

# PREVALENCE S U R V E Y

2018







# PREVALENCE SURVEY 2018



**DATA AND INFORMATION RESEARCH CENTER  
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## **Prevalence Survey 2018**

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Pusat Penelitian Data dan Informasi (Data and Information Research Center)  
Badan Narkotika Nasional Republik Indonesia (National Narcotics Board of the Republic of Indonesia)

Jl. MT. Haryono No. 11 Cawang, East Jakarta

Telp.(021) 80871566, 80871567

Fax. (021) 80885225, 80871591, 80871593

Email : puslitdatin@bnn.go.id.

Call Center : 184

SMS Center : 081221675675

Email : puslitdatin@bnn.go.id

Website : www.bnn.go.id

**Assalamu'alaikum Warahmatullahi Wabarakatuh.**  
**May peace be upon us.**



Let us praise to God the Almighty for the blessing that BNN in cooperation with the Culture and Society Research Center of LIPI has completed the Book of Prevalence Survey 2018. The survey is conducted in three groups namely the group of students/university students, workers, and household.

The objective of the research is to find out the prevalence rate of drug abuse (ever use and current user) students/university students and workers in 13 capital cities of provinces in Indonesia as well as to find out factors related to drug abuse, influencing factors, risky behavior, knowledge on drugs, and P4GN program intervention. Furthermore, this research aims to identify the rate of household vulnerability toward the danger of drugs. With this the survey, it is expected that the society and stakeholders will aware of the issues on drug abuse in Indonesia and its development year by year.

Finally, as Chief of BNN, we would like to convey our gratitude to Indonesian Institute of Sciences (LIPI) as the supervisor of research functions and to all parties involving in the formulation of this Book that enable us to publish it ontime. We hope that the results of this research can be used widely to support the policy of prevention and eradication of drug abuse and its illegal trafficking in Indonesia. It is expected taht the result of this would be a reference for all ministries or institutions as well as society to support the countermeasure of drug abuse and illicit trafficking in Indonesia.

**Thank you**

**Wassalamu'alaikum Warahmatullahi Wabarakatuh.**

Jakarta, October 2019  
**Chief of National Narcotics Board**

**Drs. Heru Winarko, S.H**

Praise be to God the Almighty for his grace and guidance to us for completing the Book of Prevalence Survey 2018 on time. This research is a collaboration between Badan Narkotika Nasional (National Narcotics Board/BNN) and Culture and Society Research Center of LIPI. This research was assisted by University Researchers in 13 Provinces in Indonesia.

The objective of this research is to find out the drug abuse prevalence among students and university students, drug abuse prevalence among workers, and vulnerability rate of household toward the danger of drugs.

This survey involves many parties including expert team of BNN, BNNP, BNNK, related Ministry/Institution and Office, field coordinator informan, enumerator, and university local partner in 13 Provinces. In this opportunity, we would like to convey our gratitude to Chief of BNN Drs. Heru Winarko S.H and Drs. Adhi Prawoto, S.H as Primary Secretary of BNN for the instruction. We would like to deliver our gratitude as well to Head of Research Center, Drs. Agus Irianto, S.H., M.H., M.Si, Dra. Endang Mulyani, M.Si, Siti Nurlela Marlani, SP, S.H, M.Si, Sri Lestari, S.Kom., M.Si, Erma Antasari, S.Si, Sri Haryanti, S.Sos, M.Si, Novita Sari, S.Sos., M.H, Quazar Noor Azhim, A.Md and all BNN staffs for the assistance and cooperation in each stage of this study, from instrument development to report writing.

Furthermore, we would like deliver our gratitude to Culture and Society Research Center of LIPI and all local universities partner namely: University of Syiah Kuala Aceh, University of Sumatera Utara, University of Sriwijaya Palembang, University of Nasional Jakarta, University of Padjajaran Bandung, University of Gajah Mada Yogyakarta, University of Airlangga Surabaya, University of Riau Kepulauan Batam, University of Udayana Bali, University of Mulawarman Samarinda, Politeknik Kesehatan (Polytechnic of Health) Pontianak, University of Hasanuddin Makassar, University of Cendrawasih Papua.

Finally, we have the expectation that this survey would give beneficial contribution on decision making and improvement on Prevention and Eradication of Drug Abuse and Illicit Trafficking (P4GN) in Indonesia in general and in provincial level specifically.

Jakarta, October 2019

Editorial Board

Currently, Indonesia has stated that the state is in drug emergency situation as drug abuse has spread to all layers of the society across the country. According to research by BNN in collaboration with Health Research Center of the University of Indonesia in 2017, the prevalence rate of drug abusers was 1.77% or equal to 3,376,115 of Indonesian population and the social-economic loss due to drug abuse was Rp 84.7 trillion.

Data on prevalence rate of drug abuse is obtained through a survey. In 2004-2017, BNN in cooperation with Health Research Center of the University of Indonesia conducted a survey to calculate the prevalence rate of drug abuse in three groups of the community, namely students and university students, workers, and households. In 2018, BNN in cooperation with Culture and Society Research Center of LIPI carried out a survey to calculate the prevalence rate of drug abuse. The survey was also carried out in three groups of the community, namely students and university students, workers, and households. The survey in 2018 was conducted in 13 Provinces, namely Aceh, North Sumatera, South Sumatera, Riau Islands, Jakarta, West Java, East Java, DI Yogyakarta, Bali, East Kalimantan, West Kalimantan, South Sulawesi, and Papua.

The book will present data of research findings conducted by BNN and LIPI in 2018. New facts revealed by this research such as prevalence rate of drug abuse (ever use and current user) among students and university students, and workers as well as related factors such as the history of usage, influencing factors, risky behavior description, knowledge on drugs, and the P4GN program intervention. In addition, the survey on the group of households was conducted to find out the vulnerability rate toward the danger of drugs. With the result of this research, it is expected that the policy in prevention and eradication of drug abuse and its illegal trafficking will meet the target and will be appropriate.

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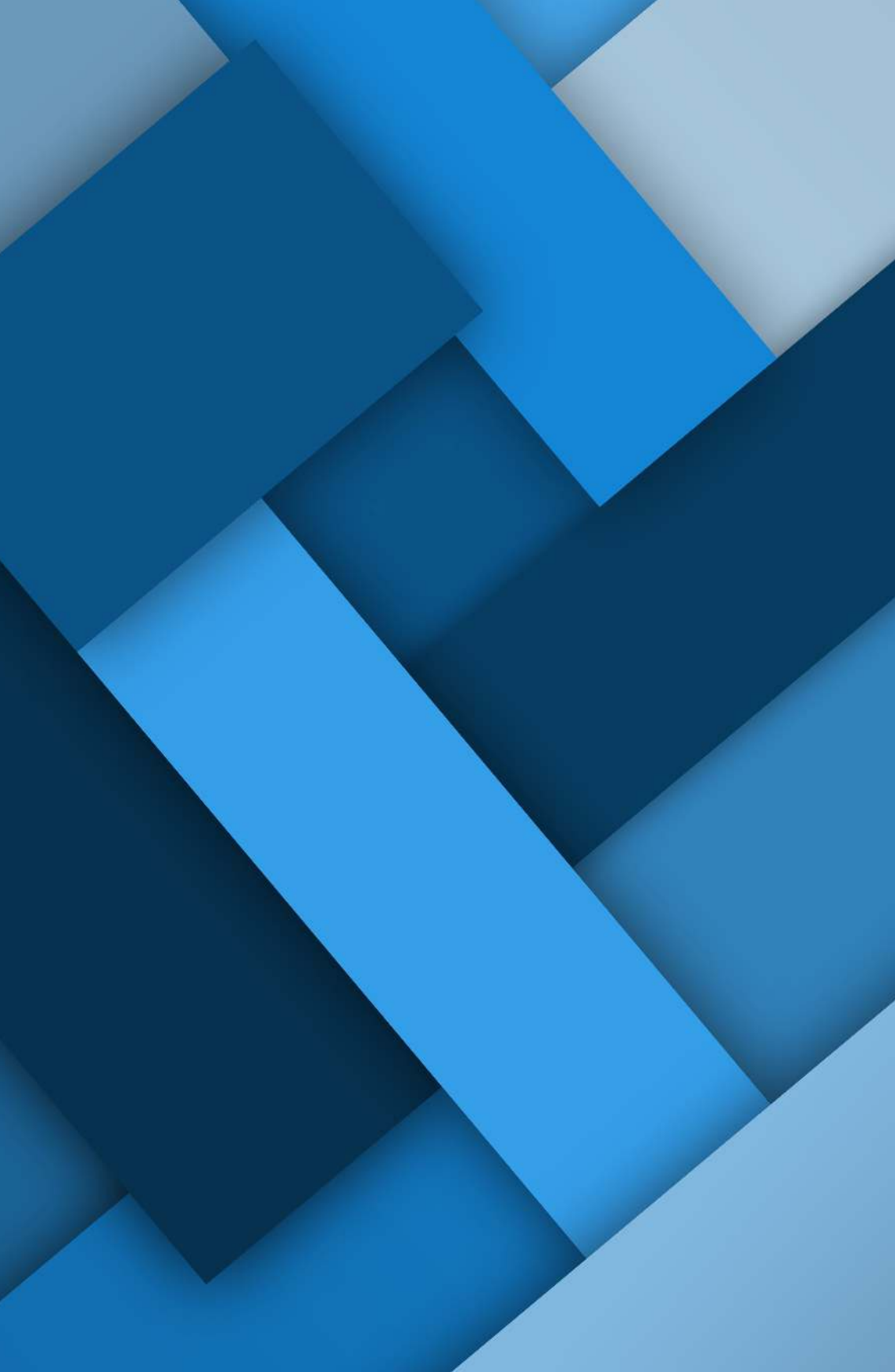
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## INTRODUCTION





# INTRODUCTION

## 1.1. Background

The vast ocean in Indonesia Unitary State which is larger than the mainland has encouraged drugs syndicate to smuggle drugs to Indonesia. In 2018, BNN seized 3.6 ton meth, 7.3 tons marijuana, 531 thousand ecstasies, 68 kilos cathinone, and 28,000 PCC/ Carisoprodol pills.<sup>1</sup> Indonesia has become a target of drugs smuggling from international syndicate. Indonesia's large population and high economic growth have been an attraction for drugs syndicate.

Based on the research findings by BNN in cooperation with Health Research Center of the University of Indonesia (UI) in 2017, the prevalence trend of drug abuse was 1.77% or equal to 3,376,114 drug abusers. This number consists of several categories, namely 1,909,319 of experimental abusers, 920,100 of regular users, 489,197 non-injected drug addicts, and 58,498 injected drug addicts. The total of drug abusers was 3,376,115 people.

Until 2018, 74 types of New Psychoactive Substances (NPS) have been in circulation in Indonesia in which 66 of them have been regulated to the Ministry of Health Regulation. In BNN survey in 2017, several types

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<sup>1</sup> Research, Data, and Information Center of BNN, Research Findings of BNN & PPK UI, 2016

of mostly consumed NPS were flakka, dumolid, Carnophen (Zenith) and PCC pill which have become a serious threat to the community, especially a case in Kendari in September 2017.<sup>2</sup>

The data of drug seize through the years indicates that drug deal among workers is significantly increasing. During 2017, BNN has revealed 46,537 cases across Indonesia as well as arrested 58,365 suspects, 34 suspects of money laundering, and 79 suspects who fought against the officers and then shot dead. In 2017, BNN also confiscated hundred tons of drugs evidence from the suspects who were then known as drugs dealer and syndicate in Indonesia. The confiscated drugs were 4.71 ton meth, 151.22 ton marijuana, 2,940,748 ecstasy pills, and 627.84 kilogram of liquid ecstasy. In addition, BNN also confiscated the money laundering from drugs case such as vehicles, property, land, jewelry, cash money, and money in the account amounting to Rp 105 billion.<sup>3</sup>

Drug abuse rate in Indonesia tends to increase significantly from 2008 to 2011 of about 0.24% or equal to 911,805 abusers. Meanwhile, prevalence rate of drug abuse from 2011 to 2014 decreased about 0.05% or equal to 251.555 abusers. However, until 2017, the prevalence rate decreased 0.14% per year. The declining prevalence rate can be seen also in 2017 survey which shows that the prevalence rate among workers decreased from 12.8% in 2012 into 9.1% in 2017 (Health Research Center and BNN, 2017).

The declining prevalence rate of drug abuse is one of the indicators of the government success cq Ministry/Institution in reducing the prevalence rate of drug abuse in P4GN. In implementing P4GN, the operational pillars of BNN have formulated a number of strategies in the program based on the survey findings on drug abuse, both in the field of Prevention, Community Empowerment, Eradication, and Rehabilitation.

Strategies and program are needed in eradicating drugs abuse as the implementation of P4GN. In order that the strategies and program meet the target, a survey on drug abuse is conducted. Related to

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<sup>2</sup> Research, Data, and Information Center of BNN, Survey Findings on Drug Abuse in 34 Provinces, 2017

<sup>3</sup> <https://news.idntimes.com/indonesia/fitang-adhithia/sepanjang-tahun-2017-bnn-ungkap-46537-kasus-narkoba/full>



this, BNN had conducted several surveys on drug abuse of which the result, especially the prevalence rate of drug abuse, has been applied by Bappenas to arrange the main target in Defense and Security development 2015-2019. The result of the research has been used also in the annual international report like CND Annual Meeting, ASOD Annual Meeting, Global Smart and the filled form in Dainap, ARQ and etc.

The negative impact of drugs has made everyone worried since Indonesian population and the wide territory are a major market for drug dealers. It is not only the duty of the police to anticipate drug illicit trafficking, but also the duty of all community members including ministry and state institution. Presidential Instruction No.6 of 2018 on National Action Plan of P4GN has become a legal basis to all ministry and state institution to implement this activity.

## **1.2. Issues**

Drug abuse tends to increase in the community. Hence, data on drug abuse should be updated through the years. It is also important since the survey finding is often utilized. The follow up survey is expected to be able to answer drugs development in Indonesia through the prevalence rate. Related to this, the main questions in this research are the level of prevalence rate of drug abuse in 2018.

The questions of the research are:

1. How high is the prevalence rate of drug abuse among workers, students, and university students?
2. How is drug abuse among workers, students, and university students being described according to the history of usage, method, and distribution pattern?
3. What are the influencing factors of drug abuse among workers, students, and university students?
4. What is the description of risky behaviour (smoking, drinking alcohol) toward drugs among workers, students, and university students?

5. What is the level of knowledge on drugs and attitude toward the danger of drug abuse among workers, students, and university students?
6. What is the intervention of P4GN program both from the government and non-government institution among workers, students, and university students?

In addition, the questions related to household are:

1. How vulnerable is the family in the community toward the danger of drugs?
2. How is the household environment being exposed to the danger of drugs?
3. How is the household's sensitivity to the danger of drugs?
4. How is the household being exposed to the danger of drugs?
5. What is the household's strategy not to be exposed to the danger of drugs?

### **1.3. Objective and Target**

In general, the objective of the research is to find out the prevalence rate of drug abuse among workers, students and university students, as well as to identify the vulnerability rate of household in dealing with drug threat in 13 provinces in 2018. Here are details of the particular objectives related to prevalence rate of drug abuse:

1. To identify the estimated prevalence of drug abuse among workers, students, and university students according to usage time and category.
2. To know the illustration of drug abuse among workers, students, and university students according to the history of usage, method, and distribution pattern.
3. To find out the influencing factors of drug abuse among workers, students, and university students.
4. To find out the description of risky behaviour (smoking, drinking alcohol, and sexual intercourse) toward drug among workers, students and university students.
5. To find out the level of knowledge on drugs and attitude toward the danger of drug abuse among workers, students, and university students.

6. To find out the intervention of P4GN program both from the government and non-government institution among workers, students, and university students.

Meanwhile, to find out the household exposure, the objectives are:

1. To find out the environment's exposure from the danger of drugs.
2. To find out the household's sensitivity toward the danger of drugs.
3. To find out the household's exposure from drugs.
4. To find out the household's strategy not to be exposed to drugs.

The targets of this research are workers, students, and university student as well as household members.

## **1.4. Conceptual Framework**

### **1.4.1. Definition of Drugs**

Drugs cover narcotics, psychotropics, and addictive substances. The term of drugs is not stated in laws and regulations. Law No.35 of 2009 on Narcotics only says that narcotics are substances or drugs from plants or non-plants, either synthetic or semi-synthetic, which can cause degradation or alteration of consciousness, loss of taste, reduction or elimination of the pain, and can lead to dependency.

Synthetic narcotics are category of narcotics which require synthetic process for medical and research need as analgesic. The examples are amphetamine, methadone, dextropropakasifen, dexamphetamine, and others. Meanwhile, semi-synthetic narcotics are substances/drugs which are produced through isolation, extraction and others such as heroin, morphine, codeine, and others. Outside this category is called natural narcotics, namely substances and drugs which can be directly consumed as narcotics without fermentation, isolation, and other process since they can be directly consumed with simple process. The examples of natural narcotics are marijuana and coca leaf.

Based on Article 6 Paragraph 1 Law on Narcotics, narcotics are classified into three categories, namely narcotics category I (narcotics which are allowed to be used for the benefit of science development

and cannot be used in therapy, having very high potential of causing dependency), narcotics category II (narcotics that are beneficial for medication as the final option and can be used in therapy and/or for the development of science, having high potential of causing dependency), and narcotics category III (narcotics which are purposed for medication and used a lot in therapy and/or for the development of science, having low potential of causing dependency).

Appendix I of Law on Narcotics contains types of narcotics in category I, category II, and category III. However, with the consideration on the increase of new drugs abuse with very high potential to cause dependency which is not included in the category listed in Appendix I of Law No 35 of 2009 on Narcotics and Minister of Health Regulation No.13 of 2014 on Change of Narcotics Category, based on Minister of Health Regulation No.2 of 2017 on Change of Narcotics category, narcotics is then categorized into category I, II and III. The Minister of Health Regulation No.58 of 2017 on the Change of Narcotics Category is then changed again into category I, II and III.

Psychotropic is regulated in Law No.5 of 1997 on Psychotropic. Article 1 of the Law on Psychotropic states that psychotropic is substance or drug, both non drugs-natural and synthetic, with psychoactive benefit through selective influence in central nerves system which causes typical change in mental and behaviour activity.

Psychotropic which has the potential to cause a dependency syndrome is grouped into 4 categories, namely psychotropic category I (psychotropic which can only be used for the purpose of science and can not be used in therapy, but it has very strong potential to cause dependency syndrome), psychotropic category II (psychotropic which is used for medication and can be used in therapy and/or for the purpose of science, having moderate potential to cause dependency syndrome), psychotropic category III (psychotropic which is used for medication and is used a lot in therapy and/or for the purpose of science, having moderate potential to cause dependency syndrome), and psychotropic category IV (psychotropic which is used for medication and widely used in therapy and/or for the purpose of science, having light potential to cause dependency syndrome).

