



STIKep PPNI Jawa Barat, Bandung - INDONESIA
National Cheng Kung University Hospital - TAIWAN
Bandung, 16th – 17th July, 2018

Conference Book
International Conference on Health Care
and Management

“Evidence to inform action on supporting and implementation of
SDGs”

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This book published by:

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Welcome Message



Assalamualaikum Warahmatullahi Wabarakatuh

Dear honorable guests,
Sustainable Development Goals (SDGs) as an agreement of sustainable development objectives agreed by all countries at the 2015 UN sessions. Each country including Indonesia has an obligation to implement this joint development plan by applying universal, integration and inclusive principles by ensuring that no one missed or “No-one Left Behind” Indonesia has Nawa Cita or 9 priority agenda which should synergize with SDGs and can be used as health program application in Indonesia to also achieve SDGs.

On behalf of the organizing committee and the Nursing Society of Indonesia, I am glad to invite you to join ICHM 2018 (International Conference on Health Care and Management) in Bandung, Indonesia on July 16-17, 2018.

The conference is expected to reveal some solutions for evidence-based health care and scientific facts to be discussed by various viewpoints from diverse speakers from around the world with the title “Evidence to inform action on supporting and implementation of SDGs. Through the International Conference is expected to improve health services, especially in the field of nursing in Indonesia to improve the human development index.

We hope all participant could benefit from the exciting program and will surpass your expectation and that will be an inspiring event.

Warm regards,

A handwritten signature in black ink, appearing to read 'Dhika Dharmansyah'.

Dhika Dharmansyah
Conference chair



Assalamu'alaykum Wr.Wrb
Good morning and best wishes for all of us.

Ladies and gentlemen, in such a great and happy day, let's praise and thank to Allah Swt who has given us grace and mercy to all of us to gather in this International Conference on Health Care Management event today.

First of all, we would like to gratitude and appreciate highly to national Cheng Kung University Hospital has given the opportunity and confidence to our institution STIKep PPNI Jabar for the second time in collaboration to organize International Conference on Health Care Management with theme: "Evidence to inform action on supporting and implementation of SDGs". This event is one of follow up The memorandum of Understanding between NCKUH with STIKep PPNI Jabar.

STIKep PPNI Jabar is as a nursing education institution carry out the mandate to create professional nurse, we must implement all TRIDHARMA University activities in academic atmosphere that aims to broaden and improve nursing and existence of nurse profession capacity in nation developing continually.

As we know the university academic quality is determined by its researches and graduates result quality. The research work results may be either a right against managing intellectual wealth equity as well as scientific work which is able to be publicized through scientific journals and scientific gathering forums of the same scientist background both in national and international level.

Nevertheless, the publishing of journal researches is published by its university. Nowadays, it is irregular because there are both financial and scientific manuscript availability drawbacks. Scientific regular manuscripts are very limited because manuscript contributor is only from its university as well.

The high education Research and technology ministry data in 2017, it stated that there were an increase of research work publishing done by practitioners, academicians and researchers of Indonesian. The amount of Indonesian research publishing on international journal certifiable indexed Scopus tended to increase. The high education Research and technology ministry data on December 1st 2017 noted that Indonesia scientific research publishing reached 14.100 journals. Meanwhile, on October 1st 2017 there were as many as 12.098 journals.

However, internally nurse profession scientific research journals are still less of publishing. It is alleged to the low of quantity and quality publishing about nursing. One of the drawbacks is rarely the interaction between nursing scientists and experts in scientific conferences. Some efforts are carried out by STIKep PPNI to encourage and to accelerate sharing knowledge amongst the nursing experts. Accordance to the goals, National Cheng Kung University Hospital Taiwan and STIKep PPNI have made MoU and held as this International conferences organizer. Hopefully, it is able to bridge all stakeholders, practitioners, and academicians in supporting the quality of the human resources especially, nurses and health workers as well.

The honourable ladies and gentlemen,
Nowadays, in the global era, the transformation runs rapidly and consequently it makes the knowledge based society. Information and communication technology development are very important in on its role in manifesting society development based on the knowledge. The higher education of society will be higher of health service quality demands specially nurse.

Accordance to the effort, this International conference aims to,

1. Facilitate the knowledge sharing between health experts and nurses to encourage the goal of health human resource quality.
2. Produce health scientific and nursing articles deserve to be published on international scopus indexed journal.
3. Make communication networking amongst Universities, research institution, nurse practitioners, and other stakeholders.

I truly believe that all participants through the 2 days in international conference, our goals above are able to be manifested well.

Finally, I would like to thank to all of participants diligently and with spirit of attending this international conference on health care management.

