

THE THERAPEUTIC COMMUNITY AS A MODEL FOR SOCIAL REHABILITATION IN RESTORING THE SELF-CONFIDENCE OF RESIDENTS WHO USE ILLICIT DRUGS (A CASE STUDY OF THE JAKARTA CLASS IIA NARCOTICS CORRECTIONAL INSTITUTION)

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Abstract

Social rehabilitation is a process of restoring, developing, and rehabilitating an individual's social functioning; this process is one of the approaches used in addressing drug-related issues, specifically Demand Reduction. The implementation of the Therapeutic Community method as a community-based therapy is carried out at the Class IIA Jakarta Drug Rehabilitation Center. This study employs a qualitative research approach. The objective of this study is to examine the implementation of the Therapeutic Community program and the restoration of residents' social functioning in relation to their self-confidence. Essentially, humans require the support of others to effect change; the foundational theory of the Therapeutic Community draws upon behaviorism, which posits that individual change occurs through interactions with the environment, thereby leading to transformation within the individual. The Therapeutic Community applies the concept of a family, where each member bears responsibility for themselves and others—a principle known as “man help” or “mutual help.” In practice, the Therapeutic Community is guided by a counselor as a facilitator. Social functional recovery is also achieved through support from within the Therapeutic Community family and external support from families; these factors have a positive impact on the process of restoring residents' self-confidence.

Keywords: Social Rehabilitation, Therapeutic Community, Self-Confidence

Abstrak

Rehabilitasi sosial merupakan proses refungsional dan pengembangan dan pemulihan keberfungsian sosial dari individu, proses ini merupakan salah satu pendekatan dalam penanggulangan masalah narkoba yaitu Demand Reduction. Pelaksanaan metode Therapeutic Community sebagai terapi komunitas yang dilakukan di Lembaga Pemasarakatan Narkoba Kelas II A Jakarta, Penelitian ini menggunakan metode pendekatan kualitatif. Tujuan dalam penelitian ini guna mengetahui pelaksanaan Therapeutic Community serta pemulihan keberfungsian sosial residen terkait dengan kepercayaan diri dari residen. Hakikatnya manusia membutuhkan manusia lain dalam melakukan perubahan, teori dasar dari Therapeutic Community sendiri menggunakan teori behaviorisme yang dimana mengatakan bahwa perubahan individu terjadi melalui suatu interaksi antar lingkungan yang akan menimbulkan perubahan dari individu.

Therapeutic Community menerapkan konsep family yang dimana setiap anggota dalam family memiliki tanggung jawab atas dirinya dan orang lain atau disebut dengan man help, mutual help. Dalam pelaksanaanya Therapeutic Community juga didampingi oleh seorang konselor sebagai pendamping, pemulihan keberfungsian sosial juga didapat dari dukungan dari internal Family Therapeutic Community dan juga dukungan external dari keluarga, hal tersebut memiliki impact yang positif dalam proses pemulihan kepercayaan diri dari residen.

Kata kunci: Rehabilitasi Sosial, Therapeutic Community, Kepercayaan Diri

INTRODUCTION

Social rehabilitation is a process of reintegration and development aimed at restoring and enabling individuals to resume their social functions appropriately within society. The first rehabilitation center in Indonesia was established in 1971, following the issuance of Presidential Instruction No. 6 of 1971 to address national issues at the time, including the problem of drug abuse. Drug abuse is monitored by the UNODC (United Nations Office on Drugs and Crime). In its 2022 report, seizures of methamphetamine reported by member states showed a clear increase over the past two decades, continuing in 2020 with a 55 percent rise across 65 countries that reported methamphetamine trafficking ((UNODC), 2022). In Indonesia, according to the BNN report from 2019 to 2022, a total of 187,513,456 people aged 15–64 were exposed to drugs, with a prevalence rate of 1.80 percent in 2019 rising to 1.95 percent in 2021, with the majority of drugs consumed being cannabis (56.7%), methamphetamine (31.5%), and Koplo pills (6.3%) (National Narcotics Agency, 2022).

