

## CRAFT Model Approach in Curbing Drug Addiction among Youth

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### Abstract

The involvement of youth in drug addiction has raised concerns about the future of the country since human capital is threatened by social problems caused by drug abuse. Adolescent addicts who undergo rehabilitation treatment need continuous support outside the institution to prevent relapse which causes the treatment period to be gainless. This paper aims to (i). identify the types of drugs used by teenagers who are involved in addiction and (ii). discuss the CRAFT approach as a drug rehabilitation strategy for teenagers. This paper uses a survey method where drug information is obtained through a questionnaire. The CRAFT model is discussed as a solution to the problem of adolescent addicts. A total of 81 adolescent addicts aged 13 to 21 years were involved from three drug rehabilitation centers on the East Coast. The data was then analyzed using descriptive analysis to obtain mean values for the types of drugs taken by adolescent addicts. The results found that adolescent addicts have taken various types of drugs since the beginning. The CRAFT model is an approach that is customized in two phases which involve families and communities in the post-rehabilitation process in institutions. The idea of the CRAFT model is to empower families and communities to encourage active participation throughout the recovery process.

**Keyword:** Drug Addiction, Addiction, CRAFT Model, Family Therapy, Community Participant

### Introduction

Youth is the largest group involved in addiction every year, this figure is recorded by the statistical report of drug cases by the National Anti-Drug Agency, AADK. In Malaysia, a curfew for teenagers under the age of 18 was once proposed to prevent them from getting involved in various crimes including drugs, but it contradicts the provisions of the law and human rights (Sayuti & Rozana, 2019). Parents' attitudes such as lack of monitoring, not observing the children's contacts and their activities, allowing absolute freedom, flawed communication and inadequate education in religious values have caused the children to not respecting their parents and ending up demonstrating deviant behavior (Syazwana et al., 2019).

Adolescence refers to the stage of age transition from childhood to adulthood. At this level, it is characterized by confusion in searching for identity and the strengthening of personality. The confusion in building a personality causes emotional stress to teenagers

which eventually leads some to drug abuse (Nabila & Azmawaty, 2020). The Community Reinforcement and Family Therapy (CRAFT) model was built to involve families together in an effort to help the drug addiction recovery process. CRAFT is a therapeutic technique developed from the Community Reinforcement Approach (CRA) and has been tested on the addict population. This approach targets drug addicts as Identified Patients (IPs) and families as Concerned Significant Others (CSOs). CSOs are trained to help drug addicts through the application of skills that should be present in all families with drug addicts (Petterson, 2018).

### **Problem Statement**

A study conducted on students at an Institute of Higher Education (IPT) recorded a total of 10 out of 3,558 tested positive in urine tests. The students were four Malays, three Sabah/Sarawak natives, two Indians and a Chinese. The result also showed that six of them were male. Meanwhile, seven of these positive students have a family background with an income of RM1001-RM2000. The study also found that despite the numerous campaigns that have been organized, there are large numbers of students who are incognizant of the effects of taking various types of drugs. In addition, this study revealed an alarming number of students who actually had tried to use drugs and were close friends of addicts. This shows that efforts to educate and prevent drug abuse among children and teenagers in Malaysia still need to be improved (Hussin et al., 2005).

In Saudi Arabia, an approach is taken by integrating elements of Maqasid Syariah into educational institutions, youth centers and sports clubs, media, religious institutions, community institutions specifically to increase the awareness of teenagers and families about the threat of drugs. This Islamic approach brings teenagers, families and communities closer to spirituality, as well as making the religious factor like a fortress so that teenagers would avoid addiction and the families would take care of their children's education and a prosperous community is conceived (Murah et al., 2020).

In Malaysia, an initiative has been taken by the government by running the Student Intervention Program (PIP) which effectiveness has been tested through a study by Dahalan et. al (2010) on 161 high school students. Overall, the implementation of PIP by the National Anti-Drug Agency (AADK) has shown great benefits through good feedback in every element of the context, input and process of PIP implementation, where the students admit that PIP has increased knowledge, improved attitudes and practices of participants. However, the change in students' attitudes and practices is not compelling and does not last long. Therefore, it is suggested that the AADK, schools and also parents need to make an effort so that the change in attitude and positive practices of the students and participants continues and lasts longer.

Drug recovery is a holistic endeavor and requires a long period of time. Therefore, focusing only on addicts is a half-assed effort. The importance of family as a source of support has been recognized as significant to recovery and control of relapse behavior. The skill to handle addict in the family is not a prevalent skill in all communities. The knowledge obstacle and lack of information make it difficult for families to help in the treatment of addiction. To support the implemented rehabilitation efforts, the CRAFT (Community Reinforcement and Family Therapy) model is the right strategy to be used to fulfill the addiction recovery process.

