Policy Drugs Prevention Model Based on Local Wisdom in Lhokseumawe

Aiyub, Rusydi

Abstract: Drug prevention policies have not been able to reduce the number of drug abuse in Lhokseumawe that has continued to increase in the last five years (2012-2017). This study used a qualitative approach within-depth interview, data collection techniques, indept-interview, observation, and documentation. Data analysis was conducted qualitatively with interactive analysis models. The results show that primary prevention policies are early preventive measures such as people not using drugs. This precaution aimed at those who have not been contaminated with drugs and need protection from illegal drugs. A secondary prevention policy performed on initiated drug users who have just used or dabbed. They made war that later will not develop into addicts because of the addictive effects of drugs. This prevention directs drug users to make healthy lifestyles in their daily life. In addition, they also assisted for their therapy and rehabilitation. The tertiary prevention policy intended for long-term addicts, and in this precautionary stage, the addicts are rehabilitated, treated, and recovered. In the rehabilitation period, the addicts recovered from dependency that they can live normal and socialize again with family and society. Drug prevention policies are intended with a bureaucratic networking approach established through Memorandum of Understanding (MOU), Integrity Pact and Joint Recommendations. Collaboration between bureaucratic actors and local wisdom-based society not yet fully implemented because the meaning of collaboration is comprehensive. 

Index terms: Policy Model, Drug Prevention, Local Wisdom, and Actor Collaboration

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1. INTRODUCTION

Lhokseumawe is one of the areas that became the target of drug trafficking transactions and the city becomes the site of operation of international drug networks. The condition has encouraged BNNK, Police, Municipal and vertical agencies in this area to declare commitment to make Lhokseumawe drug free city, both the community and government work environment [22]. In addition, BNNK (National Agency for Narcotics of Municipalities / Districts) sign an integrity pact and established anti-drug cadres of City, gampung government units, Anti-Drugs Task Force Education Institutions, Anti-Drugs Ambassadors, anti-drug campaigns, raids, advocacy, rehabilitation and empowerment for the drug users. The effectiveness of four pillars of handling drug problems, (prevention, community empowerment, rehabilitation and eradication) for the creation of a drug-free society environment.

On the other hand, anti-drug movement also carried out by the community pioneered by community leaders, Teungku Dayah, Youth Anti-Drugs Cadre, Gampong level. At the gampung level, the drug prevention policy conducted in accordance with local wisdom. This policy pioneered by community figures, Teungku Dayah, and Pemuda Anti-Gampong. This is one example of community prevention that is quite effective compared to prevention based on bureaucratic approaches.

The anti-drug policy in Gampong Ujong Pacu followed by other gampongssuch as Gampong Mon Geudong, Teumpok Teumpok Village and Ujong Blang Lhokseumawe, with prevention policies that vary according to the local wisdom of each gampong.
Collectivemovementagainstdrugs ingampang done with determination and courage based on agreementof substanceprescription of forbidden actasacommonreferencethatin accordance with thesubstanceoflocalwisdom andIslamic beliefsitembraces, drugsarenotallowed / prohibited. Therefore,forindividualswhoviolate it can be subjectto sanctions, both social and formallaw.Nevertheless,drug abusein Lhokseumawecontinues to increaseinthe last 5 years(2012-2016).Variousmodesof illicit drug abuse andillicit activity are increasingly troubling thepublic. For fiveyears,229drug addicts, 363 drug offenders and 487 drug suspects [21]

Drug users reportedby the family for rehabilitation carried out in two formsof rehabilitation:outpatientrehabilitation and inpatientrehabilitation. The numberoffamilies ofrehabilitated drugusersreporters inthe period 2012-2016 for the last five yearsasmany as516 people, while those who rehabilitated 72 outpatients andhave beenrehabilitated asmuch as 115 people. It means that 329 drug users have not been rehabilitated. The averagedrugusers in the outpatient and inpatient rehab were drug users of shaban type 70%, marijuana 20% and shaban and marijuana users 10%. Dominant drug users are maleby age 14-25(schoolage) and age 26-35 (Source: BNNK Kota Lhokseumawe2017). Average drug users in outpatient rehabilitation and inpatientcare consisted of 70% shaban drug users, 20% marijuana and shaban users, and marijuana users at10%.