Wish the conference is able to be knowledge sharing event and delightful and successful as well, the conference will be enlightened and interchange will do great help for us after attending this conference, especially STIKep PPNI Jabar and generally for all profession nurses to provide health services to communities, aamiin ya robbal alamin.

Wassalamu'alaykum Wr.wb.

Kindest regards,



The Dean of STIKep PPNI Jabar



Excellencies, Distinguished Delegates, Ladies and Gentlemen,
Selamat Siang,

I'm ChyunYu Yang, the superintendent of National Cheng Kung University Hospital in Tainan, Taiwan.

On behalf of our hospital, it is my pleasure and privilege to welcome all of you to participate in the international conference on health care and management 2018.

To our eminent speakers and delegates who have come from UK, Netherland, Korea, Japan, Thailand, Singapore, Taiwan, and Indonesia, I bid you a very warm welcome to Bandung. We are indeed honoured to have you here with us. We have about 1.000 participants from different place in Indonesia and countries gathered here today, making our conference a truly meaningful one.

This is our second time collaborate with STIKEP PPNI Jawa Barat to hold an international conference. Last year, we have very successful conference with the theme focus on infection control and disaster management. And this year, our conference theme is "evidence to inform action on supporting and implementation of SDGs".

The Sustainable Development Goals (SDGs) known as the global goals, are a universal call to action to end poverty, protect the planet and ensure that all people enjoy peace and prosperity. Goal 3 addresses all major health priorities and calls for improving reproductive, maternal and child health; ending communicable diseases; reducing non-communicable diseases and other health hazards; and ensuring universal access to safe, effective, quality and affordable medicines and vaccines as well as health coverage.

However, the world seems still far from ending maternal mortality, with more than 303,000 deaths in pregnancy or childbirth occurring annually. NCDs are also a growing problem, causing 40 million deaths in 2015.

But, All in all, we can take comfort in the fact that SGD indicators are moving in the right direction. Yet we still have plenty of work to do.

I wish in the next two day and a half, we have the opportunity - and indeed the responsibility - to prepare and add knowledge related the current situation and progress reflection of SDGs.

In closing, I encourage delegates to participate actively in the interesting discussions over the next two days. I wish everyone a successful and fruitful conference.

Thank you.

Conference Committee

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THE EFFECTS OF DRUG ABUSE (MIXING DEXTROMETHORPHAN AND ETHANOL): LIVED EXPERIENCES OF TEENAGERS

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ABSTRACT

Background: This study explored and described effects of drug abuse (mixing dextromethorphan and ethanol) in East Belitung-Indonesia. **Objectives:** It aims to identify experiences of teenagers' regarding the effects of drug abuse. **Methods:** Qualitative research with a phenomenological approach conducted. Five teenagers ages 15 to 18 years old experienced effects of drug abuse in East Belitung-Indonesia are participants in this study. In-depth interviews were used. **Results:** The gathered data were analyzed through the use of Colaizzi's Methodological Approach. Following themes emerged: (1) Relationship with Family and Community, (2) Health Condition (Physic and Psychic), (3) Education Problems, (4) Behavior of Users. **Conclusions:** Teenagers with drug abuse encountered varied experiences and conditions, however, they maintained an optimistic perception about their future after rehabilitation. By learning from this experiences, other teenagers can be given proper guidance, education, and support in order to prevent drug abuse. The nursing education should design and develop the education program for teenagers to avoid drug abuse. Future researchers may conduct a more comprehensive study on a larger scale on other facets of drug abuse. Quantitative research may also be done to validate and enhance the results of this study.

Keywords: Effects, Drug Abuse, Dextromethorphan, Ethanol, Lived Experiences, Teenagers

INTRODUCTION

This study is motivated by the experience of the researcher when talking with one of the officers of Satpol PP Unit of East Belitung. Obtained information that there are many teenagers using cough medicine containing dextromethorphan with the liquor containing 1-5% ethanol. Those substances are cheap and easy to get.

Mixing alcohol and medicines can be harmful. Alcohol, like some medicines, can make you sleepy, drowsy or lightheaded. Drinking alcohol while taking medicines can intensify these effects (National Institute on Alcohol Abuse and Alcoholism, 2014).

Drug abuse is the increasing desire to obtain and use increasing amounts of one or more substances to the exclusion of everything else. Drug abuse affects the body and mind of the user and often many of those around him or her. One specific effect of drug abuse is the creation of physical drug dependence; however, dependence on the drug is not required for drug use to be considered drug abuse (Tracy, 2018).

The definition of drug addiction refers to the obsessive and repeated use of dangerous amounts of drugs and the appearance of withdrawal symptoms when not using drugs (Tracy, 2018). One of the drug abuse is using dextromethorphan and mixed it with ethanol.