Psychotropic category I is psychotropic which can only be used for the purpose of science and is not used in therapy. It has very strong potential to cause dependency syndrome. The examples of this psychotropic are:

- MDMA (*Methylene Dioxy Meth Amphetamine*), or Inex
- Shabu or Ubas
- Psilocybin and psilosin
- LSD or Lysergic Acid Diethylamine derived from a type of ergot fungus that grows on white wheat and rye.
- Meskalin (*peyote*)

Psychotropic Category II is psychotropic which is beneficial for medication and can be used in a therapy and/or for the purpose of science as and has strong potential to cause dependency syndrome. Substances in this category are: *amphetamine, methamphetamine, metamfetamine, metacualona, methylphenidate*, and etc.

Psychotropic category III is psychotropic which is beneficial for medication and used a lot in a therapy and/or used for the purpose of science and has moderate potential in causing dependency syndrome. Types of psychotropic in this category are: *amobarbital, flunitrazepam, Katina* and etc.

Psychotropic category IV is psychotropic which is beneficial for medication and widely used in a therapy and/or used for the purpose of science and has light potential in causing dependency syndrome. Types of psychotropic in this category are: *barbital, bromazepam, diazepam, estazolam, phenobarbital, clobazam, lorazepam, nitrazepam* and etc.

Psychotropic category I and II based on Article 153 law No.35 of 2009 on Narcotics has been revoked and is included in the category of narcotics as mentioned in the Appendix of Law on Narcotics. The emergence of New Psychoactive Substances (NPS) in the last several years has potentially endangered the community since it is not under the international control. This substance has caused the increasing addiction. Many people have been hospitalized for consuming this substance. It even causes death. These psychoactive substances are usually known as 'legal' alternative as substances that are not under the international control. NPS will indirectly influence the public's health



risk.<sup>4</sup> The Ministry of Health Regulation No.3 of 2017 has changed the category of psychotropic, especially psychotropic category II and IV. The Ministry of Health Regulation No.57 of 2017 has changed again the psychotropic category II and IV as mentioned in Appendix 2.

NPS has been well known in the market as “designer drugs”, “legal highs”, “herbal highs”, “bath salts”, “research chemicals”, or “laboratory reagents”. In order to clarify the terminology of this issue, UNODC only uses the term “New Psychoactive Substances (NPS)” which is defined as “drugs abuse, both in the form of genuine or mixture, which is not controlled by Single Convention on Narcotics Drug of 1961 or Convention on Psychotropic Substances of 1971 but causes a threat to the public’s health. The term “new” does not always refer to new discovery (several NPS substances are firstly synthesized around 40 years ago), but the new substances emerge in the market and are not listed in the above conventions. Types or main category of NPS as delivered by UNODC (United Nations Office on Drugs and Crime) and BNN can be seen in Appendix 3. For cases in Indonesia, especially, BNN in its website in 2016 has published list of NPS which has been identified in Indonesia.<sup>5</sup>

#### **1.4.2. Drugs Abuse and its Impact**

Article 7 of Law on Narcotics says that narcotics may only be used for the purpose of health services and/or science and technology. Hence, the use of narcotics outside these purposes can be categorized as abuse. It is based on provisions in Article 1 No.15 Law on Narcotics which says that drugs abuse is people who use narcotics without rights or against the law.

Continuous use of drugs may cause dependency which refers to Article 1 No.14 Law of Narcotics as a condition marked with a motivation to use drugs continuously with increasing dose to create the same effect and if the use is reduced and/or stopped suddenly, it will generate typical physical and psychological symptoms.

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<sup>4</sup> New psychoactive substances: overview of trends, challenges and legal approaches, Commission on Narcotic Drugs Fifty-ninth session, Vienna, 14-22 March 2014

<sup>5</sup> National Narcotics Board. List of NPS Substances already identified in Indonesia. 31 January 2016 [http://lab.bnn.go.id/nps\\_alert\\_system/12.%20Lampiran%20zat%20NPS%20terdeteksi%20di%20Indonesia.php](http://lab.bnn.go.id/nps_alert_system/12.%20Lampiran%20zat%20NPS%20terdeteksi%20di%20Indonesia.php)

There are several factors which motivate people to abuse drugs. The factors are grouped into three sources, namely:

1. Causative factors from oneself, consisting of:
  - a) Great curiosity to try, unconsciously and without a long thinking on the impact in the future.
  - b) Curiosity to try.
  - c) Having fun.
  - d) Willing to be accepted in a certain community or environment.
  - e) Workaholic to be always in an activity by using stimulant.
  - f) Running from problem, boring, or life bitterness.
  - g) Feeling exhausted and losing the spirit to study.
  - h) Suffering from anxiety and bitterness.
  - i) Addicted to smoking and drinking alcohol. These two things lead to narcotics abuse.
  - j) Self-entertaining and enjoying life to the fullest.
  - k) Losing weight or obesity by consuming excessive medicine for appetite control.
  - l) Feeling inattentive, unacceptable or unloved, in a family or social environment.
  - m) Inability to adjust to the environment.
  - n) Ignorance on the effects and dangers of drug abuse.
  - o) The misconception that trying drugs will never cause a problem.
  - p) Not able or dare to face pressure from the environment or social groups to use drugs.
  - q) Unable to say NO to drugs.
2. Environmental factors, consisting of:
  - a) Broken home.
  - b) Having a drug user or abuser or dealer father, mother or both or sibling.
  - c) Being in a wrong association or community where one of or several and all members are drug users or dealers.
  - d) Visiting nightclubs frequently (cafe, discotheque, karaoke, etc).
  - e) Having a spare time, dropout or unemployed.
  - f) A less/not harmonious family.
  - g) A family with no love, communication, openness, attention, and respect between the family members.

- h) Having authoritarian parents.
  - i) Permissive, indifferent, permissible, and less/no supervision parents/family.
  - j) busy parents/family.
  - k) A social environment with high competition and uncertainty.
  - l) A hectic urban life, people are not known personally, there is no primary relationship, disintegration, loss of social control from the community, traffic jams, slums, poor public services, and high crime rate.
  - m) Poverty, unemployment, dropouts and abandonment.
3. Drugs availability factor
- Drugs have become a driving factor for someone to use drugs when:
- a) Drugs are easily obtained and bought.
  - b) Price of drugs is cheap and affordable by people's purchasing power.
  - c) Drugs are increasingly diverse in type, method of use, and form of packaging
  - d) The modus operandi of narcotics crimes is increasingly difficult to be revealed by law officials.
  - e) There are still many illegal drug laboratories that have not been revealed.
  - f) It is difficult to reveal computer crimes and money laundering that can help the drug trafficking business.
  - g) More accessible internet that provides information on drug making.
  - h) The drug business promises huge profits.
  - i) Drug trafficking is controlled by strong and professional syndicates.

Uncontrolled drug use will ruin someone's life. The impact is 207,400 death cases due to drug abuse in the world.<sup>6</sup> The use of drugs in general and the use of psychotropic which is not according to the rules will create an effect that will endanger the body. The effect of drug abuse can be divided into three, namely:

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<sup>6</sup> World Drugs Report Tahun 2016. UNODC

1. *Depressants*, which suppress the central nerves system and reduce the functional activities of the body so that the user feels calm. They can even make the user sleep and unconscious. The case of overdosing can lead to death. Types of depressant drugs include opioda, and various derivatives such as morphine and heroin. The example is Putaw.
2. *Stimulants*, stimulate the functions of body and increase excitement and awareness. Types of stimulants: Caffeine, Cocaine, Amphetamine. Examples that are now often used are meth and Ecstasy.
3. *Hallucinogens*, the main effect is to change the perception or cause hallucinations. Hallucinogens mostly come from plants such as mescaline from cactus and psilocybin from mold-fungi. In addition, there are also mixed in the laboratory such as LSD. The most widely used is marijuana or cannabis.

Haryanto (2012) says that the negative impacts of drug abuse are physical, psychological, and socio-environmental impact. These various impacts have encouraged the government to declare a war against narcotics.

The impacts of narcotics abuse to the physical are:

- a. Disorders in nerves system (neurological) such as seizures, hallucinations, disturbance of consciousness and peripheral nerve damage.
- b. Disorders of the heart and blood vessels (cardiovascular) such as acute infections of the heart muscle and circulatory disorders.
- c. Skin disorders (dermatological) such as abdominal (abscess), allergies and eczema.
- d. Lungs disorders (pulmonary) such as suppression of respiratory function, difficulty in breathing and hardening of lung tissue.
- e. Frequent headaches, nausea and vomiting, diarrhea, increased body temperature, muscle wasting of the liver and insomnia.
- f. Disruption of endocrine hormones, such as decreased function of reproductive hormones (estrogen, progesterone, testosterone) and sexual dysfunction
- g. Disruption of reproductive health in adolescent girls, including changes in menstrual periods, menstrual irregularities or amenorrhea.

- h. For addicts, abusers and victims of narcotics abuse through syringes, especially the use of needles interchangeably, the risk can be contracted by diseases such as hepatitis B, C, and HIV which is no cure until now.
- i. Narcotics abuse can be fatal in the case of overdose when narcotics consumption exceeds the body's ability to accept it, and it can even cause death.

The physical impact includes:

- a. Work slowly, work carelessly, often tense and anxious.
- b. Loss of confidence, apathetic, delusional, suspicious.
- c. Aggressive, being violent and having brutal behaviour.
- d. to concentrate.
- e. Tend to hurt oneself, feeling insecure, even wanting to suicide

The impacts of drug abuse to socio-environment are:

- a. Mental disorders, anti-social and immoral as well as ostracized by the environment.
- b. Troublesome and a burden on the family.
- c. Education is disrupted and the future is bleak.

The physical, psychological, and social impacts are closely related. The physical dependency will cause tremendous pain (withdrawal) if abusers are not consuming drugs on time and strong psychological stimulus to consume drugs (the slang word is *suggest*). The physical and psychological impacts also correlate with social impact such as the suggestion to lie to parents, stealing, being grumpy, manipulative, etc.

Besides negative impacts to the users, narcotics also give negative impacts to the national security. As we know, national security is a nation's ability to face and overcome threats, challenges, obstacles, and interference both from inside or outside directly or indirectly to guarantee the identity, integrity, life of the nation and state in achieving national goals. In other word, national security is the nation's ability to defend its life and lives from threats. This ability is achieved only if the people are in healthy condition, physicaly and spiritually. Hence, if many nationals use narcotics, this nation would be weak and would not be able to face the threats.

### 1.4.3. Worker and Drugs

Worker is a drug abuse prone-social group. Based on drug case classification in 2017, there was a declining trend of drug case in total with the declining percentage of 10.07% from 51,464 cases in 2017 into 46,283 cases in 2018. The declining suspects occurred in the group of Civil Servants from 422 in 2017 into 399 in 2018, private sector workers from 25,984 in 2017 into 20,150 in 2018, entrepreneurs from 17,200 in 2017 into 16,483 in 2018.<sup>7</sup>

Meanwhile, the increasing suspects occurred in the group of Police/Indonesian Army from 367 in 2017 into 426 in 2018, farmers from 2,625 in 2017 into 2,628 in 2018, labor from 6,902 in 2017 into 7,540 in 2018, and unemployment from 8,650 in 2017 into 9,256 in 2018. The survey by BNN and PPK UI shows the estimation of prevalence rate in students and workers in drug abuse as shown in the following table

**Table 1**  
**Estimation on the Number of Drug Users and Current User Prevalence Rate According to Gender and Types of Group, 2017**

	Male		Female		% Prevalence	
	Minimum	Maximum	Minimum	Maximum	Male	Female
Workers living in boarding house	829,826	924,826	134,209	148,816	9.0	2.7
Workers not living in boarding house	1,582,573	1,743,573	314,445	347,340	2.9	0.9
Students living in boarding house	254,777	254,777	54,623	59,935	11.1	4.2
Students not living in boarding house	464,440	510,909	126,405	141,798	4.7	1.5
Female Sex Workers	-	-	63,191	69,719	-	27.6
Street children	12,671	13,802	1,949	2,187	17.4	10.8
Household	176,640	203,393	63,359	70,361	1.2	0.2

Source: BNN & PPKUI, 2017

<sup>7</sup> BNN, Summary of Journal on Drug Abuse and Illicit Trafficking Prevention and Eradication (P4GN), 2017, 2018 Edition



### 1.4.4 Students and Drugs

Each student has different need and shows different growth rate. Thus, this research refers to a narrow definition on student. It only refers to students in formal schools from Junior High School, Senior High School and University. The group of student is a social group which is prone to drug abuse.

Based on drug case classification in 2017, there was a declining trend in drug case relatively with the percentage of 10.07% from 51,464 cases in 2017 into 46,283 cases in 2018. The declining suspects occurred in university students from 1,327 in 2017 into 1,282 in 2018. In the group of students, the increase was from 1,050 in 2017 into 1,127 in 2018.<sup>8</sup> Based on research by BNN and PPK UI in 2016, there was a declining prevalence rate in pupils and university students in 2011-2016. In 2011, the prevalence rate was 2.9% and declined into 1.9% in 2016. It increased again in 2017. In general, the drug abuse prevalence in male students is higher than female students. Based on the residence, the prevalence rate of students living in boarding house is higher than those who are not living in the boarding house. It occurs both in male and female students as shown in the following table.

**Table 2**  
**Estimation on the Number of Drug Users and Current User Prevalence Rate Among Students According to Gender and Type of Group, 2017**

	Male		Female		% Prevalence	
	Minimum	Maximum	Minimum	Maximum	Male	Female
Students living in boarding house	254,777	254,777	54,623	59,935	11.1	4.2
Students not living in boarding house	464,440	510,909	126.,405	141,798	4.7	1.5

Source : BNN & PPKUI, 2017.

<sup>8</sup> BNN, Summary of Journal on Drug Abuse and Illicit Trafficking Prevention and Eradication (P4GN), 2017, 2018 Edition

Based on BNN and PPK UI research in 2016, there was a declining prevalence rate in students and university students in 2011-2016. In 2011, the prevalence rate was 2.9% and declined into 1.9% in 2016. It increased again in 2017.

#### **1.4.5 Household and Drugs**

According to Ministry of Health (1988), family is defined as the smallest unit in the society consisting of head of family and family members living in a place under the same roof and being interdependence. Family is also classified based on its types, namely: 1. Nuclear family, a family consisting of father, mother and children. 2. Extended family, a nuclear family added with relatives living in the same house. 3. Serial family, a woman and a man who are married more than once and are one nuclear family. 4. Single family, a family with divorce or death. 5. Composite family, polygamous family and living together. 6. Cohabitation, two people forming a family without a marriage.<sup>9</sup> From the definition of family, this research uses the definition of extended family or household.

As mentioned before, a family is the main fortress to fight against the danger of drug. Hence, family resistance is a condition created to face the danger of drug abuse. If the family resistance is created, the functions of family will work well to protect the family from the danger of drugs. Family serves the function of protection. Family may also serve as an institution to give a protection to its family members and to give a safe and peaceful feeling.

A complete family is very effective since the family gives love. It means that there is love between the family members. Thus, there is a strong bond in the family. If a family has it, then any life problems faced by the family members would be able to be handled and will not use drugs easily as the solution to the life problems. A family has the function to grow the religious basis to its children and family members. A family also has the function to educate children before entering the formal schools. A family should also educate children from the early age to the growing and forming personality stage.

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<sup>9</sup> Irwanteasosial.blogspot.co.id, downloaded on 7 Maret 2018

## **1.5. Research Methodology**

### **1.5.1. Research Location**

The field research was carried out in 13 provinces selected based on drug abuse national projection which was grouped into 3 categories namely: low, moderate, and high category. Each category takes four provinces with the highest national projection, except high category which takes five provinces by adding DKI Jakarta as the capital of Indonesia. The provinces in each category are as follow:

1. Low category, covering: Bali, West Kalimantan, DIY and South Sumatera
2. Moderate category, covering: East Java, Riau Island, Aceh and Papua
3. High category, covering: DKI Jakarta, North Sumatera, East Kalimantan, South Sulawesi, and West Java.

From each province of the research location, one city (the capital city of the province) is chosen to be studied. The capital city of the province is chosen with the reason that it is the city with most population and has the highest potential of drug abuse. However, there is an exception for particular provinces where the capital city has less population than the other cities. Then, the research location is another city, such as Batam in the Province of Riau Island.

Furthermore, For the capital city of province which lies very close with other regencies, the sample is taken from adjacent-location such as the city of Yogyakarta which is located very closely to the Regency of Sleman and Bantul, but these two regencies are inseparable with the city of Yogyakarta.

### **1.5.2. Data Collection Technique**

This is a quantitative research. Data collection is conducted in two techniques, namely structured interview and secondary data collection. Structured interview is done by using questionnaire to the respondent. The determination of sample quantity is done in quota system (quota sampling).

### **A. The Determination on the Number of Sample in The Group of Workers**

The workers taken as samples in this research are workers in formal sectors in companies with more than 20 workers. It occurs since the company data sampling is using BPS data which only covers medium and large enterprise (with more than 20 workers).

The companies are from 9 business sectors. They are:

1. Agriculture/plantation/forestry/hunting/and fisheries;
2. Mining and Quarrying;
3. Construction;
4. Trading/Restaurants and Accommodation Services;
5. Transportation/Warehousing and Communication;
6. Financial Institution /Real Estate/Rental & Business Services Companies;
7. Community/Social and Individual Services;
8. Processing Industry;
9. Electricity-gas-drinking water

If a location has less than 9 business sectors, real sectors in the location are taken. Each location takes at least 10 companies. The number of companies is taken proportionally. Meanwhile, the number of respondents in each company is determined proportionally.

### **B. Sample-taking in the Group of Students and University Students**

The data collection among students and university students is done by filling the answer for each question asked by officer. Hence, before filling the answer, respondents are guided by field officer. The filling of questionnaire can be done individually or collectively in a room.

The method to determine respondents from the group of students and university students:

- Group of students in Junior High School and Senior High School.
- The distribution of sample in each level is: 100 respondents from Junior High School, 150 respondents from Senior High School, 150 respondents from University Students. The number of respondents from Junior High School is smaller since it is assumed that more drug users are from Senior High School and University Students.

- In line with the quantity of respondents per level, the number of school as sample is: 4 Junior High Schools, 6 Senior High Schools, and 6 Universities. If a location has less than 6 universities, then all universities in that location are taken as samples.
- The sampling of Junior High School, Senior High School and University uses PPS (Probability Proportional to Size) method. With this method, the chosen school and university are those with more number of students. Meanwhile, the data of Junior High School and Senior High School in the city will be taken from Dapodiknas (basic data on primary and Junior High education) in the address <http://dapo.dikdasmen.kemdikbud.go.id/pd>, while the data of university will be taken from the website on information of higher education in the address <https://forlap.ristekdikti.go.id/perguruantinggi>.