The CRAFT model focuses on interventions involving family members in an effort to bring closer addicts who are demotivated in following a rehabilitation program. This model was developed by Robert J. Meyers and Jane Ellen in the late 1970s and early 1980s. Through the intervention, seven steps are taught to family members which are raising awareness of

the dangers and negative effects of addiction, learning specific strategies to prevent dangerous situations in the family, training how to manage unexpected situations, training in communication skills and problem solving, planning activities to approach addicts, learning strategies to approach at-risk addicts as well as preparing for recovery if the addict wants to enter recovery and always support the recovery program. CRAFT not only has a positive effect on the addicts, further, it evokes the emotional and physical well-being of the family, as well as all parties' preparedness for keeping up in treatment (Meyers et al., 1998). This model is more organized and has levels that suit the needs of the family.

### **Objectives**

This paper aims to fulfill the following objectives:

- i. Identifying the types of drug related to addiction among adolescents.
- ii. Discussing the CRAFT approach as a drug rehabilitation strategy for teenagers.

### **Research Questions**

More specifically, this paper aims to answer the following questions:

- i. What types of drugs are involved in adolescent addiction?
- ii. How does the CRAFT approach work as a drug rehabilitation strategy for teenagers?

### **Methodology**

This paper uses quantitative methods. The research design is a survey distributed to adolescent addicts who are undergoing rehabilitation. Data is collected using a questionnaire related to social support for adolescent addicts. The four indicators for this questionnaire are knowledge of drugs, received social support, efforts and obstacles to recovery.

Respondents consisted of 81 adolescent addicts from several rehabilitation institutions on the East Coast. Their ages were between 13 and 21 years old and from various backgrounds. The selection of respondents was made based on their age and history of involvement in drug addiction. Data were analyzed using SPSS descriptive analysis to obtain frequencies and mean values.

### **Findings and Discussion**

#### **i. Adolescence and Addiction**

The respondents involved in this survey were a total of 81 teenagers aged between 13 to 21 years old. 65 of them were boys and 16 were girls. 60 male teenagers had secondary education backgrounds while one boy had primary education only. 11 of the female teenagers received secondary level education and four others had primary education only. Meanwhile, four teenage boys and one teenage girl received another type of education.

		<b>Number of Respondents</b>	<b>Primary School</b>	<b>Secondary School</b>	<b>Others</b>
Gender	Male	65	1	60	4
	Female	16	4	11	1
Total		81	5	71	5

#### **Types of Drugs**

A study on drug abuse among adolescents found a teenager who had experimented on various types of drugs. This situation is alarmingly disturbing because at the age of 21,

teenagers who are exposed to myriad types of drugs are prone to permanent disability or even premature death. In the future, this may cause a huge decline in human resources in the country (Norayu et al., 2014). Locally known as *pil kuda* (horse pill/ *ya maa*), *syabu* (crystallised methamphetamine/ice), *ketum* (kratom leaves), *ganja* (marijuana) and Erimin 5 are the most common street drugs and are the choice of teenagers compared to codeine, morphine and cocaine.

Since 2018, there has been a shift in the trend of street drugs in Malaysia, from old types of drugs such as morphine and heroin to Methamphetamine-type drugs (Crystalline) which are usually referred to as syabu, ice and stones (National Anti-Drug Agency, 2019). Horse pills are notorious on the East Coast which explains the high number of youths involved in horse pill addiction in the states of Terengganu and Kelantan. However, these pills are rather the choice of young men than they are of women.

Syabu turns out to be the most commonly used drug among girls. They usually get their syabu supply from their boyfriends or acquaintances. Marijuana and Erimin 5 are also quite common among young women yet are taken recreationally. Although horse pills, kratom and heroin are known to be used by young women their popularity among girls is unlikely.

Table 1  
*Drugs Preference among Male and Female Adolescents*

N=81									
Gender	Types of Drugs								
	Horse Pill/Ya ba	Syabu / Ice	Krato m	Marijuan a	Erimi n 5	Codein e	Heroi n	Morphin e	Cocaine
Male	45	35	33	15	17	18	8	4	3
Female	5	14	5	11	7	1	4	1	2
Total	50	49	38	26	24	19	12	5	5

The trend in today's drug market shows that the youth take drugs for the purpose of pleasure. The history of drug use in Malaysia begins with drugs were used by labor groups in mines and farms for relief. In the early 90s, drugs began to be used for entertainment purposes with the introduction of recreational drugs and found in most entertainment centers and taken by young people (Siti Norayu, Hassad, Adila, Nur Hudi'in & Nur Salimah, 2014). Drugs are also misused for the purpose of crimes such as in crimes against women like torture and rape.

## ii. The CRAFT Model Helps with Drug Addiction Problems

The recovery of drug addiction among teenagers requires the involvement of socialization agents, namely family and community. Family and community relationships in recovery efforts are undeniably important in supporting recovery. Addicts who follow an institutional rehabilitation program demand strong and continuous support to back them in the treatment process. The role played by social support in helping recovery is very important and has become a variable in the health of adolescent addicts (Jalilian et al., 2014).

