Reselience in Vulnerable Zones: A Study of Protective Factors in Drug Free Communities

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Abstract

Substance or drug abuse remains one of the most critical threats to national well-being. A key factor contributing to the failure of maintaining abstinence among affected individuals is the lack of social support from the surrounding community. Furthermore, most existing prevention models are adopted from Western contexts, which often do not align with the local cultural and social realities in Malaysia. This highlights the urgent need to explore alternative, locally grounded strategies that incorporate protective and spiritual elements practiced within resilient Malaysian communities. This study aims to investigate and identify the protective and spiritual factors embedded within communities that have successfully remained drug-free despite residing in high-risk areas. Through in-depth interviews conducted with community leaders, youths, youth leaders, and spiritual leaders, this research explores the resilience and preventative practices upheld by these individuals and groups. The findings of this study contribute to the development of a psychospiritual-based prevention module that is culturally relevant and rooted in Malaysian values and community practices. These emerging themes serve as a foundation for conceptualizing a prevention model that can be applied to other communities at risk.

Keywords: Protective Factors, Drug Abuse, Resilience, Prevention, Spirituality

Introduction

Substance abuse remains a persistent public health issue in Malaysia, especially in areas identified as hot spots by the National Anti-Drug Agency (AADK). These locations are often marked by poverty, social fragmentation, and high exposure to drug availability and usage. Despite the establishment of Malaysia's National Drug Policy in 2004 with the vision of becoming a drug-free nation by 2015, the issue of drug abuse remains a significant threat to national stability and social cohesion. Now, ten years beyond the targeted year, the Malaysian government continues to battle the persistent challenge of substance abuse. According to AADK, there were 145,526 individuals recorded as drug users in 2023 representing a 32.5 percent increase compared to the previous year (Channel News Asia, 2025). Alarmingly, more than 50 percent of the reported cases involve youth, with 118,820 new drug cases recorded in just the first half of 2023 alone (The Malaysian Insight, 2023). These statistics highlight the

critical need for preventive interventions especially in community settings where individuals are exposed to elevated drug-related risks.

Youth remain particularly vulnerable, accounting for more than 50 percent of reported addiction cases during the first half of 2023 (Malaysia Addiction Report, 2024). Studies focusing on protective factors among Malaysian communities reveal that spiritual and knowledge-based themes represent 32.6 percent of the protective elements identified, while awareness of the dangers of drug abuse accounts for 30.06 percent (Lim et al., 2022). The increasing relapse rates and complexity of addiction trends in Malaysia further complicate prevention and treatment efforts (Tan et al., 2024). State-wise data from AADK's 2020 report provides a detailed breakdown of substance abuse prevalence and demand, emphasizing the need for targeted interventions (AADK, 2020). Additionally, earlier studies estimate that approximately 9.25 percent of Malaysian adolescents have engaged in substance use, underscoring the importance of early prevention (Lim et al., 2022). Overall, these statistics demonstrate the critical need for comprehensive strategies focusing on prevention, treatment, and rehabilitation to address the growing challenge of drug abuse in Malaysia. This rising trend has placed a substantial financial burden on the government, particularly with youth being the critical demographic for national productivity. Drug involvement among youths contributes to increased criminal activity, greater demands on law enforcement, and rising healthcare and social welfare costs ultimately impacting the nation's economic development.

Despite substantial investments in treatment and rehabilitation, much of Malaysia's current drug policy still emphasizes reactive strategies rather than proactive community-based prevention. Existing programs such as the Perangi Dadah Habis-habisan (PDH) campaign, tend to focus either on individuals or families in isolation, and very few adopt integrated or holistic approaches. A shift in perspective from focusing solely on communities at risk to those that remain resilient despite living in high-risk environments may offer fresh insights in the fight against drug abuse. Understanding the protective factors that enable certain individuals and communities to remain drug-free, even when exposed to high-risk conditions, could reveal key components of resilience that are currently underutilized in national prevention efforts. Moreover, prevention strategies grounded in spiritual or psychospiritual frameworks remain underexplored in the local context (Wazir et al., 2019). There is limited published evidence evaluating the effectiveness of community-driven and faith-based prevention efforts, particularly those tailored to Malaysian cultural and religious values.

