

**THE PRACTICE OF ISLAMIC
PSYCHOSPIRITUAL THERAPY IN THE
TREATMENT OF DRUG ADDICTION AT
REHABILITATION CENTRES IN MALAYSIA**

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Abstract

Drug addiction is a global problem and it also poses a threat to Malaysia. The Malaysian government through National Anti-Drug Agency (NADA) has implemented various approaches to eradicate drug abuse by providing rehabilitation centers and rehabilitation programs. Private institutions have also taken the same initiatives. One of the approaches in the recovery process used is Islamic psychospiritual therapy for Muslim addicts. However, the psychospiritual therapy program used varies and requires a holistic and comprehensive model. This study employed the qualitative approach through interviews with treatment center operators, observations of treatment center activities and text studies. It was conducted at several governments and private drug rehabilitation centers namely Cure & Care Rehabilitation Centre (CCRC) Tiang Dua, CCRC Sungai Ruan, Pondok Remaja Inabah Negeri Sembilan, Teratak Tautan Kaseh Murabbi and Persatuan Pengasih Malaysia. The study has revealed

that Islamic psychospiritual therapy takes into account three main concepts and components that are *tazkiyah al-nafs* (soul purification), basic religious knowledge, and a therapeutic support system. Islamic psychospiritual therapy is found to help the government, private institutions and individuals to achieve the recovery of drug addicts especially in addressing the issue of relapse in drug addiction for Muslim addicts.

Keywords: Psychospiritual therapy; *tazkiyah al-nafs*; drug addiction treatment.

Khulasah

Ketagihan dadah adalah masalah global dan juga merupakan ancaman kepada Malaysia. Kerajaan Malaysia melalui Agensi Antidadah Kebangsaan (AADK) mengambil pelbagai pendekatan untuk menangani isu penyalahgunaan dadah dengan menyediakan pusat pemulihan dan program pemulihan. Institusi swasta juga telah mengambil inisiatif yang sama. Salah satu pendekatan dalam proses pemulihan yang digunakan ialah melalui terapi psikospiritual Islam khusus untuk penagih dadah beragama Islam. Walau bagaimanapun, program terapi psikospiritual yang digunakan berbeza-beza antara satu sama lain dan memerlukan satu model holistik serta komprehensif. Kajian ini menggunakan pendekatan kualitatif melalui temu bual bersama pengendali pusat rawatan, pemerhatian terhadap aktiviti pusat rawatan dan kajian teks. Ia dijalankan di beberapa pusat pemulihan dadah kerajaan dan swasta iaitu CCRC Tiang Dua, CCRC Sungai Ruan, Pondok Remaja Inabah Negeri Sembilan, Teratak Tautan Kaseh Murabbi, dan Persatuan Pengasih Malaysia. Kajian ini mendedahkan bahawa terapi psikologi Islam mengambil kira tiga konsep dan komponen utama iaitu *tazkiyah al-nafs* (pemurnian jiwa), penguatan pengetahuan agama yang asas dan sistem sokongan terapeutik. Terapi psikospiritual Islam didapati dapat

membantu kerajaan, institusi swasta dan individu untuk mencapai pemulihan penagih dadah terutama dalam menangani isu penagih dadah berulang bagi penagih Muslim.

Kata kunci: Terapi psikospiritual, *tazkiyah al-naafs*, rawatan penagih dadah.

Introduction

Drug addiction is a negative symptom and a social problem that has plagued the country since the late 20th century. It is a form of non-military threat that has a great impact on the country as it involves a large number of addicts.¹ Statistics from the National Anti-Drug Agency (NADA) show that the total number of drug addicts from 2014 to 2018 was 116,204. According to NADA, in 2019, a total of 20,223 addicts were detected. It means every day there will be 55 drug addicts recorded and 47 of them are new addicts and 7 are relapse addicts.² Relapse addiction means "the use, consumption or abuse of psychoactive substances after a person has completed treatment and recovery of drug addiction in terms of physical and psychological dependence on drugs".³

There has been positive growth in terms of relapse addiction compared to previous years since 2014. A total of 9863 recurring addicts in 2014 dropped to 7643 in 2015, to 4648 in 2016, and 3243 in 2017. The year 2018

¹ Zarina Othman, Nor Azizan Idris & Mohamad Daud Druis, "Penyalahgunaan Dadah Sebagai Ancaman Keselamatan: Analisis Keberkesanan Program Kerajaan Dalam Mengkang Pengrekrutan Penagih Dadah Di Malaysia," *Geografia: Malaysian Journal of Society and Space* 11(13) (2015), 60–71.