### **C. Sample-taking in the Group of Household**

The number of sample in household is 5,200 respondents. The sample in household is determined with the classification on drug illicit-trafficking or abuse prone and non-prone urban village, with the comparison of 60% prone-urban village and 40% non-prone urban village based on the information from BNN or Regional Police in each location.

The sample is chosen by taking 2 drug illicit trafficking or abuse prone-sub districts randomly. Then, in each sub district, 2 prone-urban villages and 2 non-prone urban villages are taken randomly.

### **D. Secondary Data Collection**

Secondary data collection is done by searching documents in institutions working closely with drug abuse and illicit trafficking.

## **1.5.3. Data Analysis**

All compiled data is entered in SPSS data system. The data processing will also use SPSS program. Before data entry, data cleaning is conducted. Data cleaning is done before the final checking to ensure that there is no more invalid data. Data cleaning is done to make new category in the data obtained from open question.

Data analysis is conducted in two ways, namely frequency distribution and cross tabulation inter-variable. To ease the data processing, a dummy table will be made at first. To sharpen the analysis, the quantitative data finding will be strengthened with the result of document collection.

#### **1.5.4. Research Instrument**

The instrument in this research is a questionnaire which is composed in simple form to be easily understood by respondents since respondents must fill in each question in the questionnaire. Thus, the questionnaire is expected not to contain leap question or filter question. In general, type of question to respondents in the group of students, university students and workers is given to obtain data on:

1. Characteristics of respondents (gender, education level, type of school (private, public, religious), place of residence (boarding house, with parents, living with relatives, dormitory), pocket money;
2. Family background (parents' job, education of intact parents broken home, closeness to parents);
3. Utilization of spare time outside of school (participation in organizations / extracurricular);
4. Dealing with the police (crime, student fights, prisons);
5. Knowledge and attitudes on drugs;
6. Impacts of drug use (health impacts, economic impacts, social impacts);
7. Risky behaviors (smoking, drinking, sex before marriage);
8. Intervention of the P4GN Program (type of intervention program, origin of the intervention program, involvement in the program, benefits of the program);
9. Drug use behavior (frequency of use, types of drugs, how to use drugs, reasons for use, history of use, source to obtain drugs, place of use);

Meanwhile, type of research question in the group of household is to obtain data on:

1. Characteristics of household respondents (gender, age, education level);

2. Family background (number of family members, parents' occupation, education of parents and family members, intact/broken home parents, family harmony, close relations between family members);
3. Environmental safety from the danger of drugs (drug exposure in the community);
4. Household sensitivity (drug abuse concerns);
5. Household exposure and;
6. Family strategies in dealing with the danger of drugs.





II

## **SURVEY ON DRUG ABUSE AMONG STUDENTS AND UNIVERSITY STUDENTS**



## **SURVEY ON DRUG ABUSE AMONG STUDENTS AND UNIVERSITY STUDENTS**

The result of survey which is based on several key questions reveals the respondents characteristics comprising gender, education level, type of school (private, public, religious), place of residence (boarding house, with parents, living with relatives, dormitory), pocket money, family background (parents' occupation, intact/broken home parents' education, closeness with parents), the use of spare time outside of school (participation in organizations/extracurricular) and experience dealing with the police (crime, student fights, prisons). Other aspects which are as important as the respondents' characteristics are respondents' knowledge and attitude to drugs and drug use impact (health impact, economic impact, and social impact).

### **2.1. Respondents' Characteristic**

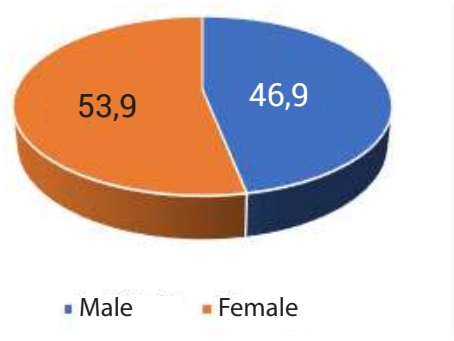
In the part of respondents' characteristics, several data to be exposed are: gender and education level, current place of residence, monthly pocket money, and parents' condition.

#### **2.1.1. Gender and Level of Education**

From the total 5,200 respondents from the group of students and university students, the majority is female with 2,761 (53.1%), while male respondents are 2,439 (46.9%). The gap between male and female respondents is not too standout. Hence, it indirectly emphasizes that

this survey is not gender-bias. The respondents sampling is based on the sampling method as mentioned in the previous chapter..

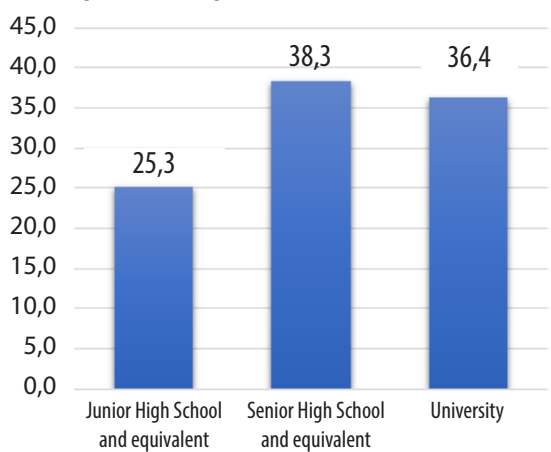
**Graphic 1. Respondents' Gender**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

From the level of education, respondents are divided into 3 clusters namely: Junior High School, Senior High School, and University Student. The number of respondents in this survey should be equal. The percentage of students is 25.3% in Junior High School and 38.3% in Senior High School. Meanwhile, respondent in university is 36.4%. The comparison between three clusters can be seen in Graphic 2 below.

**Graphic 2. Respondents' Level of Education**

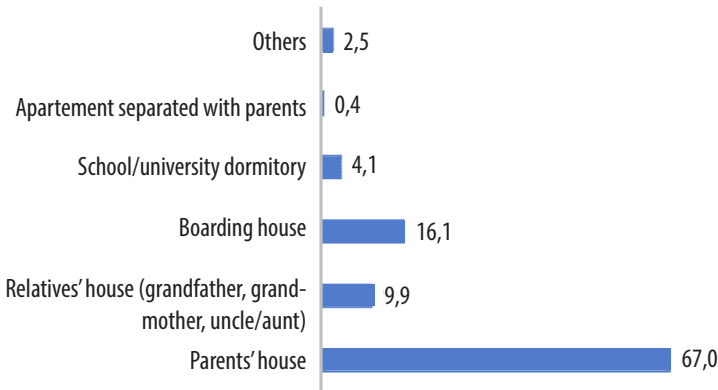


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

2.1.2. Current Place of Residence

Based on the result of survey, the majority of respondents are still living with parents (76%). The number of respondents living in the boarding house is in the second biggest number with 16.1%. Respondents studying in university are mostly living in boarding house. Meanwhile, respondents living in school/university dormitory or apartment are less than 5%. This data show that the majority or 2/3 respondents of students and university students are still under parents or relatives’ supervision and guidance since they are still living together. The rest of respondents are living alone without others’ supervision.

Graphic 3. Current Respondents’ Place of Residence

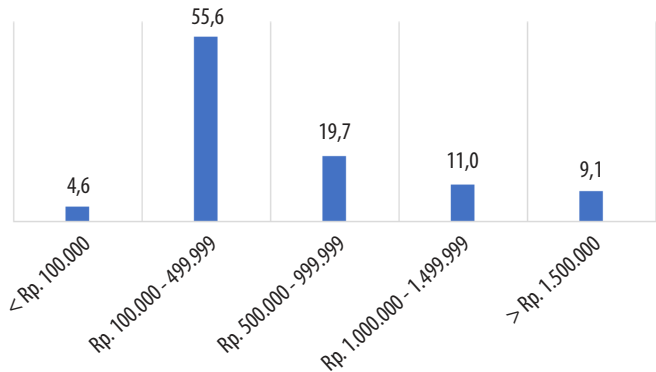


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

2.1.3. Monthly Pocket Money

The majority of respondents of 55.6% receive monthly pocket money amounting to Rp 100,000 to Rp 499,999. Respondents with monthly pocket money less than Rp 100,000 are the lowest (4.6%). Respondents with monthly pocket money of around Rp 500,000 to Rp 1 million are quite big of around 19.7%. Respondents with bigger amount of pocket money show smaller number. Interestingly, respondents with pocket money higher than Rp 1.5 million are relatively high of 9%. This survey data shows that the majority of students have enough money to buy things as they wish.

**Graphic 4. Respondents' Monthly Pocket Money**

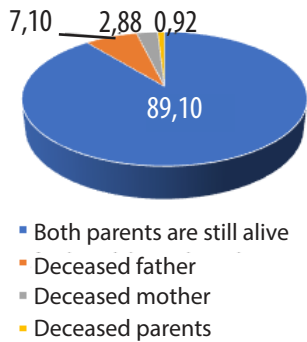


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

**2.1.4. Parents' Condition**

The majority of respondents of about 89% have parents who are still alive. Around 10% of respondents are orphans having only a father or a mother. Respondents with deceased parents are 0.92%. The survey shows that the majority of respondents have parents who are still alive and are still under parents' supervision both directly or indirectly.

**Graphic 5. Respondents' Parents Condition**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

## **2.2. Knowledge on Drugs**

### **2.2.1. Knowledge on Types of Drugs**

Narcotics are divided into several types, namely potent drugs, addictive substances, psychotropic drugs, natural drugs, synthetic drugs and semisynthetic drugs. Potent drugs, natural drugs, and semisynthetic drugs are divided again in several types (see Table 1). The respondents' knowledge on types of drugs is varied, but the majority of respondents (77.4%) know natural drugs such as marijuana (gele, cimeng, marijuana, getok, linda). The second most-known drugs are shabu, yaba, SS, tastus, and ubas as synthetic drugs.

For potent drugs, respondents know about headache medicine which is consumed excessively or overdose (49.3%) and headache medicine which is mixed with soda drink (41.1%). Potent drugs such as dextro (dextromethorpan) which is consumed excessively, tramadol, and trihexyphenidyl/trihex/THP/yellow pill are less known by respondents.

Other types of drugs known by respondents are aibon glue, gasoline, markers, and electric hits (64.6%). The high knowledge of respondents on addictive substances is probably since these substances are very close with people's daily life. Furthermore, the price is relatively cheap and it is easily obtained.

Meanwhile, synthetic drugs which are mostly known by respondents are shabu, yaba, SS, tastus, and ubas (methamphetamines) (71.1%). Types of ecstasy (inex, XTC, cece, happyfive) and bear tobacco or gorilla tobacco are known by 48.0% respondents. The amphetamine (seed, dex, adderall, dan dexamphetamine) is synthetic drugs which are less known by respondents.

Semi-synthetic drugs which are mostly known by respondents are heroin (60.20%) and cocaine (59.4%), while other types less known by respondents are putaw (28.5%) and morphine (38.3%). The respondents' knowledge on types of drugs is probably influenced by the use of drugs in their surrounding or types of drugs frequently heard. In details,



respondents' knowledge on types of drugs can be seen in table 3 below.

**Table 3. Respondent's Knowledge on Types of drugs, 2018**

Types of drug		N	%
<b>Potent Drug</b>			
1	Dextromethorphan consumed excessively	901	17.30
2	Tramadol	1,105	21.30
3	Trihexyphenidyl	1,163	22.40
4	Medicine for headache consumed excessively	2,564	49.30
5	Medicine for headache mixed with soda	2,137	41.10
<b>Addictive substances</b>			
6	Substances inhaled continuously (aibon glue, gasoline, markers, electric mosquito, etc)	3,357	64.60
<b>Psychotropics</b>			
7	Koplo pill, BK, Mboat, Mboti, roda	1,901	36.60
<b>Natural Drug</b>			
8	Marijuana	4,026	77.40
<b>Synthetics Drug</b>			
9	Tembakau beruang, tembakau gorilla	2,494	48,00
10	Ekstasi ( <i>inex, XTC, cece, happyfive</i> )	2,533	48,70
11	Amphetamine ( <i>Seed, Dex, Adderall, Dexamphetamine</i> )	1,090	21,00
12	Shabu, Yaba, SS, Tastus, Ubas ( <i>Methamphetamines</i> )	3,697	71,10
<b>Semi-Synthetics Drug</b>			
13	Putau (the lowest grade of heroin)	1,481	28.50
14	Morphine	1,990	38.30
15	Heroin	3,129	60.20
16	Cocaine	3,087	59.40
17	Others	64	1.23

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### **2.2.2. Distribution of Respondents According to Level of Education and Knowledge on Types of Drugs**

In general, the highest respondents' knowledge on types of drugs is potent drugs (77.42%) and addictive substances (77.92%). It occurs in respondents in the group of Junior High School, Senior High School, and University. Meanwhile, the lowest knowledge is on natural drugs of 36.56% compared to psychotropic (66.25%), semi-synthetic drugs (64.73%), and synthetic drugs (64.56%). The same pattern and tendency happens in all level of education (Junior High School, Senior High School, and University).

Respondents in Junior High School has the highest knowledge on potent drugs of 72.51%. Respondents in Senior High School have the highest knowledge on addictive substances of 79.18%, while respondents in University have the highest knowledge on addictive substances of 80.78%. Meanwhile, the lowest knowledge on types of drugs according to level of education is natural drugs for Junior High School (27.8%), natural drugs for Senior High School (35.93%), and natural drugs for university (43.295%).

The data above shows that respondents in Senior High School and University have higher knowledge on types of drugs than respondents in Junior High School. It can be seen from the higher proportion of respondents who have the knowledge on types of drugs. In other word, respondents in Junior High School have lower knowledge on types of drugs than respondents in Senior High School and University. Thus, the higher level of education, the higher knowledge on types of drugs it has.

**Table 4**  
**Distribution of Respondents based on the Level of Education and**  
**Knowledge on Types of Drugs (%)**

Type of drug	Junior high school	Senior high school	University	Total
Potent drug	72.51	78.12	80.10	77.42
Addictive substances	71.90	79.18	80.78	77.92
Psychotropic	50.80	66.48	76.72	66.25
Natural drugs	27.80	35.93	43.29	36.56
Synthetics drugs	61.23	65.28	66.10	64.56
Semi-synthetic drugs	57.50	66.83	67.53	64.73

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 2.2.3. Distribution of Respondents According to Knowledge on Types of Drugs and Province

Based on survey of respondents' knowledge on drugs, potent drugs and addictive substances are types of drugs mostly known by respondents in all provinces as survey locations (13 provinces). **Appendix 1** shows that these two types of drugs have the biggest proportion of respondents in each province, except South Sulawesi where most respondents know better semi-synthetic drugs of around 74.3%.

### 2.2.4. Distribution of Respondents According to Knowledge on the Impact of Drug Abuse to Health, 2018

Based on the survey, in general the respondents' knowledge on the impact of drug abuse to health is adequate; two third of respondents know the impact of drug abuse to health, except the impact of feeling stronger/energetic. The most known impact is that drugs can cause hallucination or imagination (77.6%), followed by depression, concentration at work and hallucination. The respondents' knowledge on the impact of drugs which is least known is that drugs make the users feel stronger or more eenergetic (34.9%). It means that respondents less know that drugs can make the users stronger.

**Table 5**  
**Distribution of Respondents Based on the Impact of Drug Abuse to Health, 2018 (%)**

<b>Impact to Health</b>	<b>Yes</b>	<b>No</b>	<b>Don't know</b>
Causing depression	70.70	2.80	26.40
Hallucination	77.60	0.90	21.50
Feeling stronger	34.90	16.80	48.30
Causing Addiction	69.60	1.80	28.50
Concentration at work	70.60	1.40	28.00

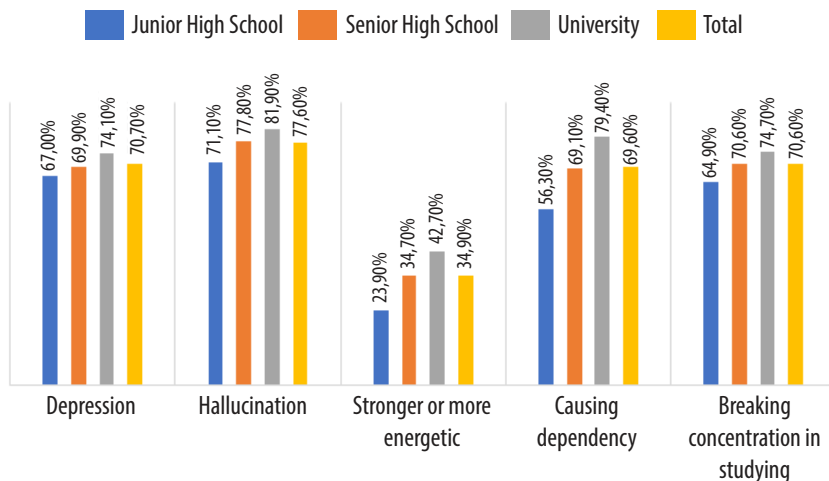
Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### **2.2.5. Knowledge on the Impact of Drug Abuse to Health Among Students and University Students**

The survey obtains data that respondents studying in Junior High School, Senior High School, and University mostly know the impact of drug abuse to health namely hallucination. Besides hallucination, respondents' knowledge on the impact of drug abuse is depression, problem with concentration in studying, and dependency. Another drugs impact namely making stronger or energetic is less known than other impacts. Less than half of respondents or around 42% knows this impact. In other word, making drug users feeling stronger is not one of the drugs impacts.

Based on the level of education, respondents' knowledge on the impact of drug abuse to health in university is higher than respondents' knowledge in Junior High School and Senior High School. From the survey, it can be seen that respondents with higher level of education have higher knowledge on the impact of drug abuse (see Graphic 6).

**Graphic 6**  
**Knowledge on Impact of Drug Abuse to Health Among Students, 2018**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 2.2.6. Distribution of Knowledge on the Social Impact of Drug Abuse Among Students and University Students

Based on the data of survey to students respondents with the knowledge on social impact such as shunned, bullied, hosted, and ostracized in the friendship, with friends from different school, with family, and people around the resident, it is known that concerning the knowledge of social impact on drug abuse, the majority of respondents know that the relation with society especially those in neighbourhood is in a problem of being shunned by the society. It is indicated that the highest average of survey on social impact shows 64.0% respondents choose this. Another impact highly known by respondents from the survey is being shunned in friendship of 60.9%. The next impact known by the majority of respondents is being ostracized by people in neighbourhood of 57.5%. Meanwhile, the least known social impact compared to other impacts is being bullied in the family of 28.5%.

