

The Spiritual Intelligence on Drug Abuse Tendencies among Residents of Rehabilitation Centres in the Southern Zone

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Abstract

This study was conducted to identify the differences in spiritual intelligence and the tendency of drug abuse according to the rehabilitation centres in the Southern Zone consist of the rehabilitation centres in Muar, Johor, Jelebu, Negeri Sembilan, and Tampin, Melaka. Using a quantitative survey design approach, this study involved 318 respondents representing each rehabilitation centre chosen by the researcher. There are two questionnaires used in this study, namely the Spiritual Intelligence Questionnaire (SIQ) to measure spiritual intelligence and the Drug Abuse Screening Test 20-DAST-20 to measure the tendency for drug abuse. Data was analysed using the Statistical Package for the Social Sciences (SPSS) version 27. The results of the analysis show that there is a difference in spiritual intelligence according to the Southern Zone rehabilitation centres [$F(2,315) = 11.379, p < .05$] and there is a difference in the tendency for drug abuse according to the Southern Zone rehabilitation centres ($F(9,818) = .001, p < .05$). This finding may have various factors contributing to the differences, such as the methods and effectiveness of the treatments used, as well as the rehabilitation programs implemented for the residents of the rehabilitation centre. This study is anticipated to provide benefits to various parties, including rehabilitation institutions, policymakers, the community, and individuals who are in the process of recovery.

Keywords: Spiritual Intelligence, Drug Abuse, Rehabilitation Centre Resident

Introduction

Drug addiction is a serious issue that has a profound impact on individuals, families, and society. The physical and mental health of individuals involved is not only affected, but it also triggers various social, economic, and security issues. In many countries, including Malaysia, the rate of drug addiction continues to rise despite various efforts being made to curb this problem. According to data from the National Health and Morbidity Survey (NHMS) 2022 by the Institute for Public Health (IKU) under the Ministry of Health (KKM), it is noted that 60,000

adolescents in this country are identified as being involved in drug abuse activities, while approximately 106,000 others have a history of using these illicit substances (Muhammad Yusri Mazammir, Berita Harian, 2023). The current situation is very concerning because today's youth are the future heirs of the nation, yet they remain exposed to the dangers of drug abuse, and there are teenagers who have already become entangled in this seemingly endless problem.

According to the Head Director of the National Anti-Drug Agency (NADA), Dato' Ruslin Jusoh, a total of 169,691 drug addicts and abusers have been recorded in the country as of September 2024, representing a 31.6 percent increase compared to the same period in 2023 (NADA Website, 2025). Individuals who become entangled in drug abuse will face difficulties in their daily lives, including job loss, social relationship problems, and deterioration of both physical and mental health. This situation indicates the need for a more holistic approach in addressing this issue, including medical interventions, psychosocial rehabilitation, and ongoing community support.

There are several possibilities regarding the causes of addiction that appear to be increasingly alarming, particularly among those in their 40s, who represent the highest percentage of individuals falling into drug addiction (NADA website, 2024). One of the factors influencing drug addiction is related to spiritual intelligence. According to Adler (1927), humans are beings who are aware of all the behaviors exhibited by an individual and capable of guiding their behavior while being conscious of their actions. Thus, each human behavior is determined by the individual themselves, and this situation may differ from the behaviors of other individuals due to factors such as differences in spirituality. Spirituality is related to or characterized by the spiritual or soul aspect that is non-physical, pertaining to the spiritual (Kamus Dewan, fourth edition). Studies show that one of the factors that can influence an individual's tendency towards substance abuse is spiritual intelligence, which refers to a person's ability to seek meaning in life, connect with spiritual values, and cope with life's challenges in a more positive manner (Zohar & Marshall, 2000).

Studies show that spiritual intelligence plays an important role in preventing drug abuse and enhancing individual resilience against addiction. This spiritual intelligence can assist individuals in filtering out immoral behaviors. A comparative study found that individuals suffering from drug addiction have lower levels of spiritual intelligence compared to non-addicted individuals. The study also indicated that the enhancement of spiritual intelligence can be achieved through guidance and therapy provided by counsellors to assist in recovery and prevention of addiction. (Derikvand et al., 2014). Spiritual intelligence is also positively correlated with self-control over drug abuse, wherein individuals with high spiritual intelligence possess better abilities to resist temptation and avoid addiction (Alaei et al., 2017).

