Social Determinants of Drug Abuse Among Youth in Selangor: A Case Study in Serendah’s Rehabilitation Centre

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Abstract

Drug abuse is considered one of the social issues in Malaysia. Despite various actions and initiatives taken by the Malaysian government, according to the data from MAMPU, the number of people abusing drugs keeps on increasing each year, especially among youth. Thus, this paper aims to identify the social determinants influencing drug abuse among youth in Selangor. This study found that the number of youths in Selangor involved in drug abuse is higher than other states in Malaysia. One hundred forty-three respondents participated in this quantitative study. The data was obtained by distributing questionnaires to youth aged between 19 to 39 years old, receiving treatment at the Serendah’s rehabilitation centre when this study was being conducted. The age range was chosen based on youth defined in the Youth Societies and Youth Development Act 2007. The findings found that three factors contribute to youth involvement in drug abuse: peer influence, family environment, and neighbourhood influence. This study employed the Statistical Package for Social Sciences (SPSS) to analyse the data. This study provides several recommendations and a conclusion based on the outcomes.

Keywords: Drug abuse; Family environment; Peer influence; Neighbourhood influence

INTRODUCTION

Drug abuse, also known as substance abuse, is a pattern in using drugs in which an individual uses the substance in a harmful method or harmful amount to themselves or others (Chan, Sidhu, Lim, & Wee, 2016). In Malaysia, the drug is well known as the number one enemy, and the government tried to fight it for a long time. It is not an easy task to tackle the drug abuse problem despite the government’s numerous efforts. The problem remains critical, especially among youth, as the number of drug abuse among them is higher than other age groups in Malaysia.

In Malaysia, drug abuse among youth is a highly discussed topic as the number of youths involved in drugs keeps increasing. Ngamije and Yadufashije (2016) strongly believed that the youth start committing drug abuse during their adolescent years, especially those who never go to school or school dropouts. As they grow old, the urge to take drugs increases. It might be due to their lack of knowledge concerning drugs and the consequences since they are exposed and educated about why drugs are dangerous.
and most importantly, what drug is (Ngamije & Yadufashije, 2016). It is difficult for them to prevent themselves from taking drugs due to addiction. It is supported by Saleh (2012), stating that when individuals involved in drugs, they start to depend on drugs physically and psychologically in their everyday life, resulting in failing to control themselves, due to their addiction. It will be difficult for them to control and stop their addiction and do anything to satisfy their addiction, including crimes, such as robbery.

The question is, what exactly influences youth to be involved in drug abuse. It is indeed important to investigate and understand the root cause of this problem to come out with the best solution in tackling the problem, especially when the problem is concerning the country’s future leaders. According to Asbah and Zainal (2016), if youth continue taking drugs, it will lead to health and physical well-being problems. Consequently, they will become a threat to national development and security. Concerning the health problem, they indicated that youth involved in drug abuse would have a mental illness, cancer, functional failure, cancer, and other kinds of diseases due to the toxicity in the drug. Besides, in terms of psychological health, they stated that youth abusing drugs would three times most likely face depression and might have to go through post-traumatic stress disorder (PTSD).

In terms of physical well-being, if youth continuously engage in drug abuse, their physical appearance will change drastically. They will grow thin, lethargic, and weak, and seem high (Asbah & Zainal, 2016). They will also feel faint, dizzy, and act violently and feel high, in pain and restless. They will be battling with death since they are exposed to various diseases, such as meningitis, heart disease, Hepatitis B, C and D, muscle atrophy, AIDS, kidney damage, and will most probably end up being paralysed (Asbah & Zainal, 2016). It shows how bad youth will be affected by drugs if they don’t get treatment and if drug abuse among youth is not addressed accordingly. If the problem persists, we will be producing unhealthy youth who cannot give back to society and build a better nation.

