

Drugs in the Family: The Reactions and Families' First Actions

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Abstract

Drug addiction is a social problem that has long been going on and affects individuals, families, communities and countries. At the national level, drugs are a serious threat to the extent that various actions and efforts are taken by various agencies either directly or indirectly. The public sees drugs as a problem to the local communities' harmony. The presence of drugs in a family institution draws various reactions and forces these families to take various precautions and actions to help save their family members from drug addiction. This study was undertaken in order to identify the reactions and early actions taken by families of drug addicts after finding out there is a drug addict among them. This study used qualitative methodology and data were collected through interviews and focus group interviews or *Focus Group Discussion* (FGD) involving 29 respondents conducted in 10 separate focus groups. The study found that mixed emotions are the initial reactions of the respondents and the measures taken by the respondent were to get alternative treatments. Although drug rehabilitation takes time and requires the commitment of the addicts themselves, it does not prevent the family from trying and find other alternatives to treat addicts for the sake of family ties and a sense of responsibility to save addicts.

Keywords: *Drugs, Family, Drugs in the Family, Reactions, Early Actions*

Introduction

The negative impact due to drug abuse has been widely discussed in various aspects; either individually, within a family, community, religion or country. This is because the issue of drug abuse is not a new issue debated in the country and is often discussed on the media as well as in research done in various fields including the sciences and social sciences. It is also common that most are well aware of the religious law and its punishment established by law on individuals who are involved in any immoral activities such as drug addiction, drug possession, drug dealing, drug trafficking and drug selling.

An individuals' addiction is often associated with factors such as broken family relationships, lack of communication and disharmonic family atmosphere. In short, negative surroundings within the family can become the cause that encourages addiction. This shows that most addicts come from an unsupportive family background thereby exposing them to immoral activities from the very beginning. Such situation reduces the tendency for the family to help assist the addicts throughout rehabilitation. An addicts' rehabilitation process requires collective effort from all family members due to the addicts' own failure to protect themselves from drug addiction. Early family actions are closely linked with their acceptance towards the addicts themselves and their addictions as well as the family's level of knowledge pertaining to drug addiction. Family acceptance also has something to do with the family's reactions upon discovering the negative element existing in their family.

This is due to the fact that drugs have become a social problem that plague the country and has spread since the early 1990s and continues to be the country's main social problem (Abdul Halim et al., 2009). Since the danger of drugs have often been discussed, drugs are seen as a nightmare to those whose family members are addicted, where sometimes there are families who cannot accept the fact that there are drug addicts among their family members due to societal stigma. There are also some who are affected by the news reported in the mass media about drug addiction, describing drug addiction as a serious offence that cannot be cured, and some lack knowledge about drugs and drug rehabilitation as well as how to treat and cure drug addicts in their family (Azizi, Mohd Najib dan Badrulzaman, 2006). This study, therefore, was conducted in order to identify the causes of addiction from the perspective of the addicts' family, the family's reactions upon learning about the existence of drug addicts among their family members and the early actions taken to overcome the addicts' addiction.

Methodology

This study used qualitative methods in which the study focused on identifying and understanding the experience of families with drug addicts in addressing the existence of drug addiction among their family members. Data were collected through focus group interviews (*Focus Group Discussions*, FGD) on 29 respondents in 10 separate FGD where respondents were selected using purposive sampling method. Respondents consisted of family members who are actively interacting with the drug addicts namely their parents, siblings, wives, grandparents and children. FGD were used in order to collect data from individuals who have a similar experience in handling and managing drug addiction in their family (Bryman, 2012).

The researcher acted as a moderator throughout the discussion and helped all the respondents to participate in the discussion and the advantage of using FGD in the data collection procedure was to help clarify the question or themes used in this study that cannot be explained through statistics. The data collected were compiled, translated into transcripts and sorted according to the themes of the study using the Nvivo8 software (Siti Uzairiah, 2014).

Results

The cause of addiction, family reactions and early actions identified are varied according to family. There are also families who have diverse opinions on the theme answers provided in this study.

