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Effective Strategies for Early Prevention of Substance Use Disorder Among Adolescents

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ABSTRACT

Street heroin disappeared completely from the black market in 2019 in Bandung, Indonesia. This is because many heroin abusers are switching to buprenorphine/naloxone, which is more readily available and cheaper. A decade ago, Yayasan Grapiks—a non-governmental organization that works to reduce the negative effects of heroin—reported that 61 students were actively injecting buprenorphine/naloxone. Based on the report, researchers were prompted to conduct a study to background of non-heroin-addicted adolescents analyze who buprenorphine/naloxone in Greater Bandung. Another objective is to explore appropriate strategies for early prevention of drug abuse among adolescents. Qualitative methodology with a phenomenological approach was used. In-depth interviews were conducted from September to November 2021 with 13 male and 4 female students as informants. The findings of the study show that all the informants of the study have a history of drug abuse since primary and secondary school. Before addiction to buprenorphine/naloxone, the informants were already addicted to drugs, some were even at the stage of hardcore addiction or severe addiction. Early prevention of drug abuse among adolescents is to create a positive environment at school and at home to prevent adolescents from becoming involved in drug abuse.

Keywords: Buprenorphine/Naloxone, Adolescent Substance Use Disorder, Early Prevention, Greater Bandung.

1. Introduction

Drug abuse represents a worldwide issue impacting nations across the globe. Often, drug-related challenges within one country are linked to others, particularly through drug trafficking networks. In Indonesia, this concern ranks among the country's top priorities, alongside corruption and violent crime (Johnson et al., 2022). President Joko Widodo once highlighted that 2015 marked the peak year for drug abuse cases in the nation. This growing trend is alarming, as the number of incidents continues to rise annually. This issue must be addressed promptly and with serious effort. In response, the Indonesian government implemented HIV and AIDS prevention initiatives targeting injection drug users between 2006 and 2011.

Efforts to combat this problem also involve collaboration among law enforcement agencies such as the police, the Ministry of Health, the National Narcotics Agency (BNN), and the Ministry of Social Affairs. These institutions launched extensive campaigns that provided fundamental

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training and guidance to incorporate the Sterile Syringe Service (LASS) and the Methadone Maintenance Therapy Program (PTRM) into local health initiatives at public health centers, clinics, and hospitals. Humanitarian elements, including the empowerment of former injection drug users and related activists, are also prioritized. This empowerment aims to ensure these individuals can contribute meaningful feedback to enhance the effectiveness and impact of the programs, both within the community and in rehabilitation environments (Dushkova & Ivlieva, 2024). The government's dedication to expanding and strengthening harm reduction efforts is articulated in the National Strategy and Action Plan (SRAN) for 2007–2010 and 2010–2014. Since July 2009, the implementation of these programs has been financially supported by Australia AID (AusAID) and the Global Fund.

The efforts to curb HIV transmission among injection drug users have gradually yielded positive outcomes. According to records from the National AIDS Commission (KPA), there were only 17 Sterile Syringe Services (LASS) operating within NGOs and health facilities in 2005. By June 2011, this number had significantly risen to 194, with 160 of them integrated into public health services to ensure long-term sustainability and broader access to essential healthcare. These integrated services offer treatments for AIDS, tuberculosis, hepatitis, and maternal health care when needed. In this context, the contribution of NGO communities—whether they are comprised of former injecting drug users or AIDS-focused activists—is crucial, as they are directly involved in delivering education, support, and referral services to drug users and their partners. The availability of oral substitution therapy (OST) using methadone or buprenorphine has also seen considerable growth. Beginning with just three centers in 2002, the number expanded to 65 clinics by 2011, including nine programs run within rehabilitation institutions, 22 in hospitals, and 34 in public health centers.