Concerning national development and security, if the problem is not addressed accordingly, there will be a decline in labour and human resources. Their involvement in drug abuse causes them to lose interest in studying and tend to leave school earlier; resulting in difficulties to be employed and even losing interest in working (Asbah & Zainal, 2016). Consequently, we will not be able to produce quality labour force to develop the country. Asbah and Zainal (2016) also agreed that the country needs to bear
a high cost due to drug abuse. Thus, there is a strong need to provide rehabilitation and treatments for the addicts, organise prevention programme, and even bear costs from crimes. Besides, they also stated that the cost of maintaining law enforcement, such as expanding the workforce for prison departments, hospitals and others, will increase to fight drug abuse among youth. Other implications of drug abuse among youth are broken family relationship, tarnished family names, discipline problems, and academic failures.

This paper focuses on youth involving in drug addiction. According to Rozmi, Nor Azri, Fauziah, and Salina (2017), records indicate most youth involved in drug addiction aged between 19 to 39. Thus, this study aims to examine factors influencing youth to involve in drug abuse in Selangor. There are three rehabilitation centres located in Selangor, namely in Rawang, Serendah, and Dengkil. However, due to the Ministry of Home Affairs policy and regulation, specifically under the National Anti-Drug Agency (NADA) administration, this study was only allowed to be conducted at one centre. Thus, Serendah’s rehabilitation centre was chosen as a case study. All data were obtained from respondents currently receiving treatment from the rehabilitation centre.

PROBLEM STATEMENT

Drug abuse in Malaysia is indeed alarming. According to the United Nations Drug Control Programme (UNDCP), Malaysia is in the fifth rank in drug addicts among the Southeast Asian nations; approximately 1.2 million drug addicts from Malaysia’s total population of 28.3 million of Malaysia’s population (Asbah & Zainal, 2016). It is worth noted that, in 2016, 158 Nigerian were waiting for execution due to drug offences in Indonesia, China, Singapore, and Malaysia. Some of them were reported to be university students. They were colluding with drug traders to sabotage the visa system to enter Indonesia, Malaysia, Thailand or other countries on drug trafficking routes (UNODC, 2018). Thus, it indicates how easy for people, especially youth, to get drug supplies.

According to the former Sarawak Chief Minister, Tan Sri Adenan Satem (2016), today’s youth is the country’s valuable assets and an essential member of society. They will decide where the country will be in the next five years and how it will be in the future. It cannot be denied that youth is a period filled with challenges (Fauziah et al., 2018). During this period, youth is looking for their identity and creating the future they
want. It is a time when most of the youth are confused about what they want or need to do with their life to get what they want. However, the increasing number of youths involving in drug addiction is alarming to many parties as the country’s state would be in jeopardy. NADA is one of the government agencies introduced under the Ministry of Home Affairs to tackle drugs in Malaysia. One of the agency’s efforts that reduced the number of drug addicts was the “Perangi Dadah Habis-Habisan” programme introduced in 2016. NADA focused on 178 areas marked as high risks, narrowing down to 14 main areas around the country based on NADA’s specific criteria. After the programme, two of the areas were marked as clean and another two still as high risks. The remaining ten areas are still under the programme (NADA, 2019).

However, despite NADA’s effort, the number of youths involved in drug addiction is higher than other age groups. According to age groups, Table 1 shows the number of drug addicts caught once or more for each year from 2015 to 2019. The statistics in the table indicate the number of youths involved in drug abuse is higher than other age groups. The statistics lead to a big question concerning factors influencing drug abuse among youth, which is the focus of this paper.

<table>
<thead>
<tr>
<th>Year</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescence (13-18 years old)</td>
<td>713</td>
<td>810</td>
<td>683</td>
<td>541</td>
<td>431</td>
</tr>
<tr>
<td>Youth (19-39 years old)</td>
<td>18,799</td>
<td>20,335</td>
<td>15,812</td>
<td>15,131</td>
<td>15,033</td>
</tr>
<tr>
<td>Adult (40 years and above)</td>
<td>6,078</td>
<td>6,317</td>
<td>4,859</td>
<td>4,551</td>
<td>4,693</td>
</tr>
</tbody>
</table>

Sources: National Anti-Drug Agency (2020)

The respondents in this study were youth currently receiving treatment in the Serendah’s rehabilitation centre. Youth refers to the individual in the age group of 19-39 years old (Rozmi, Nor Azri, Fauziah, & Salina, 2017). Nevertheless, this study employed the Youth Societies and Youth Development Act 2007 definition in which youth is not less than 15 years and not more than 40 years. Malaysia has been using this act as the principal law governing youth’s activities and development (Asmah, Siti, Rozita, Zainal, Alias, & Safiah, 2016). However, upon the study completion, amendments were made to this act and passed by the Dewan Rakyat that youth’s age has been reduced from 40 to 30 years old (Arfa & Esther, 2019).