Pharmacologically, dextromethorphan is a cough suppressant drug because of throat and bronchial airways irritation, especially in cases of a cold cough. Ethanol is a type of liquor with varying levels that are widely traded in communities (Hikmat, 2008).

But in fact, many teenagers who abuse the drug dextromethorphan mixed ethanol with the aim to get drunk, resulting in changes in mental activity, emotional, behavior, and often lead to addiction and dependence (Bertram, 2006 in Rusmawati, 2017).

The researcher got information from some teenagers about juvenile delinquency against drug abuse, there are some of their friends who overdose when abusing cough medicine containing dextromethorphan mixed with ethanol and some who got expelled from the school because of drug abuse.

Teen drug abuse can have long-term cognitive and behavioral effects since the teenage brain is still developing (AddictionCenter, 2018).

The observed decline in Dextromethorphan (DXM) abuse call rates corresponds to a period of growing public health efforts to curtail the abuse of over-the-counter (OTC) DXM containing products, particularly among adolescents. Further evaluation of state-level sales and abuse trends among adolescents would be valuable to better understand how restricted availability of OTC DXM cough and cold products and other efforts may affect abuse rates (Karami, 2017).

According to the Minister of Health the Republic of Indonesia adolescents are 10 to 18 years and based on the World Health Organization (WHO), adolescents aged 10-19 years. In adolescence, there will be physical, emotional, intellectual, sexual, and social changes. The effects of such changes include: searching for identity, rebellion, unstable stance, always changing the interests, affected by mode easily, conflict with parents and relatives, curiosity, intimate contact with peers, and forming peer groups that become a reference (Hikmat, 2008).

The effects of drug abuse can also include decreasing performance in work or school. This decreased performance may lead to disciplinary action, expulsion or dismissal, creating money problems and possibly even legal troubles. Discontinuing participation in sports and giving up hobbies are other effects of drug abuse (Tracy, 2018).

METHOD

The study included five (5) teenagers ages fifteen to eighteen (15 to 18) years old experienced the effects because of drug abuse their did. The five (5) participants composed of five (5) males in East Belitung-Indonesia.

The study utilized a qualitative phenomenological approach wherein the researcher helped uncover the essence of the teenagers' experienced related to the effects of drug abuse. It focused primarily on direct human experiences by exploring attitudes, beliefs and values. This qualitative research used *purposive sampling* in selecting the participants of the study.

The selection of the sample was based on the judgment of the researcher as to which subjects best fitted the criteria of the study. In-depth record interviews were used as the data collection method. The gathered data were analyzed through the use of Colaizzi's Methodological Approach (Afiyanti, 2014). This study was conducted from February to April 2018 in East Belitung, Indonesia.

ETHICAL CONSIDERATION

Ethical considerations were an important aspect in this study. Due to the sensitive nature of the study, possible risks were continuously examined to increase sensitivity to the participants and not to expose them. The ethical principles consist of informed consent, anonymity and confidentiality, privacy, and justice.

For informed consent, participants approved the researcher's request. Written and verbal consent for the interviews was obtained from participants. The participants were informed that they could withdraw from the study at any time if they wished to.

No names were attached to the information obtained but codes were used for confidentiality, Privacy was also maintained by not attaching participants' names to the information.

RESULTS

Four interrelated themes emerged in the researcher's exploration of the experience of the teenagers. How they experienced the effects of drug abuse they did. The themes are (1) *Relationship*

with Family and Community, (2) Health Condition (Physic and Psychis), (3) Education Problem, (4) Behavior of Users.

Effects of Drug Abuse

Effects of drug abuse; how they experienced the effects in their lived events because of drug abuse (Mixing Dextromethorphan and Ethanol).

The effects of drug addiction seen, due to this compulsion, are wide-ranging and profound. Effects of drug addiction are felt by the addict both physically and psychologically. The effects are also seen in those around the addict, like family members (Tracy, 2018).

The effects of drug abuse refers to a change that is a result or consequence of drug abuse (Mixing Dextromethorphan and Ethanol), how they face the effects of drug abuse in their lived events.

(1) Relationship with Family and Community

It is a simple yet largely ignored truism that drug problems have a profound impact on families. Mothers and fathers, brothers and sisters are frequently caught in the maelstrom that drug problems almost inevitably create. If the effects on families have been ignored it is because of a preoccupation to perceive and treat drug problems as the preserve of the individual rather than having any wider ramifications for close relatives, and perhaps too an underlying an assumption that often the family is the cause of the problem (Copello and Orford, 2002 in Barnard, 2005). All of the participants have had experiences related to relationship with family and community. These are some of the participants' statements :

“Rajin emosien Kak jadi e, marah e kan kawan rajin ngerase sensitif gitu men biak itu becakap dak kenak di hati, rajin adu mulut ajak sehingga e makai kate kasar gitu lah. Men di rumah seh diam ajak Kak meje takut kan urang tue Kak jadi men marah seh kan kawan ga e.”