**Table 6**  
**Distribution of Knowledge to Social Impact of Drug Abuse Among**  
**Students and University Students, 2018 (%)**

Social Impact	Junior High School	Senior High School	University	Total
<b>Friendship</b>				
a. Shunned	60.90	59.00	62.90	60.90
b. Bullied	36.30	35.40	38.80	36.90
c. Hostile	45.20	40.40	42.30	42.30
d. Ostracized	46.90	47.60	51.40	48.80
<b>Different school friends relationship</b>				
a. Shunned	53.90	44.40	46.90	46.60
b. Bullied	33.80	34.00	35.10	34.30
c. Hostile	32.20	37.50	36.50	38.20
d. Ostracized	42.90	42.90	43.70	43.20
<b>Relationship with family</b>				
a. Shunned	49.40	44.40	46.90	46.60
b. Bullied	24.80	27.70	31.70	28.50
c. Hostile	32.20	31.90	34.30	32.90
d. Ostracized	42.70	42.20	44.80	43.30
<b>Social relationship in the neighbourhood</b>				
a. Shunned	63.10	62.00	66.60	64.00
b. Bullied	37.80	40.20	47.70	42.30
c. Hostile	46.20	46.60	50.30	47.80
d. Ostracized	54.50	56.20	60.90	57.50

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 2.2.7. Distribution of Students' Knowledge on Issues due to Drug Abuse

Based on the survey, student respondents state that almost all issues may occur due to drug abuse. Adding the burden to family shows the highest percentage of 79.4%, followed by spending the saving of 78.1%. Immoral action is the least issue known by respondents as the

impact of drug abuse with 69% (see Appendix 2). This data shows that students' knowledge on the issues of drug abuse is adequate. Students know well the impact of drug abuse.

### **2.2.8 Attitude Toward Drug Abuse**

Respondents with Junior High School background are asked about their response on a case where their school friend is trading drugs. Most of them will report to school (41.00%) or report to police (36.40%). Those who choose to give advice are only around 15.70%. (See Appendix 3)

The attitude when being offered to buy drugs is mostly rejecting (98.305). Almost no respondents answer 'accepting'. Respondents with doubtful answer are only 1.60%. This pattern of answer also occurs in respondents in the education level of Junior High School, Senior High School and University.

In the case of having school friend which uses drug, more than half of Junior High School students (55.105) will report to the police. Some will give advice (20.30%) and prohibit (16.60%). Only few will keep silent.

## **2.3. Drug Abuse and Influencing Factors**

### **2.3.1. Prevalence Rate of Drug Use Among Students and University Students**

Overall, the prevalence rate among current users-students and university students is 3.2% or equivalent to 2,297,492 people. The prevalence rate of Senior High School students as ever used is the highest compared to Junior High School students and University students. In Senior High School, the prevalence rate is 6.40% (for ever used-respondents) and 3.60% (for current users-respondents).

The prevalence rate of Senior High School students is the highest compared to Junior High School students and university students. The prevalence rate of ever used-university students is below the



prevalence rate of Senior High School students with 6.00% followed by the prevalence rate of Junior High School students with 3.30%. Meanwhile, the prevalence rate of drug abuse in university student in the last one year is 2.80%.

**Table 7**  
**Prevalence Rate of Ever Used and Current User**  
**Among Students and University Students According to the Level of Education (%)**

	Ever used		Current User	
	N	%	N	%
Junior High School	63	4.80%	43	3.30%
Senior High School	127	6.40%	71	3.60%
University	113	6.00%	53	2.80%
<b>Total</b>	<b>303</b>	<b>5.80%</b>	<b>167</b>	<b>3.20%</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

The prevalence rate of drug abuse in Junior High School students is almost equal of 3.40% in male students and 3.20% in female students. Hence, current users among Junior High School students are equal in gender. The thing that differentiates is the use of drugs among Senior High School students and university students which is dominated by male students.

**Table 8**  
**Prevalence Rate of Current User Among Students and University Students**  
**According to the Level of Education and Gender**

	Male		Female	
	N	%	N	%
Junior High School	20	3.40	23	3.20
Senior High School	47	5.00	24	2.30
University	39	4.30	14	1.40
<b>Total</b>	<b>106</b>	<b>4.30</b>	<b>61</b>	<b>2.20</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

The survey among Junior and Senior High School students and University students shows that in the last one year, they consume drugs as an experiment or a trial (1.40%) with the highest reason compared to as a regular use (0.44%) and addiction (0.175). Meanwhile, students and university student respondents which use injected drugs are very low (0.06%).

**Table 9**  
**Current Use of Drugs According to the Status of Usage**

Status of Usage	N	%
Experiment	73	1.40
Regular	23	0.44
Addicted	9	0.17
Injected drug	3	0.06

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

The survey shows that the reason to try is very dominant (64.00%) among students and university students as ever used and current users, followed by the reason for having fun (16.80%). Being persuaded or forced by a friend is also a reason with quite high percentage of 6.60%. Why do student and university students use drugs? This group of respondents is difficult to say no to avoid conflict or not to be shunned by friends. Meanwhile, the factor of personal stress among students and university students shows the smallest percentage (5.605) among the four biggest reasons to use drugs in students and university student.

**Table 10**  
**Reasons of Using Drugs**

Reasons	N	%
Experiment	194	64.00
Having fun	51	16.80
Forced by friends	20	6.60
Forced by boyfriend/girlfriend	1	0.30
Stressed due to family problem	6	2.00
Stressed due to personal problem	17	5.60
Stressed due to job	1	0.30
Being set up	7	2.30
Others	6	2.00
<b>Total</b>	<b>303</b>	<b>100.00</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

From the result of survey in table 11, less Junior High School students consumes drugs. The Junior High School students tend to use non drugs-addictive substances. Meanwhile, Senior High School and University students consume both drugs and non drugs-addictive substances. Students in Senior High School consume more varied hazardous drugs, both drugs and non-drugs addictive substances than University students. The detail use of drugs and other addictive substances can be seen in the following table.

**Table 11**  
**Types of Drugs Consumed in the Past Year**

Type of drug and other addictive substances	Junior high school		Senior high school		University		Total	
	N	%	N	%	N	%	N	%
Dextromethorpan overly consumed	0	0.00	3	4.20	2	3.8	5	3.00
Tramadol	1	2.30	4	5.60	3	5.70	8	4.80
Trihexiphenidyl	0	0.00	3	4.20	2	3.80	5	3.00
Headache medicine overly consumed	4	9.30	14	19.70	8	15.10	26	15.60
Headache medicine mixed with drinking soda	3	7.00	6	8.50	2	3.80	11	6.60
Substances inhaled continuously (glue, gasoline, markers, electric mosquito, etc. )	12	27.90	9	12.70	2	3.80	23	13.80
Koplo pill, BK, mboat, mboti, roda	1	2.30	3	4.20	0	0.00	4	2.40
Marijuana	0	0.00	8	11.30	8	15.10	16	9.60
Bear tobacco, gorilla tobacco	0	0.00	3	4.20	2	3.80	5	3.00
Ecstasy	0	0.00	3	4.20	0	0.00	3	1.80
Amphetamine (seed, dex Adderall, dexamphetamine)	0	0.00	1	1.40	0	0.00	1	0.60
Methamphetamine	0	0.00	4	5.60	1	1.90	5	3.00
Putau	0	0.00	3	4.20	0	0.00	3	1.80
Morphine	0	0.00	3	4.20	0	0.00	3	1.80
Heroin	0	0.00	3	4.20	0	0.00	3	1.80
Cocaine	0	0.00	3	4.20	1	1.90	4	2.40

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 2.3.2 Prevalence Rate per Province

From the use of drugs and other addictive substances in the past one year, cities like Surabaya, Samarinda, Bandung, Jakarta and Yogyakarta are the cities with the highest prevalence rate of drugs and non drugs-addictive substances abuse compared to other cities.

**Table 12**  
**Prevalence Rate in Past Year According to the Level of Education**  
**Per Capital City of Province**

City	Junior high school		Senior high school		College		Total	
	N	%	N	%	N	%	N	%
Banda Aceh	1	1.00	5	3.30	4	2.70	10	2.50
Medan	5	5.00	2	1.30	3	2.00	10	2.50
Palembang	3	2.90	5	3.40	1	0.70	9	2.30
Batam	1	1.00	4	2.50	5	3.60	10	2.50
Jakarta	2	2.00	11	6.30	3	2.40	16	4.00
Bandung	7	6.90	5	3.40	6	4.00	18	4.50
Surabaya	8	7.60	14	9.40	8	5.50	30	7.50
Yogyakarta	7	6.90	7	4.70	1	0.70	15	3.80
Denpasar	0	0.00	0	0.00	1	0.70	1	0.30
Samarinda	5	5.00	8	5.20	8	5.40	21	5.30
Pontianak	1	1.00	3	2.00	1	0.70	5	1.30
Makassar	1	1.00	5	3.30	8	5.40	14	3.50
Jayapura	2	2.00	2	1.40	4	2.70	8	2.00

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Meanwhile, based on drugs dependency rate (ever used, regular and addiction), the highest prevalence rate among students and university students as current users are in Surabaya with ever used (4.5%), regular (2.0%), and addiction (1.0%).

**Table 13**  
**Prevalence Rate of Past Year**  
**According to the Status of Usage in 13 Capital Cities of the Province**

Cities	Experimental use	Regular	Addicted	Injected drug use
Banda Aceh	1,00%	0,75%	0,75%	-
Medan	2,00%	0,25%	0,25%	-
Palembang	1,25%	0,50%	0,50%	-
Batam	1,50%	0,75%	-	0,25%
DKI Jakarta	2,25%	1,75%	-	-
Bandung	3,50%	0,75%	0,25%	-
Surabaya	4,50%	2,00%	1,00%	-
Yogyakarta	2,00%	1,50%	0,25%	-
Denpasar	-	-	0,25%	-
Samarinda	4,25%	0,75%	0,25%	-
Pontianak	0,25%	0,50%	0,50%	-
Makassar	2,50%	0,75%	0,25%	-
Jayapura	1,50%	0,25%	-	0,25%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 2.3.3. Risky Behaviour toward Drug Abuse

The risky behaviour toward drugs abuse is the activity among students and university students with the frequency and intensity that may create vulnerability on drugs use.

Students and university students with drinking alcohol experience is about 26.7%. This percentage has experienced being drunk because of alcohol. Based on the level of education, drinking alcohol was experienced by 21.6% of Junior High School students, 29.6% of Senior High School students, and 25.9% of University students.

The second-quite prominent risky behaviour among students and university students is the habit of smoking reaching 12.3% in Junior

High School, 22.2% in Senior High School, and 24.4% in University. Generally, respondents admitted that they started smoking at the age of 14. The next risky behaviour among students and university students is smoking with vaping and visiting nightclubs. Smoking with vaping is known among 10.4% of Junior High School students and 12.8% of Senior High School students. They mostly confessed having vaping in the age of 16. Smoking with vaping is not popular among university students. Visiting nightclubs becomes a risky behaviour toward drug abuse (15.8%).

#### **2.3.4. Source of Obtaining Drugs (Source, Level of Ease)**

Students and university students obtain drugs from being offered (17.9%) and by buying (17.9%) from hang out friends. They also obtain drugs from being offered by a friend (10.6%) and by buying from school/campus mate (10.2%). All types of drugs are not difficult to get, but there are two types of drugs that are easiest to get despite that less respondents admit on it. They are marijuana (gele, cimeng, marijuana, getok, hemp leaf [linda]), and bear tobacco or gorilla tobacco.

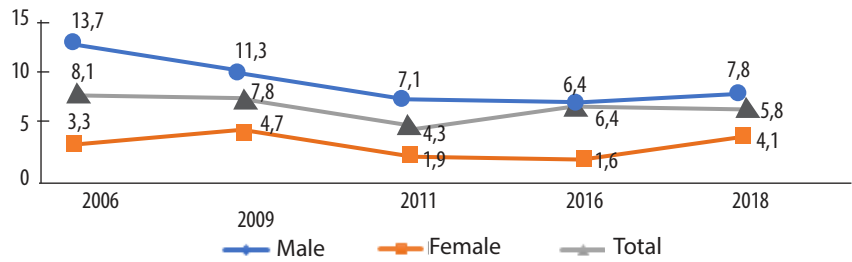
#### **2.3.5 Trend of Drug Use (Comparing the Use of Drugs Currently and Years before)**

Students and university students realize that drug use is not for medication, but for enjoying its impact since it is mostly started with trial, being offered, or buying from hang out friends. Since drug substances are addictive, there is the potential of addiction even in excessive amount, regularly and long enough that may cause health, physical, mental and social disorder. From the previous surveys, drug use through the years experiences fluctuating dynamic.

The prevalence rate of drug use is fluctuating. It proves that it is not easy to prevent drug use especially among students and university students. Graphic 7 shows that the trend of drug use among students and university students from 2006, 2009 and 2011 was declining from 8.1% (2006), 7.8% (2009), and 4.3% (2011). However, the prevalence rate of drug abuse in 2011 was higher than in 2016. The prevalence rate of drug abuse increased into 6.4% in 2016 and declined into 5.8% in 2018.

Based on gender, the prevalence rate of drug abuse among male and female was declining in 2011 and increasing in 2016 compared to in 2018. The prevalence rate is increasing respectably among female students and university students.

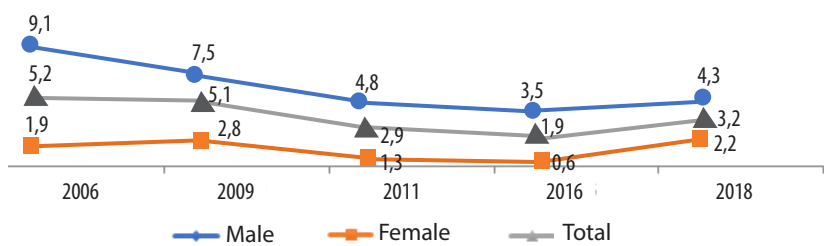
**Graphic 7**  
**Comparison of Prevalence Rate Among Students and University Students According to Gender**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Compared to prevalence rate of druig abuse in the past year among students and university students, there has been a difference. The tendency to use drugs among students and university students in total from 2006 to 2016 was declining from 5.2% (2006), 5.1% (2009), 2.9% (2011) and 1.9% (2016). The prevalence rate according to gender shows that prevalence rate of drug abuse both among male and female students and university students was declining from 2011 to 2016. However, compared to the prevalence rate of drug abuse in 2018, the prevalence rate was increasing both in total and between male and female. The detail prevalence rate is shown in Graphic 8.

**Graphic 8**  
**Graphic of Prevalence Rate Comparison among Drug User Students and University Students in the Past Year According to Gender**



Source : Survey on Drug Abuse and Illicit Trafficking, 2018





## **SURVEY ON DRUG ABUSE AMONG WORKERS**





## SURVEY ON DRUG ABUSE AMONG WORKERS

### 3.1. Characteristics of Respondents Among Workers

The total number of respondents in the capital city of 13 provinces is 5,200 workers, consisting of 3,066 male workers (59.0%) and 2,134 female workers (41%). The result of reaserach survey on drug abuse in 13 provinces in Indonesia shows that more than half of respondents (51%) are married and 47.2% are not married.

**Table 14**  
**Distribution of Respondents According to Profession Sector**

	Professional sector	N	%
1	Agriculture		0.0%
2	Mine dan excavation	60	1.2%
3	Industry of proces	463	8.9%
4	electricity, gas, water	40	0.8%
5	construction	640	12.3%
6	commerce, restaurant dan hotel	2,411	46.4%
7	transportation, warehousising, communication	460	8.8%
8	finance, real estate, rental dan service company	140	2.7%
9	Social service/ private social	986	19.0%
Total		5,200	100%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

## **3.2. Knowledge and Attitude on the Danger of Drugs Among Workers**

### **3.2.1. Knowledge on Drugs Among Workers**

Worker respondents' knowledge on the types of drugs is varied. Basically, there are six groups of drugs type known by respondents, such as potent drug, addictive substances, psychotropic, natural drugs, synthetic drugs, and semi-synthetic drugs.

Semi-synthetic drugs are quite well known by most respondents, such as heroine (57.5%) and cocaine (53.7%). Meanwhile, morphine and putaw including etep and pete are also known by respondents reaching 45.2% and 43.4% from the total respondents (Table 15).

Worker respondents also know types of potent drug which have the effect as drugs. Most respondents (31.5%) know that headache-potent medicine can cause tremendous effect when consumed excessively. Around 31.0% respondents know that headache medicine when mixed with soda may cause drugs effect also. Meanwhile, psychotropic drug mostly known by workers is koplo pill of around 39.1%.

**Table 15**  
**Respondents' Knowledge on Types of Drugs**

Types of drug		N	%
<b>Potent medicine</b>			
1	Dextromethorphan overly consumed	1,278	24.6%
2	Tramadol	1,068	20.5%
3	Trihexyphenidyl	887	17.1%
4	Medicine for headache overly consumed	1,640	31.5%
5	Medicine for headache that's mixed with drinking soda	1,610	31.0%
<b>Addictive substances</b>			
6	Substances inhaled continuously (glue aibon, gasoline, markers, electric mosquito, etc	2,436	46,8%
<b>Psychotropics</b>			
7	Koplo pill, BK, Mboat, Mboti, roda	2,436	46,8%
<b>Natural drug</b>			
8	Marijuana	3,572	68.7%
<b>Synthetics drug</b>			
9	Bear tobacco, gorilla tobacco	1,911	36.8%
10	<i>Ecstasy</i>	2,912	56.0%
11	<i>Amphetamine (seed, dex, addrall, dexamphetamine)</i>	1.123	21.6%
12	<i>Methamphetamine</i>	3,431	66.0%
<b>Semi-synthetics drug</b>			
13	Putau (the lowest grade of heroin)	2.255	43.4%
14	Morphine	2,348	45.2%
15	Heroin	2,992	57.5%
16	Cocaine	2,790	53.7%
17	Others	64	1.23%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Respondents also know other impacts of drug abuse in three categories such as interfering the relation with office-mate, family or relatives, and society (**see Appendix 4**). More than half of respondents

(51.3%) acknowledges the social impact of drug abuse such as being ostracized from the community (besides office-mate). They will be also ostracized from the community when being caught of using drugs. The percentage reaches 37.9%.

3.2.2. Attitude Toward Drug Abuse

Attitude is a representation of what someone will do in facing a situation related to drug abuse. This research shows that more than one third of respondents (38.6%) has the viewpoint and will give an advice when knowing that an office-mate is selling drugs. More than one fourth of respondents (28.2%) will report it to the police, while 24.8% respondents will prohibit the office-mate (Table 16), only 6.6% will keep silent.