Concerning the centre selection, this study opted for rehabilitation centres in Selangor because the number of youths currently receiving treatment in Selangor,
representing 1,702 drug addicts, was higher than other rehabilitation centres in Malaysia (MAMPU, 2016). There are three rehabilitation centres in Selangor located in Rawang, Serendah, and Dengkil. However, due to the Ministry of Home Affair’s rules and regulation, the data can only be collected from the Serendah’s rehabilitation centre. This study’s respondents were 143 male respondents, consisting of 140 Malay respondents and 3 Indian respondents aged between 19 to 39 years old currently receiving treatment in the rehabilitation centre. This study’s main objective is to identify the social determinants influencing youth to be involved in drug abuse. The followings are the sub-objectives of this study:

i. To ascertain the relationship between peer influence and drug abuse among youth in Selangor.

ii. To examine the relationship between family environment and drug abuse among youth in Selangor.

iii. To examine the relationship between neighbourhood influence and drug abuse among youth in Selangor.

iv. To explain the most influencing factor for youth to commit drug abuse in Selangor.

LITERATURE REVIEW

Drug Abuse: The Definition

In defining drug abuse, several terms are used to define the problem, including substance use, substance involvement, abuse, dependence, and addiction. It also refers to the dependence on or overindulging substances, such as drugs or illicit and/or over-the-counter and prescription medications (Chan et al., 2016). Drug addiction occurs when the drugs taken by an individual do not have any prescription by the doctors. The individual does not have any medication needs, or the individual takes drugs excessively than what the doctors have prescribed for him/her. It is an act of misuse or excessive use of illicit drugs.

Thus, drugs are not only harmful substances that are not authorised or approved by medical experts but can also be medicines that are easily obtained from the clinics and pharmacy. It is difficult to control or restrict these substances from being used in a harmful manner, especially those sold at the pharmacy since they are important for...
Most medicines are displayed on the shelves, and even if they can only be bought over-the-counter, the pharmacist has no idea the buyer’s real intention of using the medicine. Malaysia considers drug one of the most significant issues threatening society and considered its number one enemy (Norayu et al., 2014). The Malaysian government has made many efforts in combatting drug abuse. One of the efforts made was to introduce NADA. Despite the introduction of NADA, the number of drug addicts keeps increasing over time.

Substance abuse among young adults usually happens due to factors that are out of their control. These factors can be seen on personal, micro, and macro levels, making adolescents vulnerable to substance abuse. However, these factors vary among young adults, and not all young adults are equally vulnerable to substance abuse. These factors alone are not sufficient to influence youth to be involved in substance abuse, as reported by the UNODC (2018). The absence of a critical combination of the protection and presence of risk factors at a particular stage of their life increases drug abuse susceptibility. Substance abuse among young adults increases unemployment, physical health problems, dysfunctional social relationships, suicide tendencies, mental illnesses, and lower life expectancy (UNODC, 2018).

Drug addiction can be considered cancer spreading among the neighbourhood that slowly becomes severed from the early 1970s until now as there are no ways to overcome it as it becomes more and more dangerous (Salleh, 2012). According to Nordin and Masron (2016), the drug addiction problem in Malaysia started when foreigners came to the country to work in the mining sector and the estates. They took opium for entertainment and to relieve pain, such as diarrhoea and malaria. Thus, due to opium smuggling, in 1952, the Dangerous Drug Act 1952 was introduced (Nordin and Masron, 2016) to punish those possessing or taking opium.

