NAVIGATING COMMUNICATION DYNAMICS: COUNSELOR-RESIDENT INTERACTIONS IN THE AFTERCARE PHASE AT SEKAR MAWAR REHABILITATION CENTER

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ABSTRACT
This research explores the communication process between counselors and residents during the aftercare phase at the Sekar Mawar Drug Rehabilitation Center. This study mainly uses the qualitative research method of in-depth interview, combined with the observation. Employing a qualitative descriptive research design, the study focuses on primary and secondary communication processes, as well as communication patterns. Utilizing purposive sampling, four participants, including two residents and two counselors, were selected from the center. Data collection methods comprised library research, in-depth interviews, observation, documentation, and online data tracking. Data analysis involved collection, reduction, presentation, and conclusion-drawing. Findings reveal that communication occurs through oral, written, and visual means, with communication patterns including one-way, two-way, and multi-way communication. The study concludes that communication between counselors and residents at Sekar Mawar is conducive and multidirectional. Suggestions include counselors maintaining consistent responsibilities, and further research on long-term effects and monitoring. This study contributes to understanding effective communication processes in drug rehabilitation settings, emphasizing the importance of continued research and monitoring.

Keywords: communication process, counselors, residents, aftercare phase, drug rehabilitation center
INTRODUCTION

The prevalence of drug utilization worldwide in 2021 surged by 23% compared to a decade earlier, with approximately one in every 17 individuals reported to have engaged in drug consumption (UNODC, 2023). Indonesia is one of the low-income and middle-income countries (LMICs) currently battling with the increasing issue of drug use (Dewabhrata, et al., 2023). The data from the Indonesia Drugs Report 2022, a total of 43,320 drug addict rehabilitation patients in Indonesia throughout 2021 (BNN P. D., 2022). According to Article 54 of Law (UU) Number 35 of 2009 concerning Narcotics (Narcotics Law), narcotics addicts and victims of narcotics abuse are required to undergo medical and social rehabilitation (Law Number 35, 2009). To implement this article, the government provides rehabilitation services for addicts, drug abusers, and victims of narcotics abuse who require rehabilitation, such as rehabilitation centers, rehabilitation homes, institutions receiving mandatory reporting (IPWL), and community-based intervention (Setkab RI, 2023).

Rehabilitation is a series of processes meant enable people with drug use disorder (p-DUD) to recover from their addiction and restore its negative affects so that they can return to society as healthier, more productive, and socially functional individuals (Dwi Putri & Ayuningtyas, 2023). In the world of narcotics abuse rehabilitation, one of the professions that is really needed is addiction counselors and addiction counselor assistants (BNN H. , 2022). Addiction counselors are responsible for providing rehabilitation services for addicts, abusers, and victims of addictive substances, including narcotics and psychotropics (BNN P. , 2020). Addiction counselors can also learn about their clients' difficulties or issues, so that, in addition to lowering the client's burden, the counselor can determine what treatment is best for the client's needs as a resident (Windyaningrum, 2014). Furthermore, effective communication skills and interpersonal competency are crucial to providing high-quality therapy and a decisive role in determining client happiness, compliance, and recovery from substance abuse (Adigwe & Okoro, 2016).

Sekar Mawar Rehabilitation Center is one of the social institutions that are part of the Institution Recipient of Compulsory Reporting (IPWL), which aims to combat drug usage by educating people about the hazards of drugs and providing rehabilitation to addicts (Suhangga & Karsa, 2017). According to the Drug Rehabilitation Information System, there are several rehabilitation stages that must be carried out for drug addicts, namely the medical rehabilitation stage, the non-medical rehabilitation stage, and the aftercare stage, which is obviously emphasized and evaluated continuously by addiction counselors (Directorate of Rehabilitation, 2019). Therefore, the goal of the rehabilitation program is to encourage addicts to make positive changes through medical interventions, mental guidance, psychosocial support, education, vocational training, and religious activities; to improve abilities in accordance with their potential; and to create a supportive environment so that, in the end, they can return to interact with society in a reasonable way (Sitanggang, 2015).