“Suka emosian Kak jadinya, marahnya sama teman karena suka sensitif kalo mereka ngomong ngga kena di hati, suka adu mulut gitu Kak kalo lagi emosian ya pake kata-kata kasar lah. Kalo di rumah aku diem aja sih karena takut ketahuan sama orang tua Kak, jadi kalo marah sama teman aja sih.”

(“Become temperamental, got angry at the friend because offended did argument with the harsh words. If in the house, I only got silent because of fear of getting caught by parents. So I only got angry with my friend.”) – PT 1

The family is a fundamental social group in society which typically consists of parents with drug abuser teenagers. In this theme, all of the participants were able to illustrate the importance of the expression and response of a family member or community.

“Ye men dari keluarga seh ape agik umak kan bapak awal e seh tekejut meje tahu aku rajin makaiek nok gitu tapi seh tetap merik nasehat kan aku usa rajin makai nok gitu kate belau sayang kan duit men rajin dibeliek kan nok gitu, men dari kawan seh ade lah nok jadi dak nak bekawan kan dirik agik e.”

(Ya kalo dari keluarga terutama orang tua ya Kak mereka awalnya sih kaget karena tahu aku suka pakai yang kaya gitu, tetapi mereka tetap ngasih nasehat sih ke akunya jangan pakai yang kaya gitu lagi katanya sayang uangnya kalo untuk beli yang kayak begituan, kalo dari temen ada sih beberapa dari mereka yang dulunya suka ngajak ngobrol waktu sudah tahu aku suka pakai yang kaya begitu mereka jadi agak menjauh gitu Kak.)”

(“My family, especially my parents getting shocked when they know in the first time that I’m a user, but they always advise me for don’t use that substance again because wasting money, there are some friends stay away from me too when they know I’m user.”) – PT 2

“Aku dimaraek kan dinasehatek juak seh dari urang tue usa makai nok gitu agik kate e men sampai sekali agik ketauen makai nok gitu ndak kan disuro ngayaw agik biar dak rate nyaman juak uje e ngawasek aku, men dari kawan seh ape agik nok setongkrongen malahan nawarek agik Kak cuman aku ndak gik nak ape agik pas lah dibawak ke rehabilitasi lah ndak makai lah sampai sekarang”.

“Aku dimarahin sih sama dinasehatin sama orang tua jangan make yang kayak begituan lagi katanya, terus kalo sampai ketahuan aku make lagi ya ngga akan disuruh main lagi Kak, di rumah aja katanya biar mudah untuk ngawasin aku, kalo dari temen tongkrongan sih malahan nawarin lagi Kak tapi akunya yang ngga mau make lagi apalagi waktu udah rehabilitasi kemarin sampai sekarang aku udah ngga menggunakan obat-obatan itu lagi”.

(“My parents were upset with me and told me to do not use the substance again, if I am caught using that again I will not be allowed to play, stay at home so that they will easy to supervise me, my friends even offer me the substance again but I refused it moreover when I was undergoing rehab until now I do not use that substance again”.)-PT 2

“Emosional seh kayak men ade salah sikit aku rajin marah-marrah gitu, susah diator, keras kepala, ape agik men di rumah susah diator, malas begawe nggak baring lah gawe e, rajin ngebentak urang tue rajin marah-marrah juak men disuro”

“Emosional sih kayak kalo ada salah sedikit aku suka marah-marrah gitu, susah di atur, keras kepala, apalagi di rumah kan suka susah diatur, malas gerak gitu kerjanya tidur aja, suka membentak orang tua sama marah-marrah gitu kan kalo disuruh.”

(“Emotional, I got angry even because little thing unexpected, did not obey, stubborn, unruly at home, lazy to do activities, only sleep, snarling to the parents and got angry if they asked some help”.)-PT3

“ndak nyaman lah kan tetangga kan pas tahu aku makai ubat gitu rajin lah nyakapen kan terus ngelarang anak e bekawan kan gitu meje takut ikut-ikuten kini malu lah. Pokok e sampai berape hari aku jak ndak keluar rumah sebelum dibawak ke rehabilitasi.”