² Agensi Antidadah Kebangsaan, *Dasar Dadah Negara* (Kajang: Agensi Antidadah Kebangsaan, Kementerian Dalam Negeri, 2019). https://www.adk.gov.my/wp-content/uploads/Dasar-Dadah-Negara-BM_compressed.pdf.

³ Fauziah Ibrahim et al., "Faktor Menyumbang kepada Penagihan Relaps dalam Kalangan Penagih Dadah PUSPEN di Semenanjung Malaysia," *Jurnal Antidadah Malaysia* 5(1) (2009).

recorded relapse addict cases by 2908. This means a decrease of 70.5% in cases of relapse addicts compared to 2014. In the 2013 data, there was a 54% increase over the previous year (NADA, 2017). This represents an interesting development in that the existing drug rehabilitation process is effective in providing addiction recovery. The situation is different compared to a study done before 2015. However, the National Drug Policy aimed at creating a country that is free from the threat of drug addictions by 2015 has not yet been reached.⁴

The situation is also different compared to studies done before 2016. The number of drug addicts who have recovered after treatment and recovery programs is so small compared to repeated addicts. Wan Mahmood Pawanteh reports that 90% of drug addict relapse within five years after undergoing drug rehabilitation and treatment programs.⁵ While according to the findings of the Social Welfare Department, only 37% of ex-drug addicts have recovered from drug addiction.⁶ This situation raises doubts about the effectiveness of the treatments provided at drug rehabilitation centres.⁷ This scenario clearly illustrates the need for a more effective model for treating and restoring drug addicts. Adam, Wan Ibrahim, Ahmad & Sudirman through their research, found the need for alternative methods in the existing

⁴ AADK, *Dasar Dadah Negara*.

⁵ Wan Mahmood Pawanteh, "Penyelarasan Jentera Pelaksanaan dalam Bidang, Peranan dan Penglibatan Masyarakat dalam Usaha Membentasi Dadah," paper in Konvensyen PEMADAM Kebangsaan (Kangar: Kolej Universiti Kejuruteraan Utara Malaysia, 1988).

⁶ Seghatoleslam, Tahereh et al., "Achieving a Spiritual Therapy Standard for Drug Dependency in Malaysia, from an Islamic Perspective: Brief Review Article," *Iranian Journal of Public Health* 44(1) (2015), 22–27.

⁷ Zarina et al., "Penyalahgunaan Dadah Sebagai Ancaman Keselamatan, 60–71.

conventional drug rehabilitation process conducted by the government.⁸

Starting from March 2015, the government has initiated the implementation of a pilot recovery project through the Inabah approach at CCRC Sungai Ruan. This Inabah approach uses the psychospiritual aspect as the basis for drug addiction recovery. The government recognizes that for addiction recovery programs, spiritual-based therapy or psychospiritual therapy is more effective in addressing drug addiction issues. NADA has taken the initiative to combine existing rehabilitation programs with psychospiritual therapy treatment programs in 2015.⁹ NADA has used a psychospiritual therapy module pioneered by Pesantren Tasek Malaya, Suryalaya, Indonesia. The institution uses the Tarekat Naqshabadiyyah and Qadiriyyah (TQN) approaches and practices as the main therapeutic program for treating various diseases including drug addiction. NADA has incorporated this TQN model by renaming it The Islamic Rehabilitation Approach Program (ISRA). The ISRA model was first launched at the Cure & Care Rehabilitation Centre (CCRC) Sungai Ruan, Pahang, Malaysia. This module was then extended to several other CCRCs including the CCRC Tiang Dua Melaka, CCRC Perlop Perak, CCRC Bera Pahang, CCRC Kampung Selamat Pulau Pinang, CCRC Karak Pahang, and CCRC Jeli Kelantan.¹⁰

The ISRA model combines spiritual features and holistic development in the treatment and recovery of drug

⁸ Fadzli Adam, Wan Ahmad Wan Ibrahim & Abdul Fatah Sudirman, "Spiritual and Traditional Rehabilitation Modality of Drug Addiction in Malaysia," *International Journal of Humanities and Social Science* 1(14) (2011), 175–181, http://www.ijhssnet.com/journals/Vol_1_No_14_October_2011/24.pdf.

⁹ AADK, *Dasar Dadah Negara..*

¹⁰ *Ibid.*

addicts. The goals of ISRA are to purify the soul, increase confidence and self-efficacy, return to God, provide peace, emphasize self-discipline, and restore the function of a normal human being. ISRA also uses a combined approach of psychosocial programs as support therapy. This combined module utilizes eight core programs including *halaqah*, moral modification and psychoeducational programs.¹¹

Some non-governmental organizations (NGOs) and private individuals have taken the initiative to set up their drug treatment centres. The widely used approaches include psychospiritual, psychosocial and pharmacotherapy. There are also private therapy centres that use psychospiritual therapy as a whole or make it part of a therapeutic approach.¹² Pondok Remaja Inabah uses a model of psychospiritual therapy that is based on the practice of *tasawwuf*. The *tasawwuf* approach applies the teachings of the Tarekat Qadiriyyah and Naqsyabandiyah (TQN) pioneered by the Pesantren Tasek Malaya, Suryalaya, Indonesia similar to the NADA approach.¹³ The difference between the NADA approach and the Pondok Remaja Inabah is that Pondok Remaja Inabah has previously adopted the *tasawwuf* approach to drug addiction treatment while NADA is still relatively new in its usage of the *tasawwuf* approach.