Because there must be counselors and residents in a rehabilitation facility, the requirement for appropriate communication patterns needs to be further investigated. There are many different kinds of rehabilitation facilities; however, for the sake of this study, the researchers are more interested in learning more about a facility that specializes in the treatment of drug addicts or those addicted to narcotics, psychiatric medications, or both. Because the counselor is a person who aids the resident's recovery process, the counselor's position in the recovery of a resident in a drug rehabilitation facility is quite important. Former drug users, also known as residents, require counselors with the appropriate communication skills in order to deliver the message effectively.

Based on the description above, this study was conducted to delve into the intricate dynamics governing communication and interaction between counselors and residents during the post-rehabilitation phase within the confines of the Sekar Mawar Rehabilitation Center.
METHODOLOGY

The aim of this study is to explore and analyze the communication patterns among counselors and residents during the aftercare phase at the Sekar Mawar Social Drug Rehabilitation Institute, focusing on both primary and secondary communication processes utilized within this context. Therefore, this study collected first-hand information through in-depth interviews with the key informants and supporting informants, and observational methods. The study takes the city of Bandung in West Java Province as a case study and uses a phenomenological research method of qualitative research methods to dig deeper into the data information (Denzin & Lincoln, 2017). Researchers were interested in learning more about the various shared experiences of this phenomenon from the individuals involved (Li, Mohamed, H, & Aziz, 2023). The descriptive approach involves conducting research utilizing multiple data sources that are frequently used to conduct study, explain, and give detailed explanations on various individual characteristics of a group, activity, organization, or phenomenon about events in a systematic manner (Kriyantono, 2014). The qualitative method was chosen to acquire a thorough knowledge of the many details involved in a human interaction. The quantity or number of informants is not prioritized by qualitative research techniques; if the data collected is sufficient and adequately describes the phenomenon under investigation, there is no need to add more informants.

Purposive sample approaches, or sampling considerations in Indonesian, are used in this study to make its conclusions. The purposive sampling technique is appropriate for use in descriptive studies because these studies aim to describe a phenomenon that actually exists in a real, realistic, and actual way. Additionally, these studies aim to create a systematic, factual, and accurate description, picture, or depiction of the facts, nature, or relationship between elements in a phenomenon under study (Rukajat, 2018).

The purpose of this study was to determine how the pattern of interpersonal communication between the counselor and the resident was developed, thus the researcher would select a sample using the following criteria for research subjects:
1. One of the Sekar Mawar Drug Recovery Center’s counselors is the subject.
2. Those who work with former drug users who are in the re-entry or After Care phase are known as subjects.

   Advanced development stage (after care), this stage addicts are given activities according to their interests and talents to fill their daily activities, addicts can return to school or work but remain under supervision (Directorate of Rehabilitation, 2019). In order to complete the data on the research subject, additional informants, such as former drug users or residents who are receiving rehabilitation at the Sekar Mawar Drug Rehabilitation Center, will be used. It is the researcher’s objective to first consider who can be the sample in this study. Below is a table listing the important informants that the researchers have identified:

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lalu Irfan</td>
<td>32</td>
<td>Addiction counselor</td>
</tr>
<tr>
<td>Doddy Ariatiawarman</td>
<td>40</td>
<td>Addiction counselor</td>
</tr>
</tbody>
</table>

Table 1 presents essential details concerning the principal participants in this investigation, emphasizing the pivotal contributions of two addiction counselors, Lalu Irfan and Doddy Ariatiawarman, affiliated with the Sekar Mawar Rehabilitation Center. Their designation as key informants holds particular significance owing to their integral involvement in offering continuous support, direction, and counseling to residents navigating the crucial aftercare phase of rehabilitation.
Table 2. Supporting Informants

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>RS</td>
<td>25</td>
<td>Resident</td>
</tr>
<tr>
<td>GN</td>
<td>31</td>
<td>Resident</td>
</tr>
</tbody>
</table>

Table 2 provides detailed information from supporting informants who were willing to be involved in the research, namely two residents who were former drug addicts who had gone through the entire rehabilitation process with the initials RS and GN.