In 1983, the Malaysian government declared the nation’s public number one enemy is drug abuse (Chan et al., 2016). The government believed that drugs could interfere with the nation’s harmony and stability and affect the young generation’s mind if no action is taken in combating it (Yusoff, 2015). In the late 1990s, the detention centre’s rehabilitation enforcement was the primary drug addiction treatment in Malaysia. However, due to the increase of post-detention relapse rate, the programmes’ success remains controversial (Norliza et al., 2014).
Peer Influence

Youth need peers to get opinion, motivation, sympathy, and love. The function of peers is to reduce the feeling of isolation youth face and empower them (Fauziah et al., 2018). To prevent risky behaviour development among youth, practitioners need to design an appropriate measure in understanding peer influence. It is supported by a study finding that individuals may not engage in risky activities when they have friends discouraging them (Loke and Mak, 2013). It shows that peer influence indeed plays a significant role in determining whether individuals will be involved in drug abuse. If their friends discourage them from taking drugs or involve in drug abuse, there are chances that they will not be involved in drugs and vice versa.

Youth typically will be involved in drugs due to their friends’ encouragement, and most of the time, they cannot say “no” to the encouragement. They feel that if they say “no” to their friends, their friends will not accept them and might be alone. Being accepted by friends is crucial to youth as they are thirsty for friendship and people who will be there and support them when they feel blue. Thus, to ensure that their friends accept them, they willingly do anything even if they have to do something dangerous and risky, such as getting involved in drug abuse. Therefore, by understanding the peer influence on youth in getting involved with drugs, there are chances that drug abuse among youth can be reduced and possibly be put to a stop. Social support from peers can help youth cope with stress and help them with autonomy development (Fauziah et al., 2018).

According to Nachiappan (2015), the main factor influencing youth to be involved in drug abuse is peer influence. Youth is a stage in which they are searching for their identity and the path for their future. Thus, their peers will easily influence them as they do not have any firm belief in what they want or what they use as a guide. When they do not have any firm belief to hold on, they are prone to commit something they see as fun but harmful. They will not bother about the negative impact of what they are about to do as they are more concerned about having fun and what their friends will think instead. Besides, peer influence is said to be associated with the youth surrounding. In the youth stage, friends are everything to them, and they prefer to spend more time with their friends. When their peers’ negative behaviour influences them, they will slowly get immune and indulge with the negative surrounding they created.
According to Chan et al. (2016), most youth engaged in drug abuse usually do their activities in groups. The excitement is more if they can join their friends to have “fun” and look after each other if there is any unanticipated event occurring while having “fun”. They believe that they should at least have someone who will help them out if overdose drugs harm them, such as foaming at the mouth. Chan et al. (2016) also indicated that they prefer to carry out their activities in groups because they believe drugs are more affordable when used in groups. It is consistent with Alia et al.’s (2018) findings, stating that their firm belief becomes wobbly when their friends invited them to participate in drug abuse activities. Their research indicated that 50% of the respondents admitted that they readily accepted their friends’ invitation to try drugs.

Family Environment

According to Sharma (2013), a family can affect and influence an individual’s well-being, behaviour, and development. A family’s function is to act as a model towards the youth’s behaviour and provide safety (Fauziah et al., 2018). As they say, everything starts at home. Parents or family members’ behaviours and attitudes may influence the way individuals carry themselves when they are not supervised or monitored by their family. Besides, when people get to know their family members involved with drugs, they may not be able to put up with society’s insults; thus, they decide to follow the family members’ footsteps and become drug addicts. It is because family are the people whom youth grow up with and close to them. As they grow, they will be observing how their family members live.

There are chances that youth get involved in drug abuse due to their family members’ history involving drugs. Family is important as they can be the role model for youth decision-making when they do not stay close with their family. The family dysfunction will lead to youth getting involved in problems as there is a relationship between youth’s behaviour and family conflicts and cohesion (Fauziah et al., 2018). It is supported by Ngamije and Yadufashije’s (2016) findings, stating that the role of family, especially parents, in protecting their children from the risk of involvement in drugs and promoting the adolescents’ health is being questioned.