“ngga enak lah sama tetangga gitu waktu udah tahu aku menggunakan obat-obatan tersebut mereka juga jadinya suka ngomongin kan terus suka ngelarang anaknya bergaul sama aku malu lah Kak. Pokoknya aku sampai beberapa hari sebelum ke rehabituasi aku ngga keluar rumah.”

(“I felt ashamed of the neighbors, they talked about me and forbade her son to hang out with me. A few days before getting into rehab, I just stay at home.”)-PT 4

“Muat rajin emosi seh rajin marah-marrah lah gitu biarpun hal nok sepele, isak pas di sekolah aku kan tiduk terus dibangunen dari kawan aku emosi kan aku jadi e sampai aku bekelai kan ninju die lah udah itu seh dihukum dari guru meje ketahuen”

“Bikin emosi sih lebih suka marah-marrah gitu walaupun hanya hal kecil, pernah di sekolah kan waktu di kelas aku tidur gitu terus dibangunin sama teman aku, terus langsung emosi sampai aku mukul teman aku setelah itu aku kena hukum karena ketahuan guru kalo kita berantem”

(“Made me easy to become emotional even with trivial things, someday I got asleep in the class and then my friend wakes me up, I got angry and I hit my friend. After that, teacher punished me.”)-PT 5

(2) **Health Condition (Physic and Psychic)**

Health condition experiences were as follows:

“Muat badan jadi lemas Kak, rajin malas nak ngape-ngape, singgak nak tiduk ajak gawe e ape agik di rumah nunton ga e gawe e men disuro nulung urang tue rajin malas Kak.”

“Bikin badan jadi lemas Kak, suka malas mau ngapa-ngapain, suka mau tidur aja kerjaannya ya apalagi di rumah cuma nonton aja kalo disuruh sama orang tua suka malas bawaannya Kak.”

(“Made me felt limp, lazy to do activities, always sleepy, only watching TV at home, ignored if parents asked me for a help”)-PT 2

“Pas pertame kali makai seh aku ngerase pening gitu, terus badan aku jadi ringan kan pikeren juak jadi melayang gitu”

“Waktu pertama kali make sih aku ngerasa pening gitu, terus badan terasa ringan sama pikiran jadi melayang gitu”

(“The first time I have used that substance, I felt a headache, body felt light and mind has floated.”)-PT 3

“Aku seh ngerase mudah leteh ape agik pas main bula gitu ndak sua tahan lamak main e, muat malas begawe, terus men ke badan e sek aku jadi kurus waktu dua taun makai ubat gitu. Terus pas aku kecanduan nok tiap hari men makai e tek jadi tambah kurus benar pakaien ajak nok jadi tambah longgar dari sebelum e, pipi aku jak kurus, cengkelong gitu”

“Aku ngerasa mudah letih apalagi main bola gitu ngga tahan lama bisa mainnya, bikin malas untuk beraktivitas, terus kalo ke badannya sih aku kurus waktu dua tahun menggunakan obat-obatan itu. Terus waktu aku kecanduan yang aku menggunakan obat-obatan itu setiap hari, pakaian aku jadi tambah longgar dari sebelumnya, sama pipi aku juga jadi kurus, cekung gitu lah”

(“I felt easy to limp moreover to played football didn't able for a long time, made me lazy to did some activities, became thin after two years used that substances. When I was addicted every day I felt my clothes got bigger than before, cheeks became thin and sunken”)-PT 3

“Badan aku jadi kurus selamak makai ubat itu turun e enam kilo en waktu aku nimbang di rehabilitasi kemarik jadi agik empat puluh satu kg en kan awal e empat puloh tujuh gitu berat aku, terus tulang pipi aku jadi timbul gitu raga e, celanak jak nak makai talikban, baju sekolah jak jadi gede lah ki macam urang sawah waktu aku makai e haha... men sekarang seh ade lah berisik e badan neh pas lah berenti makai ubat itu”

“Badan aku jadi kurus selama menggunakan obat-obatan tersebut, turunnya enam kilo an waktu aku nimbang masuk rehabilitasi kemarin jadi empat puluh satu kg awalnya dulu sebelum aku suka menggunakan obat-obatan gitu berat badan aku empat puluh tujuh kilo, terus tulang pipi aku jadi agak timbul gitu, celana juga harus pakai sabuk, baju sekolah aja jadi gede kayak orang-orangan sawah waktu dipake haha... kalo sekarang sih udah mulai berisi lagi badannya semenjak ngga menggunakan obat-obatan itu lagi”

(“My body became thin during addicted, my weight got loosed 6 kg. Before my weight was 47 kg, then became 41 kg, my cheek was thin, I need to used belt anytime, school uniform became oversized like the scarecrow haha... Now my body getting better after didn't use the substances again”)-PT 4

