

Effectiveness of Community Empowerment of The Malay Communities in Dealing with Drug Addiction

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Abstract: Drug abuse remains one of the most complex social challenges affecting the Malay community. Despite significant development in the Asia Pacific region, Malaysia continues to face persistent issues related to drug abuse, with the problem showing little improvement since the 1970s. Youth aged 19 to 39 are particularly vulnerable, with over 50% of this group involved in drug addiction. Although drug abuse among children and teenagers has decreased, the numbers for adults have increased. The Malay community is disproportionately affected, despite being the majority in the country, with a significant proportion of addicts coming from this group. This study explores the various factors contributing to drug abuse within the Malay community, using a quantitative approach based on the Structural Equation Model (SEM). The research identifies several key factors: religious practices and philosophies of life, socio-cultural influences such as lifestyle, cultural customs, family culture, and education, as well as community-based factors like environment, information, support, and challenges. The study finds that community factors, particularly those related to the environment, information, support, and challenges, are crucial in addressing drug addiction in the Malay community. Socio-cultural factors also play an important role, although they are secondary in comparison. The findings suggest that the Malay community has a vital role in combating drug addiction, and the authorities must continue to provide comprehensive support to help address this issue.

Keywords: Community Empowerment, Addressing Drug Addiction, Malay Community

Introduction

Drug abuse is the single most complicated social problem that is haunting and happening in the community in Malaysia. This study examines the effectiveness of community empowerment between Malays and Chinese in dealing with drug addiction in the East Coast state, Peninsular Malaysia. In 1983, the government took a new approach in combating the drug epidemic in the country. In that

year problem was declared a threat to national security. The philosophy of this policy is to create a society free from the threat of drugs. This policy was declared by Tun Dr. Mahathir bin Mohamad, former Prime Minister of Malaysia on 19 February 1983 while launching the Anti -Drug Campaign. The government has created a National Anti -Drug Committee and placed it under the National Security Council (Hossen & Pauzi, 2025; Ziogas et al., 2023).. The Government has approved the establishment of the National Drug Agency which is responsible as the Secretariat to the National Drug Council and responsible for all anti -drug actions. Since then, drugs have been considered the number one enemy of the country, not to mention the main target of drug addiction is the young generation who are the backbone and hope of the future country. Widespread drug trafficking and addiction can threaten the socio-economic, socio-cultural, spiritual well-being of the masses, weaken national resilience and threaten national security (Agensi Dadah Kebangsaan, 1997).

Drug law in Malaysia covers aspects of prevention to treatment and rehabilitation. In its implementation, there are legislative weaknesses that have been identified on an ongoing basis and several amendments have been made to be more effective. The severe punishment imposed reflects the Malaysian government's determination to eradicate the drug problem. Various measures have been implemented by the government and Non-Governmental Organizations (NGOs) to combat the problem of drug abuse (Hossen, 2023; Hossen & Rezvi; Hossen & Salleh, 2024). The first step is to practice efforts to eliminate or reduce one of the main causes of this problem, which is the source of drug supply (Hossen & Rezvi, 2021). To that end, various preventive measures and punishments have been implemented including imposing severe punishment on drug offenders. The Dangerous Drugs Act 1952, covers drug trafficking. The punishment is imprisonment of not less than 5 years or life imprisonment with 10 strokes of the cane. A person is deemed to have committed an offense under Section 6 (B) of the Dangerous Drugs Act 1952 if he is found planting or cultivating a cannabis tree (even a tree) and is punishable by life imprisonment and whipping of not less than 6 strokes. Section 39B of the Dangerous Drugs Act 1952 provides for the mandatory death penalty for traffickers convicted of drug trafficking Rohany, Fatimah, Zainah and Mohd Norahim (2016).

For each offense proved, the court has no discretionary power to reduce the sentence (Anwarul, 1996). Meanwhile, Dangerous Drugs Act 1952 (Amendment) 2002 Act A1167 was passed and gazetted on 8 August 2002. With the coming into force of this act from 11 November 2002, drug addicts who re -addicted after 2 times undergoing treatment and rehabilitation at Serenti Center or supervision from 5 up to 7 years will be whipped no more than 3 times. If they are found addicted again for the 4th time, they will be sentenced to imprisonment from 7 to 13 years and lashes of 3 to 6 lashes (AADK, 2019). The phenomenon of drug addiction is a global issue and problem. Arguably no country is exempt from these symptoms of drug addiction (Hossen & Mohd Pauzi, 2023). The difference, is only in the form of scale whether large or small, serious or not. In Malaysia, the issue of drug addiction is a very serious matter that has become the main agenda of the country that needs to be given attention. The Malaysian government is committed to the War on Drugs, because drugs are the number one enemy of the country (Hossen et al., 2023). According to statistics AADK (2019), a total of 142,199 people has been identified as involved in drug abusers and addicts in Malaysia, from 32.4 million people to 32.6 million people, an increase of 200,00 people compared to the previous year (2018). The findings in 2019 show that out of 100,000 residents, there are a total of 436 drug and substance abusers and addicts, which is a ratio of one (1) person for 229 residents.