¹¹ *Ibid.*

¹² Mohd Rushdan & Ahmad Bukhari, "Integrasi Terapi Psikospiritual Islam dalam Modul Rawatan dan Rehabilitasi Berasaskan TC (*Therapeutic Community*)," Paper in International Drug Prevention and Rehabilitation Conference, 2015, 98-107 <https://doi.org/10.1080/00306525.1988.9633699>.

¹³ Saiful Amri et al., "The Role of Former Drug Abuser in the Management of Drug Treatment Center Using Psycho Spiritual Therapy in Malaysia and South Thailand: A Comparative Study," *International Journal of Asian Social Science* 9(1) (2019), 106-113, <https://doi.org/10.18488/journal.1.2019.91.106.113>.

Persatuan Pengasih Malaysia has also adopted a psychospiritual therapy approach in its treatment at the beginning of its establishment. Initially, they adopted a full-fledged *tabligh* group approach as the centre focused on the rehabilitation of local Muslims. Once known locally and abroad, they are no longer adopting a holistic *tabligh* groups approach, but include psychosocial elements so that non-Malay and non-Muslim drug addicts can also receive treatment at this centre.¹⁴

Another treatment institution, Pusat Rawatan Islam Manarah also treats drug addictions. The approach used is psychospiritual therapy that uses the recitation of Quranic verses to be listened to by the addicts. This approach has also shown positive results for drug addicts.¹⁵ This approach is not the same as in the NADA's CCRC, the Persatuan Pengasih Malaysia and the Pondok Remaja Inabah, which emphasizes religious learning rather than mere recitation of Qur'anic verses.

The diversity in these psychospiritual therapy approaches when combined will result in the best drug addiction psychospiritual therapy model. Each treatment centre has its approach and varies among itself. It is based on a long period of experience, trials and improvements that are performed continuously to produce positive results. Psychospiritual therapy has different effects on drug addicts. Hence, the selection of psychospiritual therapy elements from al-Qur'an and al-Hadith, practices of the two such as prayer, *dhikr*, the application of *sunnah* and etc. are the best elements essential in ensuring the effectiveness of treatment programs. So far, there has been no special study aimed at bringing together the best

¹⁴ Mohd Rushdan & Ahmad Bukhari, "Integrasi Terapi Psikospiritual Islam," 107.

¹⁵ M. Zohdi Amin et al., "A Literature Review of Spiritual Psychotherapy Using Quran Recitation in the Treatment of Drug Addiction," *Advanced Science Letters* 23 (5) (2017), 4865-4868, <https://doi.org/10.1166/asl.2017.8929>.

psychospiritual therapy components based on al-Qur'an and al-Hadith as therapeutic models in drug rehabilitation programs in Malaysia.

Methodology

The study employed the qualitative method whereby the data collection was done through observations, interviews and text studies. The observation approach was conducted at the CCRC Tiang Dua, CCRC Sungai Ruan, Pondok Remaja Inabah Negeri Sembilan, Teratak Tautan Kaseh Murabbi, dan Persatuan Pengasih Malaysia. The researchers stayed at the rehabilitation centres for three days each. The data collection was performed by taking notes on all observations that were related to psychospiritual therapy elements and making fine conclusions on the overall observations.

Interview sessions were also conducted at all the stated rehabilitation centres. Five respondents were selected among the staff (2 respondents) and inmates (3 respondents) from each rehabilitation centre totaling 25 respondents. The unstructured interview approaches sessions conducted are aimed to gather in-depth information with some guidance from the researchers. The researchers used a one-to-one interview approach with the staff of the rehabilitation centres. Meanwhile, a group interview approach was used for inmates considering their larger number compared to the staff.

While for the document analysis, there are two parts. The first part explored the concept of *tazkiyah al-nafs* by al-Ghazali in his books and other scholars' writings on the concept. Among the books referred to are *Ihya' 'Ulum al-Din* and *Riyad al-Salihin*. The second part was the analysis of all the psycho-spiritual therapy guidance books or pamphlets obtained from the centres. The documents were analysed by extracting spiritual elements used in the therapy sessions.

