System Analysis in Community-Based Rehabilitation Services in the Context of Increasing Community Resilience

Dian Surtikanthi[a], Muhammad Syaroni Rofii[b]*

[a] *diansurtikanthinew@gmail.com*
School of Strategic and Global Studies, University of Indonesia, Jakarta10430, Indonesia

Abstract

This research is motivated by the number of narcotics abusers who have penetrated into rural areas. On the other hand, government policy requires all abusers to receive rehabilitation services. As a short cut of this policy, Community-Based Interventions (IBM) were formed in 2020. However, only 26 IBMs have provided Prime services in 2022. A qualitative approach was used to evaluate policies related to IBM in Jakarta with IBM Siaga as case study. The purpose of this research is to get an overview of the results of policy evaluation so the IBM program can be optimized. The author uses retrospective process evaluation type to analyse primary data information obtained through FGD and interviews with village heads, National Narcotics Agency (BNN) of East Jakarta City's officer, recovery agents and clients of IBM Siaga. While secondary data sources are obtained from analysis of reports and research related to IBM. The results of the research show that in input aspects, IBM Siaga has not been able to optimize village potential. From a process perspective, IBM Siaga has carried out IBM activities and services according to client needs. From the aspect of output, clients who successfully complete the program at IBM Siaga totalled 10. However, the success of the IBM Siaga program is still in doubt because it does not conduct urine tests on clients, and clients are also not productive at work. The dimension of community social resilience found in IBM Siaga is only the coping dimension. Based on the analysis, the strategy for optimizing IBM Siaga is synergizing eradiction activities with local officials and carrying out IBM activities outside the Kebon Manggis area

Keywords: Narcotics Rehabilitation; Community Based Rehabilitation

1. Introduction

Research from the National Narcotics Agency (BNN) in collaboration with the National Research and Innovation Agency (BRIN) shows that the prevalence rate of narcotics abuse in 2021 has reached 1.95%. It is predicted that the number of people in 2021 who have used narcotics throughout their lives will reach approximately 4,827,616 million people. While the prevalence rate for the last year of use in urban areas has reached 2.23%, while in rural areas it has reached 1.61%. It is predicted that the number of people using

narcotics in 2021 will reach approximately 3,662,646 million people (National Narcotics Board of The Republic of Indonesia 2022).

However, the government has limitations in providing special institutions or agencies that can provide rehabilitation services for all narcotics abusers. The Deputy for Rehabilitation of the BNN said that the total number of rehabilitation places throughout Indonesia could only accommodate 3% of the total needs of clients who needed rehabilitation services (Sarasvita 2022). To overcome this, the government has actually provided a policy which stipulates that every mental hospital in Indonesia is required to provide 10% of the number of available beds for narcotics patients (Minister of Law and Human Rights Republic of Indonesia 2014). However, the implementation of the regulation of article 54 paragraph 1 of the law has not been maximized because there are still many law enforcers who tend to give prison sentences for narcotics abusers.

This picture is really worrying considering that in article 54 of the policy of the Law of the Republic of Indonesia No. 35 of 2009 concerning Narcotics, it is stated that victims of abuse and addicts of narcotics have an obligation to attend medical rehabilitation services or social rehabilitation services (President of the republic of Indonesia 2009). As also explained in the research by Mamangkey et al. rehabilitation arrangements for narcotics abusers is one of the goals listed in the Narcotics Law as an effort to protect citizens and build the nation (Jesicha Yenny Susanty Mamangkey, Prasetyo, and Yudianto 2022). As mentioned in the research by Nugroho et al, the purpose of the Narcotics Law is to differentiate between abusers and dealers (Nugroho et al. 2021).

The paradox of the lack of utilization of rehabilitation services with the obligation to obtain services for narcotics abusers emphasizes the need for social resilience in the form of creative and innovative village or urban communities that are able to respond to the endless problem of narcotics abuse. Robert Ali and Matthew Stevens, say that it is time for communities and governments to shift to evidence-based rehabilitation systems that are culturally adapted from voluntary community-based interventions that are cheaper, more effective and rights-based (Ali and Stevens 2022).