Table 16  
Respondent’s Attitude when Office Mate Deals Drugs

WHAT’S IS YOUR RESPONSE IF YOUR OFFICE MATE INVOLVED IN DRUGS DEALING	N	%
Keep silent	344	6.6%
Advise them	2,009	38.6%
Forbid them	1,287	24%
Report them to the police	1,468	28%
Others	92	1.8%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

The respondents’ knowledge and attitude is varied when knowing that their friend and family are involved in drug abuse. This research shows that almost half of respondents (45.5%) will expressly prohibit when their parents are involved in drug abuse. Furthermore, almost half of respondents (48.9%) will strictly prohibit if their spouse, husband or wife, is involved in drug abuse (Table 17).

**Table 17**  
**Respondents' Attitude When Friends or Family Members Use Drugs**

Attitude	If respondents have				
	Office mate using drugs	Relatives using drugs	Parents using drugs	Boyfriend/Girlfriend	Your couple using drugs
Keep silent	7.1%	2.2%	1.3%	1.0%	0.9%
Advise them	43.7%	39.7%	32.5%	25.2%	25.3%
Forbid them	22.5%	37.0%	45.5%	45.0%	48.9%
Report to the police	24.5%	19.3%	18.6%	22.5%	20.2%
Others	2.2%	1.9%	2.1%	6.4%	4.6%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 3.3. Drug Abuse Among Workers and Influencing Factors

#### 3.3.1. Prevalence Rate of Drug Use among Workers

The prevalence rate of drug use in the past year among workers in 13 capitals of the provinces in 2018 was **2.10% or equivalent to 1,514,037 workers**. Table 18 below shows that male workers have higher prevalence rate compared to female workers of 2.7%.

**Table 18**  
**Prevalence of Ever Use and Current User**

GENDER	EVER USED DRUG		CURRENT USE	
Male	199	6.50%	84	2.70%
Female	49	2.30%	24	1.10%
<b>Total</b>	<b>248</b>	<b>4.80%</b>	<b>108</b>	<b>2.10%</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Based on prevalence of drug use among workers in the past year (current users), this survey tries to further study the prevalence according to age, level of education, marital status and residence. Table 19 shows that the prevalence of drug use among male workers both under and over 30 (thirty) years old is not too significant reaching 43 workers (2.70%) under 30 years old and 41 workers (2.80%) over 30 years old.

**Table 19**  
**Prevalence Rate of Current Use According to Gender**

<b>CURRENT USE</b>				
<b>Group of age, educational level, status, residence</b>	<b>N</b>		<b>PREVALENCE</b>	
	<b>Male</b>	<b>Female</b>	<b>Male</b>	<b>Female</b>
<b>GROUP OF AGE</b>				
<30	43	14	2.70%	1.00%
30 +	41	10	2.80%	1.40%
<b>EDUCATIONAL LEVEL</b>				
Junior high school and under	8	2	4.00%	2.90%
Senior high school	42	9	2.60%	0.90%
Diploma degree	34	13	2.80%	1.30%
<b>MARITAL STATUS</b>				
Not married	40	10	3.00%	0.90%
Menikah	44	9	2.60%	1.00%
Divorce (live)	0	5	0.00%	12.80%
Divorce (die)	0	0	0.00%	0.00%
<b>RESIDENCE</b>				
Own house	20	5	2.10%	1.00%
Family's house	37	8	3.40%	0.80%
Official residence	1	1	0.60%	1.30%
House for rent	26	10	3.10%	1.80%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018



The survey in 2018 was also targeted on the age of workers when they try to use drugs for the first time according to the type of consumed drugs. Types of consumed drugs are divided into 6 (six) groups, namely: potent drugs, addictive substances, psychotropic, natural drugs, synthetic drugs, and semi-synthetic drugs.

**Table 20**  
**Prevalence Rate of Current User**  
**According to the Status of Usage**

Type of use	N	%
Experiment	73	1.40%
Regular	23	0.44%
Addicted	9	0.17%
Injected drug	3	0.06%
Others	92	1.80%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

In 2018, group of workers in 13 capitals of the provinces was not working in all sectors, but only in five sectors which have major contribution to the economy of the capital of the province. Since agriculture in each city is not among the six major sectors, workers in agriculture sector are not being surveyed.

**Table 21**  
**Prevalence Rate of Current Use**  
**According to Work Field, Position and Staffing Status**

SECTOR	MALE+FEMALE	
	N	%
Agriculture		
Mining and Quarrying		
Processing Industry	9	1.90%
Electricity, gas and water		
Construction	15	2.3%
Trade, restaurant, hotel	44	1.80%
Transportation, ware housing, communication	13	2.80%
Finance, real estate, rental and service company	1	0.70%
Social/private services	26	2.60%
<b>POSITION IN COMPANY</b>		
Leader (manager, supervisor, foreman)	12	2.40%
Administrative staff	11	1.10%
Operational staff	85	2.30%
<b>STATUS OF STAFFING</b>		
Permanent workers	57	2.20%
Contract workers	35	1.70%
Daily workers	15	3.70%
<i>Outsourcing workers</i>	1	0.60%
Others	92	1.80%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

The first time-drug users have various reasons. Based on Table 22, the reason to use drugs for the first time is distributed in eight reasons which give a significant prevalence rate in this survey. The reason of trial is the reason with then highest percentage of 57.7% followed by the reason of being persuaded/forced by friends with the percentage of 11.7%. The reason with the lowest percentage of 0.8% is being persuaded/forced by boyfriend/girlfriend

**Table 22**  
**Respondent's Reason of Using Drugs for the First Time**

Reason of using drug for the first time	N	%
Experiment	143	57.7
Having fun	25	10.1
Forced by friend	29	11.7
Forced by lover	2	0.8
Stressed due to family problem	4	1.6
Stressed due to personal problem	10	4.0
Stressed due to work problem	3	1.2
Being set up	26	10.5
Others	6	2.4
<b>Total</b>	<b>248</b>	<b>100.0</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 3.3.2. Prevalence Rate per Province

The lowest prevalence rate among drug used-workers in 13 capitals of provinces occurs in Bali and Papua with 1.50%. However, this position is not in line with the prevalence rate of current users-workers in West Kalimantan with 1.00%. Despite that the gap with the lowest position is not significant, Bali, Papua, Riau Islands and D.I.Yogyakarta are in the second lowest position after West Kalimantan.

**Table 23**  
**Prevalence Rate of Current Use According to Province and Gender**

Province	Ever used		Current use		Gender	
	N	%	N	%	Male	Female
Aceh	19	4.80%	7	1.80%	2.20%	0.80%
North Sumatera	16	4.00%	6	1.50%	2.00%	0.70%
South Sumatera	30	7.50%	14	3.50%	5.90%	0.60%
Riau Islands	21	5.30%	5	1.30%	1.40%	0.80%
Jakarta	22	5.50%	6	1.50%	1.80%	0.80%
West java	33	8.30%	22	5.50%	5.20%	5.80%
East java	22	5.50%	11	2.80%	3.20%	1.70%
Special region of Yogyakarta	18	4.50%	5	1.30%	2.30%	-
Bali	6	1.50%	5	1.30%	1.90%	0.50%
East Kalimantan	21	5.30%	8	2.00%	3.70%	-
West Kalimantan	8	2.00%	4	1.00%	1.4%	0.80%
South Sulawesi	26	6.50%	10	2.50%	3.50%	1.20%
Papua	6	1.50%	5	1.30%	1.20%	1.30%
<b>Total</b>	<b>248</b>	<b>4.80%</b>	<b>108</b>	<b>2.10%</b>		

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Based on Table 23, when current user workers are grouped according to gender, it can be seen in Table 24 that in general the average prevalence rate for male in each province is relatively higher than female, except in West Java and Papua where the prevalence rate of female is higher than male.

The province with the highest prevalence rate of male-current users is South Sumatera (5.90%), followed by West Java (5.20%) and East Kalimantan (3.70%). Meanwhile, the highest prevalence rate for female-current user workers is in West Java (5.80%), followed by East Java (1.70%) and Papua (1.30%). The prevalence rate of current user workers in West Java is relatively the same, 5.20% for male and 5.80% for female. Meanwhile, the lowest prevalence rate for female-current

user workers is in D.I. Yogyakarta and East Kalimantan with 0% since there are no female workers used drugs in the past year.

Survey in 2018 also sees the prevalence rate according to status of drug use, namely whether current users are being in trial with the frequency of once to five times, in a regular use with the frequency of 6 to 49 times, addicts with the frequency of more than 50 times in the last one year, and using injection drugs.

**Table 24**  
**Prevalence Rate of Current Use**  
**According to Province and Status of Usage**

Province	Experiment	Regular	Addict	Injected drug
Aceh	1.00%	-	0.75%	
North Sumatera	1.25%		0.25%	
South Sumatera	2.25%	0.50%	0.25%	0.50%
Riau Islands	1.00%	0.25%		
Jakarta	1.50%			
West java	2.00%	3.00%	0.25%	0.25%
East java	2.00%		0.25%	
Special region of Yogyakarta	1.25%	0.50%		
Bali	0.75%	0.50%		
East kalimantan	1.50%	0.50%		
West kalimantan	0.75%		0.25%	
South Sulawesi	2.00%	0.50%		
Papua	1.00%		0.25%	
<b>Total</b>	<b>1.40%</b>	<b>0.44%</b>	<b>0.17</b>	<b>0.06%</b>

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 3.3.3. Risky Behaviour toward Drug Abuse Among Workers

Survey on drug illicit and abuse in 2018 also touches upon the risky behaviour among workers in the last one year. The risky behaviour consists of three behaviours namely smoking, vaping, and drinking alcohol. The prevalence rate of the most risky behaviour among workers, both male and female, is smoking with 38.20%.

**Table 25**  
**Number of Smoker, Electric Smoker, and Alcoholics among Workers in the Past Year According to Gender**

Kind of worker's habit	Male		Female		Total	
	N	%	N	%	N	%
Smoking cigarette	1,879	61.30%	105	4.90%	1,984	38.20%
<i>Smoking electric cigarette (vaping)</i>	290	9.50%	32	1.50%	322	6.20%
Drinking alcohol	752	24.50%	125	5.90%	877	16.90%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Among workers, they smoked for the first time at the age of 6 years old. They did vaping at the age of 10 years old and drinking alcohol at the age of 7 years old.

**Tabel 26**  
**Umur Pertama kali Merokok, Mengisap Rokok Elektrik, dan Minum Minuman Beralkohol**

Type of Worker's habit	Mean	Median	Mode	Minimum	Maximum
Smoking cigarette	18	18	20	6	54
<i>Smoking electric cigarette (vaping)</i>	24	22	20	10	42
Drinking alcohol	20	20	20	7	45

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 3.3.4. Source to Obtain Drugs Among Workers

Based on Table 27, workers obtain drugs mostly by being given by hang out friends with the percentage of 23.00%. The second source to obtain drugs with the percentage of 21.40% is by buying from hang out friends. Hence, hang out friends are the easiest source to obtain drugs. The least way to obtain drugs is through relatives/family with the percentage of 2.40% followed by being given by unknown person with the percentage of 3.20%.

**Table 27**  
**Ways to Obtain Drugs (N= 248)**

<b>The way to get drug</b>	<b>N</b>	<b>%</b>
Directly buying from the dealer	44	17.70%
buying from the courier	40	16.10%
buying from office mate	26	10.50%
Buying from other than office mate	41	16.50%
Buying from hangout friends	53	21.40%
Buying from friends with the same hobby	25	10.10%
Buying from relatives	6	2.40%
Buying in drug store	19	7.70%
Buying from the strangers	13	5.20%
Given by lover	16	6.50%
Given by office mate	24	9.70%
Given by friends other than office mate	39	15.70%
Given by hangout friends	57	23.00%
Given by friends with the same hobby	30	12.10%
Given by relatives	14	5.60%
Given by strangers	8	3.20%
Given by parents	0	0.00%
Others	7	2.80%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Table 28 shows the level of easiness in obtaining drugs and types of drugs in eeking place. The categories are very easy, easy, not easy, and doesn't know. Among workers, marijuana is type of drugs that is easy (5.205) and very easy to be obtaines in working place (5.20%). Other types of drugs with very easy and easy category are shabu, yaba, SS, tastus, ubas with the percentage of 4.00%. The survey also confirms that working place is also a very easy place to trade drugs.

**Table 28**  
**The Ease of Obtaining Drugs in Workplace According to Types of Drugs**  
**(N = 248)**

Type of Drug	Ease of Getting Drug			
	Very Easy	Easy	Not Easy	Don't know
Marijuana	5.20%	5.20%	22.20%	67.30%
Bear tobacco, gorilla tobacco	0.80%	3.60%	19.40%	76.20%
Ecstasy	2.00%	3.60%	21.40%	73.00%
Methamphetamine	4.00%	4.00%	21.40%	70.60%
Putau (heroin)	2.00%	2.00%	19.40%	76.60%
Morphine	1.20%	1.60%	21.80%	75.40%
Cocaine	1.20%	1.60%	21.80%	76.20%
Others	0.40%	-	69.40%	30.20%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018





## IV

# **FAMILY VULNERABILITY IN FACING THE DANGER OF DRUG ABUSE**



## IV

# FAMILY VULNERABILITY IN FACING THE DANGER OF DRUG ABUSE

## 4.1. Profile of Household Respondent

### 4.1.1. Characteristic of Household Demography

Household in this research is a group of people living in the same house and consuming the food from the same kitchen. In other word, household is a residential unit with the orientation on duties to carry out economy-production, consumption and distribution function to meet the daily need. But the most important thing is the social unit with the interaction between one household and anothers (Fox, 1982)..<sup>10</sup>

The number of research sample in drug abuse prevention is 5,200 housheolds spread in 13 capitals of provinces in Indonesia. A number of 400 households in each province (capital of the province) is taken as samples. Household respondents find no difficulty in anwering all questions in the quuestionnaire. The target of household respondents reaches 100 percent.

Around 46.92% respondents are son/daughter and son/daughter-in-law. The proportion of son/daughter and son/daughter-in-law living in the same house shows the characteristic of respondent household with little children and children in school age who are still under the

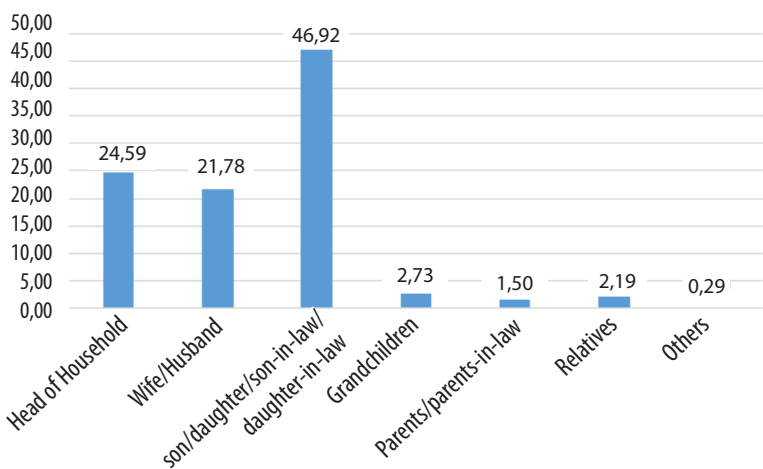
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<sup>10</sup> Fox, R, .1982 *Kinship and Marriage*. Cambridge: Cambridge University Press.

parents’ supervision. Meanwhile, son/daughter-in-law living in the same house does not mean that they are not independent. It is more on the reason that they are there to takecare elderly parents. Thus, they are not leaving the house.

Another biggest proportion is more household in research location is filled by head of household of 24.59%. It means that many heads of household is represented only husband or wife. This data strengthen the previous hypothesis that many son/daughter and son/daughter-in-law are not allowed to leave the house to takecare the parents.

**Graphic 9. Number of Household Members**

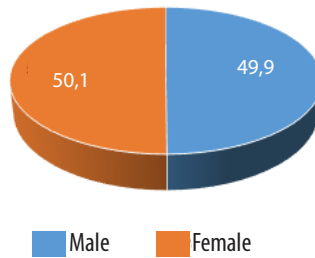


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

**4.1.2 Gender of Household Members**

Reviewed from the composition of the household members’ gender in 13 research locations, the number of male is bigger than female (50.1% compared to 49.9%) **(see Graphic 10)**. This data shows that the sex ratio of household members is similar to sex ratio of Indonesian population in total. It means that the number of male and female population is balanced. It can be summarized that their participation is economic development is the same.

**Graphic 10. Gender of Household Members**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### **4.1.3. Composition of Household Members According to Age**

The distribution of household member respondents according to age shows that most respondents are young. The group of young respondents is in productive age ranging from 15 to 19 years old and 20 to 24 years old with the percentage of 10 percent each (**Graphic 11**). Conversely, the proportion of household members in older age is declining. This graphic also shows that the pyramid of household members is big in the middle and smaller in the upper and lower part.

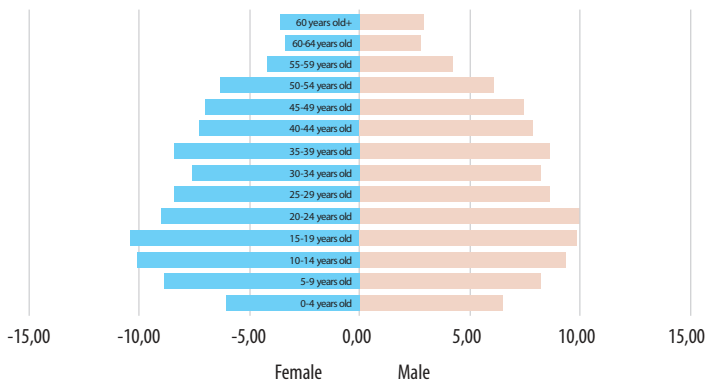
The number of household members with young age is almost the same with the composition of Indonesian population according to age. Based on composition of age of household member respondents, it can be concluded that the ratio of dependency is low. Thus, it is assumed that the economic potential in a region is the high number of productive age. The high number of productive age can be utilized optimally as an asset in resources development.