The ASEAN Drug Monitoring Report 2018 (Manop, Chuanpit, Rachanikorn & Poonrut, 2019) shows that out of the total ASEAN population of 654.3 million people in 2018, 76.7 drug addicts have sought treatment and rehabilitation per 100,000 population. This number shows an increase of 50.6 people compared to 2017. If broken down by country, Vietnam reported 231 people, Thailand reported 221 people and Cambodia reported 114 people in 100,000 people receiving treatment and rehabilitation. AADK (2019) also show that Malays are the highest number in terms of drug addiction, which is 107,503 people or 75.6 percent. While other nations are at a lower level. Logically, it may be because Malays are the majority population in the country out of a total population of 32.4 million.

According to the AADK (2019), in 2010, 23,642 people were reported to be taking drugs in Malaysia. By 2016, this number continued to increase to 30,844 people. In 2017, a total of 163,931 drug-related arrests were made. This has created a situation where a group of Malaysians have been imprisoned for addiction, which is also a health and social problem. In 2019 a total of 33,500 out of 59,600 (approximately 56 percent) inmates nationwide were in prison for drug offenses. Of this number, 71.35 percent are Malays, and 66 per cent are between 22 and 40 years old. It is a figure that far exceeds the capacity of the prisons in our country which should only be able to hold 52,000 people. Too many Malaysians today have lost their lives due to drug problems. In November 2019, Al-Jazeera reported that among the 1,279 individuals sentenced to death in Malaysia, 932 (72.9 percent) were related to drug offenses. The cost that taxpayers in Malaysia have to bear to bear someone in jail is RM35 a day, equivalent to RM12,775 a year (AADK, 2019). According to the study of Ridhuan Tee et al. (2021), the greatest number of drug addicts are among the Malays as the majority population in the country. Some argue, that is a reasonable thing to do. Compatriots like China, many Chinese are addicted. Of course, for a country with a Malay majority like Malaysia, then the Malays are the most numerous. The question that needs to be considered together is, should not the Malays be the champion of all social problems that occur in Malaysia even though the Malays are the majority of Malays who are Muslims, while Islam is the best religion among all religions. Islam should be a barrier to the Malays from getting caught up in this despicable scene. Why do Malays continue to be champions in all these problems, especially drug addiction?

The involvement of local leaders and volunteers from all walks of life has a positive impact in efforts to address social problems, especially drug abuse in the country (Mohd Fahmi & Halim, 2018). In conjunction with the 35th National Anti-Drug Day (HADK-35) campaign themed "Our Community is Our Responsibility", the approach to community empowerment is in line with the theme according to the Deputy Prime Minister, Datuk Seri Dr Ahmad Zahid Hamidi (Mohd Fahmi & Halim, 2018). He who is also the Home Minister stated that, the implementation of the leadership program with volunteers is seen as a reminder of the role of leaders to help address social problems, especially drug abuse through the element of commitment or 'political will' in conjunction with volunteers. According to him, "Community empowerment is implemented in 14 high-risk areas (drug addiction problems) and now added 50 areas to make a total of 64 areas". The effort was successful and can be proven through the Anti-Drug Campaign (PDH) 2.0 when the decrease in new addicts by 16 percent compared to 2016. From the findings of the study, the decrease in new addiction cases decreased to 18,440 last year compared to 22,923 in 2018 (AADK, 2019).

Thus, this study attempts to identify whether the factors used in this study meet the required validity and reliability before conducting further studies in detail. Among the factors used are religious factors based on practices, philosophy of life and community morals; socio-cultural factors of the community based on their lifestyle, cultural customs, family culture and education; community factors based on community environment, community information, community support, community challenges and community environment; and factors in addressing drug abuse among communities in the East Coast state of Malaysia.