This alarming situation has prompted BNN to initiate the formation of 306 independent organizational units known as Community-Based Intervention (IBM) units in villages and sub-districts in 2020. Community-Based Intervention is a short cut in the field of rehabilitation through simple low-threshold interventions, designed by the community to provide rehabilitation services to narcotics abusers (Deputy for Rehabilitation 2021). However, based on the results of the assessment of 306 IBMs, the number of IBMs that have provided optimal service (Prime) in 2022 is only 26. There are still many IBMs that have not yet reached the best phase, namely a total of 280 IBMs. This shows that there are still many IBMs that have not been able to provide all full and independent services to clients (Directorate of Strengthening Community Component Rehabilitation Institutions 2022).

Thus, it is feared that IBM has not been effective enough in helping people to reduce the prevalence of narcotics abusers in Indonesia by providing rehabilitation services that are more easily accessible. Based on the reasons above, the author wants to conduct research by evaluating the implementation of this IBM program policy, through system analysis on one of the IBM units that has not been able to provide optimal service. Thus the results of the analysis can be used to develop strategies for optimizing and improving the implementation of future IBM programs so that they are more effective.

The research will be carried out in the Jakarta area by taking the IBM Siaga case study in Kebon Manggis Village, Matraman District, East Jakarta. The reason for selecting the research location was that based on data, there are at least 117 drug-prone areas in Jakarta including the Kebon Manggis Village (National Narcotics Board of The Republic of Indonesia 2020). Based on data on drug problems in Indonesia for 2020, the number of drug abusers in Jakarta has reached 600,000 people. This means that more than 5% of Jakarta's populations, out of a total of 10.4 million Jakarta residents, have used drugs. This figure is very high when compared to the national prevalence of narcotics abusers in 2017, which was 1.77%. Another reason is that in

2022, out of a total of 10 IBMs in the Jakarta area, there will be 4 IBMs without clients. Therefore, the author wants to get an overview of the obstacles to IBM's implementation in the Jakarta area so that in the future, the program implementation will be more optimal.

Previous research has found that: 1) Even though IBM has been running well, it needs to increase Recovery Agent (RA) capacity in order to be able to provide more optimal services, as well as funding from collaboration with various stakeholders (Dicky Pelupessy and Rangga Radityaputra, M.Psi., M.S.W. 2021); 2) In order to enhance IBM implementation in Lingayen Municipality Philippines, a holistic approach that integrates physical, mental and spiritual models is required in the reintegration of surrendered clients. In addition, the support and involvement of the family and community is also needed in accelerating the client's recovery (Pescador 2018); 3) IBM is proven to reduce relapse rates. Social support is needed from the government and social service organizations in promoting the program. The role of the family is very important in the success of the program to rehabilitate clients, so IBM administrators need to involve the family in becoming a client support system with a CBT approach (Lin and Zhou 2020); 4) Community-based Addiction Rehabilitation Electronic Systems (CAREs) can increase the effectiveness and efficiency of IBM (Xu et al. 2021); 5) One of the IBMs in West Java can be categorized as the Prime phase because it has better support compared to the IBM categorized as the Developing phase in terms of the quality of the Village Head, BNN Province and RA as well as financial support from the village (Surtikanthi et al. 2023).

Thus, based on previous research, there are several reasons why IBM's services do not run optimally, such as lack of client awareness because they do not have support from their families and other support systems. In addition, in order to become Prime stage, support from the Village Head, BNN Province or City and RA is needed. The author will examine more deeply whether these constraints are also found in IBM Siaga which will be the site of research so that in the future a better optimization strategy for IBM-related policies can also be found which can also be implemented by other IBM units throughout Indonesia.

2. Method

This study uses qualitative methods, with descriptive analysis techniques. The theory used is the theory of policy analysis and the theory of the health service system with a formal evaluation approach. Evaluation of the implementation of this service will be measured by a quality evaluation approach with system theory (Donabedian 2003), which consists of structure, process and output standards. The structure includes the infrastructure of physical equipment and supplies, management and organization, financial resources and management, personnel and other resources at the IBM facility. While the process includes activities and services performed at IBM. Outputs include the final results of activities which can be seen from the number of clients who undergo service interventions to IBM's continued development as well as the number of people involved in IBM activities.

