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The Islamic Integrated Model for Drug Addict Treatment and Rehabilitation on Kratom Use Among Muslim Adolescents: A Case Study in Krabi Province, Thailand

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Abstract: There are several medical drug addict treatment methods used by physicians and other health professionals worldwide. The community-based treatment and care for drug use and dependence have increased in popularity. However, little is known about whether or how Islamic spirituality model could be incorporated into formal treatment in the Muslim community. This study aimed to explore the Islamic integrated model for drug addict treatment and rehabilitation on Kratom use among Muslim adolescents in Krabi Province, Thailand. The focus group discussion and in-depth interview were carried out in chief officer, the staff of treatment service volunteers, program leaders, and families and friends of addicts during October 2017-December 2018. The results revealed that the implementation of integrated Islamic religious learning in the drug therapy session to grow the spiritual religiosity and lower relapse among Muslim youth who were previous kratom addicts. The Islamic faith-based treatment model could be declared the evidence of kratom recovery in community level.

Key words: Islamic integrated model; drug addict treatment and rehabilitation; kratom use

JEL codes: H0

1. Introduction

Kratom (Mitragyna speciosa) is a tropical tree that commonly grows in Thailand and other parts of Southeast Asian country such as Malaysia (Swogger M. T., Walsh Z., 2018). People have generally ingested by chewing the raw leaves or brewing in tea as an herbal remedy to increase energy, relieve pain, and opioid withdrawal for centuries (Tohar N, Shilpi J. A, Sivasothy Y., Ahmad S. & Awang K., 2019). Its mechanisms rely on its main alkaloid (Suhaimi F. W., Yusoff N. H. M., Hassan R., Mansor S. M., Navaratnam V. & Müller C. P. et al., 2016). that can be presented both stimulant and sedative effects in a dose-dependent manner. For example, low doses of kratom use exert stimulant effects, while high doses induce analgesic or sedative effects (Kruegel A. C. & Grundmann O., 2018). These addictive properties like opium can be contributed to various negative effects for its dependence problems and psychotic symptoms (Singh D., Müller C. P. & Vicknasingam B. K., 2014). For example, recurrent seizures can be occurred due to chronic use, and it could be associated with structural brain lesions on MRI (Tatum W. O., Hasan T. F., Coonan E. E. & Smelick C. P., 2018). These always definitely bring

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them to visit the emergency departments (Cumpston K. L., Carter M. & Wills B. K., 2018). Nowadays, kratom use as traditional and non-traditional appears to be on the rise in global (Smith K. E. & Lawson T., 2017) including Western contexts (Smith K. E. & Lawson T., 2017). due to enhancing mood, euphoria, and relieving anxiety (Swogger M. T., Walsh Z., 2018). This is especially a concern and problematic for adolescents that start to use various of drugs. Kratom is attracting increased attention as a currently illegal that is used alone and combined with other substances for a cocktail, such as caffeinated beverages or codeine-containing cough syrups called "4×100", to increased sociability among the male youth in Southern, Thailand. Health risks due to kratom use are concerned that it has been linked with various toxicity such as fatal overdose, addictive potential, and associated withdrawal syndrome (Stanciu C. N., Gnanasegaram S. A., Ahmed S. & Penders T., 2019). In addition, it can contribute to the cost burden for treatment and rehabilitation.

A person with addictive symptoms requires access to the treatment depending on the type of addictive disorder, the length, severity of use, and its effects on the individual and social dimensions. Thus, receiving a specific treatment is essential for breaking the cycle of addiction and various negative outcomes. However, drug addict treatment methods are available a wide range of treatment options. Types of addiction treatment therapies are known such as cognitive-behavioral therapy (CBT), rational emotive behavior therapy (REBT), community reinforcement and family training (CRAFT), and matrix model. Since treatment programs are varied for individual patients, and no two programs are the same. There are also a wide variety of drug abuse treatment methods, from the more traditional methods to the more unusual, and alternative ideas. Unfortunately, none of the treatments for addictive disorders work well for every person, and common treatment interventions might involve a combination. Moreover, the standard treatment approaches that have been shown to be helpful for people addicted to other types of drugs, except for kratom use. Furthermore, some addictions are difficult to treat and require on-going care and cost. Efficacy evaluation of the medical model of rehabilitation treatment of drug addicts with psychiatric treatment also presented unsatisfied for several patients and their family.