The data obtained from the observations, interviews and text studies were described by looking at the aspects of relations and factors. Atlas.ti 7 was used to encode the data by classifying them into several codes. From the codes, the researchers were able to come up with general and specific conclusions. All the analysed data were mapped upon the concept of *tazkiyah al-nafs* by Imam al-Ghazali.

The study, therefore, evaluated all the rehabilitation centres according to the concept of *tazkiyah al-nafs* by al-Ghazali which is one of the models or concepts of Islamic psychospiritual therapy that is suitable for dealing with issues related to social symptoms that stem from spiritual problems.¹⁶ A similar approach was also introduced by Ibn Qayyim al-Jawziyyah.¹⁷ Even so, al-Ghazali's explanation was found to be more comprehensive and detailed.¹⁸

Result and Discussion

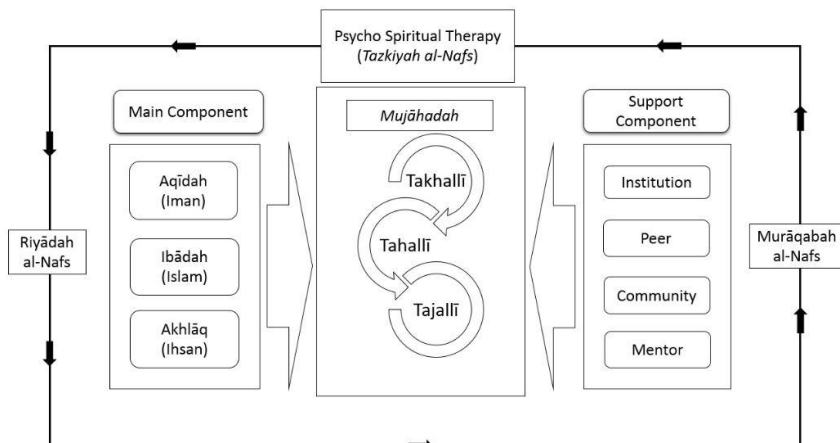
The researchers found that the construction of the new model of psychospiritual therapy based on al-Qur'an and al-Hadith in drug addiction treatment consists of a few fundamental elements of religion (Islam). There are three elements of the model which are – i) Main component therapy - compulsory religious knowledge of Islam which is known as *fard 'ayn*; ii) *Tazkiyah al-Nafs* of al-Ghazali; and iii) Support therapy – the roles of the institution, peer, community and mentor. The combination of these three

¹⁶ Zuraidah Abdullah, Che Zarrina Sa'ari & Lee Wei Chang, "Transgenderisme di Malaysia: Pelan Bimbingan Kembali Kepada Fitrah dari Perspektif Psikospiritual Islam," *AFKAR: Jurnal Akidah & Pemikiran Islam* 20(2) (2018), 279–322, <https://doi.org/10.22452/afkar.vol20no2.9>.

¹⁷ Ibnu Qayyim al-Jawziyyah, *Ighathah al-Lahfan min Masayid al-Shaytan* (Beirut: Dar al-Ma'rifah, 1975).

¹⁸ Zidni Nuran Noordin & Zaizul Ab.Rahman, "Perbandingan Proses Tazkiyah al-Nafs Menurut Imam Al-Ghazali dan Ibnu Qayyim," *Jurnal al-Turath* 2(1) (2017), 37–46.

vital elements provides a balance therapy model for drug addiction treatment.



Model of Psychospiritual Therapy Based on al-Qur'an and al-Hadith for Drug Addiction Treatment

Main Therapy Component – Compulsory Religious Knowledge (*Fard ‘Ayn*)

In general, the psychospiritual therapy approach is not new. Instead, it stemmed from religious teachings and was refined to suit the model of psychospiritual therapy. Then, the psychospiritual therapy of Islam is the compulsory religious knowledge or *fard ‘ayn* knowledge. *Fard ‘ayn* knowledge is the compulsory religious knowledge that has been taught to all Muslims after they reach *‘aqil* (the ability to differentiate good and bad things) and *baligh*. No Muslim could skip learning *fard ‘ayn* knowledge.¹⁹

The actual problem faced by drug addicts before or after their involvement in drug addiction is that they have not been properly taught about *fard ‘ayn* knowledge and

¹⁹ Zaizul Ab Rahman et al., "The Factor of Religiousness in the Spirit of Unity among Adolescents Living in Malaysia Community," *International Journal of Business and Social Science* 9(3) (2018), 75-80, <https://doi.org/10.30845/ijbss.v9n3p8>.

thus, resulting in them not living a religious and dutiful life. Their life is disorderly and muddled, leading them to take drugs as a means to fulfil their desires. So, by re-learning *fard 'ayn* knowledge, they will have higher resistance to vices including taking drugs.²⁰