Spirituality leads to subjective experiences that are deemed relevant to humanity. This subjectivity indicates that the needs or behaviours exhibited by each individual vary considerably. This spiritual intelligence not only assists individuals in coping with life's pressures but also plays a role in developing resilience and a deeper understanding of the purpose of life (Emmons, 2000). Based on research, individuals with a generally high level of spiritual intelligence are more likely to demonstrate a better level of self-awareness and are

less involved in risky behaviours, including drug abuse (Nasel, 2004). In this context, this study aims to examine the relationship between spiritual intelligence and drug abuse.

Research Objectives

This study is conducted to identify the differences in spirituality and substance abuse based on three rehabilitation centres in the Southern Zone. Therefore, several study objectives have been established, including:

- i) To identify the differences in spiritual intelligence according to the Southern Zone rehabilitation centres.
- ii) To identify the differences in drug abuse tendencies according to rehabilitation centres in the Southern Zone.

Literature Review

The Theory of Spiritual Intelligence proposed by Zohar and Marshall (2000) conceptualizes spiritual intelligence as the capacity to recognize and engage with the spiritual dimensions within oneself. This form of intelligence is regarded as a foundational intelligence that underpins intellectual (IQ), emotional (EQ), and moral intelligence. Beyond cognitive and emotional capacities, spiritual intelligence serves as an inner compass that guides individuals in making value-driven decisions and navigating existential questions. It enables individuals to find meaning and purpose in life, particularly in times of adversity or inner conflict. In the context of rehabilitation centres residents, who often struggle with identity issues, spiritual emptiness, and a loss of life direction, spiritual intelligence may function as a protective and restorative force that supports recovery and reduces the tendency toward drug relapse.

Arshad et al. (2020) examines the elements of mind, body, and soul in developing approaches and techniques for drug addict rehabilitation. The study took place at four drug rehabilitation centres in the Northern Zone. This study employs a qualitative research design and involves in-depth interviews. The results reveal that there are differences in spiritual intelligence based on the four drug rehabilitation centres. This is due to the varying elements such as spiritual intelligence, emotional intelligence, and intellectual intelligence across the rehabilitation centres. The director of the rehabilitation centre in Penang stated that activities related to spiritual intelligence constitute 50%. Similarly, the rehabilitation centres in Perak and Bukit Mertajam allocate 50% and 60% respectively for spiritual intelligence elements. Only the rehabilitation centre in Perlis allocates 33% for activities related to spiritual intelligence elements.

Furthermore, a study by Abd. Majid et al. (2023) presents the programs implemented for delinquent adolescents at the moral rehabilitation centres managed by the Department of Prisons Malaysia (JPM) and the Department of Social Welfare (JKM). This study is qualitative in nature. Drug abuse is also included as part of delinquent offenses. JPM stated that all the problems encountered are closely related to the elements of a person's spiritual intelligence. Therefore, the centre for moral rehabilitation under JPM uses the 'Putra Module' as a basis for moral rehabilitation, where this module includes the foundations of religion, identity, and others, while the JKM uses the Spirituality Module for the residents of the rehabilitation centre. The results of the study show a significant effect of these modules in shaping positive behaviour among prison offenders and residents of rehabilitation centres under JKM.

In a previous study by Arshad et al. (2020), it was found that the implementation of elements of IQ, EQ, and especially spiritual intelligence (SQ) in the Human Re-Engineering Program (HRP) plays a crucial role in influencing the effectiveness of the recovery process among drug addicts. The study also shows that different program approaches among rehabilitation centres can result in varying levels of effectiveness, especially when involving spiritually-based activities that touch upon the aspects of introspection, religiosity, and the formation of the patients' character. This, in turn, directly influences the level of spiritual intelligence among clients.

Furthermore, a study by Oktariani and Abdulkarim (2020) shows that rehabilitation institutions such as the National Narcotics Rehabilitation Centre (BNN) play a significant role in shaping spiritual and intellectual intelligence among drug users through the Therapeutic Community (TC) approach. Through this approach, various religious activities such as Iqra' reading classes, Qur'an learning, congregational prayers, and spiritual dialogue sessions are systematically conducted. These activities not only provide spiritual support but also reshape the values, behaviors, and identity of the residents, making the TC approach an effective mechanism for holistic recovery that encompasses both spiritual and intellectual aspects.