This study seeks to fill this gap by examining communities within hot spot areas that have remained resilient and drug-free despite environmental vulnerabilities. Specifically, it explores the internal and external protective factors including spiritual values, self-assertiveness, prosocial peer influence, and strong family support that help youth resist drug involvement. By identifying the attributes and practices that contribute to drug-free resilience, this study aims to inform the development of a culturally relevant prevention module. Such insights are vital for academics, policymakers, and community leaders seeking sustainable and localized strategies to combat substance abuse in Malaysia.

Problem Statement

Drug abuse remains a critical public health challenge globally, with prevention efforts often emphasizing treatment rather than proactive community-based strategies (UNODC, 2020). Existing prevention programs largely focus on individual or family interventions, frequently neglecting the broader community context and the integration of spiritual elements (Wazir et al., 2019). Research shows that protective factors such as strong family bonds, positive peer influences, and community cohesion play crucial roles in reducing substance abuse risk (SAMHSA, 2019; Walters, 2019). Spirituality and religious engagement have also been identified as significant protective factors, providing individuals with coping mechanisms, moral guidance, and resilience against drug use (FSSA, 2023; Dalimunthe et al., 2021).

However, in Malaysia, there is a paucity of evidence on the effectiveness of psychospiritual prevention modules tailored to local cultural and community contexts (Wazir et al., 2020). Most programs implemented by agencies like the National Anti-Drug Agency (AADK) focus on awareness but lack comprehensive approaches integrating family, community, and spirituality holistically. This gap underscores the necessity for new, culturally relevant prevention models that leverage protective and spiritual factors practiced by resilient communities in high-risk "hot spot" areas.

By identifying and incorporating these factors into a community-based prevention module, it is possible to enhance youth resilience, promote abstinence, and reduce drug abuse prevalence. This approach aligns with ecological models of prevention, emphasizing multi-level protective influences from individual to community (Bronfenbrenner, 1979), and offers a promising direction for Malaysia's ongoing efforts to combat substance abuse.

Literature Review

Protective Factors

Protective factors are conditions or attributes in individuals, families, communities, or larger social contexts that reduce the likelihood of negative outcomes or buffer the impact of risk (SAMHSA, 2019). They are not the simple absence of risk, but active supports that promote adaptive functioning and resilience (SAMHSA, 2019). In the domain of substance abuse, resilience is conceptualized as maintaining abstinence or avoiding initiation of use despite exposure to risk (Calpe-López et al., 2022). In etiological models such as diathesis–stress, protective factors can counteract stressors and reduce the probability of transitioning toward pathology like substance use (Ingram & Luxton, 2005). Given that many prevention frameworks are adapted from Western settings, there is a growing recognition of the need to understand locally embedded protective factors in communities with high-risk exposure but low incidence of drug use. The Communities That Care model, for instance, emphasizes the role of community-driven prevention planning by targeting locally relevant protective factors (Hawkins & Catalano, 2004).

Protective Factors at the Individual Level

At the individual level, various traits and competencies have been consistently identified as key contributors to resilience against substance abuse. Self-efficacy and an internal locus of control enable youth to believe in their ability to make independent choices and resist peer pressure (Hawaii Substance Abuse Prevention, 2024). A positive future orientation, including clear goal-setting and motivation, has also been linked to lower rates of substance use

(recoveryanswers.org, 2023). Additionally, adaptive coping mechanisms such as emotional regulation, problem-solving, and stress management play a crucial role in helping individuals navigate adversity without turning to harmful substances (Mental Health First Aid, 2022). Personal spiritual or religious commitment further strengthens resilience by providing meaning, moral direction, and emotional support through faith-based values and practices (FSSA, 2023). Collectively, these individual protective factors help youth remain grounded in long-term values and less vulnerable to external pressures in high-risk environments.