According to Fauziah et al. (2013), most youth are involved in drug abuse due to their weak family bond, resulting in them having difficulties in facing pressures and hardship in life. They also stated that family members’ support is important as a healthy
family relationship helps prevent youth from getting involved in drug abuse. When the family relationship between family members is weak, there are chances that family conflicts to occur and lead family members getting involved in drug abuse. It is supported by Ngamije and Yadufashije (2016), stating that youth’s deviant behaviour can be prevented by facilitating communication through the parent-child relationship. They believed that with parents’ warmness and acceptance, the psychological distress and the problematic behaviour among youth could be reduced. Besides, parents offering emotional support while exercising control over their children may provide a conducive environment.

According to Anderberg and Dahlberg (2018), several studies showed that girls grow up in a more troubled family than boys. It results in girls having a higher degree of mental health problems and victimisation in their childhood environment than boys often experiencing violence during childhood. Most parents will be stricter with their daughters than their sons since parents believe that their sons can take care of themselves better than their daughters. When parents are too strict with their daughters, they will feel pressured; thus, they will turn to drugs to cope with their parents’ pressure.

Neighbourhood Influence

According to Ramli (2012), in his research entitled ‘The influence of psychosocial and the knowledge level on dangerous of drugs towards relapse among prisoners who abuse the drug in Malaysia’s prisons”, neighbourhood influence is the most influential variable impacting prisoners having a drug addiction problem. In this study, the researcher found that neighbourhood influence plays an important role for ex-drug addicts to continue abusing drugs or for the neighbourhood to accept them and give them a chance to start a new healthier life in the society. Positive neighbourhood influence is important as it provides social support for drug addicts to change and stop taking drugs. However, if the neighbourhood negatively influences the drug addicts, they will feel like they are no longer accepted once they have involved in drugs and will be prone to abuse drugs again. It is supported by Romzi et al. (2017). They stated that most individuals getting involved in drug abuse when they are young due to the pressure and suffering in their surroundings that they sometimes need drugs to control their behaviour.
According to Asbah and Zainal (2016), most youth are involved in drug abuse due to their low-income family. They stated that youth growing up in a small and uncomfortable house and living in a disadvantaged area later became victims of the circumstances. Due to their surroundings, they are associated with a lack of necessities, such as hygiene, education, nutrition opportunities, and parental supervision. They are more prone to spend more time with their surroundings to kill time and boredom. Some may resort to dangerous and criminal activities to get money as their circumstances hinder their employment opportunity. It may also lead to them getting involved in the drugs business. Some may also become drug suppliers and dealers, later influencing and encouraging their friends to try drugs to earn money to help their family and support their drug abuse lifestyle.

The community’s perception and people around them play important roles in influencing an individual to be involved in drug abuse. It was supported by NADA (2015), stating that people’s stigma and perception may be the reason why the individual involved in drug abuse. According to NADA, most of them believed eradicating drug users is the agency’s responsibility when it is everyone’s responsibility. Most people who know that drug users live among them refuse to be involved in the problem as they believe it is not their problem. Besides, NADA (2015) stated that drug abuser does not have any chances to recover, and there are no reasons to help them. Thus, youth will be more encouraged to be involved in drug abuse with this kind of perceptions and stigma. They know well that no one will stop them, and no one will bother about what they are doing.

METHODOLOGY

This research employed a quantitative approach using statistics or mathematical models to analyse the data and report the results. A questionnaire was used to gather the data. This research examined youth aged 19 to 39 years old. They were chosen for the case study because the number of drug addicts among youth is higher compared to other age groups.

The sample size was based on the number of respondents receiving treatment and rehabilitation in the Serendah’s rehabilitation centre that fits the criteria. Since the researchers were only allowed to gather data from one rehabilitation centre, 143 youth receiving treatment in the centre and fit with the criteria set have participated in this
study. Specifically, the respondents were 19 to 39 years old, currently receiving treatment in the rehabilitation centre.

Purposive sampling is the technique used to collect the data for this case study due to the number of cases involving drug addicts among youth and the respondents’ specific characteristics, namely Malaysian, aged 19 to 39 years old, and receiving treatment at the rehabilitation centre in Selangor.