**DISCUSSION**

Drug addicts are rehabilitated through community or small group therapy (Prasetyo et al., 2022). Being one of the providers of social drug rehabilitation services in Indonesia, the Sekar Mawar Drug Rehabilitation Center has a high reputation and can be trusted. From April to October 2021, The National Narcotics Agency (BNN) will provide assistance for the standardization of rehabilitation services at 32 rehabilitation facilities spread across 14 provinces in Indonesia. Recognizing the significant role and contribution of BNN, implementing a social rehabilitation program is a crucial step towards reducing the high rate of drug abuse, facilitating a holistic recovery encompassing physical, mental, and social aspects (Igirisa et al., 2023). The Sekar Mawar Rehabilitation Center is also known as Sekar Mawar Foundation, it is the only organization in West Java Province that obtained Indonesian National Standard (SNI) help, assistance from BNN West Java Province, and aid from BNN Bandung City, and that successfully passed SNI type 3 Social Services in 2021.

The act of passing messages or information from one person to another with the intention of fostering successful communication is known as communication. If the message provided can be understood accurately and appropriately, effective communication can determine the success of a communication (Vita, Siregar, Hutabarat, & Utomo, 2023). Yet, conversely, if the message is improper and inaccurate, the transmission will fail. The pattern of communication between counselors and residents in the after-care phase illustrates how messages in the communication process might take the shape of primary or secondary communication. The following are the stages of communication patterns from previous research also adapted by the Sekar Mawar Rehabilitation Center in curing drug addicts:

![Figure 1. Stages of Doctor’s Therapeutic Communication Patterns in Healing Drug Users (Vita, Siregar, Hutabarat, & Utomo, 2023)](image-url)
Based on the stages of this process, if a resident at the Sekar Mawar Rehabilitation Center has passed the initial phase of entering rehabilitation and completed all of the therapeutic communication stages, they will enter the aftercare phase, which also produces verbal and nonverbal communication, with the ultimate goal being recovery. Therapeutic communication is an important part of the drug addiction recovery process because it helps addictive counselors as communicators and drug addicts as communicants reach mutually acceptable agreements (Prasetyo et al., 2022). According to the study that was done on the ways that counselors and residents communicate during the after-care phase. In the primary communication process between residents and counselors, both verbal and nonverbal modes of communication are utilized. It uses Indonesian for verbal communication, specifically the language used in the Primary Communication Process. Irfan indicated that they are accustomed to the situation, managing primarily from outside the area, and expressed gratitude that there have been no issues so far because the residents can also speak Indonesian.

According to Irfan, who spoke to researchers, inhabitants of the Sekar Mawar Drug Social Rehabilitation Center come from different parts of Indonesia. Because it is conducted in Bahasa Indonesia, the communication that does take place continues to function successfully. So, language is used in this instance as the primary form of communication between the counselor and the resident during the after-care phase. In addition to Irfan's story, Doddy stressed how to deal with the issue of a language barrier between the Counselor and the Resident. He mentioned that in cases where someone speaks a language they don't understand, they will inquire about the meaning first. Additionally, they stated that if the communication originates from them, they will provide an explanation. The speaker further affirmed their understanding, specifying agreement regarding the mentioned cave.

In the statement above, Doddy makes an attempt to clarify once more whether there are linguistic variations brought on by regional variations in the communication process between the counselor and the resident, particularly variations in the meaning of some terminology. When he feels a word or phrase is unclear or has a different meaning, Doddy will immediately ask the Resident about it. Likewise, if it appears that the resident could not comprehend what Doddy was trying to say.

Next, in order to conceal his emotions and prevent miscommunication owing to variations in interpreting terminology, he will ask the Resident about the information or messages that he had previously conveyed. RS asserted that he’s a Sundanese ethnicity and mentioned their ability to communicate in Indonesian, thereby suggesting the possibility of effective communication between them and others.

RS made an effort to convince the researcher that although he speaks Sundanese on a daily basis, he is also proficient in Bahasa. So, he never encountered this as a challenge. The use of language in the communication process can help translate or explain the ideas or ideas that are in mind to the communicant, in this case from the counselor to the resident, leading researchers to conclude that verbal communication is the primary communication process between counselor and resident.

We informed by Irfan that this occurs daily via a WhatsApp group made up of counselors and after-care residents. The “Just For Today” activity involves the counselor taking turns sending images of reflections that can be utilized as a guide for carrying out everyday tasks. Hence, verbal communication in the form of language and non-verbal communication in the form of pictures are the two main methods of communication used in the aftercare phase between the counselor and the resident.