Family and Relational Protective Factors
Family and relational protective factors have been widely recognized as some of the most influential buffers against substance abuse. Strong parental supervision, the establishment of clear rules, and consistent discipline significantly reduce the likelihood of substance use among youth by creating a structured and accountable environment (Hawaii Substance Abuse Prevention, 2024). Warm and trusting parent-child relationships further enhance resilience, as youth who feel emotionally supported and able to confide in their caregivers are less inclined to engage in risky behaviors (recoveryanswers.org, 2023). Open communication and active parental involvement also serve as protective mechanisms, allowing families to address challenges proactively and instill values that discourage drug use (Hawaii Substance Abuse Prevention, 2024). Furthermore, household stability and low levels of familial conflict contribute to emotional security, which supports adaptive behavior in high-risk settings. Together, these relational dynamics foster a supportive environment that promotes resilience and protects youth from the influence of substance abuse.

Community and Environmental-Level Protective Factors
Community and environmental-level protective factors play a crucial role in fostering resilience among youth, particularly in high-risk or "hot spot" areas. Resilient communities often demonstrate strong social cohesion and connectedness, where trust among neighbors and collective efficacy help discourage deviant behaviors and reinforce shared responsibilities (SAMHSA, 2019). Positive community norms that reject drug use often supported by religious institutions and local leaders create a social environment where substance abuse is culturally and morally discouraged (UTCourts, n.d.). Access to structured activities such as youth programs, sports, cultural events, and volunteering opportunities further provides youth with meaningful engagement and alternatives to risky behaviors (SAMHSA, 2019; HIDTA, 2021). In many settings, faith and spirituality-based resources like mosques, churches, and spiritual centers offer moral guidance, mentorship, and emotional support that bolster protective values. Moreover, the availability of accessible social services including counseling, family support, and community outreach programs helps buffer environmental stressors. Finally, communities with effective law enforcement and limited access to drugs reduce exposure and temptation, further strengthening the resilience of their members (Hawaii Substance Abuse Prevention, n.d.; UTCourts, n.d.). Together, these structural elements create a nurturing and protective environment that deters drug initiation and reinforces pro-social behavior.

To conclude, in high-risk contexts, protective factors must be strong enough to overcome elevated pressures. Calpe-López et al. (2022) articulate how resilience to social stress influences vulnerability to drug reward mechanisms in which individuals with more active coping strategies and fewer depression-like symptoms show greater resistance to

substance-related rewards. Their review underscores that internal protective traits and social support synergistically modulate stress and addiction pathways. Empirical studies, such as those analyzed in Facing Addiction in America, reveal that bonding to family, school, community, recognition for positive behavior, and healthy behavior norms are among major protective factors correlated with reduced adolescent substance initiation (Substance Abuse and Mental Health Services Administration, 2016).

Research Objectives and Hypotheses
This study is grounded in the etiological theory of drug abuse, which posits that an increase in protective factors corresponds to a decreased risk of drug abuse within a community. The research aims to explore the protective factors actively practiced by communities that remain unaffected by drug-related issues, despite residing in high-risk areas. Concurrently, the study seeks to identify the spiritual elements embedded in the daily lives of these communities that contribute to their resilience against drug abuse.

Furthermore, this research will develop a self-prevention model for drug-free youth communities, informed by the findings from focus group discussions conducted with relevant stakeholders. The study also aims to conceptualize how these protective and spiritual factors can be effectively integrated into a psychospiritual module tailored to the Malaysian context. Ultimately, this research will assess the potential of this module in enhancing prevention efforts and mitigating the threat of drug abuse among youth.