In addition, the rehabilitation approach towards addicts and victims of drug abuse is not only accepted within the national legal system but is also in accordance with the principles of Islamic law. Rehabilitation in the form of medical and social treatment is categorized as *ta'zir* punishment, which can substitute *hudud* punishment should there be elements of ambiguity such as doubt, uncertainty, or confusion in the proof of the offense. This indicates that the implementation of rehabilitation that emphasizes spiritual and social elements is a choice that aligns with the approach of Islamic justice and is relevant within the modern rehabilitation system (Syafliin Halim, 2017).

Methodology

Research Design

A quantitative research method has been employed by the researcher in conducting this study to obtain more accurate results and to reduce bias by the researcher. This quantitative study is frequently chosen by many researchers in conducting research to achieve high reliability in the findings and to allow for the validation of results by other researchers (Neuman, 2019). One of the approaches in quantitative research, namely the survey design, has been selected for this study. According to Creswell & Creswell (2018), survey methods are often used to collect data from a population sample to understand the characteristics, opinions, or behaviours of a group within a specific time. Instruments such as questionnaires or structured interviews are commonly used in this approach to obtain data that can be statistically analysed (Bryman, 2021). To obtain accurate data, the Statistical Package for the Social Sciences (SPSS) has been utilized. Subsequently, the researcher employed purposive sampling to select respondents based on specific criteria relevant to the study's objectives. According to Patton (2015), purposive sampling can assist researchers in avoiding the selection of irrelevant participants, thereby reducing both the time and cost of the research.

Research Sample

The study sample is a part of the total population that has been selected based on the sampling method chosen by the researcher. According to Creswell & Creswell (2018), in any

research, a sample refers to a portion of the population selected to represent the entire population. To ensure that the research results can be generalized to a larger population, precise sample selection is crucial, as it can enhance the validity and reliability of the study findings (Bryman, 2021). Therefore, this study involves 318 respondents representing three rehabilitation centres in the Southern Zone. A total of 113 respondents represents PUSPEN Tampin, Melaka, 110 respondents represent PUSPEN Muar, Johor, and for PUSPEN Jelebu, there are 95 respondents who are residents of the rehabilitation centre.

Research Instrumentation

The distribution of the questionnaire was conducted by the researchers across all three selected rehabilitation centres in the Southern Zone. The questionnaire consists of three sections: Section A, Section B, and Section C. Section A contains demographic information of the respondents, including ethnicity, age, marital status, education level, and rehabilitation centre. Subsequently, Section B pertains to the Spiritual Intelligence Questionnaire (SIQ) developed by Abdollahzadeh et al. (2009). This questionnaire aims to measure spiritual intelligence among residents of rehabilitation centres and utilizes a 5-point Likert scale with a total of 29 items.

Part C is the Drug Abuse Screening Test 20 (DAST-20) questionnaire, which was modified by Skinner (1982). Unlike the SIQ questionnaire, this questionnaire employs a Guttman scale that provides two response options: Yes or No. The questionnaire consists of only 20 items. This test is suitable for use in various settings, particularly in rehabilitation centres where residents are collected, making it easier to distribute.

Findings and Discussions

Descriptive Results

Table 1

Number and Percentage of Respondents by Race

Race	Number	Percentage (%)
Malay	287	90.3
Chinese	4	1.3
Indian	20	6.3
Others	7	2.2
Total	318	100.0

The table above illustrates the total number and percentage based on racial categories at the three Rehabilitation Centres. From the table above, the researcher found that Malays is the most dominant, with 287 individuals accounting for 90.3%, followed by the Indians with 20 individuals, representing only 6.3%. Furthermore, for other races, there are 7 respondents, which is 2.2%. The racial group with the lowest representation in the rehabilitation centre is the Chinese, with only 4 individuals, making up 1.3%. This clearly indicates that the Malays dominates the highest chart of those residing in the rehabilitation centres.

Table 2

Number and Percentage of Respondents Based on Age Group

Age	Number	Percentage (%)
20 to 29 years old	61	19.2
30 to 39 years old	130	40.9
40 years and above	127	39.9
Total	318	100.0

Table 2 shows the frequency and percentage of respondents based on their age. The most respondents in this study are within the age range of 30 to 39 years, with a total of 130 individuals (40.9%), followed by the number of respondents aged 40 and above, which stands at 127 individuals (39.9%). Furthermore, the age group with the fewest respondents is between 20 to 29 years, comprising 61 individuals (19.2%).