Factors of Addiction

Four themes stated by the respondents when interviewed pertaining to the factors that caused their family member to become involved in drug addiction are as shown in Figure 1 below. Figure 1 shows the factors of drug addiction as stated by the respondents, from the perspective of their own family.

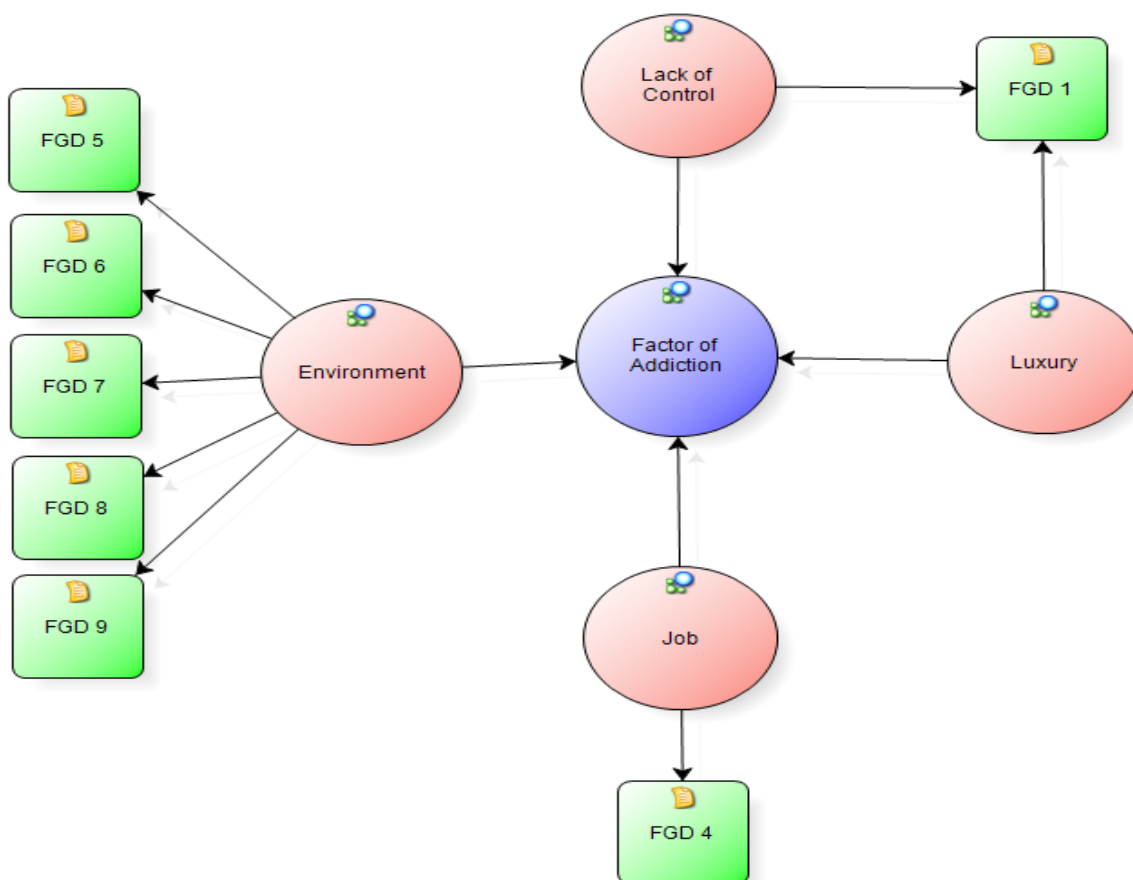


Figure 1: Factors of Addiction

The highest factor of addiction is the factor of environment or surroundings where the drug addicts such as FGD 5, FGD 6, FGD 7 and FGD 9 live. They were found to be living in neighborhoods where there were many drug addicts, known as *port*. FGD 8, on the other hand, lived in a black area, an area where there are many cases of drug addiction (high number of drug addiction cases). This finding suggests that an unhealthy environment or surrounding provides easy access for anyone to get drugs. The surrounding areas where these addicts live