Family and community are a source of support that adolescent addicts need because the drug recovery process is a long one. The presence of support resources helps to overcome the stress and challenges faced throughout the process. However, families and communities

need to be equipped with the skills to deal with adolescent addicts in order to be able to provide support continuously. Families in particular have obstacles in terms of their knowledge about drugs and addiction and in terms of emotional management. Both obstacles mutually influence the family's commitment to providing help to adolescent addicts whether material or non-material (Syazrah et al., 2018).

The biggest obstacle for the community is stigma, a bad view of an individual or group. Stigma is usually followed by labeling, the act of applying a certain label to adolescent addicts. Stigma worsens the situation by demotivating adolescent addicts to undergo rehabilitation thus forming a bad environment that prevents adolescent addicts from returning to the community hence causing these adolescent addicts to continue to be isolated. This ambiance ultimately causes the problem of relapse to be triggered and stops the continuation of the rehabilitation process in the community when it was already completed at the institutional level.

The CRAFT model aims for family and community involvement as support agents for recovery. The three goals of this model are to improve the quality of life and the functioning of the family and community, to reduce addiction and to involve addicts in treatment. The CRAFT model has been proven effective in increasing 37 percent treatment participation among addicts compared to Alcoholics Anonymous/Narcotics Anonymous and Johnson Institute Intervention (Canadian Center on Substance Use and Addiction, CCSA, 2017). The advantage of this approach to this study is that CRAFT helps families and communities as Concerned Significant Others (CSO) in:

- Changing behavior, reactions and views towards addicts.
- Reducing or eliminating the patient current addiction and addictive habits.
- Helping to motivate addicts to seek recovery.
- Assists in self-care which is important while caring for an addict or rebuilding a sense of joy (Petterson, 2018).

The CRAFT model focuses more on strengthening recovery in the community, therefore the potential of the family and community is an important resource for successful intervention for addicts. CRAFT according to Meyers et al (1998), is implemented in two phases. In the first phase, families and communities undergo intervention to build skills to encourage addicts to seek treatment consistently. During this phase, families and communities are given exposure to:

- Awareness of the negative effects of addiction and the benefits of following treatment
- Learn specific strategies to prevent dangerous situations with addicts around.
- Control and manage unexpected situations to strengthen the addict's behavior
- Communication and problem solving skills
- Plan activities that can distract and can overcome addiction.
- Strategies to curb drug use by recognizing potential drug addicts
- Willing to support the treatment that drug addicts will undergo

In the second phase, the addicts together with their families and the communities are involved in sessions to increase motivation and commitment to change. The families and the communities also continue the second session with the following goals:

- Analyzing the functional part of drugs for the addicts' recovery plan
- Developing treatment goals
- Sobriety Sampling – Addicts remain in recovery without strict rules.
- Social skills training such as communication and problem solving
- Social counselling and recreation

- Training for the prevention of relapse

The CRAFT approach is appropriate for dealing with cooperation and involvement problems in families and communities. Studies on addiction recovery have long proven that family and community involvement in the recovery process creates a better impact and is more sustainable.

Biological relationships are of great potential and can have an effective impact. However, rehabilitation treatment, especially in institutions, has often ignored the role of the family. Ironically, this family potential is often undermined by the fact that some root causes of addiction originate from dysfunctional families (Ventura & Bagley, 2017). This creates tension and pressure to provide support to adolescent addicts as the families had failed to fulfill their roles as educators and protectors before their loved ones even got caught up in addiction.

On the part of the government and responsible agencies, various programs have been prepared to help families and communities. In reality, the family's readiness to change to a drug rehabilitation-oriented family becomes the main question. The recovery process is often left to institutions while the families are hoping that the treatment period is sufficient, effective and remains effective without the need for further support from the family and/or community.

The readiness of the family and the community to offer their support depends on their absolute functioning which requires flexibility, openness and always being ready to change for the better for the benefit of all of their members. Meanwhile, families and communities that are experiencing negative functionality could overcome the situation through education and intervention thus providing a supportive environment for addicts' recovery (Bradshaw et al., 2016).

The CRAFT model emphasizes two focus groups, family and community and the involvement of addicts. Families and addicts are guided to understand each other's functions and efforts in ensuring recovery. This model is implemented in stages, allowing families and developing communities to explore each other's potential in all aspects. In addition, CRAFT does not specifically narrow the target group according to the addict's certain age limit nor limiting it to families with certain backgrounds such as harmonious families only not conflicting ones, as the final goal is to have the families being able to support the addicts without monitoring moderators.

## **Conclusion**

The youth are the biggest group of addicts in Malaysia and this unpleasant reality reflects the challenge in building the desired future of the country. The CRAFT model is one of the holistic approaches and a big step to integrating all significant support resources towards building a positive environment for saving adolescent addicts from continuing to drift away in their addiction. This effort is expected to give hope to reducing the number of teenage addicts over time.

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