The guidelines established in the Minister of Health Regulation (PMK) No. 57 of 2013 on Methadone Maintenance Therapy (PTRM) outline specific requirements for supporting institutions, qualified human resources, and eligibility criteria for participants. In addition to the methadone regulation, the Ministry of Health also issued PMK No. 47 of 2016 concerning the administration of buprenorphine therapy. This regulation allows buprenorphine to be used in medical rehabilitation for drug addicts, abusers, and victims as a treatment for opioid withdrawal symptoms and opioid dependence. The buprenorphine-based rehabilitation process must last for a minimum of six months for patients who are dependent on opioids and are using synthetic opioid agonists or partial agonists, administered orally or sublingually. These therapies must be delivered in approved hospitals, health centers, or clinical rehabilitation facilities and must comply with existing legal regulations. Treatment may also involve the use of buprenorphine in combination with naloxone to address withdrawal symptoms and aid in recovery (Beis et al., 2022).

Drug rehabilitation programs have been implemented in Indonesia for a long time. The implementation of the law was carried out more after Law No. 35 of 2009 on narcotics was introduced. This law is considered more humane because it regulates the field of rehabilitation, especially the obligation to undergo rehabilitation for drug abuse. The obligation was then followed by several regulations starting from Government Regulations, Regulations of the Minister of Health, Regulations of the Minister of Social Affairs, and Regulations of the Head of BNN.

The procedure for planning the use of buprenorphine for rehabilitation purposes is enshrined in the Regulation of the Minister of Health (PMK) No. 47 of 2016 on the Administration of Buprenorphine Therapy. In the PMK, it is stated that buprenorphine therapy is part of the medical

rehabilitation process for drug addicts who are involved in the mandatory self-reporting program as drug addicts, following the provisions of the law. The mandatory thing in this case is that addicts, patients, and victims of narcotics patients can report themselves or be reported by their parents or guardians voluntarily to the Institution of Recipients Must Report (IPWL). The implementation of buprenorphine therapy by IPWL can only be carried out in hospitals, clinics, and clinics that are Medical Rehabilitation Facilities following the provisions of the law. Based on the brief explanation above, to what extent can appropriate strategies be implemented as an early prevention measure for drug abuse among teenagers?

2. Literature Review

2.1. Social Learning Theory

According to Akers (2017), the basic assumption in Social Learning Theory is that the same learning process, in the context of social structures, interactions, and situations, produces appropriate and inappropriate behavior. The difference lies in the direction in which this process mechanism is put into practice. Second, sometimes the process will be all or nothing; what is involved is the influence of the balance of behavior. This balance is usually seen as stability over time. However, some habits become unstable and change with time or circumstances (De Roeck & Van Poeck, 2023).

Appropriate and illegal behavior is learned by all mechanisms in this process. However, the theory states that the main mechanism lies in the part of the process that differentiates recognition (instrumental learning through appreciation and judgment) and imitation (cognitive learning serves as a discriminative stimulus (cue) for behavior) (Mo et al., 2023).

Akers' (2017) social learning theory focuses on four main concepts – differential association, differential enforcement, imitation, and definition. Much of the Social Learning Theory of criminal behavior and regulation can be expressed as the view that criminal behavior and rule-breaking are more likely to occur when all four concepts agree on the notion that the action being taken is inappropriate.

Each of the four main components of this statement can be considered as a separate and tested assumption. An individual is more likely to commit a crime when:

- i. He associates with a criminal group or individual and supports the violation of social rules and norms of life that are followed (Ward et al., 2022).
- ii. The violent behavior that is committed is contrary to the behavior that is following the norm (Saikkonen & Christensen, 2023).
- iii. He is more exposed to and shaped by models of behavior that deviate from the norm. His definition of learning is more directed towards committing deviant activities (Cioban et al., 2021).

Violent and criminal behavior is learned and modified (acquired, performed, repeated, maintained, and changed) through all the same cognitive and behavioral mechanisms as appropriate behavior. They differ in the action, content, and results of learned behavior. Therefore, it is not accurate to say that peer influence does not influence the behavior of adolescents in violating the rules because such behavior is also influenced by peers during adolescence. This theory assumes that peer influence and the content and direction of influence greatly influence adolescents in drug abuse (Zarling & Russell, 2022).