Methods
Research Design
This research adopted a multiphase design, with Phase 1 dedicated to identifying the foundational needs for developing a community-based psychospiritual prevention module. This phase aimed to explore protective and psychospiritual factors among individuals in high-risk drug areas who remain uninvolved in substance abuse, thereby informing the model's conceptual framework. Phase 1 comprised two main stages which are; (1) Quantitative Stage and (2) Qualitative Stage. In quantitative stage, a structured survey was administered to 48 youth residing in areas identified as high-risk for drug abuse by the relevant authorities. These individuals had no history of drug use, and their participation aimed to reveal the protective factors that contribute to maintaining a drug-free lifestyle despite their environment. The data collected helped identify key variables for inclusion in the prevention model. Meanwhile in qualitative stage, it involved semi-structured interviews with a total of nine participants in which, three youths from high-risk communities (but not involved in drug abuse) and six professionals with expertise in drug prevention and rehabilitation. The purpose was to gather in-depth insights into the community, familial, and spiritual dynamics that act as protective factors. These qualitative findings complemented the survey results and added depth to the model development.

The needs assessment conducted in this phase was integral to identifying relevant themes and constructs for the module. It focused particularly on the psychospiritual resilience and community-level strengths among families, youth leaders, and local community figures. Data collection methods included interviews, direct researcher observation, and document analysis. The findings from this phase formed the foundation for the initial draft of the psychospiritual module to be developed in Phase 2. The Sidek Module Development Model

(2005) was selected as the guiding framework for module construction, beginning with the translation of assessed needs into structured components of the intervention.

Sample and Research Location
The study population comprises individuals from selected high-risk areas for drug abuse as identified by the National Anti-Drug Agency (NADA, 2017) across Malaysia. These populations are clustered into five zones, namely: (1) North, (2) South, (3) East Coast, (4) Central, and (5) East Malaysia (Sabah and Sarawak). The research anticipates conducting interviews with approximately 200 respondents, including families, community members, community leaders, youth, and youth leaders residing within these high-risk zones.

For Phase 1, the study employs a purposive sampling technique, also referred to as judgment sampling, which involves the deliberate selection of individuals or groups who possess specific knowledge or experience related to the phenomenon under investigation (Creswell & Plano Clark, 2011). The inclusion criteria for Phase 1 participants are: (1) youth who are not involved in drug abuse, and (2) individuals who have resided in the high-risk area for five years or more. The selection of families, community leaders, and youth leaders in this phase is based on their demonstrated resilience and resistance to the pervasive issue of drug abuse in their respective communities.

Data Analysis
For Phase 1, the data analysis process involved both quantitative and qualitative approaches, depending on the nature of the data collected. The quantitative data were analyzed using the Statistical Package for the Social Sciences (SPSS) Version 23. This software facilitated the generation of descriptive and inferential statistics, which provided an overview of respondents' profiles and identified patterns relevant to protective factors in drug-free communities.

Meanwhile, the qualitative data obtained through interviews, observations, and document analysis were subjected to thematic analysis. This process involved transcribing the data, followed by identifying, categorizing, and coding key themes based on the frequency and consistency of responses. The emerging themes were interpreted to uncover meaningful insights into the lived experiences of individuals and communities who have remained resilient against drug abuse despite residing in high-risk areas.

Results and Discussion
Results
The subject's characteristics included age, weight (BW), height, and BMI, as indicated in Table 1. The results of the independent sample t-test analysis ($p < .05$) show that there was no difference ($p > .05$) in terms of age ($p = 1.00$), BW ($p = .98$), height ($p = .75$), and BMI between groups control and trial ($p = .94$). These findings show that there is no difference in the characteristics of each research subject between the control and trial groups; thus, the two groups can be compared because they have similar characteristics or homogeneous. The table below shows the pre-and post-test results between the control and experiment groups. The results indicate the effectiveness of the prevention module after being tested on 66 respondents divided into experiment and control groups.

Table 1

Internal an External Protective Factors of Participants

Theme			f	%
Protective factors	Internal factors	Knowledge and spiritual elements practice	103	32.60
		Knowledge about the dangers of drugs	95	30.06
		Positive friends influence	76	24.05
		Self-assertive	42	13.29
	External factors	Choosing friends skill	38	42.22
		Positive family influence	39	43.33
		Stay away from the drug ports	13	14.44

Knowledge and Spiritual Elements

Majority of the respondents (32.60%) are saying that knowledge and their spiritual element practice are one of the internal protective factors that help them avoid from taking drugs.