also showed that peer influence is also one of the main reasons why they are addicted to drugs. This statement is supported by FGD 6, FGD 7, FGD 8 and FGD 9 where most of the addicts' friends often come to their homes when they are not allowed to go out or grounded from going out. This situation prompted the respondents to use other approaches such as preventing the other addicts' friends from coming over to their house and prevented them from mingling around. However, there are also some of the respondents who stated that there are times when these addicts went to see their friends outside of the house, and it is out of their control because the addicts are all grown ups and are difficult to handle particularly if they are beyond their watchful eyes. FGD 5, on the other hand, stated that their addicted family member became involved in drug addiction after working in Kuala Lumpur and said that the addict was influenced by workplace the environment. Other causes of drug addiction, according to FGD 1, is the luxury given to the addict after the addict decided to quit school. The respondent runs a transportation truck service and often goes back and forth across the Malaysian and Thailand and border earning as much as RM10,000 a month. On the basis of trust, the respondent gave one of his lorries to the addict for him to earn his own income. Luxurious life and lack of control by the addict, believing that he could take care of himself and manage his finances brought him to his addiction. The trust and freedom that he offered to the addict was misused and the respondent was only aware of the addict's condition after being told by a family friend.

Unlike FGD 4, the respondent stated that the addict decided to take drugs for the sake of relieving stress and boosting their energy. The respondent stated that the addict was a hardworking person and did many extra jobs. He decided to take drugs to help him complete all his jobs.

Family Reactions

The moments when a family knows that one of their family members are addicted to drugs brings about various reactions from other family members. Eight answer themes representing family reactions towards drug addicts include anger, shock, acceptance, frustration, sadness, feeling sorry, contented, and intimidated.

Anger is the main reaction among family members after knowing that one of them is addicted to drugs. The respondents from FGD 1 and FGD 5 stated that when they first knew about one of their family members' addiction towards drugs, they were angry because they could not accept the fact that the trust and freedom they gave to the addicts were betrayed. They were also angry because they could not believe that one of their family members was addicted to drugs. Respondents from FGD 9, on the other hand, believed that the anger was fueled thinking that the addicts had been problematic ever since they were young and still had issues up until the present when they are grown up which then leads to family breakups. The feeling of anger lasted up to now due to the addicts' own attitude – not wanting to change ever since they were first involved in drug addiction.

For FGD 2, FGD 3 and FGD 4, they stated that they were shocked when they found out about the addicts. FGD 2 stated that he/she only knew about the addict's addiction when he/she went

for a medical check-up at the local hospital claiming that he/she suffered a pain in the heart. However, after being informed the truth, the respondent was surprised that it was due to drug addiction. FGD 3 experienced the same thing where he/she is unaware of the addict's immoral activity outside of the house, but everything was revealed after the police raided their home for a motorcycle theft case, which surprised the whole family. It was after the incident that the respondent became well aware of the addict's drug addiction. FGD 4 also stated that he/she knew only about the addict when he/she was arrested by the police and the respondent also informed that it was shocking as the addict himself/herself is a well-educated person as well as a kind and obedient child.

Besides that, frustration is also one of the reactions shown by family members of drug addicts upon learning that there are drug addicts among them. FGD 4 stated that when they learned that there was a drug addict among them, their feelings were a mix of frustration and anger together. This was because the addict happened to be the backbone of the family and was expected to become an example for his/her other siblings. FGD 5 and FGD 10, on the other hand, the wives of the addicts, expressed their frustration once they learned about their husbands' immoral activities. The respondents only found out about their husbands' addiction after they got married, however, they thought it was the best to just accept what has been destined for them for the sake of their children.

FGD 8 and FGD 10, who had mixed feelings towards the drug addicts, however, still accepted the addicts as their family members. They accept the addicts with open arms in order to prevent these addicts from drifting apart. Other family reactions included sadness felt by FGD 6 because the drug addict is close with him/her and has good religious knowledge but is also plagued by drug addiction. Other reactions included feeling sorry, expressed by FGD 1. FGD 1 felt sorry that he/she had pampered the drug addict too much with luxury and did not keep an eye on him/her from the very beginning. FGD 10 said that he/she had to accept what was written for him/her upon learning that the addict was addicted to drugs but he/she also intimidated the addict to put some effort and change if they want their marriage to last.