There are currently no forms of treatment known to be specifically effective for kratom addiction. On the other hands, religion is one of the protective factors against drugs use that are well established in several reports (Counted V., Possamai A., Meade T., 2018; Shamsalina A., Norouzi K., Fallahi Khoshknab M. & Farhoudiyan A., 2014). These can be found in a variety of places and levels, from hospitals, mosques and churches to the treatment centers and community centers. Nowadays, kratom use is widespread in the Southern of Thailand across adolescents at least once in their lifetime to induce euphoria and social interaction (Singh et al., 2017). It becomes a serious problem including mental health risks, especially in Muslim communities. Several community stakeholders try to produce an effort to protect their youth from this growing epidemic. One of a Muslim community in Krabi province has been focused on using Islamic religious to heal Muslim youth for this addict for a decade. Thus, this study aimed at investigating the effect of integrated Islamic religious learning on kratom addict rehabilitation and its model for Muslim youth in the community, Krabi province, Thailand.

2. Literature Review

The Islamic integrated models for drug addict treatment were studied as shown in Table 1.

Study	Findings	Ref.
The impact of integrated psychospiritual module (IPM) among the drug addicts in Malaysia	The IPM is certainly effective in elevating the level of drug-related locus of control and psycho-spirituality instrumental to reduce relapse rate among the drug-addicts.	(14)
2. Achieving a spiritual therapy standard for drug dependency in Malaysia, from an Islamic perspective	The usage of piety based on the Holy Quran's recommendations emerged as an applicable method of Islamic spiritual therapy because it looks like a modified cognitive behavioral therapies (MCBT).	(15)
3. Perspectives on Drug Addiction in Islamic History and Theology	The 3 models on drug addiction from an Islamic theological perspective were explored: 2 of them are preventative models based on an understanding of society rooted in shame-culture, while the third model, called Millati Islami, practiced in the USA, is founded on the Islamic understanding of repentance.	(16)
4. The biopsychosocial-spiritual model of addiction applies in an Islamic context	The biopsychosocial-spiritual addiction model fitted well in the Islamic context.	(17

3. Conceptual Framework



Figure 1 The Conceptual Framework for the Islamic Integrated Drug Addict Treatment and Rehabilitation (IDTR) Model

4. Methodology

Study Design: The study design was a descriptive study aiming to explore the integrated Islamic religious drug treatment and rehabilitation model for kratom use among Muslim youth in the Muslim community. Each approach to kratom treatment was designed to address certain aspects of kratom addiction treatment and its consequences for the individual, family, and society after completing the cessation.

Study Setting and Participants: A case study setting was chosen from one of the Muslim communities based on good practice in drug treatment in Krabi province, Thailand. The 150 participants were purposive sampling from program volunteers, program leaders, and families and friends of addicts. These were recruited through contacts with the research staff at participating treatment programs.

Data Collection and Analysis: Data was obtained from 3 in-depth interviews and focus group discussion from all participants conducting from October 2017 to December 2018 in a community, Krabi province, Thailand. A series of open-ended questions guided participants in describing the characteristics of the drug addict treatment and rehabilitation for kratom addict on Muslim youth by using integrated Islamic program. Interviews were transcribed verbatim facilitating familiarization and immersion in the data. The analysis documentary materials,

interview transcripts and detailed fieldnotes were analyzed by using a thematic analysis. The emerging coding framework was finally discussed between authors in a process of triangulation.

Ethics Consideration: Ethical approval was obtained from the Ethics Committee for Human Research at Health System Management Institute, Prince of Songkla University, Thailand (EC005/60). Those who agreed were provided the written informed consent before the study.