According to Law No. 35 of 2009, narcotics are substances or drugs derived from plants, whether synthetic or semi-synthetic, that can cause a decrease or alteration in consciousness, loss of sensation, reduction or elimination of pain, and can lead to dependence; such acts are classified as illegal offenses, and users will face criminal penalties commensurate with the criminal acts committed. Efforts to combat narcotics abuse must be carried out in a coordinated manner between law enforcement agencies and the government, and must involve the community in addressing narcotics-related issues, ranging from reducing the availability of narcotics to reducing the demand for narcotics among users. Pursuant to Law No. 35 of 2009, the Narcotics Law aims to ensure the regulation of medical and social rehabilitation efforts for drug abusers and addicts. In addition to self-improvement programs provided to inmates, rehabilitation programs must also be offered to inmates—particularly addicts and victims of drug abuse. Rehabilitation provided by correctional institutions can take the form of social or medical rehabilitation; one of the social rehabilitation programs is the Therapeutic Community method, which prioritizes social rehabilitation for drug-abusing residents to improve the quality of their social relationships within the community (National Narcotics Agency, 2004).

As a correctional institution specifically housing drug offenders, it does not merely provide training in self-reliance and spirituality; rather, the Jakarta Class IIA Drug Correctional Institution also employs treatment and medical care methods for drug users, particularly in addressing their drug dependence. The therapeutic community method is implemented through social group guidance, where a “family” is formed consisting of

individuals with similar issues and goals—namely, helping themselves and others—to facilitate a shift in inmates’ negative behavior toward a more positive direction. (Virginia, 2019). Self-confidence is essential for inmates as they reintegrate into society; the stigma surrounding former inmates in the community can lead them to feel inferior and withdraw from social environments. Gael Lindefield, in his translated book titled **Raising Children to Be Self-Confident**, defines self-confidence as a belief in one’s own abilities and self-assessment when performing tasks, including confidence in one’s ability to face increasingly challenging environments and trust in one’s own decisions or opinions (Lindefield, 1997). The author selected the Jakarta Class IIA Narcotics Correctional Institution as the research subject because this Technical Correctional Unit is an institution specialized for narcotics-related crimes and employs the Therapeutic Community method in its rehabilitation programs. The success of this program can be achieved if the inmates carry it out earnestly; however, there are still inmates who have low motivation in participating in the program. Therefore, the author conducted research on how the implementation of the Therapeutic Community approach enhances self-confidence among residents, as presented in this article.

METHOD

The research methods used to address the problem include qualitative methods. The qualitative approach falls under *naturalistic inquiry*, meaning that this study treats humans as instruments because the research is oriented toward naturalistic content. This study is adaptive to social situations; the methods used in this research include interviews, observation, participant observation, document and literature analysis, analysis of real-world documentation, and life history (Abdussamad, 2021). The author employs qualitative methods to investigate the social phenomena occurring. This approach enables an understanding of the individual’s personality being studied, with observations conducted directly within the community. Therefore, the author conducts a subjective study to examine the recovery of *Self-Confidence* among drug users through the social rehabilitation method of the Therapeutic Community. The primary data in this study consists of interview results with informants and observations of inmates, staff, and other parties involved in the implementation of the *Therapeutic Community* social rehabilitation program at the Jakarta Class IIA Narcotics Correctional Institution; The number of inmates to be interviewed ranges from 5 to 10, and the officials involved in these interviews include staff from the Social Guidance and Care (Bimkeswat) subsection at the Class IIA Jakarta Drug Rehabilitation Center. The researcher obtained secondary data sources through literature reviews, books, the internet, journal articles, and writings relevant to the issues the researcher will investigate.