The component of *fard 'ayn* knowledge comprises three parts – *'Aqidah* (creed), *'Ibadah* (worship) and *Akhlaq* (morals).²¹ These three parts of *fard 'ayn* knowledge are important for addicts to learn as Muslims. Starting by learning *Arkan al-Iman* (Pillars of Faith) – Allah the Almighty as the only God, Prophet Muhammad as the last prophet sent, creation and task of angels, holy scriptures, prophethood, hereafter and belief in good and bad destinies. Once learned, they will have strong faith in Allah the Almighty which has destined everything from the beginning. By fulfilling their emptiness with *'aqidah*, they will have a strong reason to abstain from taking drugs again and make them capable to handle withdrawal symptoms and triggers. Believing in Allah the Almighty as the only God, the only savior that they can rely on, will help them to go through treatment programs and be involved in society once again. Relying on an absolute outer power (Allah the Almighty) is the essence of psychospiritual therapy.²²

The second part of *fard 'ayn* knowledge is the theory and practice of *'ibadah* (worship) of Islam. After they have been filled with strong *'aqidah*, they must worship Allah the Almighty as the God who had created them,

²⁰ Muhammad Yusuf Khalid, "Psycho-Spiritual Therapy Approach for Drug Addiction Rehabilitation," *Jurnal Antidadah Malaysia* 3&4 (2008), 143–152.

²¹ Muslihah Mazlan et al., "Fardhu 'Ain Sebagai Kerangka Pembentukan Disiplin Pelajar di Institusi Pendidikan Islam," *Jurnal Ulwan* 1 (2016), 59-73.

²² Kenneth I. Pargament & James W. Lomax, "Understanding and Addressing Religion among People with Mental Illness," *World Psychiatry* 12(1) (2013), 26-32, <https://doi.org/10.1002/wps.20005>.

given them life and its meaning, and as an act of being grateful. The theory of *'ibadah* will prepare for them the basic concepts of how they have to perform the worship and the value and philosophy of spirituality behind it. It is important because the practical parts of *'ibadah* are the physical manifestation of the theories learned. The practical parts consist of *Salat al-Fard* (compulsory prayers), ablution, fasting, *taharah* (hygiene care), etc. These practices of *'ibadah* will gradually become their daily habits and thus reconstruct their behaviours from a purposeless way of life to a God-centred way of life.

The last part is *akhlaq* which can be literally translated as morals and good conduct of a Muslim according to al-Qur'an and al-Hadith. When addicts have completed the first and second parts of the *fard 'ayn* knowledge, they have to learn about *akhlāq* which is the final completion of the compulsory knowledge of Islam. Leaving *akhlaq* behind means the psychospiritual therapy of this main therapy component is not complete, and consequently, addicts are prone to produce negative or incomplete treatment. *Akhlaq* can be divided into two parts which are theory and practice. The theory of *akhlaq* must be learned beforehand so the addicts will have basic knowledge of *akhlaq*. Then addicts have to practice and apply the theory in real life. The practical part of *akhlaq* is the hardest because it involves both explicit behavior (e.g. being kind to other people) and implicit behavior (e.g. suppressing negative thoughts about other people) which make this part harder than the practice of *'ibadah*.

Even though there is a separation of parts (*'aqidah*, *'ibadah* and *akhlaq*) in this main therapy component, it does not mean that the *'aqidah* part must be learned by addicts before the *'ibadah* part and so does the *akhlaq* part is not the last part to be learned. These three parts cannot be separated in both teachings (theory and practice)

according to the order of priorities, but they should be executed simultaneously.

Process – *Tazkiyah al-Nafs* of al-Ghazali

Psychospiritual therapy in Islamic realms cannot go further without encompassing the concept of *tazkiyah al-nafs* (purification of the soul) by al-Ghazali.²³ The concept of *tazkiyah al-nafs* consists of several elements and processes which are important to secure one's soul from being deviated from a healthy and sound soul which is *nafs al-mutma'innah* (soul at rest) to another two types of soul which are *nafs al-lawwamah* (reproaching soul) and *nafs al-ammarah* (soul inclined to evil).²⁴ To achieve *nafs al-mutma'innah*, one has to go through many processes which take a lot of effort, and it is not an easy feat.²⁵ As for most of the addicts, the researchers assumed they have fallen to the lowest part of the soul – *nafs al-ammarah* – which can be explained as they are far from religion before or after they consumed drugs.

Tazkiyah al-Nafs is a process of cleansing and purifying oneself from the most despicable traits (*madhmumah*) that become an obstacle to the cultivation of noble morals (*mahmudah*),²⁶ by acting as a solution to the conflict between good and bad that collide within a

²³ Malik Badri, *Contemplation: An Islamic Psychospiritual Study* (London: International Institute of Islamic Thought -IIIT, 2001).