Youth

'The second thing I would recommend is religious education, particularly in terms of spirituality or spiritual development.' (Y-KL-7)

'Yang kedua yang saya boleh recommend adalah dari segi agama, pedidikan dari segi spiritual atau rohani' (Y-KL-7)

'For me, those things act as protective factors that keep us from doing forbidden acts. Once we perform prayers, recite the Quran, and know what is right, it guides our actions.' (Y-J-6)

'kalau untuk saya, orang kata benda tu macam pelindung faktor untuk kita tidak buat perkara perkara yang terlarang. Bila dah solat, mengaji, dah tau benda benda elok' (Y-J-6)

'This goes back to the earlier point on psychospiritual elements, specifically religious values, meaning the religious education within ourselves. We need to increase our learning, whether it's religious knowledge or staying informed about current issues, as both can help keep us away from such negative influences.' (Y-K-2)

'Selepas itu berbalik pada psikospiritual tadi iaitu nilai agama maksudnya didikan agama dalam diri kita. Kita kena memperbanyakkan pelajari tak kisah la ilmu agama ka, tahu dari isu-isu semasa pun satu cara kita boleh dijauhkan dari benda-benda yang macam itu' (Y-K-2)

Youth leader

'Able to listen to past experiences and has also taken the initiative to learn, at least to some extent, about drug abuse.' (YL-KT-3)

'dapat mendengar lah daripada sebelum-sebelum ni dan juga pernah mengambil tahu sedikit sebanyak tentang penyalahgunaan dadah' (YL-KT-3)

'One's own personal factor is religious belief, specifically the Islamic faith.'
(YL-KL-4)

'faktor diri sendiri adalah pegangan agama, pegangan agama Islam.' (YL-KL-4)

'Then, from the internal aspect, we can see that some say it's due to a lack of religious education.'(Y-J-2)

'Aa lepas tu dari segi dalaman pun kita lihat aa ada yang mengatakan kurang didikan agama.' (Y-J-2)

Knowledge about the Dangers of Drugs
Knowledge about the dangers of drugs is the second most answers (30.06%) as the internal protective factors among the respondent that stayed away from taking drugs.

Youth
'One of them is our own understanding, why that thing (drug use) is bad.' (Y-KT-8)
'Salah satunya adalah kefahaman kita sendiri lah, kenapa benda tu buruk' (Y-KT-8)

'So when we already know what's good and bad, that becomes a guideline in our life development.' (Y-KT-9)
So bila kita tahu dah apa yang baik dan buruk, benda tu akan jadi guideline dalam perkembangan hidup.' (Y-KT-9)

Youth leader
'Think about the negative effects or impacts of taking drugs. It affects health, emotions, and even the brain.' (YL-KL-1)
'pikir apa itu kesan negative ataupun impak negative sekiranya menghisap dadah. Menjejaskan kesihatan nanti emosi jadi otak pun terjejas semua tu' (YL-KL-1)

"I already know that it's something dangerous, people say it harms and destroys ourselves." (YL-KL-2)
'saya dah tahu benda tu memang orang kata apa berbahaya untuk diri merosakkan diri kita sendiri' (YL-KL-2)

"Okay, one factor in staying away from drugs is understanding that drug abuse is wrong. Secondly, we know the health impacts and prohibitions. Harming oneself is forbidden in religion." (YL-J-3)
Ok aa faktor jauhi dadah lah. Satu kita faham bahawa penggunaan penyalahgunaan dadah itu salah. Kedua kita boleh tahu aa kesihatan lah dan larangan. Memudaratkan diri seseorang itu adalah dilarang dari segi agama lah.' (YL-J-3)

Positive Friends Influence
Positive friends influence has become the third highest (24.05%) as one of the internal protective factors that has contribute to the respondents from taking the drugs.