Findings

There are two (2) types of output when running the Structural Equation Modeling (SEM) procedure (Chik & Abdullah, 2018), namely graphic output and text output. The graphical output produces standardized regression values and unstandardized regression values between constructs. Running the SEM procedure produces standardized regression values and unstandardized regression values.

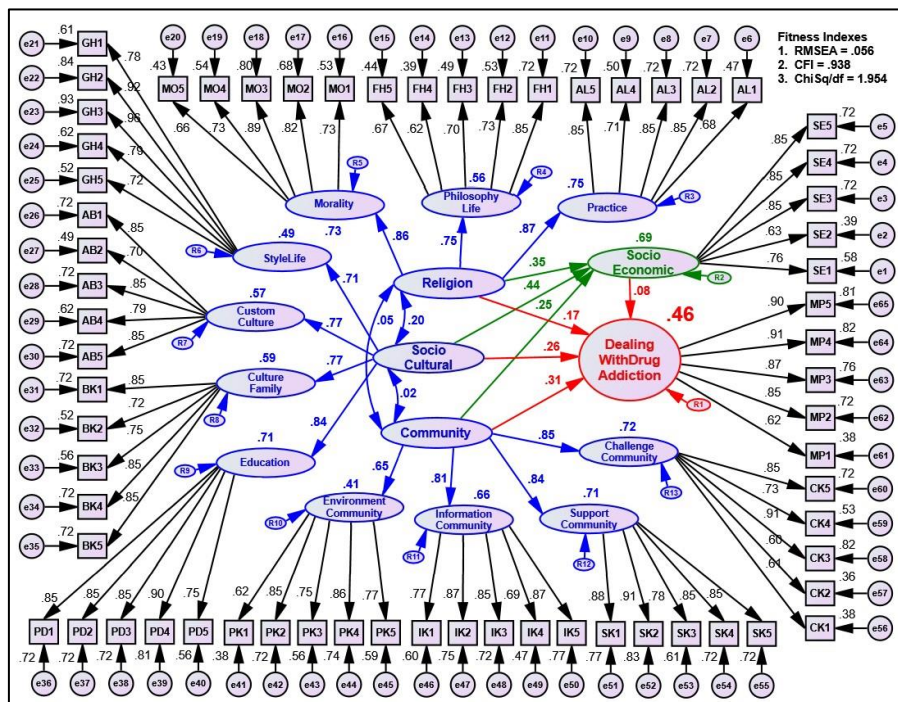


Figure 1: Standardized Regression Values

Figure 1 above shows the R^2 value for Dealing with Drug Addiction (DDA) is 0.46. This shows four (4) predictor constructs in the model (red arrow) which are Religion (RE), Socio-cultural (SC), Community (CO) and Socio-economic (SE) contributed as much as 46 percent (%) to Dealing with Drug Addiction (DDA) in the Malay community in this study. The R^2 value for Socio-economic (SE) is 0.69. This shows three (3) predictor constructs in the model (green arrow) which are Religion (RE), Socio-cultural (SC) and Community (CO) contribute as much as 69 percent (%) to Socio-economic (SE) in the Malay community in this study.