²⁴ Zakaria @ Hamid Khairani, "Kaedah Pembangunan Akhlak Remaja Menurut Imam al-Ghazali: Aplikasinya dalam Program Tarbiyah Sekolah-Sekolah Menengah Aliran Agama Berasrama di Negeri Kedah, Malaysia," *Jurnal Kajian Pendidikan (ATIKAN)* 2(1) (2012), 94.

²⁵ Khalid, "Psycho-Spiritual Therapy Approach," 146.

²⁶ Che Zarrina Sa'ari, "Peranan Penyucian Jiwa (Tazkiyah al-Anfus) Terhadap Pembangunan Insan dalam Masyarakat Bertamadun," Paper in Seminar Tasawuf Negeri Sembilan 2007, Jabatan Mufti Kerajaan Negeri Sembilan Darul Khusus, 2007, <http://www.muftins.gov.my/v1/en/2019/04/19/peranan-penyucian-jiwa-tazkiyah-al-anfus-terhadap-pembangunan-insan-dalam-masyarakat-bertamadun/>.

person.²⁷ According to al-Ghazali, the main objective in *tazkiyah al-nafs* is to produce good morals. Good morals are based on two aspects, namely (i) balance between the strength of reason and wisdom with anger and lust, (ii) making reason obey the will of the Shari'ah. Good morals can be achieved through *mujadah al-nafs* and *riyadah al-nafs*.²⁸ *Muraqabah al-nafs* play a role in driving reason to fulfil the requirements of Sharia. The reason is led by knowledge, and knowledge is the ruler of human sensory behaviour.²⁹

Tazkiyah al-nafs in the context of drug addiction recovery can play a role in encouraging addicts to use their reason and wisdom to control their lust from the symptoms of drug addiction and make them obedient to the will of Sharia. Although *tazkiyah al-nafs* is usually referred to as the cleansing of the spiritual soul only, many physical factors influence the formation of the spiritual soul which also contribute to self-impairment. Among them are environmental factors such as peers, family, society,³⁰ nutrition factors,³¹ practice factors, worship factors and sin factors.³²

Thus, it can be concluded that the process of *tazkiyah al-nafs* also involves physical aspects and spiritual

²⁷ Che Zarrina Saari & Nor Azlinah Zaini, "Terapi Spiritual Melalui Kaedah *Tazkiyah al-Nafs* oleh Syeikh Abdul Qadir al-Mandili dalam *Kitab Penawar Bagi Hati*," *AFKAR: Jurnal Akidah & Pemikiran Islam* 18 (Special Issue) (2016), 75–90.

²⁸ Al-Ghazali, *Ihya' 'Ulum al-Din*, 940.

²⁹ *Ibid.*, 888

³⁰ Norhisham Muhamad Azmil Hashim, "Pelaksanaan Biah Solehah dan Kesan Terhadap Penghayatan Akhlak Pelajar di SMKA," *Technical & Social Science* 8(1) (2017), 25–43.

³¹ Aemy Liza Minhat, "Hubungan Makanan dan Pemakanan Halalan Toyyiba dengan Akhlak" Master thesis, Universiti Teknologi Malaysia, 2014.

³² Suhaimi Abu Hassan, Mohd Azam Yahya & Ahmad Faqih Ibrahim, "Kesan Pelaksanaan Solat Terhadap Akhlak Mukallaf menurut al-Quran dan al-Hadith," *Jurnal 'Ulwan* 4 (2019), 100–115.

aspects. Because of that, we find that among Sufi figures some introduce the concept of *zuhd* (asceticism) and *'uzlah* (isolation) as one of the processes of purifying the soul.³³ Following that, al-Ghazali when explaining the role of *riyadah al-nafs* suggested that a person should train himself with good practices and character so that it becomes integrated with him and then affects his soul, making his soul improve. Faithful practices add white dots to the heart, while bad deeds make black dots to the heart which eventually darkens the heart.³⁴

The outer process of *mujahadah*, *riyadah* and *muraqabah* was modified from its original concept but not deviating far from its original purposes. *Mujahadah* means one's efforts to leave vices behind. *Riyadah* means one is practicing to conduct virtue and religious practices, and *muraqabah* means one is keeping his or herself in check from not being fallen into negative acts, and keep on doing virtuous acts.³⁵ For this model of psychospiritual therapy for drug addiction treatment, the researchers put the *mujahadah* above the inner processes of *takhalli*, *tahalli* and *tajalli*. The justification for this action of changing the position of *mujahadah* is that the *nafs al-ammarah* of addicts' soul needs to be cleaned and polished greater than any other soul problems. The addicts' soul and psychological problems involve the changes of chemicals in their brains which make them crave drugs, and this is hard to deal with. By focusing on *mujahadah*, they will be able to resist the craves for drugs, thus transforming themselves into better human beings who live according to Allah's guidance.