The rise of drug trafficking in the city of Lhokseumawahasnegative impact on the younger generation of Lhokseumawe. Therefore, the LhokseumaweCity Legislative Assembly gaveonerecommendation to the Health Office intensively socializing the dangersof drugstothepopulationof Lhokseumawe City so that people are aware of the dangers of drugs[19]

This reality shows the ineffectiveness of drug prevention policy in Lhokseumawe, although the Police, BNNK, Municipal Government, DPRD, MPU and Vertical Agency in Lhokseumawe City havestatedcommitment in the form of MoU, Integrity Pact and Joint Recommendation as a form of collaboration of actors in drug prevention.

Based on theabovementioned problem is necessary to research the form of drug prevention policy by the government bureaucracy and the community in Lhokseumawe from the actor-based collaborative approach of local wisdoms as a model of policy.

A. Formulation of the problem

Based on the background of the above problem, the formulation of the problem in this study is to develop a model of drug prevention policies based on local wisdom in the city of Lhokseumawe.

B. Research purposes

The purpose of this research istounderstand the form of policy of drug prevention policy from aspects of primary prevention policy, secondary prevention policy, and tertiary prevention policy based on local wisdom in Kota Lhokseumawe.

C. Benefits of research

The benefit of this research is to provide solutions in the form of model of drug prevention policy based on local wisdom to prevent drug abuse in Lhokseumawe City.

III. LITERATURE REVIEW

A. Theoretical Perspective

Purwoko(2010) states that public policy is no longer an exclusive process involving state actors, but is also a product of networking, collaboration, and partnership between the elements of governance (policy network). Suwiti (2008) also states that there is a need for a network that can connect the state with public actorsto integrate in a public policy process at the stage of policy formulation.

These relationships called policy networks. The paradigm of previously developed government management is the only policy exercise. With the paradigm shift from government to governance emphasizing collaboration, inequality and balance between government, private sector and civil society, the relational relationships between various actors, both individual and collective, are mainly due to the dependence on resources (Menzel, 1987). Generally, organizations try to reduce the uncertainty (organizational uncertainties) they face by establishing relationships with others, Thompson (1967). This leadsto the concept of network having the advantage of overcoming the problem of resource scarcity, which is one of the uncertainties experienced by organizations.

Criticism of the conception of single actor (state) that has been dominating the process of public policy formulation. With this pattern of relationships, interest groups on a policy issue have accessed to the formulation process. The administrator as the leading pillar implementing
the true public policy requires political support, legitimacy, information, and coalition partners. Meanwhile, interest groups want access to the process of public policy formulation and implementation. This difference in needs is what lies behind the exchange and transaction.

Policy networks by Kenis & Schneller described in several categories. First, it described as actors, second, linkages among actors, third, boundary [14]. Actors are those who are involved in apolicy. Linkages among actors defined as relationships among actors served through communication, information, trust and other policy resources. While boundary can be defined as limitations. The boundaries in the policy network according to Carlsson is a formal institution in a process of mutually beneficial relationships of relevant functions and structures [14]. The most important thing in the policy network is the creation and trust with each other otherwise a policy network will be vulnerable, which actually makes the actors blame each other. Therefore, mutual trust among fellow actors is the first step that must be achieved at the beginning of the network among organizations.

2.2. Conceptual Framework
Schematically, the conceptual framework of the model of local wisdom-based drug prevention policy in Lhokseumawe described in the following figure:

**Figure 2.1 Conceptual Framework of the Local Wisdom-Based Drug Abuse Prevention Policy Model**

- Public Policy Prevention
- Drug Abuse Policy
- Collaborative Actors
- Local Wisdom-Based Drug Abuse Policy
- Drug Case

### III. RESEARCH METHODS
This study uses a qualitative approach with consideration to study and understand more deeply about the model of local wisdom-based drug prevention policy in the city of Lhokseumawe. Sources of data in this study consist of two types, namely primary data and secondary data sources. Data collection done through in-depth interviews, observation, and documentation. The information and data were obtained through in-depth interviews with the policy actors involved in the process. Informants in this research are BNNK, Police, Municipal Government, DPRK, MPU, Rehabilitation Center Counselor, Teungku Dayah, and Community Leaders, Gampung Anti-Drugs Cadre (Pagar Gampung, Anti-Drugs Ambassador, and Non-Drugs Health Organization). Data analysis technique using Miles & Huberman in Sugiyono [2011], who argued that the activities in qualitative data analysis are done interactively and continuously to complete, so that data analysis is saturated. There are three activities in data analysis, namely: data collection, display data, and conclusion drawing / verification.