“Selamak aku rajin makai ubat itu seh aku rajin ngerase mudah capek ape agik pas main bula duluk e seh tahan sejam en lah men kito te sepuluh menit jak lah berase benar leteh e, aku jak kurus turun tige kilo kemarik pas nimbang di rehabilitasi kan mule e empat puloh tige kg jadi agik empat puloh kg”

“Selama menggunakan obat-obatan gitu aku suka ngerasa mudah capek apalagi saat main bola gitu kan dulunya sebelum make obat gitu aku tahan kurang lebih satu jam an lah kalo selama makai obat-obatan itu sepuluh menit juga capeknya berasa banget, aku juga jadi kurus gitu kan berat badan aku turun tiga kilo an lah waktu nimbang di rehabilitasi kemaren awalnya empat puluh tiga kg terus jadi empat puluhan gitu”

(“During use the substances I felt easy to limp moreover when I was playing football. Before, I could play football in one hour, after used the substances only ten minutes I felt very tired, I got thin and loosed the weight 3 kg. My body weight before 43 kg became 40 kg.”)-PT 5

(3) Education Problems

These are the expressions about education problems:

“Men ketahuan e pas aku rajin ngula ubat tek dari pihak sekolah lah Kak kan pas itu agik ade razia hp di sekolah, nah waktu hp aku kenak razia dibukak chatan aku kan kawan aku kamek tek agik nyakapen tentang ubat itu lah terus dipanggil urang tue sampai aku dibawak ke rehabilitasi”

“Kalo ketahuannya aku suka pakai obat dari pihak sekolah Kak, karena waktu itu lagi ada razia hp di sekolah, nah waktu hp aku kena razia dibuka kan chatan aku sama teman yang lagi ngomongin tentang obat itu jadi langsung dipanggil orang tua sampai akhirnya aku dibawa ke rehabilitasi”

(“I caught as the user at the school, in that time there are raids in the school, my cell phone taken and opened by the teacher. There is my conversation with my friends about the substances. My parents called by the school and then they brought me to the rehabilitation”)-PT1

“Muat malas juak Kak men di sekolah singgak nak tiduk lah. Isak dimaraek sampai dihukum gare-gare tiduk di kelas terus disuro push up gitu”

“Bikin malas juga sih kalo di sekolah juga suka tidur jadinya. Pernah dimarahin malahan sampai dihukum gara-gara tidur di kelas terus aku di suruh push up gitu”

(“Those substances made me became lazy in the school, I frequently went asleep. Someday, I caught asleep in the class and the teacher punished me to did push up.”)-PT1

“aku jak men agik makai ubat gitu pas di sekolah jadi raga susah nak konsentrasi Kak kurang tanggap lah gitu men ditanyak dari guru pas agik belajar, aku jak biase e sengaje bolos meje nak makai ubat itu”.

“aku juga kalo sering pake obat itu waktu di sekolah jadi susah untuk konsentrasi Kak, kurang tanggap gitu kalo ditanya sama guru waktu belajar, aku juga biasanya sengaja bolos karena mau make obat itu”.

(“I also felt difficult to concentrate because of those drugs. If the teacher asked me when we study in the class, my response was less, usually I skipped the class too because of wanted used the drugs.”)-PT2

“Oh waktu itu tek kan di sekolah aku naik pagar meje memang agik tenga makai ubat itu tek terus ketangkapen guru, terus tau kan guru e tek aku agik makai nok gitu meje mate aku randang kan pandanganen aku tek kusong terus lah uda itu tek aku dibawak kan dari sekolah ke rehabilitasi terus”

urang tue dipanggil juak, terus dicek urin positif kate e hasil e, dari urang tue seh setuju nyuro aku masok rehabilitasi, dua bulan lebeh lah aku tek di rehabilitasi e”

“Oh waktu itu kan di sekolah aku manjat pagar karena emang lagi pake obat itu kan nah ketangkapan sama guru aku Kak, terus gurunya tahu kan karena dari mata aku merah dan pandangan aku kosong, nah dari pihak sekolah langsung dibawa ke rehabilitasi terus dipanggil orang tua kan, kemudian dicek urin gitu Kak, positif kan hasilnya kalo aku memang pemakai obat-obatan itu, terus orang tua juga setuju sih aku disuruh masuk rehabilitasi, dua bulan lebih Kak kemaren aku selama menjalani rehabilitasi”

(“Oh in that time at school I caught climbed fence while using those drugs, my teacher knew because of my eyes colored red and looked empty, the teacher brought me to the rehabilitation and then called my parents. After urinary checked they knew that I was positive. I stayed in rehabilitation along two months”.)-PT 2