³³ Che Zarrina Sa'ari, "Peranan Penyucian Jiwa."

³⁴ Al-Ghazali, *Ihya' 'Ulum al-Din*. 942

³⁵ Mohd Suhardi Mat Jusoh & Mohd Farid Mohd Sharif, "Pembangunan Spiritual dalam Pelaksanaan Program Tarbiah di Asrama Sekolah-Sekolah Menengah Kebangsaan Agama (SMKA) Pulau Pinang," *AFKAR: Jurnal Akidah & Pemikiran Islam* 20(2) (2018), 127-158, <https://doi.org/10.22452/afkar.vol20no2.4>.

In this model, the *riyadah* and *muraqabah* will come side by side as the outer process which regulates all the components of psychospiritual therapy. In this sense, *riyadah*'s role is to make sure that the whole processes of the components are being conducted or executed continuously. *Riyadah* involves the appreciation of the three main therapy components which are Compulsory Religious Knowledge (*Fard 'Ayn*). The appreciation towards the *'Aqidah* component include *dhikr* and reciting *salawat* upon Prophet Muhammad (PBUH), being engaged in the meaning, al-Qur'an recitation, Hadith and Sirah. For the *'ibadah* component – practising the compulsory actions such as the obligatory prayers, fasting in the month of Ramadhan and performing supererogatory acts like *Duha* prayer, prayers before *Fajr*, *rawatib* prayer, *salat hajat* (praying if you have special wishes) and *salat tawbat* (prayer of repentance). The *akhlaq* component includes trying to get rid of negative attitudes (*takhalli*) such as being hot-tempered, vengeful, raking up the past, boastful, egoistic and self-centred, and being rough with others. At the same time, the inculcation of positive attributes (*tahalli*) like being patient, accepting (*rida*), grateful (*shukr*), humble, and respecting teachers and friends are also encouraged.

The *muraqabah*'s role is to make sure that all the processes (inner and outer) are being monitored without leaving out any of the components and processes.³⁶ *Muraqabah* takes place in the form of monitoring through the support therapy component which involves the roles of institutions, friends, society and mentors who act as the teacher (*murshid*) in the framework of commanding the good and forbidding the evil (*amar ma'ruf and nahi munkar*). *Muraqabah* should also be conducted by

³⁶ Nazila Isgandarova, "*Muraqaba* as a Mindfulness-Based Therapy in Islamic Psychotherapy," *Journal of Religion and Health* 58(4) (2019), 1146-1160, <https://doi.org/10.1007/s10943-018-0695-y>.

individuals within themselves through repentance (*tawbat*), meditation (*tafakkur*) and remembrance of Allah (*tadabbur*). Apart from that, the addicts must be disciplined in reciting daily *wirid*, *ma'thurat* and *ruqyah shar'iyah* to seek Allah's assistance in obeying Him and leaving behind evil. By practising the *wirid* and *ruqyah shar'iyah*, the addicts can avoid the evil of Satan who always leads to disobedience to Allah.

Support Therapy Component

Apart from the main therapy component, the support therapy component helps the rehabilitation processes of drug addiction. It is noted that drug addicts suffer from four major aspects which are (i) biological, (ii) sociological, (iii) psychological, and (iv) spiritual aspects. Focusing only on the spiritual aspect is not advisable as the addicts will not be completely cured and tend to relapse. The support therapy component for this model consists of four entities that play their respective roles in drug addiction treatment, which are (i) institution, (ii) peer, (iii) community, and (iv) mentor.

i. Institution

The institution plays a major role in the support therapy component. The institution is the shelter where all the addicts live while receiving and undergoing treatment. Preparing a conducive atmosphere by making the institution neat and clean is the most critical aspect. The safety aspect of the institution is another crucial part as the inmates tend to escape and violate the law within the first three months because they lack self-control. They also tend to smuggle cigarettes and drugs if they find weaknesses in the institution.