On the other hand, many of them are household member respondents in school age. Usually, this group of age is very vulnerable to drug abuse. In fact, older population is also involved in drug abuse. It is proved that drug offenders are mostly over 50 years old.<sup>11</sup>

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<sup>11</sup> Interview with Head of LAPAS Class IIA, Banda Aceh

**Graphic 11. Household Members by Gender**

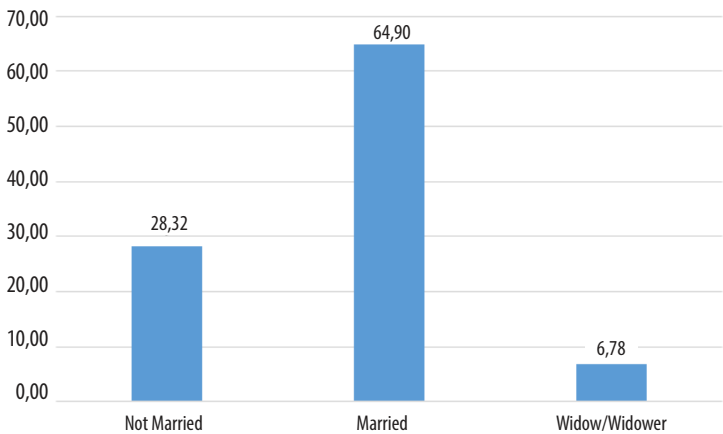


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

**4.1.4. Marital Status of Household Members**

Married respondents show the biggest proportion with 64.905. It is well understood since the research is conducted in household. Meanwhile, the proportion of not married respondents is 28.32%.

**Graphic 12. Marital Status of Household Members**

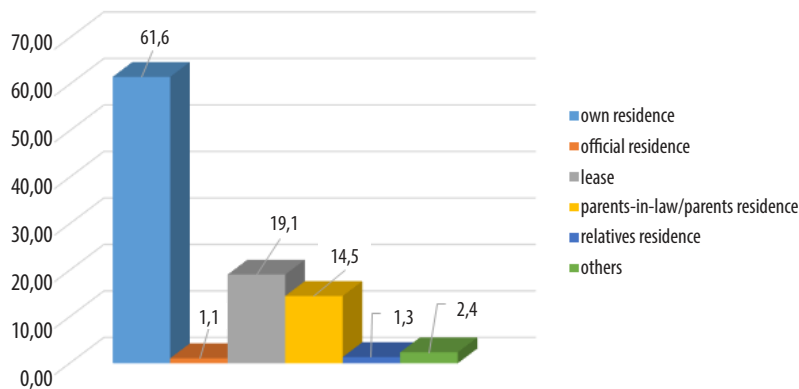


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

4.1.5. Residence Status of Household Members

The highest distribution of household members' residence status is living in their own residence (61/6%). This data indirectly shows the socio-economy level of the household members. Meanwhile, household member respondents who reside in leased residence is 19.1%. Those who reside in parents/parents-in-law's house is 14.5%. Only few reside in official residence or relatives' residence of around less than 3% (Graphic 13).

Graphic 13. Residence Status



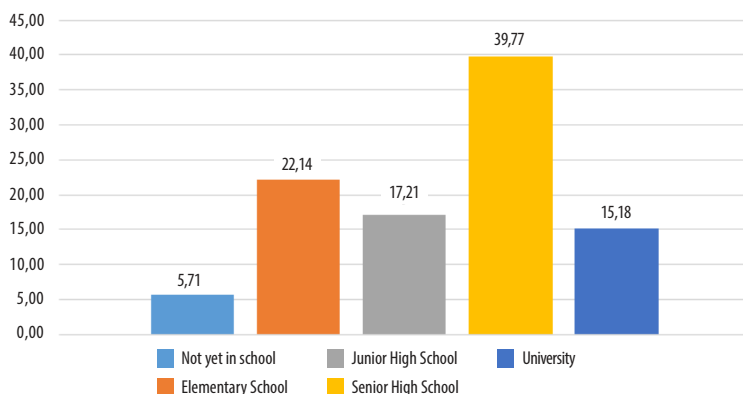
Source: Survey on Drug Abuse and Illicit Trafficking, 2018

4.2. Social Condition

4.2.1. Education

Both formal and non formal education is one of the means in improving the quality of human resources in a region, especially in supporting the development. According to the level of education, the distribution of household respondents is dominated by Senior High School graduates with 39.77% followed by Elementary School graduates with 22.14%, Junior High School graduates with 17.21% and University graduates with 15.18% (**Graphic 14**). It can be concluded that the education of household respondents is qualified since more than half of respondents are Senior High School or University graduates.

**Graphic 14. Level of Education of Household Members**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

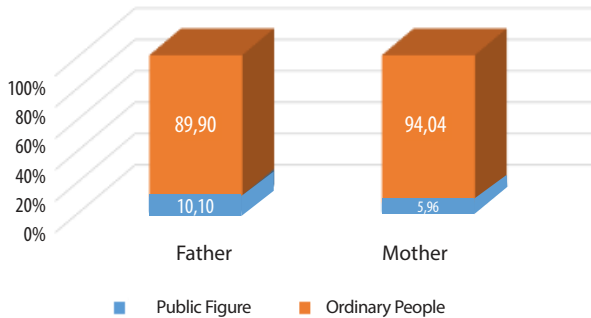
#### **4.2.2. Social Status of the Head of Household**

The figure of a head of household is very important in shaping the toughness of a household. Head of household, both a father or a mother, is a captain to guide and shape the character of household members which is different one to another. Related to drugs abuse, head of household has an important role in taking care each member of the household from the use of illicit goods.

The result of research on drug abuse in 13 capitals of the provinces shows that a father or a mother as the head of household is in majority having the status of ordinary people. The slight difference is that a father as a head of household shows more his figure in the society than a mother as a head of household (10.1% compared to 5.96%) (**Graphic 15**).



**Graphic 15. Social Status of Head of Household**

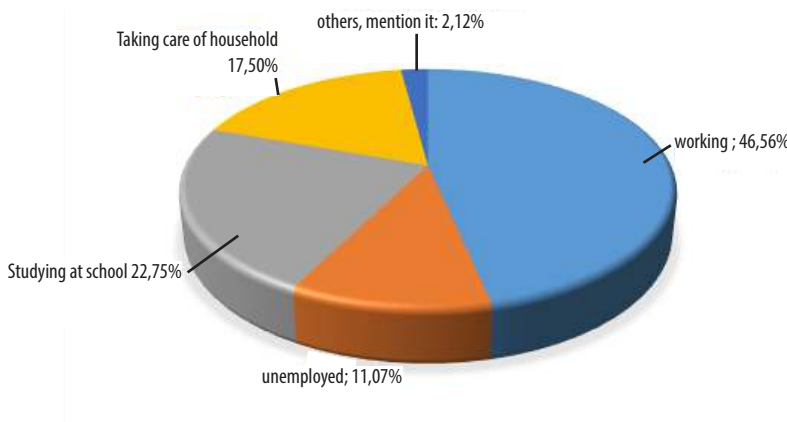


Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### **4.2.3. Economic Condition of Household According to Occupation**

The distribution of household member respondents' activity in the last one month shows biggest portion in respondents with occupation (46.56%). Most of the working respondents are male. This phenomenon usually occurs in the society since male is taking the responsibility in a household. Meanwhile, the unemployed household members or those who are applying for jobs is 11.10% (**Graphic 16**).

**Graphic 16. Household Members' Main Activity in the Past Month**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### 4.2.4. Household's Average Income and Spending

Income and spending are two economic indicators which become the measurement to describe society's welfare in a region. The higher amount of income and spending in a society becomes a proxy that the people's welfare of the area is improving. The improving economic condition in a region refers to the development of Gross Regional Domestic Product (GRDP).

The development of GRDP is influenced by the development of each supporting sector. GRDP of a region is derived from three sectors namely primary, secondary, and tertiary sector. The primary sector is a sector of which the main activity related to direct natural resources management such as agriculture, mining and quarrying. Secondary sector is the sector which further manages primary sector, such as gas processing industry, water and building. Tertiary sector is the supporting production sector such as trade, services, hotel, telecommunication, and transportation.

According to household's average income and spending in 13 capitals of the provinces, it can be described that the income is two times higher than the spending (Rp. 4.46 million compared to Rp 2.75 million) (**Table 29**). This data indirectly shows that most respondents have very good level of welfare. It means that the average of household respondents have the residual income due to less spending.

**Table 29. Household Income and Spending**

Data	Income	Spending
Mean	4,462,676	2,758,771
Median	3,500,000	2,350,000
Mode	3,000,000	2,000,000
Standard Deviation	3,359,972	1,868,223
Minimum	100,000	80,00
Maximum	42,000,000	20,000,000

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

### 4.3. Sensitivity of Household toward the Danger of Drugs

#### 4.3.1. Environment Exposure from the Danger of Drugs

Almost all residential environments are involved in drugs, both as dealer, user, dealings with the police, or deceased victim due to drugs. Despite that the percentage of each category is below 15%, the data shows that the level of exposure of the environment toward the danger of drugs is quite high. It can be seen from the result of research in 13 capitals of the provinces that the level of exposure of drug users in residential environment is quite high of 14.0 (Table 30).

Despite of its small proportion, there are inhabitants died due to drugs exposure (4.8%). Anticipation should be taken immediately upon this warning to early prevent illicit drugs in residential environment and its inhabitants.

**Table 30**  
**Environment Exposure from the Danger of Drugs**

Description	Many	Few	None	Don't know
People dealing drug in your environment	11.2	13.6	44.7	30.5
People using drug in your neighbourhood	14.0	17.5	40.8	27.7
People arrested by the police as they deal drug	9.7	14.7	47.1	28.6
People arrested by the police as they use drug	10.5	16.7	45.8	26.9
People died as they use drug	4.8	7.1	61.1	27.0

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### 4.3.2. Knowledge on the Impact of Drugs Use

In general, there are three impacts when someone uses drugs namely health, social, and economic impact. The three impacts are correlated one and another. If someone's health is worsening due to drugs, it will also influence the social and economic condition.

More than three fourth of respondents say that drug abuse gives impact on health such as stress (84.06%), hallucination (84.375), dependency (84.48%), and concentration disruption in studying (81.96%).

The social impact of drugs is varied according to social relation. However, most respondents say that drug users are mostly shunned by others. The research shows that most drug user-respondents in their social relation will be shunned since they interference the relation with neighbours (61.5%), friends (56.25), relatives (39.0%), and society near residence (56.5%) (Table 31).

**Table 31**  
**Knowledge on the Impact of Drugs Use**

Description	Yes	No	Don't know	Total
<b>A. Health Impact</b>				
Drug abuse potentially causes stress	84.06	2.35	13.60	100.00
Drug abuse can lead to hallucination	84.37	1.85	13.79	100.00
Drug abuse can make nore energetic	49.31	19.37	31.33	100.00
Drug abuse can cause addiction	84.48	2.10	13.42	100.00
Drug abuse can interfere concentration in studying	81.96	2.31	15.73	100.00
<b>B. Social Impact</b>				
<b>1. Drug use impact to neighbourhood relationship</b>				
a.Shunned	61.5	26.7	11.9	100.00
b. Bullied	20.0	57.8	22.2	100.00
c. Hostile	23.8	55.6	20.7	100.00
d. Ostracized	28.1	51.9	19.9	100.00
<b>2. Drug use impact to friendship</b>				
a.Shunned	56.2	30.7	13.1	100.00
b. Bullied	20.4	57.7	21.9	100.00
c. Hostile	23.2	55.4	21.4	100.00
d. Ostracized	27.3	52.4	20.3	100.00
<b>3. Drug use impact to family relationship</b>				
a.Shunned	39.0	48.6	12.3	100.00
b. Bullied	16.0	64.2	19.7	100.00
c. Hostile	16.8	63.8	19.5	100.00
d. Ostracized	19.8	61.6	18.7	100.00

Description	Yes	No	Don't know	Total
<b>4. Drug use effect to social relationship in the neighbourhood</b>				
a.Shunned	56.5	30.3	13.2	100.00
b. Bullied	21.1	57.0	21.9	100.00
c. Hostile	24.3	54.4	21.2	100.00
d. Ostracized	29.6	51.2	19.2	100.00
<b>C. Economic effect</b>				
Study continuity	89.5	2.7	7.8	100.00
Difficulty to get job	86.2	3.6	10.3	100.00
Family burden	89.6	2.4	8.0	100.00
Spending the saving	88.3	2.4	9.3	100.00
Wasting family's properties	89.6	2.3	10.0	100.00
Selling personal asset	87.9	2.2	9.9	100.00
Spending on cost due to law process	85.9	2.7	11.4	100.00
Adding Debt	86.7	2.4	10.9	100.00
Conducting crime (stealing , robbing)	88.8	2.4	8.8	100.00
Being drug courier	84.6	2.8	12.6	100.00
Immoral act	81.3	4.1	14.6	100.00
Lainnya	2,0	3,7	94,3	100,00

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

#### 4.3.3. Knowledge on Drugs Prone-Place and Occupation

The respondents' knowledge on drugs prone-place and occupation is varied. However, the most drugs-prone place according to respondents is nightclubs with 94.12%. Other drugs illicit-prone places are hotel apartment, and low cost apartment (72.46%). The next prone-places are boarding house/dormitory (68.12%), billyard place (67.85%), and hangout places (66.56%) (**Table 32**).

**Table 32**  
**Drug Abuse and Illicit Trafficking-Prone Places**

Location	Yes	No	total
Nightclubs (discotheque, bar, pub, and cafe)	94.12	5.88	100.00
Salon, spa, massage parlor	50.15	49.85	100.00
lounge	66.56	33.44	100.00
Coffee shop, Javanese food stall (angkringan)	41.10	58.90	100.00
Billiard center	67.85	32.15	100.00
Internet cafe	49.42	50.58	100.00
Hotel, apartment, low cost apartment	72.26	27.54	100.00
restaurant	32.46	67.54	100.00
Boarding house	68.12	31.88	100.00
school/campus	48.85	51.15	100.00
Work place	39.65	60.35	100.00
Street alleys	65.54	35.46	100.00
Others	3.83	96.17	100.00

Source: Survey on Drug Abuse and Illicit Trafficking, 2018

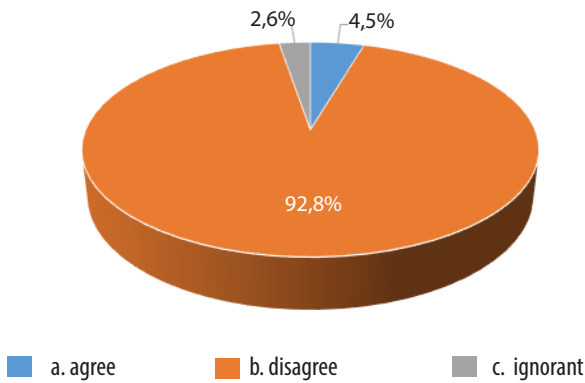
#### 4.3.4. View and Attitude on Drugs Abuse

People's view on drugs abuse is changing through the years. In the past, people thought that the main factor which caused drugs abuse was worse social conditions such as habitation, unemployment, and poverty. It is highly dependent on someone's knowledge. However, this view is shifting. People said that drugs abuse was caused by family issue. This view occurred since 1960s (Pattison, 1980).<sup>12</sup>

The research on drugs abuse in 13 capitals of the provinces shows that most household respondents (92.8%) are not agree on drugs abuse (**Graphic 17**). It means that there is a tendency of respondents to avoid, keep a distance, and hate drugs abuse which is now very booming. It is since most household respondents have the basic knowledge on drugs abuse that it gives a positive impact on forming the respondents' attitude especially in avoiding and keeping a distance from drugs abuse.

<sup>12</sup> Pattison. 1980. "Pandangan Keluarga dan Masyarakat Terhadap Permasalahan Penyalahgunaan dan Ketergantungan Narkoba". Medanoline.

**Graphic 17. Attitude toward Drugs Abuse**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

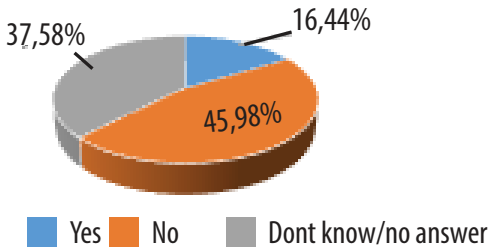
**4.4. Household Exposure Toward the Danger of Drugs**

**4.4.1. Risky Behaviour of Household Members**

The risky behaviour is negative behaviour which enables someone to be exposed by drugs. Several risky behaviours in this book include smoking, vaping, drinking alcohol, visiting nightclubs, and hanging out.

Graphic 18 below shows that 16.44% of household members have the habit of smoking. Meanwhile, 45.98% of household members do not have the habit of smoking. However, it should be noted that many respondents do not know whether that their members are smoking or not (37.58%). It shows their ignorance toward the behaviour of their household members.

**Graphic 18. Household Members with Smoking Habit**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

Meanwhile, household members with risky behaviour usually have the habit of vaping (1.98%), drinking alcohol (2.27%), visiting nightclubs (1.00%), and hanging out (3%).

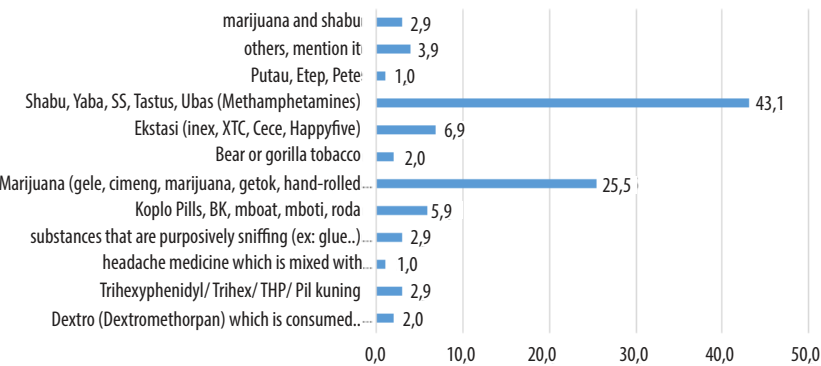
#### 4.4.2. Household Exposure toward the Danger of Drugs

Household exposure shows the quantity of household and household members exposed to drugs use. The research shows that only 92 households of which the members are exposed to drugs. Meanwhile, there are 102 household members that are exposed to drugs.

Types of drugs mostly used by household member respondents are Methamphetamine, such as Shabu, Yaba, SS, Tastus and Ubas. The number of household members who consume these drugs is 43.1% from the total 102 users. Another type of drugs consumed by household members is marijuana with 25.5% (**Graphic 19**). Hence, these two types of drugs are the most popular among household members.

The drugs-exposed household and risky behaviour (smoking, smoking electric cigarette, drinking alcohol, visiting night entertainment place, and night hanging out) are closely related. The result of Chi square shows that all risky behaviours, except smoking electric cigarette (vaping), show significant relation with drugs exposure in household with 1% of the level of mistake.