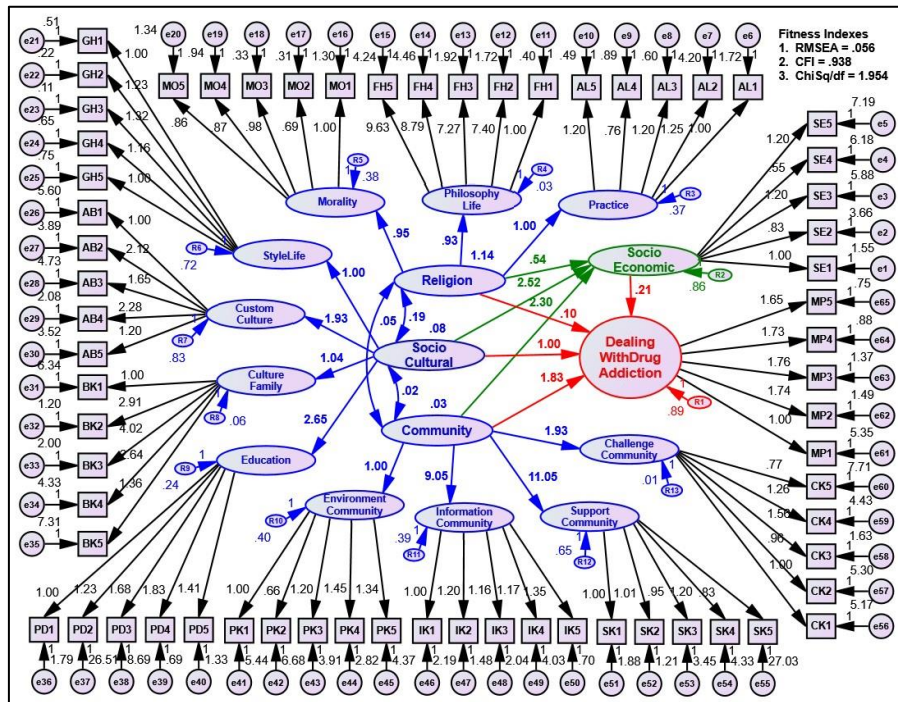


Figure 2: Unstandardized Regression Values

Figure 2 above shows the regression equation for Dealing with Drug Addiction (DDA) and Socio-economics (SE):

- a) $DDA = 0.10RE + 1.00SC + 0.83CO + 0.21SE$ ($R^2 = 0.46 = 46\%$).
- b) $SE = 0.54RE + 2.52SC + 2.3CO$ ($R^2 = 0.69 = 69\%$).

The double-headed arrow is the value of the correlation between two independent, namely the correlation between Religion with Socio-cultural results in a value of 0.19, between Religion with Community results in a value of 0.05, between Socio-cultural with Community results in a value of 0.02 and the result of this correlation value shows that the SEM model built is valid based on the construct, due to the non-occurrence of multicollinearity problems.

Table 1 from Figure 2 above, shows the results of direct effect hypothesis testing for Religion, Socio-cultural, Community and Socio-economic on Dealing with Drug Addiction.

Table 1: Hypothesis of Direct Effect Between Constructs

Direct Effects Hypothesis	P	Decision
H ₁ : Religion has a significant effect on Dealing with Drug Addiction.	***	Supported
H ₂ : Socio-cultural has a significant effect on Dealing with Drug Addiction.	***	Supported
H ₃ : Community has a significant impact on Dealing with Drug Addiction.	***	Supported
H ₄ : Socio-economic has a significant effect on Dealing with Drug Addiction.	***	Supported
H ₅ : Religion has a significant effect on Socio-economic.	***	Supported
H ₆ : Socio-cultural has a significant effect on Socio-economic.	***	Supported
H ₇ : Community has a significant effect on Socio-economic.	***	Supported

Analysis Effect of Religion on Dealing with Drug Addiction in the Malay Community

Table 2 below shows that Religion has a significant direct effect on Dealing with Drug Addiction in the Malay community. The estimate for the regression weights (β) is 0.095, the significance level is 0.000 (Estimate = 0.095, S. E. = 0.022, C. R. = 4.290, $p < 0.000$, Label = Significant). Therefore, when Religion increases by 1 unit, an increase also occurs by 0.095 units on Dealing with Drug Addiction. Therefore, testing the H_1 hypothesis in this study is supported based on the observed data.

Table 2: Regression Coefficient Value, Probability (p) Religion and Dealing with Drug Addiction

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Dealing with Drug Addiction	<-- Religion	0.095	0.022	4.290	***	Significant

Analysis Effect of Socio-cultural on Dealing with Drug Addiction in the Malay Community

Table 3 below shows that Socio-cultural has a significant direct effect on Dealing with Drug Addiction in the Malay community. The estimate for the regression weights (β) is 1.004, the significance level is 0.000 (Estimate = 1.004, S. E. = 0.488, C. R. = 2.057, $p < 0.000$, Label = Significant). Therefore, when Socio-cultural increases by 1 unit, an increase also occurs by 1.004 units on Dealing with Drug Addiction. Therefore, testing the H_2 hypothesis in this study is supported based on the observed data.

Table 3: Regression Coefficient Value, Probability (p) Socio-cultural and Dealing with Drug Addiction

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Dealing with Drug Addiction	<-- Socio-cultural	1.004	0.488	2.057	***	Significant

Analysis Effect of Community on Dealing with Drug Addiction in the Malay Community

Table 4 below shows that Community has a significant direct effect on Dealing with Drug Addiction in the Malay community. The estimate for the regression weights (β) is 1.827, the significance level is 0.000 (Estimate = 1.827, S. E. = 0.183, C. R. = 9.977, $p < 0.000$, Label = Significant). Therefore, when Community increases by 1 unit, an increase also occurs by 1.827 units on Dealing with Drug Addiction. Therefore, testing the H_3 hypothesis in this study is supported based on the observed data.