### IV. RESEARCH RESULT AND DISCUSSION
A. Form of Drug Prevention Policy in Lhokseumawe
B. Primary Prevention Policy
Primary prevention policies undertaken in prevention efforts before drug abuse occurs are

- done in the form of education, advocacy, campaigning, dissemination, and ordination of knowledge about the dangers of drugs, and
- approaches in the family and others. This method conducted by the government and various community groups anywhere such as: school, residence, occupation, and public places.

Various preventive efforts conducted early so that people do not abuse drugs. Prevention conducted to people who do not know drugs and community components that can potentially prevent drug abuse.

In the context of primary prevention policy and as a first step in prevention drugs, 10 government agencies in Lhokseumawe City together with BNNK Kota Lhokseumawe declared a joint commitment to accelerate the implementation of P4GN in Lhokseumawe. The signing of the MoU is the foundation for synergistic collaboration, establishing a common...
commitment through the awareness and participation offall partiestoacceleratethe implementation of P4GN’s national policies and strategies in saving thenation’s generation, inorder to realize the free Lhokseumawe City of Drugs. The basic implementation of the MoU between BNNK and government agencies in the region is Law No. 35 of 2009 on Drugs, Presidential Regulation no. 23 of 2010 on the implementation of national policies and strategies on P4GN 2011-2015. Joint Regulation of the Chief Justice of the Supreme Court of Indonesia, Ministry of Law and Human Rights, Social Minister, Attorney General RI Number 01/PB/MA/III/2014. No. 1 of 2014, No. PERNER/01/III/2014/BNN on the handling of Narcotics Addicts and Narcotics Abuse Victims into Rehabilitation Institutions, The primary prevention policy as presented in the graph above is more promoted and has a few touches to the object, which meant that people who receive promoted efforts are merely passive objects. The message is inherent in the history of the participants after promoted activities are minimal. Targets are not expected to be realized especially when many participants are involved. Preventive measures considered more effective than promoted. Although the object of the program is the same, that is, people who have not adversely affected by drugs, but preventive efforts are minimal. Continuation of the promotion of efforts to have a direct connection to the objective of the form of protection.

Primary prevention policies and frequency of programs/activities within the period 2014 - August 2017 as indicated in the following graph:

Table 4.1 Forms of Primary Prevention Policy 2014 - 2017

<table>
<thead>
<tr>
<th>No.</th>
<th>Policy / Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Focus Group Discussion (FGD)</td>
</tr>
<tr>
<td>2</td>
<td>P4GN Communication, Information and Education</td>
</tr>
<tr>
<td>3</td>
<td>Screening of Anti-Narcotics Cartoon Animation Film</td>
</tr>
<tr>
<td>4</td>
<td>Drug-Based Development Assistance</td>
</tr>
<tr>
<td>5</td>
<td>Saleum Sikula</td>
</tr>
<tr>
<td>6</td>
<td>Workshop of the Anti-Narcotics Activist of the FBAN Community</td>
</tr>
<tr>
<td>7</td>
<td>Anticipating Narcotics Through Scouts</td>
</tr>
<tr>
<td>8</td>
<td>PBAN and WEGA Community Role Work Meetings</td>
</tr>
<tr>
<td>9</td>
<td>Advocacy</td>
</tr>
<tr>
<td>10</td>
<td>Instructions of the Mayor of the Gampang Siaga Narcotics</td>
</tr>
<tr>
<td>11</td>
<td>Mayor’s Appeal Stay Away from Drugs</td>
</tr>
<tr>
<td>12</td>
<td>Anti-Narcotics Campaign</td>
</tr>
<tr>
<td>13</td>
<td>Integrity Facts</td>
</tr>
<tr>
<td>14</td>
<td>High School Level Inter-Task Force Tournament</td>
</tr>
</tbody>
</table>

Source: BNNK Lhokseumawe, processed in August 2017

BNNK and the Police have great authority in preventing, combating abuse, drug trafficking, and drug procurers. However, this authority has not been directly proportional to the implementation of policies in the field. There is no synergy between BNNK, the Police, the Municipal Government and the DPRK with the Community/Adat, Ulama and Pemuda. Pageu Gampang and other elements in the prevention of drugs, so in the last five years, the number of drug abuse in Lhokseumawe has increased. Sincerity and earnestness become the main capital, without which any policies made remain meaningless and certainly cannot address the increasing problem of drug abuse in the city of Lhokseumawe.