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Social learning theory proposes that there is a diversity in the extent to which a person holds definitions, values, and beliefs about deviant and prosocial behavior. The differences lie in what is believed and how strongly those beliefs can develop within the normative system. They do not require the existence of or participation in a deviant subculture that advocates for and opposes the larger normative system of society (Liu et al., 2024). Definitions that favor rule and law violations include commonly held and more strongly held justifications and definitions that deviate from the situation. Those who oppose rule and law violators are those who believe in the conventional system and the second definition that considers violations to be weak and this assumption is agreed upon by this conventional group (Harris, 2022).

2.2. Systems Theory

Von Bertalanffy defined a system as a complexity of interacting elements. He encouraged a systems thinking approach in all fields of science to identify general principles that can be applied to all systems. Von Bertalanffy also introduced "systems" as a new scientific paradigm that differed from the analytical and mechanistic paradigms of classical science (Grewatsch et al., 2023).

The basic idea of systems theory in general is its focus on interactions. This focus on relationships leads to the assumption that the behavior of an element autonomously differs from its behavior when interacting with other elements. Another important principle is the distinction between open, closed, and isolated systems (Heyder et al., 2023).

In open systems, energy, matter, people, and information are exchanged with the outside world. In closed systems, there is no exchange of information or matter, only energy. In isolated systems, no exchange of elements occurs (Stephan, 2022).

One social work scientist, Anthony Forder, acknowledges that general systems theory has had a major influence on social work practice. He emphasizes that in social work practice, there is often a challenge in adapting new approaches such as general systems theory. There is also a tendency among writers and educators to adapt their own theories to the new model (Kaloga & Reno, 2022).

First, looking at the new model immediately, deciding that one's own theory is not fundamentally different or at least incompatible, with some indirect references to make it seem more relevant. The second aspect involves the incorporation of new jargon into one's theoretical presentation by renaming concepts, which ultimately sacrifices clarity without gaining precision (Van Heerde et al., 2021).

The third aspect involves an eclectic approach, which is to select certain aspects of the new theory and incorporate them into the old theory without connecting the two models as a whole. This is the approach taken by Goldstein. Much of the content in his book, especially in the early chapters, is unrelated to the systems theory that is applied elsewhere. While this approach is more valid than the previous two approaches, it has the potential to confuse readers, especially at the beginning and when they try to delve deeper (Veresov, 2024).

Systems theory allows social work professionals to analyze individuals, environments, and changes that affect client well-being, and to guide them in identifying the most effective targets and intervention strategies. Overall, systems theory serves as an important tool in social work practice, taking the environment into account as a whole when working with individuals and

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groups, thus increasing the effectiveness of interventions at all levels of social work practice (Pettus et al., 2021).

In analyzing people, environments, and change, Dubois and Miley (2005) identified the following strategies:

- a) Change Agent System. Change agents refer to individuals or groups, whether professionals from within or outside the system, who seek to bring about change in the system. Change agents act as specially appointed assistants to achieve the planned changes. Change agents can consist of institutions, NGOs, or social workers.
- b) Client system. The client system is the recipient of assistance. The client system can be an individual, family, group, organization, or community that, in addition to being a recipient, is also a system that requests assistance and involves the services of a social worker as a change agent.
- c) Target system. This system includes the people who need to be changed or influenced by the change agent to achieve the goals of the target system.
- d) Action system. This system refers to the individuals or parties that interact with the social worker to complete tasks and achieve change goals. The action system is used to obtain agreements, working agreements, or contracts to identify and analyze problems, establish change goals, and influence key change targets.

By combining these components, social work practitioners can analyze client problems holistically, determine intervention targets, and implement strategies that aim to induce positive change and improve well-being within the client system.

2.3. The Function and Role of Social Workers in the Problem of Buprenorphine/Naloxone Abuse Among Non-Heroin Addict Students

The functions of social workers and their relationship to social work activities include several activities including individual counseling, facilitating groups of workers and families, screening institutional procedures, initiating new programs, communicating legal changes, controlling the resource systems of participants in the social environment, and offering information to participants and the systems in their environment (Dubois & Miley, 2005).

Dubois & Miley (2005) also stated that these activities involve finding solutions to problems and challenges, obtaining and modifying resources, and providing new information. Social workers generally offer a framework for organizing practical activities to complete their tasks.