Table 4: Regression Coefficient Value, Probability (p) Community and Dealing with Drug Addiction

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Dealing with Drug Addiction	<-- Community	1.827	0.183	9.977	***	Significant

Analysis Effect of Socio-economic on Dealing with Drug Addiction in the Malay Community

Table 5 below shows that Socio-economic has a significant direct effect on Dealing with Drug Addiction in the Malay community. The estimate for the regression weights (β) is 0.205, the significance level is 0.000 (Estimate = 0.205, S. E. = 0.037, C. R. = 5.561, $p < 0.000$, Label = Significant). Therefore, when Socio-economic increases by 1 unit, an increase also occurs by 0.205 units on Dealing with Drug Addiction. Therefore, testing the H_4 hypothesis in this study is supported based on the observed data.

Table 5: Regression Coefficient Value, Probability (p) Socio-economic and Dealing with Drug Addiction

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Dealing with Drug Addiction	<-- Socio-economic	0.205	0.037	5.561	***	Significant

Analysis Effect of Religion on Socio-economic in the Malay Community

Table 6 below shows that Religion has a significant direct effect on Socio-economic in the Malay community. The estimate for the regression weights (β) is 0.539, the significance level is 0.000 (Estimate = 0.539, S. E. = 0.141, C. R. = 3.826, $p < 0.000$, Label = Significant). Therefore, when Religion increases by 1 unit, an increase also occurs by 0.539 units on Socio-economic. Therefore, testing the H_5 hypothesis in this study is supported based on the observed data.

Table 6: Regression Coefficient Value, Probability (p) Religion and Socio-economic

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Socio-economic	<-- Religion	0.539	0.141	3.826	***	Significant

Analysis Effect of Socio-cultural on Socio-economic in the Malay Community

Table 7 below shows that Socio-cultural has a significant direct effect on Socio-economic in the Malay community. The estimate for the regression weights (β) is 2.523, the significance level is 0.000 (Estimate = 2.523, S. E. = 0.735, C. R. = 3.433, $p < 0.000$, Label = Significant). Therefore, when Socio-cultural increases by 1 unit, an increase also occurs by 2.523 units on Socio-economic. Therefore, testing the H_6 hypothesis in this study is supported based on the observed data.

Table 7: Regression Coefficient Value, Probability (p) Socio-cultural and Socio-economic

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Socio-economic	<-- Socio-cultural	2.523	0.735	3.433	***	Significant

Analysis Effect of Community on Socio-economic in the Malay Community

Table 8 below shows that Community has a significant direct effect on onomic in the Malay community. The estimate for the regression weights (β) is 2.280, the significance level is 0.000 (Estimate = 2.280, S. E. = 0.554, C. R. = 4.114, $p < 0.000$, Label = Significant). Therefore, when Community increases by 1 unit, an increase also occurs by 2.280 units on Socio-economic. Therefore, testing the H_7 hypothesis in this study is supported based on the observed data.

Table 8: Regression Coefficient Value, Probability (p) Community and Socio-economic

Construct	Construct	Estimate	S. E.	C. R.	P	Label
Socio-economic <--	Community	2.280	0.554	4.114	***	Significant

Conclusion

Overall, the Malay community plays a greater role in dealing with drug addiction than other communities. The authorities need to play a role in providing support to the community with various methods and meetings in dealing with drug addiction. In the findings of this study, it has been shown that community factors (ie the environment, information, support and community challenges), play a more important role and give serious focus in dealing with drug addiction in the Malay community compared to other communities, even though some of them have relatively satisfactory economic income. In addition, the socio-cultural factors of the Malay community (ie lifestyle, cultural customs, family culture and education), is also the second factor that provides a lot of support in dealing with drug addiction in the community, compared to other communities.

The conclusion of this study shows the role of the Malay community and other communities, related to drugs from various aspects in their community, need to give serious emphasis to prevent drug addicts widely. Although a lot has been done by Public University researchers, independent researchers and AADK researchers, there are still many drug issues that have not been resolved. Addiction and drug abuse, is a problem that has huge implications, starting from the individual, affecting the family and the environment, as well as the community and the country, as a whole. Thus, the cooperation and consensus of all parties in the community, will be able to further empower the community to deal with drug abuse among teenagers and adults. This will be able to achieve the government's desire to make the country one of the countries that can and will be able to effectively control drug addiction and abuse in the future.

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