Table 3

Number and Percentage of Respondents Based on Marital Status

Marital Status	Number	Percentage (%)
Single	218	68.6
Married	78	24.5
Others	21	6.6
Total	318	100.0

The table above shows the number and percentage of study respondents based on marital status. Most residents in the rehabilitation centre are individuals who are single or unmarried, a total of 218 individuals, which is equivalent to 68.8%. Furthermore, 78 individuals, or 24.5%, are among those who are married, followed by 21 individuals, or 6.6%, who fall into other statuses, possibly indicating individuals who are widowed.

Table 4

Number and Percentage of Respondents Based on Education Level

Education Level	Number	Percentage (%)
PMR	88	27.7
SPM	115	36.2
Diploma	99	31.1
Sarjana Muda	13	4.1
Sarjana/PHD	1	0.3
Lain-lain	2	0.6
Total	318	100.0

Table 4 shows the distribution of the number and percentage of respondents based on educational level. There are 6 educational levels assessed, where the study results indicate that most respondents have completed their SPM education, amounting to 115 individuals (36.2%). Next, a total of 99 individuals, representing 31.1%, hold a Diploma level of education, followed by 88 individuals at the PMR education level, which corresponds to 27.7%. Subsequently, there are 13 residents, accounting for 4.1%, who possess a Bachelor's degree, followed by 2 individuals, representing 0.6%, at other educational levels, likely corresponding to the UPSR education level or those who are uneducated. The remaining individual, representing 0.3%, is at the Master's or PhD level. The findings indicate that individuals

residing in rehabilitation centres are not solely among those with low qualifications; in fact, some of them possess high qualifications.

Table 5

Number and Percentage of Respondents Based on Rehabilitation Centres

Rehabilitation Centre	Number	Percentage (%)
PUSPEN Tampin	113	35.5
PUSPEN Jelebu	95	29.9
PUSPEN Muar	110	34.6
Total	318	100.0

Table 5 shows the number and percentage of respondents based on the type of rehabilitation centre in the Southern Zone. A total of 113 individuals, representing 35.5%, consist of residents from the Tampin district rehabilitation centre in Melaka, followed by 110 individuals, or 34.6%, who are among the residents of the Muar district rehabilitation centre in Johor. Meanwhile, the remaining 95 individuals, accounting for 29.9%, consist of respondents residing in the Jelebu district rehabilitation centre in Negeri Sembilan.

Inference Results*The Difference in Spiritual Intelligence According to the Southern Zone Rehabilitation Centre.*

Table 6

ANOVA Results for Spiritual Intelligence According to the Southern Zone Rehabilitation Centres.

	JKD	dk	MKD	F	Sig.
Between Groups	42220.765	2	2110.382	11.379	.001
In Groups	58418.311	315	185.455		
Total	62639.076	317			

$k > .05$

The findings based on Table 6 indicate a difference in spiritual intelligence according to the rehabilitation centres. The results show that the F statistic value is 11.379 with a significant value obtained of .001, which is less than the significance level of .05. Therefore, the study results demonstrate that there is a difference in spiritual intelligence according to the rehabilitation centres in the Southern Zone [$F(2,315) = 11.379, p < .05$]. Thus, this hypothesis is accepted.

Arshad et al. (2020) found that three out of four rehabilitation centres using 50% of the spiritual intelligence program in the healing process of addicts. The results of the study indicate that the effectiveness of the spiritual intelligence program varies according to the rehabilitation centre. However, only 30% of addicts achieved recovery. Therefore, the researchers recommend further assessment of the spiritual approach for addicts. A study by Abd. Majid et al. (2023) also states that the presence of spiritual intelligence elements in the modules under the Malaysian Prison Department and the Department of Social Welfare has a positive impact on shaping positive behaviour among prison inmates and JKM rehabilitation centres.

Furthermore, the study by Oktariani and Abdulkarim (2020) demonstrates that the implementation of character development through the Therapeutic Community method at

the rehabilitation centre of the National Narcotics Agency (BNN) in Lido, Bogor City, Indonesia is seen to directly contribute to the enhancement of the spiritual intelligence of the residents. Spiritual programs that are implemented, such as guidance in reading Iqra' and the al-Qur'an, congregational prayers, as well as participation in religious dialogue sessions and sermons, provide an opportunity for residents to reflect, engage in self-introspection, and establish a deeper relationship with religious values. The implementation of this program has proven to have a significant impact on the changes in attitudes, thinking patterns, and the internal resilience of residents in facing the recovery process, thereby demonstrating how spiritual aspects play an important role in the success of the recovery process in these centres.