After using symbols as the first medium, communication next takes place using instruments in the form of media, which is known as the secondary communication process. Using social media is a secondary method of communication between the resident and the counselor throughout the aftercare phase. Irfan said that they regularly organize gatherings for residents once a month. Through Zoom, we conduct a family support group meeting where different topics and speakers are featured each month. These online gatherings serve as social activities, while tele counseling serves as a novel form of individual support. Consequently, residents occasionally reach out to me directly via WhatsApp, often sharing their current situations or concerns. Additionally, they have the option to vent or discuss various topics related to their strengths and challenges upon reintegrating into society.
The two key activities in the after-care period, according to Irfan, are family support groups and tele counseling. Once a month, family support groups gather virtually via Zoom. Each meeting has a distinct theme and features presenters who are either counselors or members of the orphanage staff. Activities for family support groups have the goal of assisting local families. There are more people attending than just residents and their families because this event is accessible to the general public. It is accessible to everyone who is worried about the issue of drug usage, though.

In addition to the family support group, Irfan talked about the private activity of tele counseling. Residents can personally call the Counselor during tele counseling sessions to discuss their most recent condition or inquire about issues that have arisen after returning to the community. Sending WhatsApp private messages is the resident's preferred method of tele counseling, according to Bro Irfan.

Apart from using Zoom and sending private messages via WhatsApp, Bro Doddy tries to share more details on the Communication Process between the Counselor and the Resident in the After Care Phase in the interview excerpt above. He claims that since phone calls and video chats may be connected directly, tele counseling can also be done using these methods. This facilitates the communication process that takes place, he claims.

Irfan concurred that online communication is a practical alternative when distance is a challenge. The answer offered by Irfan is as follows since some residents forbid visits because of the great distances involved. Irfan expressed that while trips are often lengthy and expensive, utilizing the internet enables communication and connectivity, emphasizing the importance of openness. Furthermore, he mentioned the option of reaching out for assistance if needed.

As there is no time limit in the tele counseling process, Doddy tries to describe the level of communication that takes place. The process of communication can therefore happen at any time, but according to Bro. Doddy, there is a frequency of communication that frequently takes place between the counselor and the resident, namely once or up to twice a week, and in actuality, it is more frequently the counselor who contacts the resident first.

In addition to contacting via private chat, says bro Doddy. Also, counselors use WhatsApp Groups more frequently for communication. In the meantime, according to Bro Irfan, they also use the WhatsApp group's communication process as a method of approach and a method of monitoring.

Due to each party’s hectic schedules, there may be a decline in the level of communication in the secondary communication process between the Counselor and the Resident. Irfan suggested that one reason for the situation is the scheduling conflicts among individuals. He noted that despite being active in providing information and updates within the group, there remains uncertainty regarding how the individual in question came to their current state. According to Irfan, who is a counselor in the After Care Phase, it is typical for communication between the counselor and the resident to be less intense due to each other's hectic schedules. Even yet, the counselor still thinks it suffices if the resident continues to share news with the group and is even engaged in doing so.

Language is a sort of verbal communication that is used in Primary Communication, which includes both verbal and nonverbal communication. The researcher's language of choice is Indonesian, while Fig. is used for nonverbal communication. The researcher is referring to the practice of distributing photos of devotional writings—also known as "only for today"—via WhatsApp groups.

Discovered through secondary communication, specifically through Zoom, WhatsApp, or the phone. The form is used in WhatsApp's chat and group features, whereas zoom typically uses it for activities related to family support groups.
Communication Process Among Counselors and Residents Aftercare Phase

Communication process, which in principle is the process of conveying messages or information from one person to another with the aim of creating effective communication. Effective communication can be a determinant of the success of a communication if the message conveyed can be received correctly and appropriately. Yet, conversely, if the message is improper and inaccurate, the transmission will fail. The pattern of communication between counselors and residents in the after-care phase illustrates how messages in the communication process might take the shape of primary or secondary communication (Vita, Siregar, Hutabarat, & Utomo, 2023).

1. Primary Communication Process

The process by which a communicator conveys thoughts to colleagues and in which communication activities can be carried out is referred to as the primary process of communication (primary process). To assist the utilization of information that will be made by someone, the communication process is carried out (Effendy, 2003).