RESULTS AND DISCUSSION

This therapeutic community program has been successfully implemented at the Jakarta Class IIA Drug Rehabilitation Center, where the initial step involved selecting a number of residents through screening and assessment to evaluate the extent of their drug dependence. Subsequently, the selected inmates undergo urine testing to ensure they are drug-free, thereby enabling the implementation of social rehabilitation. This was also

stated by the Management Staff and officials of the Jakarta Class IIA Narcotics Correctional Institution, who noted that:

“The treatment method provided at the Jakarta Class IIA Narcotics Correctional Institution is the Therapeutic Community method, which is a social rehabilitation approach aimed at victims of NAPZA abuse. It functions as a ‘family’ composed of individuals facing similar challenges and sharing a common goal: to help themselves and one another, fostering a chain of support from one individual to another, thereby facilitating a shift in behavior from negative to positive.” (Source: Staff of the Capacity and Personality Development Unit, Evan)

These activities are conducted during the first 3 (three) months, followed by a follow-up program, where Counselors and Residents will conduct post-class group counseling, as well as re-assessments and psychological evaluations of the residents. This follow-up program will be tailored to the individual needs of each Resident to ensure the reintegration process into the community proceeds smoothly. The Jakarta Class IIA Correctional Institution also collaborates with external agencies to support and facilitate its activities. Rehabilitation is one of the efforts in the recovery of substance users to prevent relapse, as expressed by Resident G:

“I have been participating in the TC program since 2021, starting as a participant or ‘family’ member until now as a PC. In my opinion, this program is well-structured, and for those of us who are truly committed to making a change, it is indeed effective and the concept is sound” (Resident G)

The Therapeutic Community itself is viewed as a platform for residents to facilitate personal change. Although not all residents or family members voluntarily participate in Therapeutic Community activities, for those genuinely committed to recovery, this community represents their hope for personal transformation. The Therapeutic Community model itself uses the concept of “man help” and “mutual help,” meaning that residents do not make changes on their own; within a Therapeutic Community family, residents carry out their activities together, as described by Informant R as follows

“At first, there was a bit of shyness. Initially, since we were all new to being together—both the residents and their families—after about a month of being there, that sense of family bonds began to form. People started caring for one another, giving each other warnings, and offering guidance to one another.” (Resident R)

Given the limited facilities and infrastructure, the prison authorities always strive to do their best and are assisted by third parties in guiding this therapeutic community.

As stated by the Deputy Head of the Social Rehabilitation Subdivision

: “The obstacles have always been there, but we can’t let them become a crutch. The TC must continue. For instance, the TC requires classification based on group size because if one counselor handles 120 people, the care might not be optimal, so we need more classes. There are indeed many temporary classes; in this Building 2, we only have 4 classrooms. Each classroom accommodates 30 to 40 participants, which is insufficient, so we use the hallway as a temporary classroom for such sessions. Then there’s also the budget aspect;

some budget allocations haven't been fully utilized yet, such as the assessment budget we're implementing through our partnership with the National Narcotics Agency (BNN). The budget allocated by BNN and what we have here are quite different, so that part hasn't been addressed yet from a budget perspective. Meanwhile, at the Jakarta Narcotics Prison, regarding counselors, we have good connections and communication with the Indonesian Association of Addiction Counselors. They are willing to assist us with the provision of counselors or related needs." (Deputy Head of the Rehabilitation and Social Reintegration Unit).

In this Therapeutic Community, residents are also accompanied by a counselor; typically, each counselor oversees 40 residents. Every counselor conducts monthly check-ins with residents to assess their progress during the Therapeutic Community program and monitor their well-being. Additionally, counselors administer rewards and punishments, as explained by Kak Irwan, a counselor:

"Sanctions, for example, if we go to the TC, there will be a review after Ramadan, so after the month of Syawal we'll start implementing them effectively. If the sanctions haven't been lifted—meaning they're still in place—what's the purpose? So we start with a constructive approach. We need to understand this because we've already explained it: if they don't participate or don't follow the rules, they might face a "wall-in" (paper confinement). They'll have to go through a learning process until they understand and grasp the concept before being allowed back in. This isn't about punishment; it's more about learning. If they succeed in what's required, they can continue the next day until they succeed. First, when they don't show up, it's noticeable, we'll ask first what the reason is. For example, if they're absent three times without a clear explanation, we'll check what the issue is—the duration depends on the counselor—then we'll do counseling to figure out the problem. After that, we'll add conditions: "Okay, you can leave the session, but there's a learning requirement attached; you can leave, but there are terms—submit the written work from before, or if they're still stubborn, we'll change the assignment." "The real issue is when it's already their obligation but they still refuse to come here—that's why there needs to be a consequence, which is the learning process we discussed earlier" (TC counselor)

The use of rewards and consequences serves as reinforcement or guidance for residents in achieving change and fostering a sense of responsibility for their actions.

Therapeutic Community, as one of the methods of social rehabilitation, also prioritizes the restoration of social functioning through community therapy activities for residents. In practice, each resident is given the opportunity to speak in front of the class in turn about their feelings and activities, and other residents can provide feedback or ask questions, thereby fostering positive social interaction.

These activities are conducted routinely, thereby unconsciously building confidence to speak in front of a group. In addition to fostering self-confidence, this program is also

expected to create a multiplier effect, including increased sense of responsibility, awareness, and discipline in daily life. The Jakarta Class IIA Drug Rehabilitation Center utilizes the Therapeutic Community program as a means of guidance, counseling, and motivational support for residents to help restore their self-confidence. This program is also well-received by the residents, who are consistently enthusiastic about participating in this rehabilitation program. Counselors also provide guidance or social counseling to foster self-confidence, both in group and individual settings. At the end of the program, counselors analyze the residents' changes before and after the program to assess their recovery and readiness to reintegrate into society. Self-confidence recovery is not solely influenced by internal factors; external factors, such as support from the immediate environment, can also serve as a form of therapy for self-confidence recovery. Family support plays a crucial role in driving personal recovery, serving as a catalyst for change. Thus, at its core, the Therapeutic Community program involves a wide range of factors—both internal and external—including motivation from the counselor, peer support among residents, and family support, all aimed at fostering self-confidence.

CONCLUSION

Based on the results of research and analysis on the *Therapeutic Community* as a social rehabilitation model for restoring *self-confidence* among drug-using residents at the Jakarta Class IIA Drug Rehabilitation Center, the following conclusions can be drawn:

The implementation of the *Therapeutic Community* program has been underway since 2014. These TC activities have also been implemented and proven effective as part of a *demand reduction* effort by adopting an approach to break the drug cycle through the users themselves. This *Therapeutic Community* is carried out through activities aimed at psychological recovery and social functioning. The concept used in this therapy is the family model, where residents carry out all activities together—a process known as *self-help and mutual help*. The “Walking Paper” serves as a guideline for implementing the TC program. During its implementation, challenges have arisen, such as a lack of adequate facilities and infrastructure to accommodate the necessary classes; however, despite these minor obstacles, the prison authorities strive to optimize the *Therapeutic Community* program by collaborating with third-party counselors, specifically the Indonesian Association of Addiction Counselors.

Self-confidence is a crucial aspect of an individual's life. Individuals who have used narcotics inevitably experience negative effects on their well-being. The *Therapeutic Community* aims to restore the social functioning of its residents, one aspect of which relates to their self-confidence. It employs behaviorist theory as the foundation of rehabilitation, a theory that focuses on fostering self-change within individuals. During the implementation of the TC, residents are also accompanied by counselors who serve as mentors. Counselors assist with every problem residents face through individual counseling; additionally, they provide motivation and support to help residents develop from a state of low self-confidence to one of self-confidence. Residents' self-confidence also emerges when they receive support from their families and the *Therapeutic*

Community environment; the social support received by residents positively restores their psychological well-being and social functioning.

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