntarily advised me…I get a different insight to an addict's world…Instead of just talking about the place they feel safe at home, they can show you their safe place*
>
> Informant G (15032022) 136-141

Being socially selective

Being socially selective in this study refer to the small circle that only having clients whom the frame of reference matches especially discussing about the future planning and informative issue. Furthermore, when they have already completed the duration of the Methamphetamine recovery programme, the interactions remain outside. Future planning and informative issue refer to the job

opportunities, applications of new knowledge, and business opportunity in the future. They are extremely leave clients who didn't leave the addiction period. Informants stated;

> *The most important thing is ourselves… what do we think with the intention of what we want.to change… few friends here told me to take a car license because last time I also wanted to buy a car and my own house ... I felt comfortable with friends who align with me in terms of thinking or lifestyles.*
>
> Informant B (10022022) 181-185

> *I feel like happy when few friends here taught me in the process to earn money in future based on their business experience rather than friends that still in denial stage of addiction…That was really good. That's why I can't really fault it because I feel like I got the help that I needed for myself*
>
> Informant C (07032022) 44-48

> *There are so many friends who live in denial stage of addiction and still act as an addict here...I just leave them…the choice I made in terms of friends is those I can get along with well. This means that they are like-minded people, they share the same frame of reference such as business opportunities, property knowledge, etc…*
>
> Informant D (08032022) 119-126

Confidence to socialize

In addition, clients explained that the strengths-based approach within *i-Pulih* model was a strength and assisted them to build their confidence in socialize recently. Confidence in socialize refer to the knowledge and skills on how to dealing with society if they face a conflict ahead. Informant stated;

> *All the knowledge here eliminating pessimism in my life...I would like to be a community leader soon...*
>
> Informant A (07022022) 91-92

> *I become more assertive and let go of passivity. I put forth my opinions and not afraid of refusals or differences in the views of community… they know me well and community is a part of recovery phase…*
>
> Informant C (07032022) 108-110

> *Hopefully I'm able to retain my recovery journey… I would like to migrate to another place… my mother is alone and I have to look at her… the community is willing to look at my mother even though they know I'm here….*
>
> Informant D (08032022) 56-58

> *I spoke about their fear of isolation, and I think that offering myself in community leadership is really helpful for me to feel less isolated and to have confidence… so I can see that there is a positive impact of the i-Pulih model…*
>
> Informant E (09032022) 135-138

Trying to build up that rapport, engagement and trust with community probably takes more effort… I think more preparation needs to go into that... but my neighbourhood always give me a bunch of confident to cure….

Informant G (15032022) 148-150

DISCUSSION

The current study revealed an overview of the impact of *I-Pulih* model towards Methamphetamine client's recovery in Puspen Tampin, Melaka. Obviously, the *i-Pulih* model has resulted in significant impact among Methamphetamine clients in two dimensions (1) self-efficacy and (2) social interaction. Overall, the *i-Pulih* model give a moderate impact on the behavioural changes of the Methamphetamine clients since they are still in the recovery phase. In addition, the increment of positive attitude arises during the phase of recovery. Several components in the *i-Pulih* model such as counselling, social support, psycho-education, psycho-spiritual, health education, family programs, skills training and career placement, recovery trainer, and recreation seems attracted client's interest. This show that the vulnerable group is also in the mainstream of the development process and getting a positive impact from their recovery participation.

Alternative to face the recovery challenge under the dimension of self-efficacy shows a positive impact in the client's development to face recovery challenge. The interpretation directly to the important of positive thinking, honestly, and rational thinking in facing recovery challenge. Those elements are related to the quality of life for a human and consistent with the extent of healthy daily function (Compton et al., 2007; Hasin et al., 2007; Rubio et al., 2014). At the stage of recovery phases, they can control and reduce the emotional instability and aggressive behavior. Not surprisingly, a few clients failed to reduce or managing the emotional instability in this recovery phase. Meanwhile, self-regulation in recovery challenge also refer to the knowledge in their favorable class, session, or therapy as a practice strategy to get well again if they are into the addiction again. Majority of informants stated that the most favorable class is a therapeutic community because it helps to boost their confidence and develop their psycho-motor skills. Multiple evidence shows that therapeutic for youth, and parent-child dyadic interventions can help individual recover after a traumatic event (Anderson & Van Ee, 2018). Aggressive and violence behavior also is a multiple element that succeed to reduce when following therapeutic community session. In addition, dyadic interventions rely heavily on age-appropriate play-based discussions to assist youth and their caregiver to strengthen their relationship (Gomez, 2012; Lieberman et al., 2015)

Social interaction dimension shows the clients are succeeded to reduce anti-social behaviour among themselves. From the data, clearly documented that majority of the clients didn't have much friends before enrolled in the PUSPEN Tampin and most favourably isolated themselves. Now the social circle is increasingly widespread. This is a positive impact of the clients because they acknowledged few negative sides being an anti-social person ahead. Being socially selective entails purposefully limiting social circle. Clients are really comfortable revealing their true self when their friends are present. In addition, they aren't afraid to share a thought and never worry about pleasing others because they're surrounded by people who accept them. The interpretation also refers to the emotionally self-sufficient among Methamphetamine clients. It means they are at ease in their own activities and interests to keep themselves entertained. After they completed the recovery programme, assuredly they are cautious around new people outside and they need to get to know them on a deeper level in various life situations. Being socially selective does not imply becoming a recluse and withdrawing from society. Lastly the impact of the *i-Pulih* model to the recovery brings a confidence to socialize among clients. By socialising with everyone, there is an ability to overcome social anxiety and developing self- confidence to managing conflict. From the view of researchers, few clients are afraid to planning smallest step outside of their comfort zone for fear of making mistakes and preferably staying in their safe zone. This probably limiting their opportunities in life. However, as they gain more social experience their self-esteem and confidence will grow. Directly,

Carta et. al., (2013) mentioned that social interaction became a predictor for the clients to gain more social support from family members and close friends.

STUDY LIMITATIONS

Experience in engaging *i-Pulih* model among Methamphetamine clients in PUSPEN Tampin is an essential objective in the current study. Although the implementation of *i-Pulih* started 2020 but as a researcher we can see the impact of behavioural side among the client. However, there are few limitations in this study especially in the sample allocation. The number of clients in the present study was limited because this study directly explores the experience of youth clients only. Apparently, it may reduce the breadth of the data gathered. Moreover, the present study only includes synthetic drugs clients only and it is possible that opiate client's perspective who participated in the *i-Pulih* model need to consider. In addition, the study location is based on single location and the effectiveness of the *i-Pulih* model should be explore after five years during aftercare treatment. Since current study emphasizes on the self-efficacy and social interaction, the response for the next issue needs to be broad such as how to improve the quality of self-efficacy and social interaction in the i-*Pulih* model.

CONCLUSION

Majority of clients perceived that the *i-Pulih* model has ability to make change in their life. Investigating the quality of self-efficacy and social interaction reflect that this two-core element is crucial in a phase of recovery. Thus, responsible parties such as National Anti-Drug Agency, social workers, psychiatrist, psychologist, and academician must play a role in providing support and encouragement to *i-Pulih* model so that client remain motivated to improve their recovery journey and quality of life. Besides, non-government organization also should strive the *i-Pulih* model to enhance in order to achieve the objectives and provide a more significant impact on client recovery. It is hoped that the impact of *i-Pulih* model will be of better importance to the clients at the present.

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