Sincerity and seriousness in the prevention of drugs should be a capital for the stakeholders so that people can be free from drug problems. Drugs are either a congregation of crime or a chain whose treatment must be intact. The commitment to maketh the city of Lhokseumawe a drug-free city, appreciated but the form of sincerity and sincerity through regulation and authority done something more and more.
widely so that drugs can actually be eradicated from the community.

Implementing the primary policy still found problems mainly in detecting and preventing drug abuse. There is a significant number of drug users who continue to increase every year in the city of Lhokseumawe. The first is the commitment of policy actors who havenot totality, the two drug activities promising economically in the drug chain and the three cultures of society who still consider drug users as a family disgrace. Reluctant reporters of their family members to BNNK for rehabilitation process. Although so far there have been reports to BNNK but only a small part of them who have not reported just because they had a hidden drug problem had a relationship with the environment, especially the hidden peers.

In addition to having great authority, BNNK uses the community as a monitor to improve the capacity to prevent against drug abuse by empowering community members, as well as obliging them to take an active role in drug prevention and eradication efforts. The community uses an investigatory search, obtaining and providing information, while not being given the right to conduct counseling, mentoring and strengthening of drug addicts. The integrated community role in the joint venue indicates the system of policy collaboration network can be an objection because sincerity and sincerity reflected in totality. Meanwhile, the community has strong legitimacy to prevent and eradicate drugseven without the authority determined by the law.

Drug prevention policies are still symbolic and implemented consistently for various reasons and considerations. The following documentation is one example of BNNK's college-level advocacy activities resulting in twelveshared recommendations. Students, high school land junior high school students in Lhokseumawe City attended the advocacy work. As an effort to prevent drug abuse in the world of education, thatdestroys the nation's generation is agreed twelve mutual recommendations, namely:

1) The leaders will establish an Integrated Drug Monitoring Team (DMT) of the dangers of drugs in the educational environment (universities) of relevant agencies to support government programs in order to prevent drug abuse.

2) If there is any indication of drug abuse or drug abuse victim, the leader in the education environment (university) will coordinate with the family. It is reported to the institution of Primary Beneficiary (IPWL) of BNNK Lhokseumawe primary clinic in order to get coaching and undergo rehabilitation program as an effort of recovery from drug dependency.

3) Leaders in the educational environment (universities) have permission (according to applicable rules) for students who will undergo drug rehabilitation healing dependency program.

4) Implement information and education about the dangers of drug abuse in the college environment.

5) Include the material of the dangers of drug abuse in the design of teaching materials, reading materials, and extracurricular activities/SMEs;

6) Disseminating literature on reading material containing material against drug abuse, whether it is print or electronic form;

7) Developing an extra-curricular program that is oriented towards a drug-free campus environment;

8) Developing anti-drug task force and cadres in each university.

9) Involves the elements of universities (students, lecturers, staff, cafeteria manager, security guard and cleaning service) in the effort to Prevention, Eradication, Abuse, and Illicit Circulation of Narcotics (P4GN).

10) Establish rules and regulations in the campus environment.

11) Environmental education (college) to be able to carry out urine tests/screening tests to the admission of new students.

12) Educational environments (universities) to be able to carry out routine urine/screening tests in collaboration with BNNK and related agencies.

(https://www.goaceh.co_berita/baca/2016/02/03/cegah-narkoba-bnnk-dan-kampus-hasilkan12-rekomendasi/#sthash.NbgLjYSA.dpbo)

Most of the common recommendations have not worked out as agreed. Action plans for
implementation clashed with classicissussuch as resources, policies, and policy actors. Related to this, Edward III (in Subarsono, 2011) describes several variables that affect the implementation of the policy: communication, resources, disposition, and bureaucratic structure.