Besides preparing a good structure and therapeutic atmosphere, the institution should also prepare a place for worship and prayers which is the mosque (or *surau*) as a place of spiritual recovery. The mosque in the institution will act as the centre of psychospiritual therapy for the

addicts. All religious activities are mostly operated in the mosque, especially the *Salat al-Fard* (compulsory prayers). Other activities are reciting al-Qur'an, *fard 'ayn* lessons, Islamic preaching, remembrance of Allah (*dhikr*) etc. The mosque itself, if all the above activities are carried out properly, will bring a calming atmosphere and thus, help the addicts in their recovery journey.

ii. Peer

The second support therapy component is peer support. The capacity of an institution will determine the number of inmates they will take in and thus create a different range of peer support. Peer support can come with different approaches in the institutions as the inmates in the institutions vary in their ages, a batch of intakes, rooms or dorms system they live in and their respective roles in the institution. As for the age differences, usually, older people have the upper hand in giving encouragement and advice to their fellow younger friends. In the case of addicts, it is quite different from the usual cases, in which the ones who have the seniority and experiences of recovery could be younger than older addicts. Thus, the conflict of seniority between the older addicts and younger addicts would make peer support weak. So, adjusting the conflict by giving them clear rules and mindsets will set them in a harmonious relationship between addicts. This will lead to healthy peer support comprising positive encouragement, advice and mutual understanding, which will consequently promote faster and more resilient recovery.

A batch of intakes will affect the community of addicts in the institution by dividing them into senior and junior groups. The seniors have already gone through a series of treatment programs that can become role models to their juniors. The juniors will set their seniors as the ones they could rely on in giving positive insight into the recovery. The role of peers in rooms or dorms is important

as they will think that all the room or dorm members are their close friends that could comfort and support them mentally and emotionally. As for the roles assigned to each addict, they will interact as an organisation that emphasises professionalism. The roles will give them a sense of responsibility in completing their tasks and acting accordingly to the characteristics of the roles.

iii. Community

Community support is different from peer support in terms of its functions. Peer support is largely being implemented in the institution and has a full effect on addicts who live within them. Instead, community support only comes in handy if the institution allows the involvement of the community at the institution. The involvement of the community varies for each rehabilitation centre. As for NADA's CCRCs, after the addicts have gone through a six-month rehabilitation program, some of them are allowed to join community programs arranged by NADA. The community support program is in the form of industrial training at local businesses or companies to prepare them for work opportunities after they have finished the rehabilitation programs at CCRC. The only weakness of this approach is when the addicts are placed outside CCRC, the supervision for the psychospiritual therapy is not as effective as in CCRC. The addicts tend to forget all the religious knowledge and practices they used to perform in CCRC. Thus, the possibility for them to relapse is high.

Persatuan Pengasih Malaysia, Pondok Remaja Inabah and Teratak Tautan Kaseh Murabbi have about the same approach to community support. They will organise festive events by inviting parents of the addicts and the surrounding community to join. The programs can be varied according to the religious and national celebrations or the events that come up from the institutions themselves such as annual assemblies, weekly religious

programs and visits from any school or university. For example, during *Eid al-Fitri*, they will invite the communities to participate in preparing food for the event and inviting them to the festival. The institutions also invite them to *Eid al-Adha's* slaughtering cows and goat programs. The institutions also allow the addicts to help with *kenduri* (food preparation for weddings) when the surrounding community asks for their help.

iv Mentor

All of the above-stated rehabilitation centres use mentors as one of their rehabilitation components for treatment. The role of a mentor is not the same as the role of peer support. While peer support comes from surrounding fellow addicts, the mentor comes from the management team. The mentor is not always with the addicts all the time during the rehabilitation period, but their presence could give them new insights and hopes. The mentor acts as the idol or role model that all the addicts should emulate.

Persatuan Pengasih Malaysia sets Datuk Yunus Pathi, the president of the rehabilitation centre as the main mentor. He will give a speech once or twice a week to the addicts. Every Friday, he will hold a gathering for all the addicts specifically to address the dissatisfactions faced by the addicts in the rehabilitation centre. While in Pondok Remaja Inabah, Ustaz Shaifuddin acts as the main teacher for the *tarekat* approach which is known as *murshid* (sufi teacher). He will guide the addicts to the right path of Sufism as their main rehabilitation approach. His role as *murshid* could give a significant change to the behavior of the addicts.

Teratak Tautan Kaseh Murabbi's president, Ustaz Shah Eryzal also acts as a mentor to the addicts. As a former addict himself, he knows what the addicts must have faced when it comes to the challenge of being in the recovery process. He will give them Islamic motivational

values which could strengthen their faith. He also attends to them with kindness and compassion which makes the addicts feel welcomed. For both CCRCs, there is no significant individual or figure that could act as a mentor. Thus, the role of a mentor could be found in peer support only, if any.

Conclusion

The long-standing problem of the country, which is drug addiction, has deterred Malaysia from becoming a fully respectable country to live in, which cares about the health and its people. The continuity of relapse addiction cases makes it hard for the country to strive for a better future. Hence, drug addiction has become a number one threat to the country. The government and private organisations have been making efforts to curb the problems and have shown some positive outcomes. However, suggesting the new model of psychospiritual therapy based on al-Qur'an and hadith for drug addiction treatment could provide our society with a more solid treatment program and decrease the relapse of addict cases in the future.

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