Youth
*"I'm A**** N******. The main reasons I didn't get involved with drugs are the factors already mentioned, parents and friends." (Y-J-4)*
'Ok aa saya A**** N*****. Dan untuk faktor tak terjebak dengan dadah aa faktor tadi semua dah sebut kan ibu bapa, kawan-kawan.' (Y-J-4)

"For me, it's the neighborhood and friends. Thankfully, my area is mostly Malay Muslim, many are teachers, and none of my friends are involved with drugs or even smoking." (Y-K-1)

'kalau saya, boleh dikatakan kawasan kejiranan itu lah dan kawan-kawan lah. Kawasan kejiranan saya tu Alhamdulillah yang pertamanya Melayu Islam dan kedua kebanyakkan orang kerja-kerja cikgu kebanyakkan dekat taman itu dan Alhamdulillah kawan-kawan memang tak ada yang terlibat dengan dadah, rokok pun payah lah nak jumpa' (Y-K-1)

"How I stayed safe might be because, like S***** and L***** said earlier, I chose my friends wisely." (Y-K-3)

'Aaa,, macam mana boleh terselamat itu mungkin salah satunya sebab aaa macam S***** dan L***** ada cakap tadi lah, sebab salah memilih kawan' (Y-K-3)

Youth leader
"When we're in a positive group, meaning people who always encourage us."
(YL-KL-3)

'So bila kita duduk dalam kelompok yang positif kelompok yang positif lah maksudnya yang sentiasa memberi semangat' (YL-KL-3)

"Secondly, peer influence is important. If someone is surrounded by positive people and a good environment, they won't get involved with drugs." (YL-J-1)

Yang kedua saya nak highlightkan dekat sini, yang kedua adalah rakan sebaya. Rakan sebaya ni kita ambil kira faktor environment ataupun keadaan sekeliling seseorang tu. Kalau keadaan seseorang tu memang dikelilingi oleh orang yang betul-betul positif, betul-betul ok memang dia tak akan terjebak lah dengan dadah.' (YL-J-1)

"Thirdly, the influence of friends matters. If friends encourage good behavior and don't lead to bad habits, a person won't fall into drug use or wrongdoing." (YL-J-4)

'Yang ketiga adalah pengaruh rakan. Sekiranya daripada pengaruh rakan ni membawa kepada kebaikan dan tidak aa mengajak kepada keburukan, so dekat situ orang yang ingin menjerumuskan dirinya ke arah dadah ataupun perkara-perkara yang mungkar, dia akan dia akan tidak sekali-sekali untuk berbuat sedemikian.' (YL-J-4)

Self-Assertiveness
The fourth internal protective factors that help respondents from taking drugs is their self-assertiveness with 13.29% compared to other protective factors.

Youth
"If I say no, I really won't take it." (Y-KT-2)
'kalau saya cakap tak nak memang saya tak akan ambil.' (Y-KT-2)

"It's like our inner strength." (Y-KT-8)
'Macam kekuatan dalaman kita lah.' (Y-KT-8)

"Why waste a lot of money just for something so small?" (Y-KL-1)
'Buat apa kita perlu membazir duit yang banyak sekadar untuk benda sekecil tu.'
(Y-KL-1)

Youth leader
"Discipline is very important." (YL-KL-1)
So saya rasa disiplin itu sangat important lah sangat penting.' (YL-KL-1)

"We must control ourselves; our faith needs to be strong." (YL-KL-2)
'So kita lah, kita kena kawal diri kita sendiri iaitu iman kita kena kuat lah' (YL-KL-2)

"A strong personal commitment to avoid drug abuse." (YL-KL-4)
'pegangan diri untuk menjauhi dadah, penyalahgunaan dadah' (YL-KL-4)

In conclusion, from the results of the interview, researcher concludes that knowledge and spiritual elements practice and knowledge of the dangers of drugs are the internal factors that prevent the youth community from involving in the drug abuse and substances.

Positive Family Influences
Meanwhile, the following is for the external protective factors majority (43.33%) of the respondents said that having positive family influences help them stay away from taking drugs.