Drug prevention in Gampung Mon Geudong is conducted primarily in adolescents/youth who have not become victims of drug abuse by conducting routine recitation every Saturday night at Mon Geudong Mosque Hall. This activity aims to enable youth to deepen their knowledge of Islam, increase their faith, and have a stronger deterrent to the impact of social diseases such as drugs. Gampong Mon Geudong emphatically forbids drugs. One way to install a pamphlet that reads: “Peringatan Keras, Hentikan Peredaran Narkoba” (“Hard Warning, Stop the Circulation of Drugs”).

Stickypeople who are read to combat drugs totheroots should be appreciated. The motto of local wisdom “Penujih Drugs, Nyak Jroh Aneuk Bangsa” (Stay Away from Drugs for Success of Nation Children) is the slogan on a banner at the gate entrance of Ujong Pacugampong, that reads Gampong Anti Drug. In addition, there is a pamphlet on the rear of the guardpost that clearly written Gampong AntiMakiat. The joint commitment of the gampong government, teungkudaya/kahum Masyarakan and gampong youth has manifested this gampong as a clean gampong from drugs. In Ujong Pacugampong, drug prevention is done with local wisdom that is to impose social sanction to the perpetrator (pengedar/user). Social sanction in the form of choiceistop drugs or be expelled from the gampong.

Problems in the implementation of drug prevention policies can be addressed effectively and efficiently through the use of shared resources. Resource utilization can only be found in network-based organizations. Thenature of this network allows the creation of effective and efficient use of resources in order to achieve organizational goals.

In the implementation of drug prevention policy can come from primary actors and secondary actors, either institutionally or individually. Institutions are required by the government politial will to budget public spending fundsto address the urgent issue of social abuse of drugs. Meanwhile, either individuals can regenerate local wisdom through social movements in the fight against vice (immoral).

Associated with funding from APBK for drug preventions for every limited and will be maximized in the fiscal year 2018 along with the formation of collaboration of drug prevention actors involving all components of society. The main focus of drug prevention policies in 2018 at primary and junior high school level institutions through anti-drugs curricula and vulnerable drug groups detected through policies networks.

C. Secondary Prevention Policy

The secondary prevention policy is carried out when the necessity occurred, and the treatment effort is needed. This policy is handled by professional medical institution such as clinics, hospitals, and doctors. This secondary prevention phase includes; the initial acceptance stage by performing physical and mental examination. The stage of oxidation as well as the therapy of medical complications is done by gradually reducing the addictive dependence of addictive ingredients. For those who have started, initiate drug abuse, awareness is given to avoid becoming addicted, undergoing therapy and rehabilitation, and directed to implement a healthy lifestyle in everyday life.

Lhokseumawe, people's awareness of the dangers of drugs is increasing as indicated by the number of reports coming into BNK Lhokseumawe. The increase of the report is an indicator of the increasing public awareness of the importance of environmental awareness of the dangers of drugs and the opening of the mind in following up the government's program against the eradication, use and illicit trafficking of drugs. Indicators of success in raising public awareness of the dangers of drugs cannot be separated from socialization conducted both through discussion activities to schools, work environment, and community through mass media coverage.

Victims of predominant drug abuse among the productive age between the ages of 14-25 are most often among men caused by various factors. First, the individual factors consist of aspects of personality, and anxiety to depression. Included in the aspect of personality is the person who wantstoknow, easily disappointed, impatience,
and low self. While that includes anxiety or depression in those who have not tolerated the self-help difficulties so that run away from drug use. Second, socio-cultural factors consist of family conditions and social influences. Familial disharmonic factors such as divorced parents, busy parents, and infrequent attendance at home, and inadequate family economy. Their influence of association is those who want to become addicted to the drug of drug groups. Third, environmental factors that are neither good nor supportive, and accommodate everything that concerns the children's psychological development and lack of attention to cause the child to use drugs. Fourth, the drug factor is the easiness of drug obtained, and supported by these factors so that the more easily the emergence of drug abuse. Second and prevention is done. People who are trying to use drugs and community components that can potentially help stop the abuse of drugs. Activities that can be done in this prevention effort include: a. Early detection of drug abuse, social counseling, and guidance through home visits, lighting and education, individual development, life skills such as communicating skills, rejecting others' skills, and making good decisions and so on.