5. Results

5.1 The Context and History of Study Setting

The Klong Kam Pondok (School) or called Pondok Institution Anharul-U-Loom located on a little island at Moo 3, Khlongprasung Sub-district, Muang, Krabi province, Thailand. The residential treatment center has been established and administered by Tuan Guru Abdul Razak bin Mustafa or Mr. Anurak Kinglek, a founder and director of Pondok for all drug addict treatment and rehabilitation since 2003. This residential treatment center is the preferred option for many drug addict clients, as it gives them the ability to shut out the outside world and focus completely on getting well. It requires them to live within the facility fulltime for the duration of the Islamic program treatment. The management staff in the center were the alumni or the ex-addicts that were successful in treatment and became volunteers to work here. The success rate of treatment was rapidly spread both in Thailand and the neighbor countries such as Malaysia. The number of Muslim drug addicts was total accessibility 1500-1600 cases undergoing rehabilitation. Nowadays, this center is readily available, and it is supported by the government and non-government sectors for the financial and infrastructure materials.

5.2 The Lists and Number of Participants

All types of participants in this study were shown in the Table 2.

Type of Participants

Number (person)

1. A chief officer (a founder/director of Pondok)

1. Staff of treatment service volunteers

20

3. Religious program teachers

10

4. Families and friends of kratom addicts

5. The Alumni (ex-addict)

6. The community committee members

Table 2 The Types of Participants (N = 150)

5.3 The Process of Treatment

The management for drug treatment was organized by the alumni or trained staff. The role of ex-addicts in this school towards the engagement with the addicts both through counselling and Islamic teaching. Once in Islamic treatment program, drug addict clients are under 24-hour supervision as they undergo assessment, detoxification and rehabilitation until they are discharged. The length of time required to treat kratom dependency varies wildly due to a combination used alongside other drugs. This study revealed the treatment addressing not only the kratom addiction but also any other addictions that they may have. The whole process was last a minimum of months and a maximum of years or more. All dependent upon the client's commitment, dedication, and their progress. The main process of drug treatment was categorized into 3 phases that were: phase 1 — an assessment, phase 2 — a detoxification, and phase 3 — a rehabilitation as demonstrated in Figure 2. The Islamic faith-based-treatment programs were provided the detail in the Table 3.

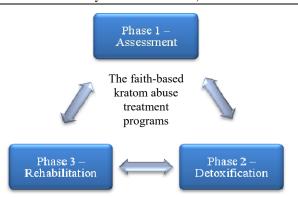


Figure 2 The Procedures of Kratom Addict Treatment

Table 3 The Islamic Faith-Based-treatment Process

Stage	Islamic Faith-Based-Treatment Programs
1. Assessment	The first treatment step, the staff providers tried to understand the characteristics of the person in treatment before they finalize the treatment plan for that individual. The staff explained the parents of the addicts about the management of activities or a daily-schedule of the addicts, life-discipline, and screening test before entering the treatment centers.
1.1 Screening	This step used to identify individuals with the harmful drug use, or dependence, as well as associated risk behaviors such as aggressive or suicide idea.
1.2 Religious Information and the treatment plan	Those who were kratom addicts that practice as Muslims of the Islamic faith received a piece of informed advice that any drug or kratom use is a sin (haram) and need to quit. However, Islam supports those who seek recovery because Islamic law seeks to protect the belief in Allah by promoting life, the maintenance of property, and the maintenance of a healthy state of mind. Encouragement to perform obligatory prayers and other customs associated with Islam was an extremely important step.
1.3 Family Counseling	This step, there were the one-on-one, family, and group counseling to help the kratom addicts better understand the root of their addiction, how it affected all aspects of their lives, including their faith in the Islamic religion. Family counseling with an Islamic-based approach to treatment can be extremely helpful for them before the cessation. Clients going through substance abuse treatment might have a particularly hard time accepting their emotions, their feelings or simply the steps on the road to sobriety.
1.4 Isolate or meeting others	Attending meetings builds a support system and relationships with others with shared experiences. Isolation for the one who harmed others such as uncontrolled symptoms. This step helped the staff to comply with human rights obligations and recognize the inherent dignity of all individuals.
2. Detoxification	Detoxification aimed to assist the kratom addicts could pass through withdrawal. The staff assisted them, offered comfort, support, and guidance. Consulting physicians in Krabi hospital could be performed by those of the same faith and gender if they cannot control the addicts. Having addiction treatment provided in such a way that is supportive of one's religious beliefs can be especially beneficial that encourages and heartens one's connection to Allah.
2.1 Intensive training class on Islamic principles	Islamic class training was based on the Quran and Sunnah to deal with their faith. Development of goals and helping each person to invest their energy in the life goals associated with the afterlife as conceptualized by Islam. Islamic-based curriculum provided the skills training to help them manage their emotions, allowing thoughts and behaviors to remain consistent with individual values.
2.2 Case management	Encourages the kratom addicts to focus on the solution, not the problems that they faced. This type of Islamic therapy helped to increase the mindfulness-based sobriety, showing clients how to accept their realities and take positive action in this camp.
2.3 Structure and routine practice	Individuals were held accountable for the Islamic preacher attendance (Nasihat), 5-times prayer, and their work activities toward lifelong recovery. Many groups encouraged those who are newer to recovery to develop a relationship with individuals who have been in recovery for a longer period of times for support in a peer assist.
3. Rehabilitation	Encouragement to perform obligatory prayers and other customs associated with Islam was an extremely important step. Religious leaders to talk to clients and convince them that repentance, treatment, and abstinence can result in forgiveness is extremely important. By attending an Islamic-based treatment program, clients are able to make deeper connections and stronger friendships with fellow clients. Clients could be encouraged to share their experiences in recovery with others.