Dunn in his Introduction to Public Policy Analysis (Dunn 1998) says that, there are at least three approaches to policy evaluation, namely quasi-evaluation, formal and theoretical decisions. In this study, the writer will use a formal evaluation with a descriptive method. This will produce reliable and valid information related to the results of policies that have been implemented and are still running. Retrospective process evaluation is a variation of the formal evaluation used in this study. By using a variation of retrospective process evaluation, information will be obtained regarding opportunities and strengths, as well as problems and obstacles that exist in the program policies that have been implemented so that later it will be possible to determine what the best optimization strategy can be implemented.

The data used in this research are primary data and secondary data. Primary data was obtained based on FGDs and in-depth interviews. Meanwhile, secondary data was obtained through document analysis, both IBM reports and other literatures. The research informants are as follows.

Table 1. Research Informants

Informants	As Representatives	Quantity	Interview Methods
Lead Recovery Agent of IBM Siaga	IBM Service Providers	1	Deep Interview
Member Recovery Agent of IBM Siaga	IBM Service Providers	1	Deep Interview
Facilitator of BNN East Jakarta City	IBM Service Providers	1	Deep Interview
Client of IBM Siaga	Client of IBM	4	Focus Group Discussion (FGD)
Village Head and Secretary Village Head of Kebon Manggis	Regional Head	2	Deep Interview

After the data is collected, the data is processed and analysed in order to get the final answer regarding the problem studied. Testing the validity of the data is done through source triangulation and method triangulation. Source triangulation is carried out by obtaining information, facts, and data from different sources or informants. While triangulation data was collected from FGD, in-depth interviews and secondary data analysis. This research was conducted from April to June 2023 offline and online at the IBM Siaga unit, Kebon Manggis Village, Matraman District, East Jakarta.

3. Results and Discussions

Based on the results of data analysis, data obtained from retrospective process evaluation results are summarized in the following table:

Table 2. Retrospective Process Evaluation

Evaluation	**Result of IBM Siaga**
Structure/Input Aspects	
1. *Human Resources* IBM implementers already consist of human resources: 1) Village Head 2) Recovery Agent (RA) 3) BNN of East Jakarta City	The implementation of IBM already involves: 1) Village Head who assists in: a. open the access 2) The Recovery Agent consists of FKDM members 3) BNN of East Jakarta City is only involved in: a. Components of IBM activities with outreach, b. IBM services component with assistance for training and evaluation of client progress with WHOQoL and Urica
2. *Facilities and Infrastructure*	IBM Siaga does not yet have specific infrastructure for the implementation of IBM activities and services
3. *Funding*	The 2022 budget can only be obtained from BNN, while for 2023 IBM has no activities
4. *Program Plan*	Program planning has been made with a timeline per month, but the division of RA tasks is not yet clear
Process Aspects	
5. *Program Implementation*	1) Socialization → carried out formally with official meetings with BNN of

IBM activities consist of: 1) Socialization 2) Mapping 3) Outreach	East Jakarta City, with IBM material, as well as informally by RA itself; 2) Mapping → RA already knows the location of vulnerable points, especially in the Berland region; 3) Outreach → carried out by the RA to 10 clients, except for clients with severe cases, carried out with BNN East Jakarta City
6. *Implementation of Intervention Services* The process of implementing Mandatory Intervention services consisting of: a) Communication, Information and Education (KIE) b) Life Skills c) Self-Visit And if there is a process for implementing the selected service	1) Implementation of Compulsory Intervention services that have been carried out in the form of KIE, Life Skills and self-visits have been given to 10 clients 2) Implementation of selected intervention services in the form of relapse prevention has been provided to 10 clients
7. *Implementation of Advanced Development* The process of implementing further coaching consisting of: a) Monitoring b) Assistance for recovery	Advanced development in the form of monitoring and assistance has been carried out by BNN of East Jakarta City and RA, but in evaluating the client's development no urine test was carried out because the client refused
Output Aspects	
8. *Number of Clients*	The target client for 2022 is 10 people, while the client's achievements are also 10 people.
9. *Evaluation of client development*	There is an increase in client development after attending IBM services to be more productive, but it cannot be proven that the client stops using narcotics because the client refuses to get a urine test

3.1. Structure/Input Aspects

According to Donabedian, structure or input is the first approach to evaluating the quality of health services which is input from an organization consisting of physical facilities and equipment, organization and management, finance, human resources and other resources in health facilities (Donabedian 2003).