FINDINGS AND DISCUSSION

In this case study, the actual data was collected to obtain responses from the 143 respondents currently receiving treatment in the Serendah’s C & C Rehab Centre or known as Serendah’s Cure & Care Rehab Centre. From 143 questionnaires, only 137 questionnaires were found to be clean with no error, missing values, and outliers.

Table 2 shows the analysed data of the respondent’s demographic. Based on the table, 137 respondents participating in the survey questionnaires aged 19 to 39 years old. Specifically, 24 respondents (17.5%) aged 19 to 23 years old, 27 respondents (19.7%) 24 to 28 years old, 36 respondents (26.3%) 29 to 33 years old, and 50 respondents (36.5%) 34 to 39 years old. Concerning the number of children, 45 respondents (32.8%) have 1 to 3 children, seven respondents (5.1%) have 4 to 6 children, and two respondents (1.5%) have more than six children. In contrast, more than half of the respondents, 83 respondents (60.6%) do not have any children. As for the highest education level, 39 respondents (28.5%) have UPSR as their highest education level, 32 respondents (23.4%) have PMR, 47 respondents (34.3%) have SPM, 15 respondents (10.9%) have a certificate, and 4 of the respondents (2.9%) have a diploma.

Among the 137 respondents, 89 respondents (64.9%) are single, 36 respondents (26.3%) are married, and 12 respondents (8.8%) are divorced. Concerning whom they live with before entering the rehabilitation centre, 85 respondents (62.0%) with their parents, nine respondents (6.6%) with their mother or their father only, four respondents (2.9%) with their relatives, and 25 respondents (18.2%) with their wife and children. Fourteen respondents (10.2%) indicate they live with others in which some live alone while some with their grandparents. Among 137 respondents, 17 respondents (12.4%) live in a condominium, 18 respondents (13.1%) live in flats, 22 respondents (16.1%)
live in a residential area, and 76 respondents (55.5%) live in a village. On the other hand, four respondents (2.9%) opt none of the choices given in which they either live in the alley or do not have any specific residential area.

Table 2: Respondents Profile

<table>
<thead>
<tr>
<th>Descriptive items</th>
<th>Category</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>19-23 years old</td>
<td>24</td>
<td>17.5</td>
</tr>
<tr>
<td></td>
<td>24-28 years old</td>
<td>27</td>
<td>19.7</td>
</tr>
<tr>
<td></td>
<td>29-33 years old</td>
<td>36</td>
<td>26.3</td>
</tr>
<tr>
<td></td>
<td>34-39 years old</td>
<td>50</td>
<td>36.5</td>
</tr>
<tr>
<td>Number of children</td>
<td>1-3</td>
<td>45</td>
<td>32.8</td>
</tr>
<tr>
<td></td>
<td>4-6</td>
<td>7</td>
<td>5.1</td>
</tr>
<tr>
<td></td>
<td>More than 6</td>
<td>2</td>
<td>1.5</td>
</tr>
<tr>
<td></td>
<td>None</td>
<td>83</td>
<td>60.6</td>
</tr>
<tr>
<td>Highest education level</td>
<td>UPSR</td>
<td>39</td>
<td>28.5</td>
</tr>
<tr>
<td></td>
<td>PMR</td>
<td>32</td>
<td>23.4</td>
</tr>
<tr>
<td></td>
<td>SPM</td>
<td>47</td>
<td>34.3</td>
</tr>
<tr>
<td></td>
<td>Certificate</td>
<td>15</td>
<td>10.9</td>
</tr>
<tr>
<td></td>
<td>Diploma</td>
<td>4</td>
<td>2.9</td>
</tr>
<tr>
<td>Marital status</td>
<td>Single</td>
<td>89</td>
<td>64.9</td>
</tr>
<tr>
<td></td>
<td>Married</td>
<td>36</td>
<td>26.3</td>
</tr>
<tr>
<td></td>
<td>Divorce</td>
<td>12</td>
<td>8.8</td>
</tr>
<tr>
<td>Living with</td>
<td>Parents</td>
<td>85</td>
<td>62.0</td>
</tr>
<tr>
<td></td>
<td>Mother or Father only</td>
<td>9</td>
<td>6.6</td>
</tr>
<tr>
<td></td>
<td>Relatives</td>
<td>4</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Wife and children</td>
<td>25</td>
<td>18.2</td>
</tr>
<tr>
<td></td>
<td>Others</td>
<td>14</td>
<td>10.2</td>
</tr>
<tr>
<td>Type of residential area</td>
<td>Condominium</td>
<td>17</td>
<td>12.4</td>
</tr>
<tr>
<td></td>
<td>Flats</td>
<td>18</td>
<td>13.1</td>
</tr>
<tr>
<td></td>
<td>Residential area</td>
<td>22</td>
<td>16.1</td>
</tr>
<tr>
<td></td>
<td>Village</td>
<td>76</td>
<td>55.5</td>
</tr>
<tr>
<td></td>
<td>None of the above</td>
<td>4</td>
<td>2.9</td>
</tr>
</tbody>
</table>