5.4 The Structure of Management System

This structure of management was divided into 4 groups as listed in Figure 3.

- 5.4.1 The mutual consultation (Al Shura) aimed at building a consensus that benefit to make the decision and plan. Their roles to draft the rules and regulation of drug treatment. It consisted of the director and committee members
- 5.4.2 The leader was called an "Amir" who entrusted with leading a group of drug addict clients as a role model or managing an organization. They possessed a greater sense of responsibility and empathy.
- 5.4.3 The general staff were the former addict alumni that became the volunteers and served as the chief and partner counselor for the new addicts.
- 5.4.4 The Religious Teachers who taught the Islamic content in a daily life with an educational programmed that contribute to the achievement of broader health goals of preventing drug use and abuse in a long term.

Another element to support this Islamic treatment for kratom addict was the community involvement that disclosed a community-based response to drug use and dependence can support and encourage behavioral changes directly in the community.



Figure 3 The Principle of Management

5.5 The Principle of Islamic Curriculum

The principle of Islamic curriculum for the drug treatment was also revealed in the Table 5.

Islamic Contents	Description
 Dahwah (Call for Islam) 	Dahwah literally means invitation to know and accept Islam for practice
Al-Masuliyyah (Responsibilities)	It is an obligation for the drug addict clients to do something in a daily life with the expectation of a certain result.
 Al-Amanah (Trustworthiness) 	It is an obligatory for every Muslim that will determine good morals in a person in daily affairs.
■ Jama-ah (Self-help support groups)	Social support interventions using peer assistance combine with the other complement formal Islamic treatment options.

Table 5 The Preaching of Islam in the Curriculum

5.6 Kratom Addict Treatment Outcomes

The Muslim youth kratom addict clients entered the treatment center by arresting from their parents and the policemen. Kratom can cause effects like both opioids and stimulants. The addicts were found both the low doses and the high dose of kratom use. The formerly presented stimulant effects that like amphetamine such as greater alertness, increased sociability, agitation, anxiety, tremors, and impaired coordination. While the latter elicited more opiate-like effects in users such as morphine that euphoria, sedation, and nausea could be found. Withdrawal symptoms in these kratom use were like those for opiate withdrawal such as sweating, irritability, high blood pressure, abdominal and muscle pain, diarrhea, and cravings for kratom. Cravings were strongly urged to those

who used single kratom or combination with other drugs and occurred after using kratom for a long period of time. This involved both physical and psychological symptoms that felt uncomfortable and distressing. Treatment programs in this center offered them a professional assistance for dealing with kratom cravings and addiction.