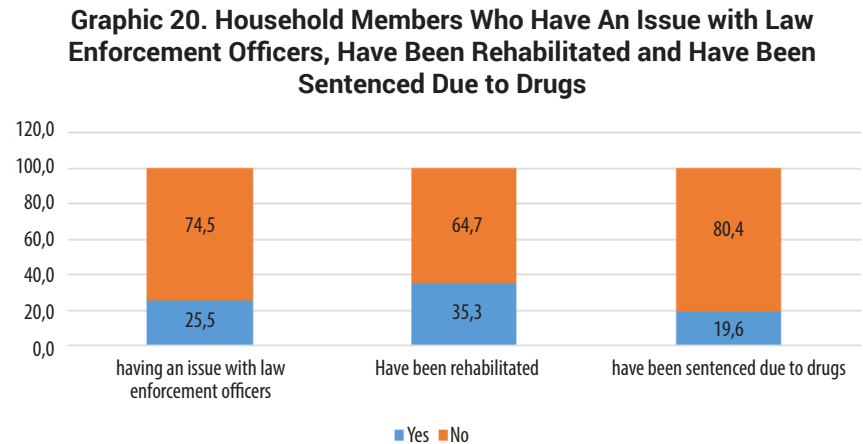
**Graphic 19. Types of Drugs Consumed by Household Members**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018



Besides being exposed to drugs, several household members are also known for having an issue with the law due to drugs, being rehabilitated, or having an issue with law enforcement officers. As seen in graphic 20, the number of household members who have been sentenced due to drugs is 19.6% or 1 out of 5. The household members who have been rehabilitated are 35.3% or 1 out of 3. Meanwhile, the household members who have been in a case with law enforcement officers are 25.5% or 1 out of 4.



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

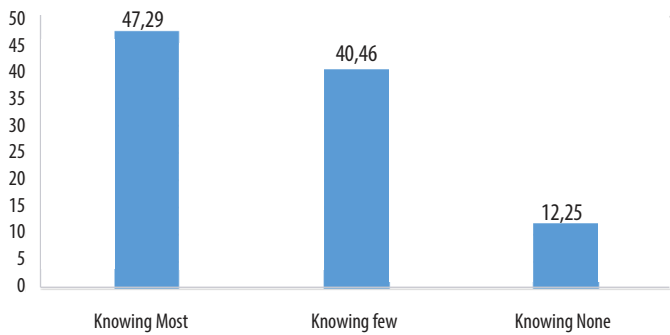
#### 4.5 Household’s Strategy to Face the Danger of Drugs

Each household has a strategy to face drugs’ threat in order to avoid drugs exposure. There are 9 (nine) indicators as the household’s strategies to avoid drugs exposure. They are:

1. Involving household members in drug prevention activities
2. Spending time together with household members
3. Involving household members in religious activities
4. Knowing members’ close friends
5. Knowing household members’ behavior outside the house
6. Prohibiting household members from smoking
7. Prohibiting household members from drinking alcohol
8. Prohibiting household members from visiting nightclubs
9. Prohibiting household members from hanging out or staying up late

Graphic 21 shows the head of household's knowledge on household members' close friend and behaviour outside the house. Only 47.92% heads of household know most household members' close friends. Around 40.46% heads of household know very few of household members' close friends and 12.25% heads of household know none of household members' close friends.

**Graphic 21. Distribution of Household which Knows the Household Members' Close Friend**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018



**V**

**P4GN PROGRAM  
INTERVENTION  
(PREVENTION AND  
ERADICATION OF DRUG ABUSE  
AND ILLICIT TRAFICKING)**





## **P4GN PROGRAM INTERVENTSION (PREVENTION AND ERADICATION OF DRUG ABUSE AND ILLICIT TRAFICKING)**

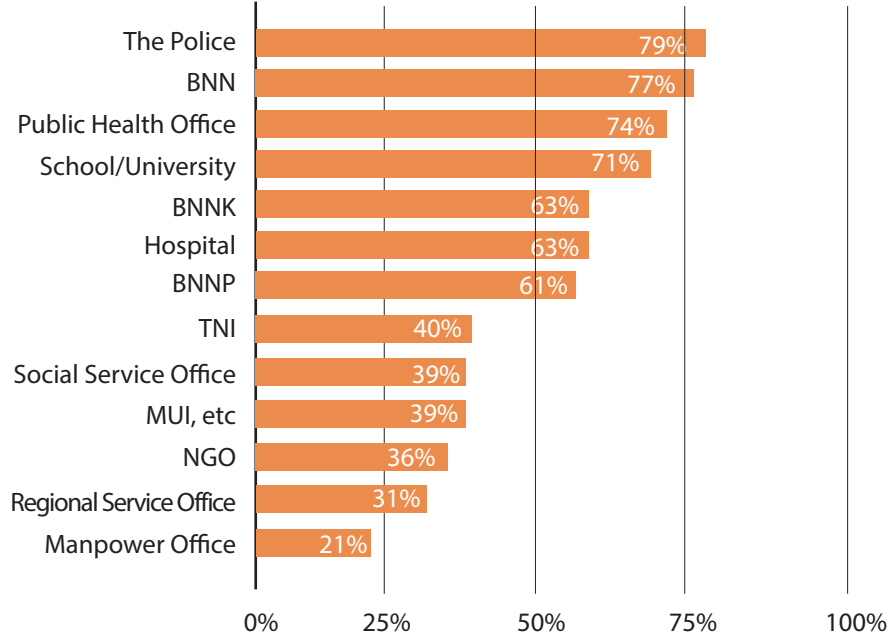
### **5.1. P4GN Program Implementation**

The survey shows that the most appropriate activity to deliver P4GN program according to students as respondents is lecture/ counselling. The detail percentage is as follow:

- 1) Lecture/counseling: 1,857 (35.7%) respondents.
- 2) Interactive discussion/dialogue: 399 (7.70%) respondents.
- 3) Anti-narcotics film/entertainment stage/music concert: 596 (11.50% respondents
- 4) Seminar/workshop: 478 (9,20%) respondents.
- 5) Training as a member of the anti-drug Task Force in the company: 779 (15%) respondents.
- 6) Anti-drug campaign: 660 (12.70%) respondents.
- 7) Joint sports activities: 346 (6.70%) respondents.
- 8) Others: 85 (1.60%) of respondents.

The survey also shows that according to students and university student respondents, the police is the most appropriate institution to carry out P4GN program, followed by BNN, Public Health Office, school/university, BNNK, Hospital, BNNP, TNI (Indonesian Army), Social Services Office, MUI, NGO, Regional Office of Religion and Manpower Office. The detail percentage is shown in the following graphic.

**Graphic 22. P4GN Program Implementing Agency According to Student Respondents**



Source: Survey on Drug Abuse and Illicit Trafficking, 2018

**5.2. P4GN Program among Workers**

**5.2.1. Knowledge on P4GN Program**

From the total 5,200 worker respondents surveyed in 13 cities in Indonesia, all of them has seen or heard about drugs prevention promotion. From 93 narcotics user-workers, 86.10% has seen or heard about P4GN. From 4,420 non drugs user-workers, 86.80% has never seen or heard about drugs prevention promotion. The rest answers “do not know”.

Based on the survey, BNN as the institution which gives drugs prevention activity is known by 76.20% respondents. Other institutions which carry out P4GN program beside BNN are the police (69.605), Public Health Office (63.305), hospital/health services (53.005), NGO (38.00%), Indonesian Army (38.705), company (38.605), social services

office (37.90%), religious organization/MUI (37.405), and manpower office (30.00%). The detail is in the following Table 33.

**Table 33**  
**Implementing Agency of P4GN Program**  
**According to Drug Users and Non-Drug User Workers**

Institutions conducting drug preventions	Using drugs		Not using drugs		Total	
	N	%	N	%	N	%
BNN (National Narcotic Board)	83	76.90%	3,878	76.20%	3,961	76.20%
BNNP (Provincial-National Narcotic Board)	64	59.30%	3,092	60.70%	3,156	60.70%
BNNK (Municipal-National Narcotic Board)	63	58.30%	3,021	63,60%	3,294	59.30%
Health office	57	52.80%	3,237	63.60%	3,294	63.30%
Indonesian National Police	68	63.00%	3,553	69.80%	3,621	69.60%
Indonesian National Army	45	41.70%	1,965	38.60%	2,010	38.70%
Regional Office of Religion affairs	25	23.10%	1,498	29.40%	1,523	29.30%
Social services Office	40	37.00%	1,929	37.90%	1.969	37.90%
Manpower office	31	28.70%	1,527	30.00%	1,558	30.00%
Non-governmental organization	41	38.00%	1,935	38.00%	1,976	38.00%
hospital	54	50.00%	2,701	53.00%	2,755	53%
Religious organization	33	30.60%	1,910	37.50%	1,943	37.40%
Company	45	41.70%	1,964	38.60%	2,009	38.60%
others	1	3.70%	137	12.30%	138	12.10%

Sumber : Survei Penyalahgunaan dan Peredaran Gelap Narkoba, 2018

The most appropriate activity of drugs prevention program according to workers is lecture or counselling (39.90%), anti narcotics campaign (13.20%), interactive discussion or dialog (11.30%), anti narcotics film/entertainment stage/music concert (10.40%), joint sports activity (8.70%), seminar or workshop (8.00%), and training as a member of the anti-drug Task Force in the company (7.20%).

**Table 34**  
**The Most Effective Program for Drugs Prevention According to Workers**

The most effective activities	Using drugs		Not using drugs		Total	
	N	%	N	%	N	%
Lecture/counseling	45	41.70%	2,031	39.90%	2,076	39.90%
Interactive discussion/dialog	11	10.20%	576	11.30%	587	11.30%
anti-drug film/ performance/ concert	13	12.00%	529	10.40%	542	10.40%
Seminar/ workshop	9	8.30%	407	8.00%	416	8.00%
Anti-drug Taskforce training in the company						
Anti-drug campaign	8	7.40%	680	13.40%	688	13.20%
Joint Sport activity	11	10.20%	440	8.60%	451	8.70%
others	0	0.00%	56	1.10%	56	1.10%

Source: Survey on Drug Abuse and Illicit Trafficking, 2018





**VI**

## **CLOSING**



## CLOSING

### 6.1 Summary

1. The survey on student and university student shows that the majority of student and university student respondents knows about the type of natural drugs, synthetic drugs and semi-synthetic drugs, such as marijuana (gele, cimeng, marijuana, getok, linda), shabu, heroin and cocaine. The majority of respondents also knows non drugs-addictive substance especially headache medicine which is consumed excessively and headache medicine which is mixed with soda drink. The prevalence rate of current user-students and university students is 3.2% or equivalent to 2,297,492.
2. The prevalence rate of current user-workers in 13 capitals of provinces is 2.10%. This prevalence rate is slightly declining compared to the prevalence rate in 2017 of 2.90%. Based on gender, drug users are dominated by male. Drug user among workers is not limited to gender since both male and female workers have become drug users.
3. 3. Based on the survey of sources to obtain drugs, marijuana (10.405) and shabu (8.005) should be taken into attention since they are relatively easy and very easy to be obtained in working place. It can be concluded that working place is a place of drugs transaction and drugs abuse.
4. The research shows that only 92 households of which the members are exposed to drugs. The total household members exposed to drugs are 102.

5. Type of drugs mostly consumed by household member respondents is methamphetamine, such as shabu, tastus and ubas. The number of household members who consume this type of drug is 43.1% from the total 102 members. Another type of drugs consumed by household members is marijuana of 25.5%.

## 6.2 Recommendation

Several recommendations to prevent drugs among students/ university students, workers and households are:

1. The need of special supervision on drugs-prone places, such as: nightclubs massage place (beauty shop and sauna), coffee shop, billyard palce, internet cafe, hotel/apartment/low cost apartment, restaurant, boarding house/dormitory, school/campus, working places, street alleys.
2. Information-sharing or socialization for certain professions that are most likely to abuse drugs, such as song guide, bartender, masseuse, DJ, capster, billyard guide, night shift worker, cruiser.
3. Information-sharing or socialization on the impact of drugs abuse should be encouraged in household.
4. In order to protect household members from drugs abuse, heads of household are suggested to conduct these activities:
  - Involving household members in drug prevention activities
  - Spending time together with household members
  - Knowing members' close friends
  - Knowing household members' behavior outside the house
  - Consistenly prohibiting household members from smoking
  - Consistenly prohibiting household members from drinking alcohol
  - Prohibiting household members from visiting nightclubs, staying up late or hanging out

### 6.2.1 Prevention

1. Advising boarding house owner and local people to increase the supervision to boarding house occupants by involving community security and order maintenance police officer (Babinkamtibmas) and law enforcement officer posted in villages (Babinsa).

2. Cooperation with school/university in increasing the supervision in hang out places visited oftenly by students or university students.
3. Advising school/university to monitor students or university students indicated as drugs users..
4. Conducting information sharing or socialization to the society that drugs user is not a 'disgrace' to the family, but a patient who needs a medication or rehabilitation to recover them from drug addiction

### **6.2.2 Community Empowerment**

1. Increasing raids in boarding houses by involving the community.
2. Increasing the empowerment of anti-drugs task force and community to jointly supervise hang out places in the community environment.
3. Increasing the role of parents and teachers in giving accompaniment to ex-drug addicts to come back to the community and school/university and not to use drugs again (relaps).

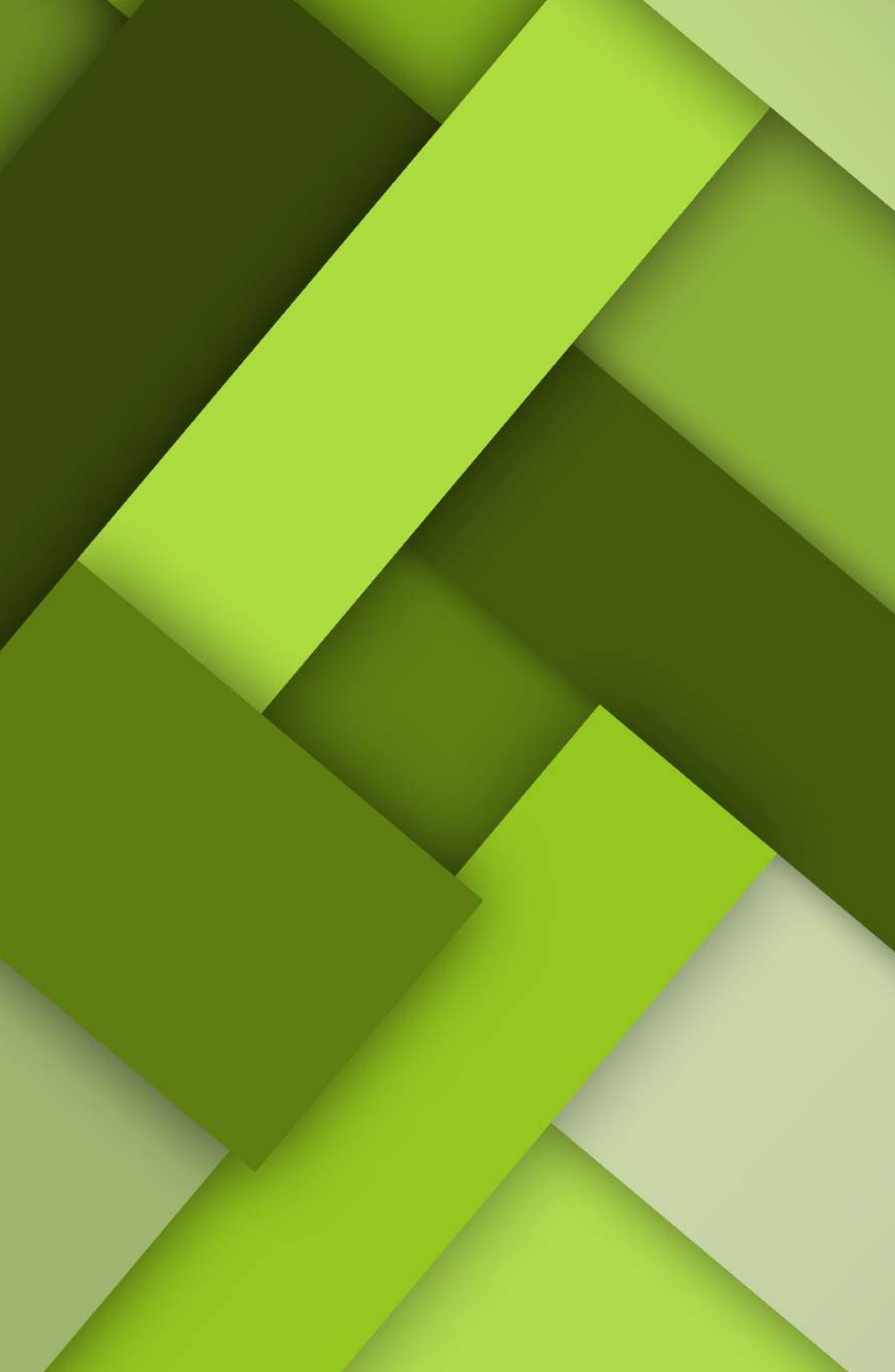
### **6.2.3 Rehabilitation**

1. Information sharing or socialization on the existence of rehabilitation center by forming network between BNN – School/University – Rehabilitation Center.
2. The involvement of school or university in Integrated Assesment Team in drugs abuse case by students or university students. The purpose is that students not involved in drug illicit trafficking can be rehabilitated to save their future.