Both verbal and nonverbal communication might take place in the resident and counselor's primary communication process. It uses Indonesian for verbal communication, which is the language used in this Primary Communication Process. Because the use of language during the communication process can aid in translating or clarifying the concepts or ideas being conveyed to the communicant—in this instance, the counselor to the resident—to the communicant.

In addition to verbal communication, the primary communication process also includes non-verbal communication, commonly referred to as silent language or action-based communication, which is a way of expressing oneself to others without using words. Fig. illustrates nonverbal communication in the dialogue between the counselor and the resident. Researchers' usage of images involves distributing pictures with writing on them through WhatsApp groups that have counselors and after-care residents as members. The "Just For Today" activity involves the counselor taking turns sending images of reflections that can be utilized as a guide for carrying out everyday tasks.

As a result, linguistic and visual cues serve as the main forms of communication between the counselor and the resident during the aftercare phase.

2. Secondary Communication Process

After employing symbols as the first medium, the communication process is carried out using facilities as the second medium. The mass media, including both electronic and print media, is the second medium used in this secondary communication process. utilizing this mass medium to appeal to an ever-growing audience. However, since this secondary communication process is one-way, it has the disadvantage of providing indirect input. Effendy (2003), p. 31

Following the employment of symbols as the primary medium, secondary communication takes place using instruments in the form of media. Using social media is a secondary method of communication between the resident and the counselor throughout the aftercare phase. discovered through secondary communication, specifically through Zoom, Whatsapp, or the phone.

The form is used in WhatsApp's chat and group features, whereas Zoom typically uses it for activities related to family support groups. Family support groups and telecounseling are the two key activities in the after-care phase. Once a month, family support groups gather virtually via Zoom. Each meeting has a distinct theme and features presenters who are either counselors or members of the orphanage staff. Activities for family support groups have the goal of assisting local families. There are more people attending than just residents and their families because this event is accessible to the general public. It is accessible to everyone who is worried about the issue of drug usage, though.
The brochure or leaflet in the image above is an example of one asking people to participate in everyday activities, specifically the family support group. It is typically delivered via WhatsApp or the Instagram account @yayasansekarmawar. The theme chosen for April is "The Role of the Family in Relapse Prevention," according to the leaflet. By enrolling for free using the Google form indicated on the brochure, anyone can participate in this activity, which is open to the public. Although this event is available to the public, it also serves as a gathering place for residents of aftercare facilities, their relatives, and staff from the Sekar Mawar Drug Rehabilitation Center.

![Figure 2 Family Support Group Flyer](image)

![Figure 3 Communication Process Among Counselors and Residents Aftercare Phase](image)
Figure 3 explains the communication process among Counselor and Resident in two ways which are using the primary process are language and image. The primary communication process uses these symbols to directly "translate" the communicator’s thoughts and feelings to the communicant, which is the distinction between the messages conveyed through primary and secondary communication processes. Whereas in the secondary communication process, which is a connection from primary communication, it is necessary to utilize a second tool or media after employing a symbol as the first medium in order to transmit messages from a counselor to a resident. As the resident who is the target of the conversation is located elsewhere, the counselor in this instance uses WhatsApp and Zoom applications to facilitate the communications. The primary communication process must take language and terms (pictures) into consideration because these two things are the main components in the communication process, as opposed to the secondary communication process, which can reach its target by using social media, which has a wide circulation and the power of simultaneity.

CONCLUSION AND RECOMMENDATION

Drawing upon the sequential stages delineated within this process, it becomes evident that upon traversing the initial phase of admission into the Sekar Mawar Rehabilitation Center and successfully navigating through the comprehensive therapeutic communication stages, residents transition into the subsequent aftercare phase. Within this phase, both verbal and nonverbal forms of communication persist, serving as pivotal conduits towards the overarching objective of achieving sustained recovery. It is within the aftercare phase that residents are provided with continued support and guidance, facilitating their reintegration into society as individuals equipped with the necessary skills and resources to navigate the challenges of post-rehabilitation life. Thus, the culmination of these stages underscores the multifaceted nature of communication in fostering holistic recovery trajectories within the rehabilitation context at Sekar Mawar.

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