The role of recovery programs, first the Islamic teaching group and preaching were motivational techniques which helped them to seek more motivation for sobriety and life's goal. In daily class, Islamic training was focused on the self-understanding how their thoughts leading to their emotions, their behaviors and their fates in the hereafter. Second, zikir or dhikr (remembrance to Allah) protocol training was the devotional act in Islam in which short prayers that recited repeatedly to remember Allah. In other word, this was mindfulness that helped the addicts be in the present moment. Third, the regular prayer (Salat) practices helped them to promote relaxation, minimize anxiety, and depression. Forth, the exercises and activities helped them to improve mood and reduce cravings. Several programs in this residential treatment center offered intensive services by alumni volunteer assistance that may include small group, individual, and class therapy, along with temporary housing for them during treatment. Finally, the discharge planning was a critical process that the family members were involved to well prepare themselves for dealing with. Some of the care the ex-addicts needed such a quite complicated. It is essential for the parents or families to get some training in special care techniques, such as life trauma, feeling and emotions.

The life after discharge from the rehabilitation center was declared by the family and friends of the ex-addicts that the Islamic drug rehabilitation programs for the ex-addicts had the potential to improve their lives and prevent re-admission to the center. However, the returning after discharge was found rare cases. Relapse was also found with the warning signs that differed from person to person and depend on their past experiences such as the familiar people, places, and things associated with using kratom can trigger them a craving. Although, the remaining in treatment for an adequate period was critical factors, kratom abusers were at risk for relapse even after long periods of abstinence.



Figure 4 The Islamic Integrated Model for Drug Addict Treatment and Rehabilitation (IDTR) on Kratom Use

5.7 Principles of Drug Dependence Treatment Model

The Islamic integrated model for drug addict treatment and rehabilitation on kratom use among Muslim adolescents in Krabi province, Thailand can be described the main elements that helped them to recovery were: (1) types of kratom use, (2) content of program, and (3) structure-based management in residential treatment center. This model was shown in Figure 4.

6. Discussion

The gap between drug dependence and the availability of treatment services is significant and growing wider for Muslim clients. There are several Islamic drug and alcohol rehabilitation centers throughout the country, including inpatient and outpatient worldwide. However, IDTR model is an Islamic faith-based drug treatment option without a medication-assisted treatment program for those experiencing problems associated with kratom addiction. This community center might be the solution for both kratom addicts and family are looking for because it aims to assist the struggling kratom addicts among Muslim youth to seek a repent and long-lasting recovery. This model also helped them to achieve sobriety and to provide them with the peace of mind.

According to, increasing trends in substance abuse, especially, kratom use literature among Muslim populations. The major risk factors that appear to contribute to an increased risk of kratom abuse among Muslims youth are their level of acculturation in some area (e.g., the Southern part of Thailand) and their commitment to Islam. One of the first principles of treating that did not suit for the individuals for substance abuse with a commitment to Islam was that this treatment was not extremely private. It is actually important point that their confidentiality should be strictly maintained and disclosures regarding the person's participation in treatment only are made with the permission of the person and their family members. Many clients struggled to accept things as they were in that moment. However, once they learned to accept something in life, realized a present moment rather than focused on the past or worried about the future. They then could accept sadness and hurtful behaviors from the past and they can accept the reality of the present moment. Through acceptance and commitment Islamic-faith therapy, clients were encouraged to choose their own direction in life. The location of treatment center was a consideration for their parents that often comes up when choosing a kratom rehab facility. Some clients preferred to stay close to home, finding comfort and stability to be essential to their ability to regain control over their addictions. Other clients preferred the anonymity afforded by attending a treatment program that removes them from their normal comfortable patterns and temptations.

7. Conclusions

The Islamic integrated model for drug addict treatment and rehabilitation on kratom use among Muslim adolescents provided many factors that they preferred to treat that were: (1) the location, (2) close-system residential treatment center, (3) Islamic teaching and rehabilitation, and (4) friendly management by the former addict alumni.

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