## **LIST OF ABBREVIATION & LIST OF RESEARCHERS**





<b>ARQ</b>	<b>: <i>Annual Report Questionnaire</i></b> <i>is an Annual Development Report on Drugs Abuse and Illicit Trafficking in Indonesia</i>
<b>Babinsa</b>	<b>: <i>Bintara Pembina Desa</i></b> <i>Functioning to carry out coaching and having the main duty to train people in the field of defense and security as well Supervision of Defense and Security facilities and infrastructure at villages.</i>
<b>Bhabinkamtib-mas</b>	<b>: <i>Bhayangkara Pembina Keamanan dan Ketertiban Masyarakat.</i></b> <i>In charge of conducting community coaching, early detection and mediation/negotiation to create conducive conditions in the village</i>
<b>BNN</b>	<b>: <i>Badan Narkotika Nasional</i></b> <i>a non-ministerial government agency in Indonesia</i>
<b>BNNP</b>	<b>: <i>Badan Narkotika Nasional Provinsi</i></b> <i>a vertical agency of the National Narcotics Agency Organization (BNN)</i>
<b>BNNK</b>	<b>: <i>Badan Narkotika Nasional Kabupaten/Kota</i></b> <i>a vertical agency of the National Narcotics Agency Organization (BNN)</i>
<b>CND</b>	<b>: <i>Commission on Narcotic Drugs</i></b> <i>a decision-making body under UNODC</i>
<b>DAINAP</b>	<b>: <i>Drug Abuse Information Network for Asia and The Pacific</i></b> <i>an online data transmission system in the Asia Pacific reported quarterly and annually</i>

<b>Dinsos</b>	<b>: Dinas Sosial</b> <i>Agency that helps the Regent carrying out government affairs in the social field</i>
<b>Disnaker</b>	<b>: Dinas Tenaga Kerja</b> <i>Manpower office/Carrying out the regional preparation and implementation in the field of Labor</i>
<b>GLOBAL SMART : Information Sharing on Drugs Illicit Trafficking</b>	
<b>Kanwil Agama</b>	<b>: Kantor Wilayah Kementerian Agama</b> <i>Government services in the religious field..</i>
<b>LAPAS</b>	<b>: Lembaga Perasyarakatan</b> <i>A place to conduct coaching of inmates and correctional students in Indonesia</i>
<b>LSM</b>	<b>: Lembaga Swadaya Masyarakat</b> <i>Non governmental organization, An organization founded by individuals or a group of people who volunteered to provide services to the public without aiming to profit from its activities.</i>
<b>MUI</b>	<b>: Majelis Ulama Indonesia</b> <i>An institution that facilitates Islamic scholars, zuama, and intellectuals in Indonesia to guide, foster and nurture Muslims throughout Indonesia</i>
<b>NPS</b>	<b>: New Psychoactive Substances</b> <i>Drug abuse, whether in pure or mixed form, which is not controlled by the 1961 Single Convention on Narcotics Drug or the 1971 Convention on Psychotropic Substances but which poses a public health threat.</i>

**P4GN** : Pencegahan dan Pemberantasan, Penyalahgunaan dan Peredaran Gelap Narkoba (Prevention and Eradication of Drug Abuse and Illicit Trafficking)

**PPK UI** : Pusat Penelitian Kesehatan Universitas Indonesia  
Health Research Center of University of Indonesia

**RS** : Rumah Sakit (Hospital)  
*A professional health care institution of which the services are provided by doctors, nurses, and other health professionals.*

**RT** : Rumah Tangga (Household)  
*The division of territory in Indonesia under the Neighborhood.*

**SATGAS Anti Narkoba** : Satuan Tugas Anti Narkoba (Anti-drugs Task Force)

**SMA** : Sekolah Menengah Atas (Senior High School)  
*Is a level of secondary education in Indonesia formal education after graduating from Junior High School (or equivalent)*

**SMP** : Sekolah Menengah Pertama (Junior High School)  
*Is a level of secondary education in Indonesia formal education after graduating from elementary school*

**TAT** : Tim Asesmen Terpadu (Integrated Assessment Team)  
*is an assessment and medical analysis, psychosocial, and therapy and rehabilitation plan recommendation for someone who has been arrested and/or red-handed in narcotics illicit trafficking and abuse.*

**TNI** : Tentara Nasional Indonesia  
*Indonesian national army*

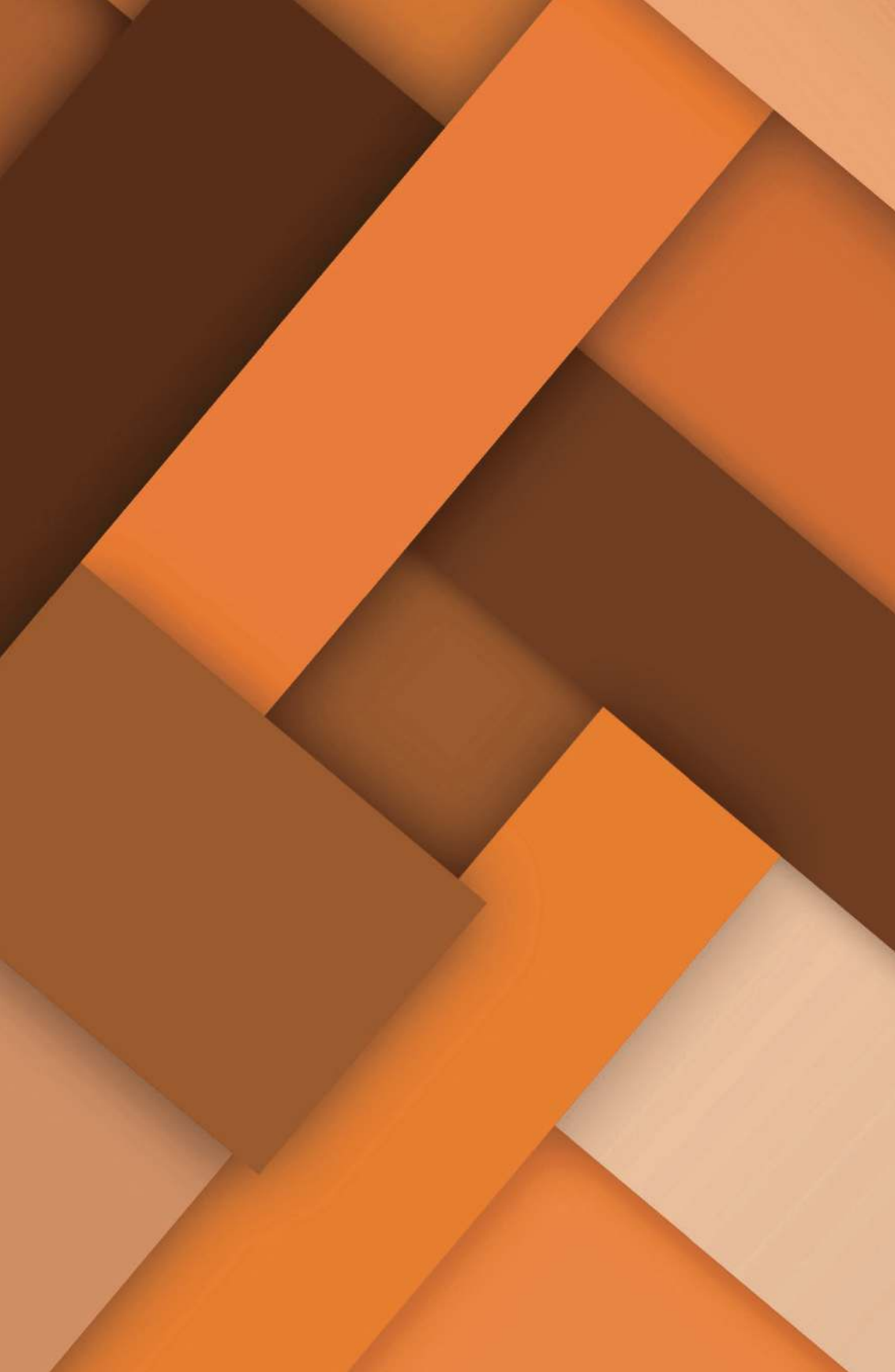
## List of Researchers



- |   |   |
|---|---|
| 1. Drs. Heru Winarko, S.H.              | 1. Dr. Sri Sunarti Purwaningsih           |
| 2. Drs. Adhi Prawoto, S.H.              | 2. Drs. Masyhuri Imron.,MA                |
| 3. Drs. Agus Irianto, S.H., M.Si., M.H. | 3. Prof. Dr. Dwi Purwoko, M.Si            |
| 4. Drs. Endang Mulyani, M.Si            | 4. Drs. Ary Wahyono, M.Sc                 |
| 5. Siti Nurlela Marliani, SP, S.H, M.Si | 5. Dr. Robert Siburian, SE., M.Si         |
| 6. Dwi Sulistyorini, S.Si., M.Si        | 6. Dr. Fadji Alihar                       |
| 7. Sri Lestari, S.Kom., M.Si            | 7. Drs. Supriyadi                         |
| 8. Sri Haryanti, S.Sos, M.Si            | 8. Dr. M. Alie Humaedi, S.Ag, M.Ag, M.Hum |
| 9. Novita Sari, S.Sos., M.H.            | 9. Dra. DTP. Kusumawardhani, M.Si         |
| 10. Erma Antasari, S.Si                 | 10. Drs Aziz Suganda SH., M.Si            |
| 11. Ranny Febriani, A.Md                | 11. Drs. Agus Santoso                     |
| 12. Quazar Noor Azhim, A.Md             | 12. Drs. Sudiyono                         |
| 13. Suryaman, S.Kom                     | 13. Dr. Dundin Zaenuddin, MA              |
| 14. Sri Indarsih, S.Kom                 | 14. Drs. Ujud Tahajuddin, MBA             |
| 15. Rizky Purnamasari, S.Psi            | 15. Drs. Bayu Setiawan, MPS.,MA           |
| 16. Tri Sugiharto, S.Kom                | 16. Drs. M. Azzam Manan, MA               |
|   | 17. Fanny Henry Tondo, M. Hum             |
|   | 18. Devi Asiati, SE., MS                  |
|   | 19. Usman S. , S.Ag.,MA                   |
|   | 20. Dr. Laely Nurhidayah, SH., LLM        |
|   | 21. Lamijo, S.S., M.Phil                  |
|   | 22. Dewi Harfina S., S.Si., M.Si          |
|   | 23. Jane K. Propiana, SKM., M.Kes         |
|   | 24. Zainal Fatoni, SKM., MPH              |
|   | 25. Radot Manalu, S.Sos                   |
|   | 26. Muhammad Saifullah Rohman, S.S., MA   |
|   | 27. Dede Wardiat, M.Si                    |
|   | 28. Luis Feneteruma, SH                   |
|   | 29. Djoko Kristijanto, S.Sos              |
|   | 30. Hermadi                               |



## **APPENDICES, EPILOGUE BIBLIOGRAPHY**



## Appendix 1 Distribution of Respondents According to Types of Drugs and Province, 2018 (%)

Province	Potent medicine	Addictive substances	Psychotropic	Natural drug	Synthetic drug	Semi-synthetic drug
Aceh	80.30	76.80	65.00	23.00	66.00	55.50
North Sumatera	80.80	81.80	68.80	29.30	64.00	54.50
South Sumatera	76.50	82.30	61.30	31.80	75.50	59.00
Riau Islands	74.30	76.80	68.50	29.80	62.50	65.80
Jakarta	77.50	77.00	64.80	38.00	63.80	71.30
West Java	81.50	83.50	75.30	31.30	73.80	73.80
East java	78.00	76.80	68.80	68.50	64.00	66.80
DI Yogyakarta	84.80	83.80	77.50	62.00	73.30	74.30
Bali	86.30	88.00	75.50	50.00	49.30	55.30
East Kalimantan	73.30	78.80	59.30	40.30	59.50	63.50
West Kalimantan	72.50	75.50	62.80	29.50	61.00	63.50
South Sulawesi	65.00	64.30	50.50	17.80	58.80	74.30
Papua	76.00	68.00	63.50	24.30	68.00	64.30

## Appendix 2 Distribution of Students' Knowledge on Issues Due to Drug Abuse (%)

Drug abuse impact	Junior high school	Senior high school	University	Total
Education continuity	63.90	74.50	83.50	75.10
Difficulty to get job	64.80	74.20	82.40	74.80
Family burden	71.70	79.20	85.00	79.40
spending the saving	68.50	77.60	85.30	78.10
Wasting family's properties	67.20	75.60	82.60	76.00
Selling personal asset	68.20	75.60	83.70	75.70
spending on cost due to law process	68.20	76.60	84.60	77.40
adding Debt	64.40	74.90	81.80	74.80
conducting crime (stealing , robbing)	68.20	76.90	84.70	77.60
Being drug courier	64.60	74.20	81.20	74.30
Immoral act	56.20	68.80	78.20	69.10
Others	4.40	5.60	6.40	5.60

Source : Survey of drug abuse and illicit trafficking, 2018

## APPENDIX 3      Distribution of Perception on the Attitude Toward Drug Abuse According to the Level of Education Among Students and University Students (%)

Responds	Junior high school	Senior high school	University	Total
<b>Respond when someone dealing drug in school or campus</b>				
Keep silent	5.50	9.00	10.30	8.60
Advising	15.70	25.00	28.70	24.00
Reporting to school or campus staff	41.00	39.20	29.80	36.20
Reporting to the police	36.40	24.60	28.00	28.00
Others	1.40	2.20	3.20	2.40
<b>Reaction when offered to buy drug</b>				
Refusing	98.30	98.10	98.50	98.30
Accepting	0.10	0.40	0.40	0.30
Being doubtful	1.60	1.60	1.20	4.40
<b>Reaction when offered drug for free</b>				
Refusing	98.10	97.40	97.60	97.60
Accepting	0.20	1.00	1.10	0.80
Being doubtful	1.70	1.70	1.40	1.60
<b>Reaction when asked to give drug to others</b>				
Refusing	97,90	98,00	98,70	98,20
Accepting	0,30	0,30	0,20	0,30
Being doubtful	1,80	1,70	1,20	1,50
<b>Reaction when asked to selling drug to others</b>				
Refusing	98,40	98,30	98,80	98,50
Accepting	0,20	0,40	0,20	0,30
Being doubtful	1,40	1,40	1,00	1,20
<b>Reaction when someone using drug in school or campus</b>				
Keep silent	5,20	8,20	8,70	7,60
Advising	20,30	32,30	36,90	30,90
Reporting to school or campus staff	16,60	18,40	17,00	17,40
Reporting to the police	55,10	37,70	33,90	40,70
Others	2,90	3,50	3,50	3,30

Source : Survey of drug abuse and illicit trafficking, 2018



## APPENDIX 4 Respondents' Knowledge on Social Impact From Drug Abuse (%)

Social Impact	Yes	No	Total
<b>Friendship</b>			
a. Shunned	53.0%	12.0%	35.0%
b. Bullied	31.3%	25.0%	43.7%
c. Hostile	32.8%	24.8%	42.4%
d. Ostracized	38.8%	20.9%	40.3%
<b>Friends other than office mate</b>			
a. Shunned	51.3%	11.3%	37.4%
b. Bullied	31.4%	23.6%	45.1%
c. Hostile	32.7%	23.2%	44.2%
d. Ostracized	37.9%	19.6%	42.5%
<b>Relationship with family or relatives</b>			
a. Shunned	41.4%	22.0%	36.6%
b. Bullied	27.8%	29.7%	42.5%
c. Hostile	29.3%	29.3%	41.4%
d. Ostracized	34.2%	25.7%	40.1%
<b>Relationship in the society</b>			
a. Shunned	55.0%	10.5%	34.4%
b. Bullied	37.0%	21.8%	41.2%
c. Hostile	39.2%	20.6%	40.2%
d. Ostracized	44.6%	17.2%	38.2%

Source : Survey of drug abuse and illicit trafficking, 2018

## APPENDIX 5 Perception on Attitude Toward Drug Abuse According to the Level of Education Among Students and University Students (%)

Perception toward drug abuse	Junior high school	Senior high school	University	total
<b>Reaction when a family member or relative uses drugs</b>				
Keep silent	3.10	3.40	2.90	3.10
Advising	21.90	29.80	35.60	29.90
Forbidding	31.20	33.30	30.00	31.60
Reporting to the police	42.50	30.90	29.00	33.20
Others	1.30	2.70	2.50	2.30
<b>Reaction when your parent use drugs</b>				
Keep silent	2.40	1.80	1.90	2.00
Advising	17.10	22.40	25.90	22.30
Forbidding	43.10	43.50	40.10	42.10
Reporting to the police	35.50	28.70	28.90	30.50
Others	1.30	3.70	3.20	3.10
<b>Reaction when your boyfriend/girlfriend uses drugs</b>				
Keep silent	1.40	1.30	1.10	1.30
Advising	13.50	18.20	21.40	18.20
Forbidding	38.60	40.90	37.90	39.20
Reporting to the police	40.30	31.00	32.00	33.70
Others	6.20	8.60	7.60	7.70

Source : Survey of drug abuse and illicit trafficking, 2018

## APPENDIX 6 Types of Consumed Drugs and the Age when Using Drugs for the First Time, 2018

Type of drug	Amount	%	Mean	Median	Mode	Min	Max
Dextromethorphan overly consumed	11	6.6	16	17	17	10	10
Tramadol	17	10.2	16	16	16	12	19
Trihexiphenidyl	11	6.6	16	16	16	13	19
Headache medicine excessively consumed	50	29.9	15	15	15	10	20
Headache medicine mixed with soda drink	21	12.6	14	14	12	10	17
Substances inhaled continuously (glue, gasoline, markers, electric mosquito, etc. )	49	29.3	13	13	13	7	22
Koplo pill, BK, mboat, mboti, roda	13	7.8	15	16	16	12	17
Marijuana	42	25.1	16	16	15	10	22
Bear tobacco, gorilla tobacco	20	12.0	16	16	14	12	20
Ecstasy	8	4.8	17	17	16	14	19
Amphetamine (seed, dex Adderall, dexamphetamine)	4	2.4	17	17	17	17	17
Methamphetamine	15	9.0	16	17	17	8	20
Putau	3	1.8	18	17	17	17	19
Morphine	4	2.4	17	17	17	17	17
Heroin	6	3.6	17	17	17	17	17
Cocaine	7	4.2	15	17	10	10	19
Others	8	3.6	17	17	16	16	18

Source : Survey of drug abuse and illicit trafficking, 2018

The data presented in this book is the result of research by BNN and LIPI. The research shows that the majority of student and university student respondents have the knowledge on the types of drugs such as natural narcotics, synthetic and semi-synthetic drugs including marijuana (gele, cimeng, marijuana, getok, linda), shabu, heroine and cocaine. The majority of respondents also have the knowledge that the misuse of addictive substances will endanger themselves such as the excessive use of headache medicine and the use of headache medicine mixed with soda drink. The data shows that drug abuse has been known by all layers of the community, including students and university students.

The publication of this book is expected to present real facts of drug abuse and drug issues in this nation to policy maker (the government) and the community. The level of severe condition described in the continuous research is expected to increase the government and community's awareness to face the illicit trafficking of drugs.

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# PREVALENCE SURVEY 2018

**C**urrently, Indonesia has stated that the state is in drug emergency situation as drug abuse has spread to all layers of the society and across the country. In 2018, BNN in cooperation with Culture and Society Research Center of LIPI carried out a survey to calculate the prevalence rate of drug abuse. The survey was also carried out in three groups of the community, namely students and university students, workers, and households. The survey in 2018 was conducted in 13 Provinces, namely Aceh, North Sumatera, South Sumatera, Riau Islands, Jakarta, West Java, East Java, DI Yogyakarta, Bali, East Kalimantan, West Kalimantan, South Sulawesi, and Papua.



**Data and Information Research Center  
National Narcotics Board of the Republic of Indonesia  
(PUSLITDATIN BNN)**

Jl. MT Haryono No 11 Cawang, East Jakarta

Telp. (021) 80871566, 80871567

Fax. (021) 80885225, 80871591, 80871593

Website : [www.bnn.go.id](http://www.bnn.go.id)

Email : [puslitdatin@bnn.go.id](mailto:puslitdatin@bnn.go.id)

Call Center : 184

Sms Center : 0812-221-675-675

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