Based on the analysis of the results of interviews, observations and reports, the structural aspects of IBM Siaga are as follows:

3.1.1 Human Resources

a) Village Head Role in IBM:
   The Kebon Manggis Village Head has not been able to provide any funding assistance in 2022 to 2023 for IBM Siaga activities and services. Apart from that, the IBM Siaga Village Head has not provided any room to assist in the implementation of IBM services, only when IBM needs a room; they can borrow a room in the village. The Kebon Manggis Village Head plays a role in selecting members of the Recovery Agent (RA) who are members of the Community Early Awareness Forum (FKDM).
b) Recovery Agency Member
   Based on UNODC's community-based treatment theory, rehabilitation with IBM is characterized by the level of community participation both in planning and implementation. Community-based rehabilitation should empower local communities to initiate action, taking ownership of the processes and outcomes of

each rehabilitation activity (UNODC 2016). Based on the results of interviews and documentation studies from the SK issued by the Kebun Manggis Village Head (SK No: 79 of 2022), all of the core team consisting of IBM Siaga are FKDM members. While it's supporting members include Community Guidance Police (Binmaspol) and Village Superintendent (Babinsa). Based on the IBM rehabilitation implementation guidelines, it is recommended to run the IBM program involving various elements of the community so that it can be more useful.

c) BNN of City involvement

BNN of City actually does not have to be involved in all IBM services except in measuring the evaluation of client progress, client recovery assistance services and the final termination of client services. In addition, BNN of City only needs to monitor the course of IBM activities and services (Deputy for Rehabilitation 2021). Based on the results of data analysis, BNN of East Jakarta City is only involved in a number of IBM activities and services such as socialization, mentoring and evaluation of client development. To evaluate the client's progress, only WHOQoL and Urica were conducted at IBM Siaga, while a urine test was not carried out because the client refused to get a urine test. BNN of East Jakarta City has also not been successful in assisting in developing work networks.

3.1.2 Facilities and Infrastructure

As previously mentioned, Kebon Manggis Village has not provided a special room for the implementation of IBM Siaga services. This was stated by 3 informants who provided IBM services, as an example of this quote: "*Nothing, just a place. Village meeting hall. There is no infrastructure. At least if the head of the village gives training and then pays it back home, it might be even better*." (Interview with RA of IBM Siaga 2, May 14, 2023).

3.1.3 Funding

In terms of operational support, from 2022 to 2023 there is no funding budget for IBM Siaga, but the village administration often helps in facilitating snacks at meetings. This was stated by an informant from the BNN of East Jakarta City and RA of IBM Siaga as an example of an interview quote as follows: "*Not yet, but like this, for example, there are activities that they can join together from the sub-district. And sometimes it's like this, the Village Head is good too, Mr. Fajar is good. For example, 'we, sir, have activities until noon right, lunch'. 'OK, I'll take the coffee' for example*" (Interview with BNN City Officer, May 8, 2023).

3.1.4 Program Plan

IBM Siaga has made plans at the beginning of the year with BNN of East Jakarta City with detailed timelines per week. However, in practice there is no clear division of tasks between RAs, both in decrees and in day-to-day implementation.

Analysis of the input aspects of IBM Siaga shows that there are obstacles due to a lack of service operational support both in terms of finance and service facilities from the village administration and CSR. This is the same as Fitri and Yusran's research where one of the factors that can become an obstacle in implementing rehabilitation at the BNN of West Sumatra Province is the lack of operational support resources (Fitri and Yusran 2020).

In addition, according to research (Dicky Pelupessy and Rangga Radityaputra, M.Psi., M.S.W. 2021) and (Surtikanthi et al. 2023), to increase IBM's effectiveness requires operational support from various relevant stakeholders. The results of this study are the same as the results of this study, where IBM Siaga in order to become IBM in the Prime category, it is also necessary to obtain financial support to support operational activities and services other than BNN. Thus, good relations between IBM, BNN of East Jakarta City and local regional managers and surrounding companies need to be well established.