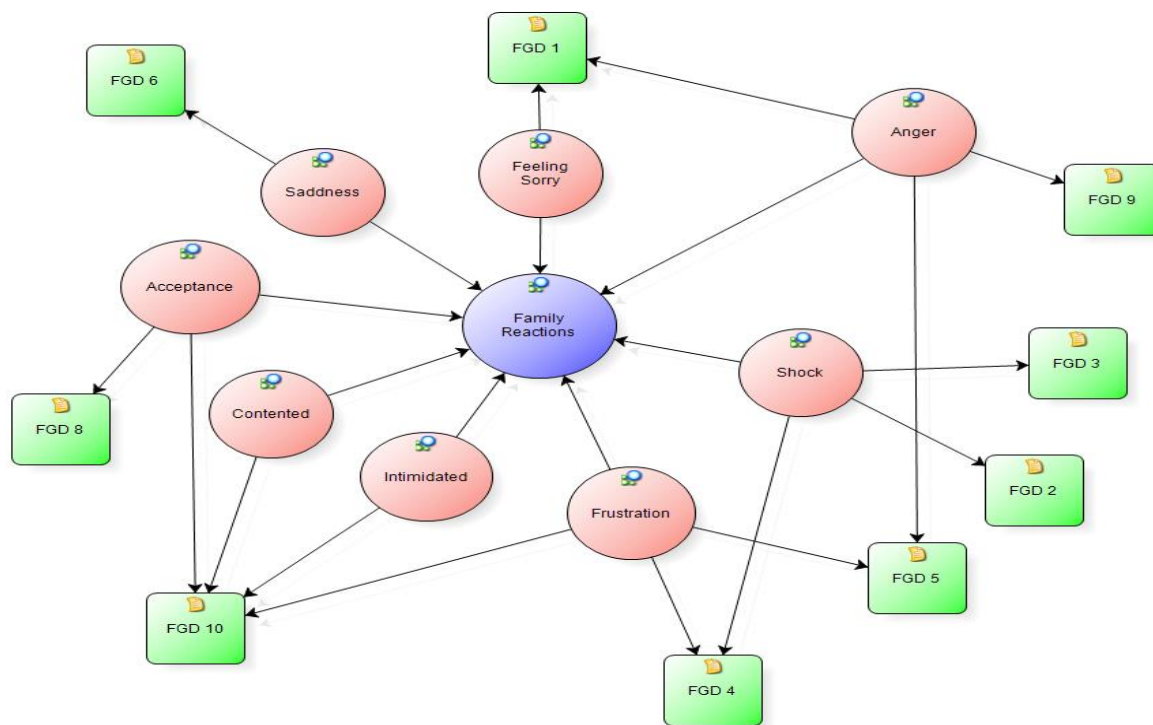


Figure 2: Family Reactions towards the Involvement of Addicts in Drug Addiction

Early Actions

Early actions are the actions or efforts taken by family members of addicts upon knowing the involvement of addicts in drug addiction. The first action taken by the families of drug addicts is to seek for alternative treatments as indicated by FGD 1, FGD 2, FGD 5, FGD 7, FGD 9 and FGD 10. The form of alternative treatment taken by these families is through healing water – plain water that is recited with verses of the Quran by reliable individuals who can help heal one’s sickness, such as religious teachers (locally known as *ustaz*) and *bomohs* who use Quranic verses in their treatment. The healing water will then be given to the addicts to drink. Should they refused to drink, according to FGD 2, he/she will add it in his/her cooking or choose not to tell the addict that the water is made to heal him/her. In addition to the alternative treatments from traditional treatment practitioners, FGD 2 and FGD 9 also tried to prepare their own healing water at home. FGD 2 stated that each of his/her family members will work together preparing the healing water after their obligatory or voluntary prayers. FGD 9 stated that he/she also provided healing water recited with *Surah Yaseen* by him/herself.