“aku juak baru dikeluaren dari sekolah meje rajin telat masok kelas biase e jam sembilan aku baru datang biase lah agik makai duluk sebelum masok kan, nah waktu itu aku ketauen pas agik tenga makai ubat meje memang dicurigaek juak dari guru e terus dibawak ke ruang BK aku ditanya-tanya gitu, akhir e dipanggil urang tue aku ke sekolah sampai akhir e dibawak ke rehabilitasi”

“aku juga baru dikeluarin sih dari sekolah karena suka telat kalo masuk kelas, jam sembilan biasanya aku baru masuk ke kelas karena aku menggunakan obat-obatan dulu sebelum masuk ke kelas, nah waktu itu aku ketahuan lagi makai obat itu kan karena emang udah dicurigai dari gurunya terus aku dibawa ke ruang BK ditanya-tanya gitu, akhirnya dipanggil orang tua aku ke sekolah sampai aku di bawa ke rehabilitasi)”

(“I just got out by the school because always late came to the class, usually nine o’clock I entered the class because before join the class I used those drugs first, I caught used those drugs at the school because suspected by the teacher and then my teacher brought me to counselor room, eventually my parents called by the school and they brought me to the rehabilitation.”)-PT 3

“men di sekolah seh aku rajin malas lah men belajar meje singgak ngantok lah kan terus men ditanyak dari guru pas agik belajar lambat lah gitu men miker nak ngejawab e te pukok e dak sua nginganen urang lain lah Kak nang kerap dihukum di sekolah meje nggagawe tiduk di kelas”

“kalo di sekolah sih bikin malas belajar karena bawaannya ngantuk kan, terus kalo ditanya sama guru waktu lagi belajar suka lambat gitu lah kalo mikir untuk menjawabnya, kebanyakan ngga ngehirauin orang lah Kak, kalo di sekolahan sering dihukum kan karena suka tidur di kelas”

(“I became lazy at the school because always felt sleepy, if the teacher asked me, I had slow thinking to response, ignorant to others, I often punished in the class too because of caught asleep.”)-PT4

“Kan pas pertame kali ketahuen aku makai ubat itu waktu aku kena razia di sekolah pas emang agik makai kan kawan-kawan aku terus dibawak ke ruang BK ditanyak-tanyak gitu lah kan terus aku diberik surat panggilan untuk urang tue awal e aku takut kan nk merik surat itu kan umak, aku sembunyeek kan surat e meje pasti kini aku kan kenak maraek belau, tapi seh urang tue aku tetap tahu meje diselik dari guru ke rumah aku”

“Kan pertama kali ketahuan waktu aku lagi make di sekolah kena razia gitu bareng sama teman aku terus dibawa ke ruang BK ditanya-tanya gitu, terus dikasih surat panggilan buat orang tua awalnya aku takut untuk memberikan surat itu kan, sama aku disembunyiin gitu karena pasti dimarah-marahin nantinya, ya tapi orang tua tetap tahu karena gurunya langsung ke rumah gitu”

(“The first time I was caught used those drugs at the school raids, together with my friend, we brought by the teacher to the counselor room, they asked many questions, and then my parents called by the school through a letter. I hide the letter, however, my parents knew because my teacher came to our home”)-PT4

“men di sekolah pas rajin makai ubat itu aku jadi malas belajar meje singgak ngantok lah”

“kalo di sekolahan selama menggunakan obat itu aku malas jadi malas belajar gitu karena suka ngantuk”

(“At the school, along I used those drugs I became lazy to study because of seleepy”)-PT 5

4) Behavior of Users

Related to Behavior of Users, the participants' verbalization were as follows:

“Ye gitu muat dak nyaman, singgak nak makai terus lah rajin tebayang-bayang nak makai ubat itu agik, pukok e kayak urang bilo-biloen men dak makai nok gitu kak... Haha sakau gitu lah Kak rase e muat dak tenang.”

“Ya bikin ga enak, aku ngerasanya mau pake terus suka kebayang-bayang pengen make yang kayak begituan, ya ngerasa kayak yang bodoh Kak kalo lagi ga make Haha... sakau gitu Kak rasanya bikin ga tenang.”