However, there is an interesting opinion based on the results of an interview with the secretary of the Kebon Manggis Village Head regarding operational support for IBM Siaga. According to the secretary, for

the Kebon Manggis area, even if IBM's activities are supported by the budget this year, it will also not be effective, but will only increase the number of abusers in this area. This happens because the abuser will be protected under IBM client status so as not to be prosecuted by law enforcement and continue to use narcotics. The following is an excerpt from the interview: "*This is just the point, even if rehabilitation is carried out in this environment, it will never be effective, it will increase… It will increase and guarantee them to commit drug crimes… It's safe, because when they were arrested by the police, they protected me that I had cooperated with BNN that I was in rehab. Picked up by BNN, right? No legal process. Not effective. In my opinion, the effective ones are like the Philippines, shoot..dor*" (Interview with the Kebon Manggis' Village Head Secretary, June 16, 2023).

This statement describes the morality of the people of Kebon Manggis who have poor legal awareness. As also stated by (Abimanyu 2019), narcotics have threatened the socio-cultural aspects, causing moral decline. As a result of using narcotics, a person's behavior can change and justify any means to get narcotics. This change gave rise to the phenomenon of the narcotics village, including this Berland village. In the absence of legal awareness in the area of Kampung Berland and its surroundings, the social resilience of the community will decrease (Deputy for Community Empowerment 2019).

3.2. Process Aspects

According to Donabedian, every activity and interaction carried out by health workers in a professional manner with clients or patients and their families is called a process. Evaluation of the process is an evaluation of doctors and health professionals in managing patients/clients (Donabedian 2003).

The IBM process begins with the execution of an IBM Activity which consists of:

1) Socialization

The socialization activity aims to introduce the IBM program to the public (Deputy for Rehabilitation 2021). Socialization at IBM Siaga has been carried out formally together with BNN of East Jakarta City where the participants consist of relevant stakeholders and the surrounding community. Apart from that, there is also informal outreach which is carried out by RAs themselves.

2) Mapping

IBM's rehabilitation implementation guidelines state that, the purpose of mapping is to get an overview and information regarding field situations such as demographic conditions and the presence of narcotics abuse (Deputy for Rehabilitation 2021). For IBM Siaga, 5 informants said that RA already knew the vulnerable locations, especially in the Berland area, namely neighbourhood 3. However, all neighbourhoods in the Kebon Manggis sub-district (neighbourhood 1 to neighbourhood 4) were also vulnerable locations. The following is an example of an interview excerpt to the RA: "*There are not many points here, they are not that vulnerable here. The most this is in Berland*" (Interview with RA of IBM Siaga 1, May 14, 2023). "*Oh, don't go to neighbourhood 1, neighbourhood 3... If you want to see the transactions in neighbourhood 3... Also, there are some residents. But what is the market there... Market hehe market, market. Really a gathering market. But yes, there are those who come in pockets like that. I saw it yesterday*" (Interview with the Kebon Manggis Village Head, June 16, 2023).

3) Outreach

The IBM rehabilitation implementation guidelines state that the purpose of outreach is to identify the presence of narcotics abusers and approach them, and then encourage them to take advantage of IBM's services (Deputy for Rehabilitation 2021). RA outreach on IBM Siaga has been carried out personally to 10 clients who all underwent the IBM program. Meanwhile, for outreach clients in the heavy category, RA receives guidance with BNN of East Jakarta City.

Then the IBM process is continued with the implementation of Mandatory Intervention Services consisting of:

1) KIE

IBM's rehabilitation implementation guidelines state that KIE includes providing information related to basic knowledge of addiction and motivation to clients (Deputy for Rehabilitation 2021). For IBM Siaga, KIE apart from being given by BNN of East Jakarta City, it is also given by RA when visiting clients.

2) Life Skills

The IBM rehabilitation implementation guidelines explain that life skills are skills given to clients to help clients live life and overcome their life problems (Deputy for Rehabilitation 2021). Putri and Nora in their research said that clients with narcotics abuse can avoid the desire to relapse through diversion with positive, creative and constructive productive activities (Putri and Nora 2022). IBM Siaga life skills are provided with training in growing grapes, from the planting process to marketing the grapes that are ready for sale. "*Yes, planting trees like grapes. How to plant it. Farming. Heehm, how to plant it from planting the seed to reaping it*" (FGD with Client of IBM Siaga 1, May 14, 2023).