This view sees social workers as having multiple functions. These multiple functions indicate that a social worker needs to have a high level of competence with diverse skills so that change can be achieved well at the micro, mezzo, and macro levels (Ioakmidis & Sookraj, 2021).

The role of a social worker is in line with the function of a social worker. The role of a social worker is adapted to the behavior and response according to specific situations. Three interrelated components of the social worker role (Dubois & Miley, 2005) are role concepts, or the way one acts in a given situation, role expectations, or the way others should act when they are in a given situation, and role performance, or the way one takes action (Dubois & Miley, 2005)

Negotiation is a professional activity to bring about change by recognizing a specific problem, exploring options, and developing a plan of action. The negotiation process relies on shared expertise between participants and social workers. Social workers offer their knowledge, values,

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and skills, while participants offer their knowledge, values, and skills based on individual, organizational, or community life experiences (Cornish et al., 2023).

The function of negotiation in the context of buprenorphine/naloxone abuse among students who have never used heroin can be mapped into the scope of the micro, meso, macro, and professional systems. Although the context of this study includes the meso, the researchers will draw meso issues into the macro issues with the aim of building programs or policies that are illustrated by the group's problems. The results of this study will be used as one of the indicators of students at risk of drug abuse. Then, a proposal for drug abuse prevention programs at the elementary and secondary school levels will be formed (Bhatt, 2022).

Working with communities or social structures, social workers position themselves as planners to set goals, build foundations, and initiate programs (Dubois & Miley, 2005). Strategies related to the planner role include research and planning.

The function of a social planner is to help communities plan solutions to problems and provide health and human services. The social worker's focus as a planner and community facilitator at the macro level requires knowledge of social problems and underlying social issues, theories of social change, and processes of macro change. Social planner activities include coordinating services, developing programs, evaluating the effectiveness of social policies, and advocating for improvements in social well-being (Agonafer et al., 2021).

3. Method

The approach used in this study is phenomenological. Phenomenological studies emphasize direct experience as the starting point and closing point of the study. In this study, the phenomenon of Buprenorphine/Naloxone abuse among adolescents in Greater Bandung is the focus. The adolescents do not have a background of heroin addiction, obtain Buprenorphine/Naloxone illegally, are under 18 years old, and use Buprenorphine/Naloxone through injection. This case is contrary to the Regulation of the Minister of Health of the Republic of Indonesia Number 47 of 2016 concerning the Implementation of Buprenorphine Therapy. To facilitate data analysis, data reduction, and presentation of the final results of the study, the researcher will use NVivo qualitative data analysis software. This is important to present data more precisely and data processing becomes more practical.

4. Result and Discussion

4.1. Analysis of Drug Abuse History of Teenagers Misusing Buprenorphine/Naloxone in Greater Bandung

In one study, it was found that the younger a person is when they abuse drugs, the longer the problems they will face related to their drug abuse (Jang, 2002). In this study, it was found that all informants abused drugs at a very young age. Some admitted to abusing drugs since elementary school. Some were currently in high school. These findings are in line with the results of the BNN study with the lowest age of starting to abuse drugs being at elementary school age.

Several informants said that cigarettes were the first substance they abused since elementary school. Although tobacco use in the Assessment to Smoking, Substance Uses Involvement, and Test (ASSIST) instrument is still classified as low risk, tobacco can lead to the use of other more

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dangerous substances. This is as stated in the ASSIST for Teens which classifies tobacco use in the moderate risk category.

This classification can be proven by the drug abuse by the informants. Almost all of those who said they had abused cigarettes were involved in trying other more dangerous substances. Several informants said that since smoking, they started drinking alcoholic beverages, from low-priced ones like tuak to brands that are commonly drunk by adults like red wine.

Then they started trying several types of drugs that should have been prescribed by a doctor. Tramadol is a drug that is often abused by informants. There are informants who admitted to abusing tramadol since the 4th grade of primary school and they have not been able to leave it since then. The informants admitted to having to take 2 Tramadol first before going to school.

Drug addiction was also found in the BNN study. The study stated that the type of drug abused was type G drugs (prescription drugs) that can be freely purchased at pharmacies or drug stores, such as tramadol, dextro, trihex, or coplo pills. In addition to the informants themselves, they also said that many of their friends at school or hangouts abuse drugs. If it weren't for the fact that some people are afraid of needles, more and more people would choose to inject drugs.