Goodness of Measurement and Testing Parametric Assumptions

In ensuring the goodness of measurement is achieved, exploratory factor analysis (EFA) and reliability test were carried out. Data not meeting the cut-off value for both EFA and Cronbach’s alpha were deleted. Simultaneously, parametric assumption testing and normality test were also conducted to ensure data accuracy.
i) To ascertain the relationship between peer influence and drug abuse among youth in Selangor.

The first research objective is to ascertain the relationship between peer influence and drug abuse among youth in Selangor. The following hypotheses were developed to execute the objective.

H0: There is no significant relationship between peer influence and drug abuse among youth in Selangor.

H1: There is a significant relationship between peer influence and drug abuse among youth in Selangor.

Table 3 shows the correlation between peer influence and drug abuse among youth in Selangor. The correlation between peer influence and drug abuse among youth in Selangor is statistically positive and significant but with the small or weak relationship (r = -0.177, p < 0.05). Thus, there is a negative relationship between peer influence and drug abuse among youth.

Table 3: The Correlation for Peer Influence

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. deviation</th>
<th>p-value (sig)</th>
<th>N</th>
<th>Pearson Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer Influence</td>
<td>24.577</td>
<td>3.278</td>
<td>0.039</td>
<td>137</td>
<td>-0.177</td>
</tr>
</tbody>
</table>

ii) To examine the relationship between family environment and drug abuse among youth in Selangor.

This case study’s second objective is to examine the relationship between family environment and drug abuse among youth in Selangor. The hypotheses are as follows:

H0: There is no significant relationship between family environment and drug abuse among youth in Selangor.

H1: There is a significant relationship between family environment and drug abuse among youth in Selangor.
Based on Table 4, there is a positive relationship between family environment and drug abuse among youth in Selangor ($r = 0.321$, $p < 0.05$). Thus, the correlation between family environment and drug abuse among youth in Selangor is statistically positive and significant with a medium relationship.

Table 4: The Correlation for Family Environment

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. deviation</th>
<th>$p$-value (sig)</th>
<th>N</th>
<th>Pearson Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Environment</td>
<td>13.212</td>
<td>6.094</td>
<td>0.000</td>
<td>137</td>
<td>0.321</td>
</tr>
</tbody>
</table>

iii) To examine the relationship between neighbourhood influence and drug abuse among youth in Selangor.

The third objective of this case study is to examine the relationship between neighbourhood influence and drug abuse among youth in Selangor. The hypotheses are as follows:

H0: There is no significant relationship between neighbourhood influence and drug abuse among youth in Selangor.

H1: There is a significant relationship between neighbourhood influence and drug abuse among youth in Selangor.

Based on Table 5, there is a positive relationship between neighbourhood influence and drug abuse among youth in Selangor ($r = 0.452$, $p < 0.05$). Thus, the correlation between neighbourhood influence and drug abuse among youth in Selangor is statistically positive and significant with a medium relationship.