In addition to the alternative treatment, rehabilitation institutions such as rehabilitation centers using Islamic approaches have also become an option for FGD 2, FGD 7, FGD 9 and FGD 10 because they think that addicts should be put in a place specifically for treatment purposes. Rehabilitation institutions have their own specific discipline for the purposes of drug addiction recovery and are controlled by officers who have experience and knowledge in treating addicts. In addition, the selected rehabilitation institutions are also chosen to keep the addicts away from their addict friends and to prevent the drug addicts from getting their drug supplies.

Other actions taken by the families of drug addicts, according to FGD 6, include praying for the addict to change, FGD 3 often gave advice to the addict to quit his/her addiction, FGD 8 said they would spend more quality time with the addict so that he/she did not feel neglected or ignored by his/her family members, FGD 4 agreed to work together to send the addict to prison because they thought prison was the safest place for the addict to change. Lastly, FGD 10 stated that they would encourage the addict to take methadone as it is proven effective to cure and treat heroine addiction.

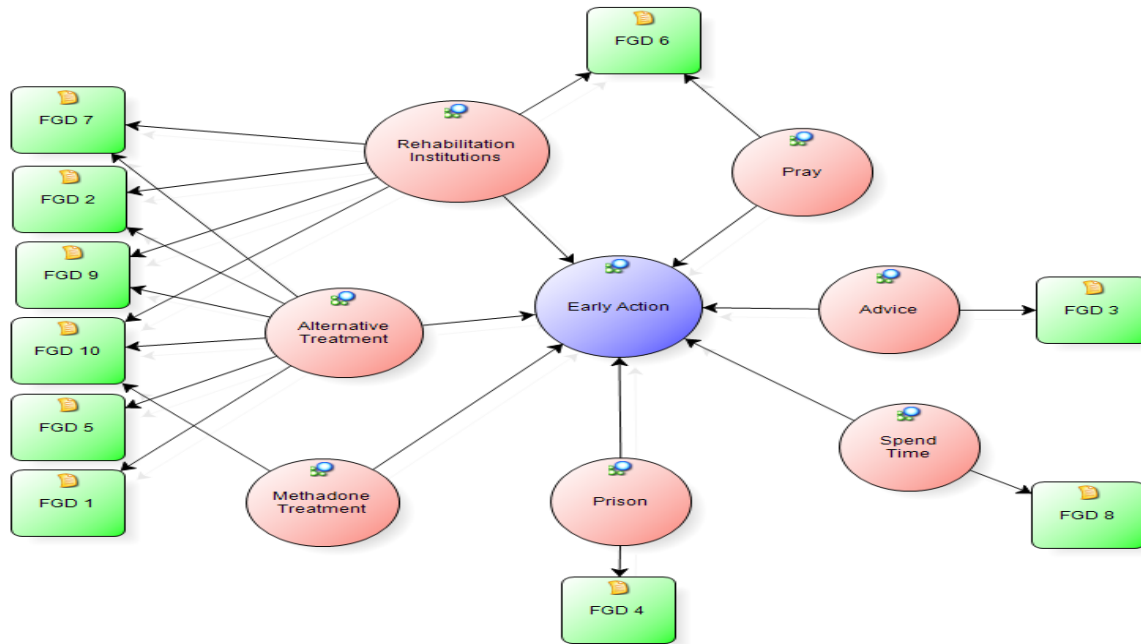


Figure 3: Early Actions towards Family Involvement in Drug Addiction

Discussion

Surrounding environment remains as the major factor that contributes to drug addiction, where peers and surrounding neighborhood areas where addicts are living, provide easy access for them to meet and mingle with other drug addicts. They are easily influenced and find it easy to get drugs (Foo, Tam & Lee, 2012). This is happening due to the fact that these drug addicts are exposed to a risky surrounding (environment) for a period of time, affecting them negatively by the surrounding areas they are living in (Hitchens, 2011). The surrounding areas where they live becomes a challenge to the respondents in controlling the addicts’ social lives since they are all grown ups and need to be outside of the house once in a while. The addicts often do their immoral activities in a closed space and have their own spot which makes it difficult for the other family members to limit the addicts' risk from drug addiction.