The courage of informants to try Buprenorphine / Naloxone is not only because when needed, tramadol is hard to get and expensive, but they also feel challenged to try other drugs that are said to have more 'kick' and the ingredients are easy to find. The internal motivation of the informants, the need for the substance, the influence of older friends, and the sensation of injecting made them decide to try Buprenorphine / Naloxone.

Buprenorphine / Naloxone is used as one of the therapies for opiate dependence. Addicts in the category of hardcore addicts who want to reduce their level of addiction but are still able to carry out their social roles can participate in this therapy.

In Indonesia, the drug Buprenorphine / Naloxone is regulated through the Regulation of the Minister of Health (PMK) No. 47 of 2016 concerning the Administration of Buprenorphine Therapy. In this PMK there is also a regulation that patients who can access this service are patients with criteria for living with opioid dependence, are over 18 years old, are resistant to buprenorphine intake, are resistant when using a combination of naloxone and buprenorphine, and do not suffer from serious mental disorders. For patients under the age of 18, the use of buprenorphine should be based on the judgment of a mental health specialist and under the supervision of family or guardians.

The implementation of the Minister of Health Regulation among Buprenorphine/Nalokson injectors in this study did not follow the regulation. First, all informants did not have a history of heroin addiction. This can be seen from the substances they used before injecting Buprenorphine/Nalokson. Almost all informants admitted to being addicted to hard drugs such as Tramadol and anti-depressants. One female informant immediately admitted to abusing Buprenorphine/Nalokson.

Second, the buprenorphine/naloxone obtained by the informants did not come from a legitimate service agency, but from the black market. This finding is in contrast to studies conducted by Richert and Johnson (2013), which stated that buprenorphine/naloxone was rarely found on the black market. This means that the drug can usually be accessed officially through services provided by the government or the ruling party.

Third, all informants at the time of the interview were between 16 and 18 years old and had no recommendations from their psychiatrists or families. Inaccuracies in the implementation of Buprenorphine maintenance services are because the service procedures are not running optimally. One of them is in the assessment. The drug abuse assessment using the Addiction Severity Index tool should be able to analyze the client's drug abuse history. This is asked in detail, starting from the first substance to the main substance used in the last week. So that the assessment process can provide an overview of the client's drug abuse problem and recommend services that are appropriate for their needs.

4.2. Suggested Appropriate Strategies That Can Be Implemented as Early Prevention Measures for Drug Abuse Among Adolescents

Hirschi in starting his social relations theory questioned why teenagers commit deviant acts. In this study, the question can be explained as in Figure 1.

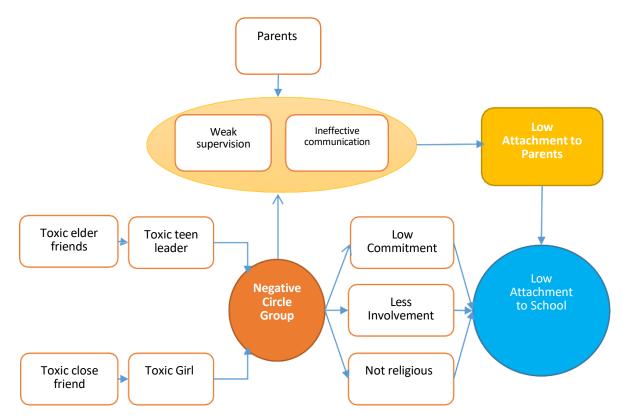


Figure 1: Negative environment for drug-abusing teenagers

A teenager commits deviant behavior through a process in a bad environment. The social environment after school, the peer environment, the family environment, and the school environment also contribute to the formation of the personality and behavior of teenagers.

In this study, it was found that teenagers who commit drug abuse are influenced by:

a) The social environment in the community. Teenagers who commit deviant behavior are influenced by social groups that involve people older than the teenager. They influence or even invite and offer drugs. Teenagers cannot refuse invitations for reasons of respect or appreciation for older people.