Youth
"My family, because no one is involved with drugs." (Y-KT-2)
'Family saya sebab tak ada seorang pun yang terlibat dengan dadah' (Y-KT-2)

"Family is the strongest support." (Y-KT-5)
'lagu mana saing situ, lepas tu family sendiri lah.' (Y-KT-5)

"A good family environment is a protective factor." (Y-KT-8)
'Persekitaran family, family yang baik itu adalah faktor pelindung.' (Y-KT-8)

Youth leader
"At home, starting from the home itself, according to AADK, their program also has drug prevention programs beginning from the home." (YL-KT-1)
'Di rumah, bermula dari rumah lagi, kalau mengikut AADK pun, dia punya program pun, dia ada buat program pencegahan dadah bermula dari rumah.' (YL-KT-1)

"Education from an early age actually, and this role is not only played by educators but also by the family institution." (YL-KT-2)
'Pendidikan daripada kecik lagi lah sebenarnya, dan peranan ni bukannya dimainkan oleh pihak tenaga pengajar sahaja tetapi jugak dimainkan oleh peranan institusi keluarga.' (YL-KT-2)

"Okay, good. I want to share a little, I am N**** N****, chairman of GAMIS Johor. The factor that can cause us to stay away from drugs, I see among the factors is first, the family itself. Meaning family education." (YL-J-1)
'Ok baik. Saya nak kongsi sikit, saya N**** N**** pengerusi GAMIS Johor. Faktor yang boleh menyebabkan kita ni jauhi dadah saya nampak antara faktornya adalah yang pertama adalah keluarga tu sendiri lah. Maksudnya didikan keluarga' (YL-J-1)

Choosing Friends Skills
The second highest (42.22%) for the external protective factors is their skills in choosing friends which really help them to stay away from drugs

Youth
"There are friends who are okay and good, so I think we can avoid these things."
(Y-KT-6)
'Ada member member yang okay dan baik kan, soo saya rasa bende ni kita boleh elak' (Y-KT-6)

"Me too, friends as well." (Y-KT-5)
'Saya pun sama, kawan jugak' (Y-KT-5)

"Need to find friends who are really good when you are away from your parents." (Y-KT-7)
'kena cari kawan yang betul betul bila dah jauh dengan ibubapa.'' (Y-KT-7)

Youth leader
"The way, okay, the first way to protect yourself from drug addiction is first, don't make friends with people who are involved in drugs." (YL-K-2)
'Cara eh, okey yang pertamanya cara melindungi diri dari penagihan dadah ini ialah yang pertama jangan berkawan dengan orang yang terlibat' (YL-K-2)

"Okay, my opinion is, the environmental factor, the people around us, is the most important. Because, yes, if we choose the wrong friends…" (YL-S-4)
'Ok aa bagi pendapat saya, aa faktor lingkungan lah orang sekeliling tu paling penting. Sebab aa ya kalau kita tersalah pilih kawan' (YL-S-4)

"The surrounding factor is who we choose to be friends with." (YL-S-4)
'faktor sekeliling daripada dengan siapa kita berkawan' (YL-S-4)

Staying Away from Drug Ports
The last external protective factors which is the minority (14.44%) of the respondents saying that staying away from the drug ports also help them from taking the drugs.

Youth
We need to put more effort into getting information about drugs like where the hotspot areas are, which places are the most dangerous and have the most drug-related activities. (Y-K-5)

'Kita kena lebihkan usaha dapatkan info pasal dadah ni semua, kawasan hospot dekat mana yang paling bahaya dan banyak aktiviti tu' (Y-K-5)

Youth leader
'The third point is to avoid such places. If we know that a certain place is associated with drugs for example, even just a food place, we should try to avoid it as much as possible. (YL-J-3)

'Lepas tu yang ketiga aa menjauhi lah. Sekiranya ada tempat-tempat kita boleh tahu benda itu dekat dengan dadah contoh macam makanan, kita cuba elakkan lah sebanyak yang boleh.'
(YL-J-3)

In conclusion, from the results of the interview, researcher concludes that choosing friends skills and positive family influence are the external factors that prevent the youth community from involving in the drug abuse and substances.