The findings of the study by Syaflin Halim (2017) also emphasize that the rehabilitation approach based on *maqasid al-shari'ah* focuses not only on physical healing (*hifzh al-nafs*) and mental healing (*hifzh al-'aql*), but also elevates the spiritual element through religious restoration (*hifzh al-din*). The effectiveness of rehabilitation is enhanced through religious elements, where addicts are given the opportunity to return to a balanced life both spiritually and socially. This approach simultaneously differentiates rehabilitation centres that emphasize spiritual aspects from other centres that focus primarily on physical or mental treatment. Generally, the comparison of spiritual intelligence among rehabilitation centres in the Southern Zone exhibits different approaches but is rooted in spiritual intelligence to aid the process of recovering from drug abuse.

Differences in Drug Abuse Tendencies According to Southern Zone Rehabilitation Centres.

Table 7

ANOVA Results for Drug Abuse According to Southern Zone Rehabilitation Centres.

	JKD	dk	MKD	F	Sig.
Between Groups	310.068	2	155.034	9.818	.001
In Groups	4974.000	315	15.790		
Total	5284.069	317			

The results shown in Table 7 represent the ANOVA results for drug abuse according to the Southern Zone rehabilitation centres. The results indicate that the F statistic value is 9.818 while the degrees of freedom (df) are (2, 315) with a significant value obtained of .001, which is less than the significance level of .05. Therefore, the findings indicate a significant difference in drug abuse according to the rehabilitation centres ($F(9.818) = .001, K < .05$). Thus, this hypothesis is accepted.

These findings are in line with the statistics released by the National Anti-Drug Agency (2024), which indicate a difference in substance abuse rates and drug addicts in the Southern Zone. The statistics show that the number of drug addicts in Melaka is 6 957, while in Johor, it is 18 707. For Negeri Sembilan, the number stands at 6,648 people. This also aligns with the findings by the National Anti-Drug Agency (NADA) reported in Berita Harian Online (2016), which revealed that there are 14 areas classified as the most critical drug zones in Malaysia. Among these is Johor. However, Melaka and Negeri Sembilan are not included in the critical category. This further reinforces the findings that there is a difference in drug abuse tendencies according to rehabilitation centres in the Southern Zone. According to NADA, the factors of fishing village communities in Johor and proximity to Singapore also contribute to the high rates of drug abuse in Johor compared to Melaka and Negeri Sembilan.

Conclusion

In summary, this study examines the influence of spiritual intelligence on substance abuse according to rehabilitation centres in the Southern Zone. The findings indicate that there are differences in spiritual intelligence based on the rehabilitation centres. This is likely due to the varying treatment approaches, rehabilitation programs, and the influence of social support present in each rehabilitation centre. According to Koenig (2019), religious therapy and moral support from various rehabilitation centres may correlate with a higher level of spiritual intelligence among their residents. Furthermore, the study's findings indicate that factors related to drug abuse also show variation based on the location of the rehabilitation centre.

This could also suggest that differences in treatment effectiveness influence the residents. Rehabilitation centres that employ a holistic approach (combining psychological, spiritual, and medical treatments) may be more effective in reducing addiction (Miller, 2021). This study can help understand the extent to which differences in rehabilitation centres affect levels of spiritual intelligence and the effectiveness of treatments for substance abuse. The results can be utilized to formulate policies or enhance more holistic rehabilitation programs. This study also provides various impacts on multiple stakeholders, including researchers, rehabilitation institutions, policymakers and society.

In this study, The Theory of Spiritual Intelligence by Zohar and Marshall (2000) provides a relevant theory to understand the relationship between spiritual elements and the tendency towards drug effects. This theory introduces the concept of Spiritual Quotient (SQ) as a form of intelligence that assists the use of IQ and EQ in decision-making, especially when facing life pressures and moral dilemmas. In the context of rehabilitation centre residents who often struggle with inner conflicts, a loss of life meaning and spiritual emptiness, spiritual intelligence may serve as an internal protective mechanism that helps rebuild their identity and reduce the tendency to relapse into substance abuse. Therefore, this study has the potential to contribute to psychological knowledge by highlighting the spiritual dimension as a meaningful form of intelligence in addiction recovery and reinforcing the need for intervention approaches that integrate spiritual elements as a source of inner healing.

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