Table 5: The Correlation for Neighbourhood Influence

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. deviation</th>
<th>$p$-value (sig)</th>
<th>N</th>
<th>Pearson Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neighbourhood Influence</td>
<td>16.496</td>
<td>4.938</td>
<td>0.000</td>
<td>137</td>
<td>0.452</td>
</tr>
</tbody>
</table>

iv) To explain the most influencing factor for youth to commit drug abuse in Selangor

Concerning the fourth research objective, to explain the most influencing factor for youth to commit drug abuse in Selangor, the multiple regression analysis was
carried out. The result can be seen in Table 6. Based on Table 6, the $R^2$ value indicates that only 0.91% fits the whole drug abuse model among youth in Selangor. Simultaneously, the Durbin-Watson test was used to identify the presence of residual serial correlation from least squares regression analysis (Chen, 2015). Concerning this analysis, based on Table 6, the autocorrelation is categorised as positive because Durbin Watson’s value is 1.584, which falls between 0 and 4.

Table 6: The Model Summary of Multiple Regression

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std Error of the Estimated</th>
<th>Durbin-Watson</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0.491</td>
<td>0.241</td>
<td>0.224</td>
<td>5.63414</td>
<td>1.584</td>
</tr>
</tbody>
</table>

Based on Table 7, the main factor influencing drug abuse among youth in Selangor is neighbourhood influence. This study aims to explain the most influencing factor for youth to commit drug abuse in Selangor.

Table 7 shows three independent variables are tested to explain factors influencing youth to commit drug abuse in Selangor. The three factors are peer influence, family environment, and neighbourhood influence. The multiple regression analysis test shows that the main factor influencing youth to commit drug abuse is neighbourhood influence, with $p < 0.05$.

Thus, in answering the fourth research objective, neighbourhood influence contributes the most in influencing youth to be involved in drug abuse in Selangor.

Table 7: The Multiple Regression Analysis

<table>
<thead>
<tr>
<th></th>
<th>Beta</th>
<th>t</th>
<th>Sig.</th>
<th>Tol.</th>
<th>VIF</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td></td>
<td>4.865</td>
<td>0.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer Influence</td>
<td>-0.144</td>
<td>-0.950</td>
<td>0.344</td>
<td>0.944</td>
<td>1.059</td>
</tr>
<tr>
<td>Family Environment</td>
<td>0.184</td>
<td>2.148</td>
<td>0.034</td>
<td>0.859</td>
<td>1.164</td>
</tr>
<tr>
<td>Neighbourhood Influence</td>
<td>0.491</td>
<td>4.588</td>
<td>0.000</td>
<td>0.871</td>
<td>1.148</td>
</tr>
</tbody>
</table>

CONCLUSION

In conclusion, the case study manages to achieve all four research objectives and answers all four research questions in explaining the factors influencing drug abuse among youth in Selangor. The factors influencing drug abuse among youth in Selangor are peer influence, family environment, and neighbourhood influence. The main factor
Contributing to youth committing drug abuse in Selangor is neighbourhood influence. Based on the case study result, it is with high hope that the government will take drastic action and measure to combat drug abuse among youth in Selangor.

This study and its result are crucial to reducing drug abuse among youth in this country. It is indeed impossible to solve and eliminate the problem. However, by reducing the number of drug abuse among youth, it is hoped that the country can produce reliable youth and future leaders with charisma and leadership to lead the country one day. After all, youth are the gem of the country. They will one day administrate the country and will create a better world for the next generation. One of the government’s initiatives was introducing the Cure & Care clinic in which the drug abusers can volunteer to seek treatment and rehabilitation without being pressed charges on them. Thus, with this initiative by the government, it is with a strong hope that the drug abuse among society can be reduced.

REFERENCES


Salleh, M. J. (2012). Permasalahan Penagihan Dadah: Tinjauan di Pusat Serenti Selangor, International Seminar on Community Development, Paper presented at Hotel Primer Kuala Terengganu, 7\textsuperscript{th} - 9\textsuperscript{th} April 2012. Published by International Islamic University Malaysia (IIUM).