Discussion

All the above analyses reveal key categories, themes, and concepts that emerged from the data. Table 4.1 presents both internal and external protective factors identified within communities residing in hotspot areas. According to Ismail et al. (2017), communities in these high-risk environments are especially vulnerable to negative behaviours such as substance abuse. However, some youth demonstrate resilience and manage to thrive despite these risks. A large portion of the protective factors identified relate to knowledge and the practice of spiritual values. Out of 306 themes, 103 (32.6%) were linked to these two elements, with a strong emphasis on spiritual practices, particularly the consistent performance of obligatory prayers. This act is seen as central to fostering self-discipline and spiritual connection. Prayer is described in the Qur'an as a means to prevent immoral and harmful behaviour, as noted in Surah Al-Ankabut: "Recite what has been revealed to you of the Book and establish prayer. Indeed, prayer prohibits immorality and wrongdoing, and the remembrance of Allah is greater. And Allah knows that which you do" (Qur'an, 2006, 29:45).

Participants emphasized that consistent practice of religious knowledge is key to preventing substance abuse, as it shapes positive personality and behavior. Dedicated prayer, seen as a sincere act of devotion, nurtures the soul (Yusoff et al., 2018), while being religious is linked to improved self-confidence, spiritual strength, and self-concept (Wazir, 2018; Dalimunthe et al., 2021). Additionally, 95 themes (30.06%) highlighted participants' knowledge about the dangers of drug abuse as a protective factor. Their awareness, influenced by witnessing the consequences in their surroundings, motivates them to avoid such behaviors. Educational initiatives, like NADA's outreach to over 26,000 students in 2019, reinforce this knowledge, demonstrating the vital role of awareness in shaping youth attitudes toward drug use.

Positive peer influence emerged as a major protective factor, making up 24.05% of responses, highlighting its strong role in shaping individuals' attitudes and behaviors toward drug use. Participants intentionally build friendships that foster a supportive environment, helping them stay away from drugs. With over half of drug users (50.6%) reporting peer influence as a factor in their addiction (NADA, 2019), promoting healthy peer relationships is crucial. Additionally, self-assertiveness accounted for 13.29% of responses, reflecting its importance in helping individuals resist pressure from peers or family. Assertiveness builds resilience and supports decision-making that avoids risky behaviors. Studies show that low assertiveness is linked to reduced self-control and a higher tendency toward drug use (Messina, 2020; Vojoodi et al., 2014; Vagos & Pereira, 2016).

External protective factors such as choosing the right friends, positive family influence, and avoiding drug-related environments play a critical role in preventing substance abuse. Studies have shown that associating with peers who hold prosocial values helps reduce drug use and

delinquency (Walters, 2019). Supportive, kind, and understanding friendships serve as buffers against risky behavior, emphasizing the impact of peer selection on youth well-being. Positive family influence also emerged as a key theme, representing 43.33% of total responses. Early prevention through family or school-based interventions during adolescence is crucial in reducing the risk of drug misuse (Williams et al., 2016; Newton-Howes & Boden, 2016). These findings highlight the vital role of the family in shaping positive behaviors and guiding youth toward healthy life choices.

Data indicating that avoiding drug-prone areas accounts for 14.44% of total responses (13 out of 90 themes) highlights the role of environmental factors as crucial external protective measures against substance abuse. The presence of drug ports or easy access to substances increases the risk of exposure, especially among youth (Qiao et al., 2023; Degenhardt et al., 2016). Staying away from these high-risk areas helps reduce temptation and peer pressure, serving as a practical strategy for self-protection. This underscores the importance of physical and social environments in influencing behavior, showing that awareness of risky settings and actively avoiding them can significantly support prevention efforts.

Conclusion

This study provides valuable insights for academics, government agencies, and community leaders by emphasizing the effectiveness of strengthening protective factors within communities to improve prevention programs. These efforts enhance values, increase awareness of the dangers of drug abuse, and promote self-assertiveness among youth. The study contributes to scientific knowledge by demonstrating the important role protective factors play in preventing substance abuse. Specifically, enhancing these factors shows promise in reducing drug abuse among youth in high-risk areas.

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