- b) Teenage girls are trapped in deviant behavior because of the influence of their male friends and boyfriends. They influence, invite, and give drugs for free. Teenage girls are unable to refuse them because they have been friends for a long time and their male friends are friends who understand the teenage girl's situation. Meanwhile, young women are very attached to their relationship with their boyfriends. This also makes young women not have a high bargaining position against the influence of their boyfriends. Teenage boys who hang out with older friends bring bad influences to their school friends. These values or behaviors then become a group habit which then becomes the values they believe in and do.
- c) Group values influence the interaction between teenagers and their parents. It is even worse when teenage parents do not have sensitivity towards their teenage children. Even though they carry out supervision, this does not affect the change in their teenage behavior. Ineffective communication between parents and teenage children also affects the behavior and attitude of their teenage children. These two things cause teenagers to not have good school spirit.
- d) The values of teenage groups greatly affect their success in school. Teenagers in their groups believe and are accustomed to deviant behavior have low commitment to their schools and often do not participate in positive activities at their schools. These two things cause them to not excel in school. The same goes for their religion. The influence of the group is very great on the implementation of religious rituals for teenagers, especially when they are in groups. No one reminds each other.

This study found that drug abuse by adolescents is mostly influenced by friends who have a negative influence on the school and home environment as well as problematic parent-child interactions. Based on these findings, this study proposes an early drug abuse prevention strategy among adolescents called a school-based drug abuse prevention program through Building a positive environment at home and school.

Table 1: Program Reserve Matrix

Activity Name	Activity Objectives	Activity Target	Stakeholders	Program/Activity Implementer	Executor
Reinforcement of school regulations	Increase awareness of school rules and increase commitment to achieving success in the learning process.	Teachers, Educators, and Students	Education authorities and School Community	Headmaster	Headmaster
Extracurricular revitalization activities	Accommodate students' talents and interests and utilize time in positive activities under the supervision of the school.	Extracurricular teachers and students	Groups, professional and professional organizations	Curriculum Assistant Professor	Headmaster
Drug education activities	Improve the understanding of the world of addiction clearly,	Student	BNN, Education authorities, and	Assistant Professor of Student Affairs and Guidance	Headmaster

	organized, and following the latest addiction theories		professional bodies in the drug field	Counseling teacher	
Improvement of social skills	Preparing students to be responsible for themselves in facing the challenges adolescent socializing	Student	Education authorities, the BK Teachers' Council, and professional organizations	BK teacher	Headmaster
Improved school communication with parents	Increase parents' sensitivity towards the behavior and activities of their teenagers so that they can create harmonious relationships in the home.	Student parents	Education authorities and School Committees	Assistant Headmaster of Studentship and Class Teacher	Headmaster

Some activities that can be carried out to support school-based drug abuse prevention programs by building a positive circle include:

- a) Strengthening school rules. Each school is ensured to have written rules in the form of school rules. Current school rules need to be reviewed with a clearer structure that does not contradict the relevant rules. For example, cases such as drug abuse by students are not immediately subject to severe sanctions by returning them to their parents. There is school treatment that allows them to delve into the problem of drug abuse and then carry out treatment measures for their drug abuse according to the level of severity.
- b) The rules are announced to all school members and are agreed upon together and known by the school principal. The rules stated in the code of conduct must be structured and accommodate rewards and punishments. In addition, their implementation must be consistent and fair to all teachers, education staff, and students. Extracurricular activity revitalization activities. This study found that after-school activities of students are often eliminated for activities that tend to be negative. Among them are hanging out at stalls near the school and spending the evening until night playing with their friends.
- c) The recovery of co-curricular activities shows that co-curricular activities are being carried out and some types of activities have shown an increase in student achievement. With the findings of this study, co-curricular activities will be more beneficial when students at risk of drug abuse are fully involved according to their interests and talents and are monitored regularly.
- d) Drug education activities. Education on drug abuse is currently being actively carried out by the National Narcotics Agency and other institutions. Campaigns or education so far can be categorized as a quick and rushed activity. This means that activities are carried out sporadically at certain times, for example when accepting new students with a traditional approach. This approach emphasizes fear tactics by mentioning the types of drugs and their dangers. The study found that this approach was not successful.
- e) The drug education proposed based on the results of this study is carried out by providing scientific explanations related to drugs. Students are fully and balancedly informed about