The involvement of a family member in drug addiction invites various emotions and reactions from the respondents when they figured out about the addicts’ addiction. Shocked, angry and disappointed are among the reactions shown by families of drug addicts because most of them could not believe the fact that there are drug addicts among their family

members. Drugs have been known to be a never ending social problem and in fact becomes a nightmare to many respondents due to the addicts' own failure to play their role as a good Samaritan, pestering the stability of their family up to breaking up their family ties. Drug addiction brings about these reactions from their family members, however, according to the respondents when they were interviewed, such reactions are not an excuse for them not to help the addicts take necessary measures and initiatives to free themselves from drug addiction.

Families' early actions showed the respondents' effort to finding a solution to drug addiction although most were angry, frustrated and shocked at the beginning. Six focus groups representing six families admitted that they sought alternative treatment such as healing water as a means of helping their addicted family members. This is an alternative treatment which is often used by the Malay community in the search for cures to diseases that cannot be treated using clinical methods. This treatment option is not new for the respondents because all of the respondents interviewed in this study live in rural areas. This type of treatment is taken as an alternative in addition to methadone maintenance treatment these opiate addicts are following at the governmental health clinics. This shows that the families of drug addicts are not dependent on one form of treatment only. Choosing the right rehabilitation institution such as an Islamic based rehabilitation institution is also one of the efforts taken by family members to help cure and treat drug addicts. These rehabilitation institutions are one of the alternative treatments chosen by family members to help cure drug addicts, however, these institutions are managed by the institutions themselves, not the family members and they have their own experts who have specific skills in curing and managing drug addiction recovery (Fadzli, Wan Ibrahim & Sudirman, 2011). Both initial actions taken by these families showed that alternative treatment is also an option by the respondents as compared to other rehabilitation centres because most of the respondents do not only want the addicts to be cured but they also want them to improve themselves, build personal strength and improve their relationship with Allah SWT. This can help them avoid a relapse after they have finished their treatment process at the Islamic rehabilitation institution.

Conclusion

Drugs have long been seen as a cancer in the society not only in this country but also in other countries, regardless of which tier in society it is spreading. Since this issue has long been discussed and debated, the public in general are well aware of the causes and effects of drug addiction. Drugs have become a nightmare for the families of drug addicts because the rehabilitation efforts taken to help cure their addicted family member is not easy and it also affects the family's lives, particularly with the stigma portrayed by their surrounding communities. Figuring out the factors of addiction and family reactions would influence the choice of actions taken by the families in order to help addicts overcome and cure their addiction in the early stages. It can be concluded that the challenges that families of drug addicts have to endure are the surroundings which could influence their addicted family member to fall into drug addiction. Although most families are annoyed with the addicts, they

still take necessary precautions and actions through alternative treatments in order to help treat and cure the addicts.

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References

Hussin, A.H., Subramaniam, V., Hussein, H., Mohamed, S., Yusoff, H., Woei, L.C. (2009). *Definisi Pengguna opiat dan Ketagihan Menurut Akta Pengguna Opiat Dadah (Rawatan dan Pemulihan) 1983 (Pindaan 1998) dan Akta-Akta Lain yang Berkaitan. Jurnal AADK.*

Bryman, A. (2012). *Social Research Methods 4th edition*. New York: Oxford University Press.

Tobi, S. U. (2014). *Qualitative Research & Nvivo 10 Exploration*. Kuala Lumpur: Aras Publisher.

Foo, Y.C., Tam, C.L., Lee, T.H. (2012). Family Factors and Peer Influence in Drug Abuse: A Study in Rehabilitation Centre. *International Journal of Collaborative Research on Internal Medicine & Public Health*. 2012; 4(3):190-201.

Hitchens, K. (2011). Addiction is a Family Problem: The Process of Addiction for Families retrieved from <http://www.lianalowenstein.com/addiction.pdf>

Adam, F. Ahmad, W.A.W & Fatah, S.A. (2011). Spiritual and Traditional Rehabilitation Modality of Drug Addiction in Malaysia. *International Journal of Humanities and Social Science Vol. 1 No. 14; October 2011.*

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