3) Self-Visit

What is meant by self-visits are meeting activities with clients and or their families carried out by the RA in order to build good communication and trust relationships (Deputy for Rehabilitation 2021). However, the client's family from IBM Siaga has not been involved in the IBM process except for clients with severe categories who need to be referred.

4) Implementation of optional services consisting of Support Group Meetings / Relapse Prevention / Referral Facilitation

Selective intervention services have been provided to 10 clients at IBM Siaga in the form of life skills through relapse prevention and grape growing training. There were also clients who were almost referred to because they were disturbing residents, but the family refused. Then the IBM process is continued with the implementation of Advanced Coaching which consists of:

- Monitoring

  What is meant by monitoring are activities carried out by the RA to observe and provide recovery support to clients, either directly or indirectly. This is done to help clients maintain their recovery (Deputy for Rehabilitation 2021). For IBM Siaga, RA only provides monitoring to 10 clients during the program.

- Recovery assistance

  According to the IBM rehabilitation implementation guidelines, a process of social relations between rehabilitation officers and clients by identifying further development needs, solving problems and obtaining access to facilities as needed in the framework of the reintegration process in the community is called recovery assistance (Deputy for Rehabilitation 2021). BNN of East Jakarta City has evaluated the progress of phase II clients to 10 clients, but all clients did not take a urine test because they refused.

Based on the theory of social resilience according to Markus Keck and Patrick Sakdapolrak, what is meant by the dimension of coping capacity is the ability of the community to overcome all types of misfortune by using the resources available in the environment (Keck and Sakdapolrak 2013). The coping capacity at IBM Siaga has actually been seen by the presence of people who want to be involved as RAs within IBM. Recovery Agent of IBM Siaga has endeavored to be active in outreach, mapping and outreach activities to clients suspected of using narcotics. According to research of Rahmawati, this has also shown examples of the adaptive capacity of the community (Rahmawati 2021).

However, based on interviews with RA, clients, Village Head and Secretary of Village Head at IBM Siaga, the community around Kebon Manggis has actually started to become apathetic towards narcotics crimes in this area. They are already reluctant to report to the authorities if they see any circulation of

narcotics around. This happened because of the fear of urban terror, as in the following interview excerpt: "*So in the end the Indonesian National Army (TNI) was terrorized, the motorbike was punctured, 2 holes. Yes, the citizens terrorized. So that place is vulnerable, that's why 3 of my FKDM members in Berland risked their lives, because for example my member, neighborhood representative, Civil Service Police Unit, came by his house early in the morning just because the neighborhood representative's house was visited. That evening the house was visited by the dealers asking why the police had come here so early in the morning. If you ask that, it's terror like that*" (Interview with RA of IBM Siaga 1, May 13, 2023). In addition, there is also an opinion that if the existing ports in the Kebon Manggis environment has a backing because it is very easy to go in and out of jail. This causes residents to be reluctant to report. "We, IBM ourselves, also think so, because there's no guarantee. Many people from the city are released. That also happened in our village a lot. In out in out in out. So we also think that it's normal, it's just their game. That's real proof. In out in out in out. Very fast" (Interview with RA of IBM Siaga 2, May 13, 2023).

According to Abimanyu, the emergence of apathy or indifference from the people in the Kebon Manggis region towards narcotics abuse is the impact of narcotics crimes on the joints of national security from a political aspect (Abimanyu 2019). Meanwhile, the impact on the defense and security aspects is illustrated by the public's suspicion of law enforcement officers in the vicinity who accept bribes or back up the dealer.

3.3. Output Aspects

The end result of the activities and actions provided by professional health workers to patients/clients is called output. According to Donabedian, this output can be measured through post-operative medical audits, case studies, medical record reviews, patient/client complaints and informed consent (Donabedian 2003). For IBM programs, outcomes can be measured by the increase in results from evaluations of client progress and the number of clients participating in IBM activities and services. Evaluation of client development is measured through Urica, WHOQoL and urine tests at the beginning of admission to the IBM program (phase I) and at the end of IBM program (phase II) (Deputy for Rehabilitation 2021).