- drugs and the consequences of their abuse. This education must be delivered by professionals and the syllabus must be fully structured and adapted to the student's class.
- f) Improving social skills. Activities to improve social skills aim to equip students with various personal skills in choosing and making decisions regarding various problems they may face. These skills include critical thinking, decision-making, problem-solving, creative thinking, effective communication, interpersonal skills, self-knowledge, empathy, coping skills, and normative beliefs.
- g) Improving Communication between Schools and Students' Parents. So far, communication between the school and the parents of students is limited to parent-teacher meetings, summons when there is a problem involving teenagers, and collecting report cards.
- h) Intensive communication to control teenagers needs to be continued and improved. One of the factors that drives teenagers to abuse drugs is ineffective communication and poor supervision from parents to their teenagers. Schools in collaboration with school committees can organize effective communication training. After the training, the learning and training process can be carried out by the school through the class teacher.

The drug abuse prevention program by building a positive environment at school and home aims to create a positive environment around students to minimize the occurrence of deviant behavior. Specifically, the goals are

- a) Activities to reinforce school rules are aimed at increasing awareness of school rules and increasing commitment to achieving success in the learning process.
- b) Co-curricular recovery activities are aimed at accommodating students' talents and interests and utilizing time for positive activities under the supervision of the school.
- c) Drug education activities are aimed at increasing understanding of the world of addiction, systematically, and according to the latest addiction theory, not based on myths. Knowledge about the world of addiction is expected to enable students to make the best choice not to abuse drugs.
- d) Improving social skills aims to prepare students to be responsible for themselves in facing the challenges of adolescent socialization. Students are educated to be able to think critically and make decisions based on beliefs about the good of themselves, their family, and the school.
- e) Improving school communication with parents aims to increase parents' sensitivity to the behavior and activities of their teenage children so that they can create harmonious relationships at home.

5. Conclusion

All participants in this study reported a history of substance abuse beginning during their elementary or secondary school years. The types of substances they used varied, including alcohol and various prescription medications. Before developing a dependency on Buprenorphine/Naloxone, the informants acknowledged that they were already struggling with drug addiction, with several describing their condition as being in a state of severe or hardcore dependency. Their initial exposure to Buprenorphine/Naloxone was influenced by several factors, including limited access to other drugs, pressure or encouragement from older peers, and influence from close friends or romantic partners, as well as persuasive tactics used by Buprenorphine/Naloxone dealers. At the time the interviews were conducted, all informants were actively addicted to Buprenorphine/Naloxone. School-based drug abuse prevention programs by building a positive environment at school and home are expected to save many students from drug abuse. Activities to strengthen school discipline targeting all school members are expected

to improve discipline to increase the commitment of school members, especially students. The co-curricular activity fitness program is expected to provide space for students to hone their talents and abilities. At least part of their time is spent in positive activities and a good group under the supervision of the school. Drug education is implemented through the delivery of scientific, real, and relevant information about the situation and circumstances of adolescents. Education is delivered professionally, programmed, and sustainable with the hope of providing a complete picture of the world of addiction and all its challenges. Improving social skills is expected to equip students to live their days by doing good things. Learning self-knowledge, thinking and behaving well, determining attitudes according to norms, overcoming and solving problems in a good way, empathizing with situations and circumstances around them, and being able to maintain good behavior even in a bad environment. Furthermore, improving the effectiveness of communication between the school and the student's parents is expected to increase the family's concern for their teenage children. Schools, through class teachers, are expected to communicate with parents of students to monitor or at least encourage effective communication with their teenagers. This attention is expected to strengthen family ties. Suggested strategies for early prevention of drug abuse among teenagers through school-based drug abuse prevention programs by developing a positive environment at school and home in line with the curriculum developed by the Ministry of Education, Culture, Research, and Technology through the Pancasila Student Profile Strengthening Project. The project is required to present diverse themes, sensitivity to the environment, and mental health themes with drug education being a must.

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