(“Those substances made me felt uncomfortable, I felt addicted and imagined want to use again, like a stupid boy.”) PT 1

“Aku toh jadi pendiam Kak rajin malas, singgak ngantok lah ga e, aku te kecanduen Kak men dak makai ngerase sakau gitu singgak nak makai lah pukok e gelisah lah men dak makai nok gitu”

“Aku jadi pendiam gitu Kak suka malas, bawaannya ngantuk aja, aku kecanduan Kak kalo ngga make suka ngerasa sakau pengen terus make Kak pokoknya bikin gelisah gitu lah kalo ngga make obat itu”

(“I became a quiet person, lazy and always sleepy, I was addicted, always wanted to use those, made me felt anxious”)-PT 2

“lama kelamaen urang tue aku sadar kalo aku makai ubat meje dari tingkah laku aku mencurigakan gitu kan”

“lama kelamaan mereka sadar kalo aku menggunakan obat-obatan tersebut karena emang dari tingkah laku aku mencurigakan gitu kan”

(“in the long run, they aware that I used those drugs because of my unusual behavior”)-PT 3

“men di sekolah pas rajin makai ubat itu aku jadi malas belajar meje singgak ngantok lah, ape agik di rumah rajin malas benar men nak bergerak atau begawe gitujadi aku seh diam ajak lah gawe e”

“kalo di sekolahan selama menggunakan obat itu aku malas jadi malas belajar gitu karena suka ngantuk, apalagi di rumah suka malas banget kalo beraktivitas jadi lebih banyak diam aja sih”

(“At the school, along I used those drugs, I became lazy to study because of sleepy, moreover at home I only quiet, lazy to do activities”)-PT 5

DISCUSSION

The broader context of addictive substances includes tobacco, alcohol, and solvents (including glues, thinners, and gasoline). All of these substances have several important characteristics in common. They alter the function of the human brain and have an impact on behavior; they are widely used throughout the world. The most widely used addictive substances, alcohol, and tobacco are harmful with extensive damage to the individual, family and the community (World Health Organization, 2008). Additionally, the behavior of the users had changed. These study revealed several themes related to the effect of using drugs and substances namely relationship with family, the behavior of the user, health condition, and education problems.

Many of the discussions surrounding addiction tend to focus on the physical and psychological effects of substance use. The effects of drug addiction, however, expand beyond these issues and further encompass one's social health and well-being. Social health refers to one's relationships and the ability to maintain healthy, rewarding connections. Social health and a healthy support system are correlated strongly with individual's success, self-esteem, and happiness in life (Atkinson, 2016). Unfortunately, substance abuse and addiction can damage social health. Several participants said there were several moments when the user easily angry without proper reason with their family. When addiction enters the mix, many of the elements that make for successful relationships become much more difficult to maintain. Once a substance user progresses from occasional use to addiction, they are likely to have a single focus: obtaining and using the substance. Since relationships often cannot compete with the euphoric experience of substance use, the user will typically put less time and energy into maintaining the relationship, allowing various damaging elements to begin to surface.

Health problems often occurred in users daily lives. Drugs and alcohol misuse can have a wide range of short- and long-term, direct and indirect effects (Atkinson, 2016; Patton, 2013). These effects often depend on the number of drugs and alcohol used, how they are taken, how much is taken, the person's health, and other factors (McLeod et al, 2008). Several participants emphasized they feel restless, losing weight and several others health disturbance. In fact, their problem with family went up continuously.

The next issue in this research is problems with user behavior. Regardless of the particular substance, someone is addicted to, they often display certain addict behavior traits. These behaviors of an addict tend to be red flags to loved ones of that person that there is a problem. Several articles listed dealing with an addict's behavior also frequently means they are abusive (King'endo, 2015; Nardi, Cunha, Bizarro, Dell'Aglia, 2012). It can be physical or verbal. This is not because the addict is inherently a bad person, but instead, it is often because they do not live in reality and they may perceive threats that do not exist (King'endo, 2015). According to the participants, they do not intentionally create problems, nevertheless, they often make trouble subconsciously.

Another condition persists in substance user is the difficult situation in schools live. Most people who use drugs regularly do not consistently do well in school. Studies show that marijuana, for example, affects student attention, memory, and ability to learn. Its effects can last for days or weeks after the drug wears off (Ross & DeJong, 2008). These conditions revealed in these study. Several participants said they often labeled as the bad student in school. Students who smoke marijuana tend to get lower grades and are more likely to drop out of high school. One recent drugs study showed that heavy marijuana use in adolescence years and continued into adulthood can reduce intelligence. High school dropout rates have also risen as a result of substance abuse. Adolescents who smoke, drink alcohol, binge drink or use marijuana or other drugs are more likely than non-users to drop out of school and less likely than non-users to graduate from high school, attend college or obtain a college degree. One study found that nearly one-third of school dropouts indicate that their use of alcohol or other drugs was an important contributor in their decision to leave school (Haskins, 2012; O'Malley & Johnston, 2002).

CONCLUSION

Teenagers with drug abuse encountered varied experience, however they maintained an optimistic perception about their future after rehabilitation.

All of the participants experienced many conflicts because of drug abuse.

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