The target and achievement of IBM Siaga clients in 2022 is 10 people. Based on the interviews, there was progress in the client following IBM as well as an increase in scores on WHOQoL and Urica. However, the results of evaluating the development of phase II clients cannot be proven because all clients refuse to be given a urine test. Thus, it cannot be ascertained that the client is not using narcotics again, because WHOQoL and Urica cannot describe the examination of narcotics in the client's body. WHOQoL is used to measure the client's quality of life, while Urica is used to measure the client's readiness to change.

In their research, Ali and Steven said that in order to assist the client's transition process so that they can return to society, on-going recovery support is needed even if the client has completed the program (Ali and Stevens 2022). IBM Siaga needs to continually monitor clients not to reuse narcotics. In addition, urine tests also need to be carried out on all clients without exception at the beginning of the service and at the end of the service to ensure that the client has not used narcotics again and is completely recovered.

Based on the theory of social resilience according to Markus Keck and Patrick Sakdapolrak, if it continues optimally, the IBM program can actually help narcotics abusers to develop transformative capacities (Keck and Sakdapolrak 2013). Based on interviews with clients, guidance and training provided while clients are undergoing the IBM program really helps the client's recovery process to be more focused on carrying out various positive activities that are useful for finding work. Clients from IBM Siaga also said that they were greatly helped by the education related to the dangers of narcotics provided during the IBM program because it was given a lot of detail, as well as training related to growing and marketing grapes which could also help them become interested in entrepreneurship. "*There is, so you know that there are levels of drugs*" (FGD with Client of IBM Siaga 4, May 13, 2023). "*Then it's as if we were taught crafts too,*

ma'am, like making a business, ma'am. How do you market grapes like that…. Heehm. The problem is, Ma'am, it seems like this is really explained from here and there" (FGD with Client of IBM Siaga 1, May 13, 2023).

Thus it can be concluded that the results of evaluating the implementation of policies in IBM Siaga are not optimal. This can be concluded because the client's success cannot be measured by a urine test and the client also cannot be proven productive because he is still not working. Even so, the client has experienced an increase in WHOQoL and Urica scores. One of the strong reasons why IBM's policy is not optimal in the Kebon Manggis sub-district is that the Kebon Manggis environment still has a lot of narcotics circulation. This causes clients to continue to be exposed to narcotics in their environment. In addition, the community, RA, Village Head and BNN of East Jakarta City are also afraid of dealers who often threaten if there are activities related to handling narcotics.

Based on the notion of public policy according to Thomas R. Dye, public policy is any government choice made to address problems in society. This choice includes the choice not to act (Abdoellah and Rusfiana 2016). Based on this understanding, the decision made by the Kebon Manggis Village Head not to be too bold in carrying out narcotics countermeasures due to threats from the dealer is also the village's policy. However, this decision cannot solve the narcotics problem in the Kebon Manggis area, but it can make the area safer from criminal acts of violence against the community.

Based on these field findings, the optimization strategy that can be carried out for IBM Siaga is with BNN of East Jakarta City to coordinate cooperation with eradication, the police and the TNI to eradicate airports first and carry out IBM service activities outside the Kebon Manggis environment to make it safer.

4. Conclusions

Based on an analysis of the results from the interviews, observations and documentation studies, it can be concluded that from the input aspects of IBM Siaga, the Village Head has not been able to provide budget operational assistance and special infrastructure facilities for IBM services such as the IBM secretariat. Since 2023, the BNN of East Jakarta City has also not coordinated with the Village Head and RA IBM Siaga regarding the IBM program. However in 2022 IBM Siaga has provided services to 10 clients. However, the success of the program at IBM Siaga can only be measured by comparing WHOQoL and Urica results because urine tests are not performed on clients. Thus, it can be seen that coping capacity in community social resilience has been built in IBM Siaga. In Kebon Manggis, the community has tried to report narcotics crimes. However, adaptive and transformative capacities have not been seen in IBM Siaga because there has been no successful collaboration in tackling the narcotics problem and there have been no assets in the IBM environment that have been successfully optimized for IBM activities.

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