Forms of secondary prevention policy is carried out through programs/activities within the period 2015-2017 as shown in the following graph:

<table>
<thead>
<tr>
<th>No</th>
<th>Policy/Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Urine Test</td>
</tr>
<tr>
<td>2</td>
<td>Raids for Entertainment Places</td>
</tr>
<tr>
<td>3</td>
<td>Operation Shining the Marijuana Field</td>
</tr>
<tr>
<td>4</td>
<td>City Level Coordination Meetings with Agencies</td>
</tr>
<tr>
<td></td>
<td>Discusses about children who are already trapped in</td>
</tr>
<tr>
<td></td>
<td>Narcotics</td>
</tr>
</tbody>
</table>

Source: BNNKLHokseumawe, August 2017

Based on the graph above, it is clear that the secondary prevention policy of BNNK and the Lhokseumawe Police Department has only been running in the context of an early detection of drug abuse-related tour, marijuana and night raid operations, while counseling, social guidance through home visits, lighting and education/training of individual development, life skills, among others, about communications skills, the skills of rejecting the pressure of others, and good decision-making skills that have not worked and this

One of the policy content weaknesses that have not been able to touch comprehensively in kaitanunya with secondary prevention policy. These secondary prevention policy in the Mon Geudong Gangpung is more responsive and directly touches the needs of vulnerable groups who begin to experiment with drugs through individual development training. Former drug users are equipped with expertise in training with knowledge on taking drugs, and drug-related treatment for 12 people. These efforts are undertaken with funds from the Gampang Foundation (FADG) and woodcarving training for former drug users in SMK4 Lhokseumawe.

C. Tertiary Prevention Policy

Tertiary prevention policy is an attempt to rehabilitate the those already in the process of healing. These efforts have been carried out along with the assistance of specialized agencies such as rehabilitation centers and those who have formed community groups. This stage is divided into two parts, namely the phase of stabilization that serves to prepare the user back to the community, and the stage of reintegration of the community so that former drug abusers are able to develop meaningful and significant lives. For those who have become drug users, rehabilitation to recover from dependence so as to re-socialize with family and society.

This prevention is done to people who use drugs and who have/for former drug users, as well as the community components that can potentially help to stop the abuse of drugs and help drug victims to be able to avoid drugs. Activities that are undertaken in prevention include counseling and social counseling for those and families and environmental groups, creating conducive environment for former users to stop drug use from being trapped and turning into drug users.

Rehabilitation of drug addicts is a system because the rehabilitation is an integrated process of treatment activities to relieve addicts from dependence. This is in accordance with the punishment intended for the flow of treatment theory, namely to provide treatment and recovery to the offender as a
POLICY DRUGS PREVENTION MODEL BASED ON LOCAL WISDOM IN LHOKSEUMAWE

substitute for punishment. Users/drug addicts are sick people whose need for treatment and recovery. Rehabilitation of drug users/ordrug victims also embraces the theory of social defense because it is a form of social protection that integrates drug users into social order so that drug users no longer commit drug abuse. Table 4.3. Number of Drug Treatment and Rehabilitation Services by Rehabilitation Place, 2012-2016.

<table>
<thead>
<tr>
<th>Year</th>
<th>PLP</th>
<th>RH</th>
<th>Rehabilitation Place</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>LB</td>
</tr>
<tr>
<td>2012</td>
<td>11</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>2013</td>
<td>53</td>
<td>19</td>
<td>11</td>
</tr>
<tr>
<td>2014</td>
<td>112</td>
<td>16</td>
<td>9</td>
</tr>
<tr>
<td>2015</td>
<td>187</td>
<td>45</td>
<td>4</td>
</tr>
<tr>
<td>2016</td>
<td>153</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: BNN Kota Lhokseumawe, August 2017

The rehabilitation of drug users is the responsibility of the Rehabilitation Center of Tabina Gangpong Blang Panyang, Muara Satu District, in the form of medical rehabilitation. The rehabilitation process is still dominated by treatment rather than recovery efforts. Place for drug addicts rehabilitation can only accommodate approximately as many as 100 people. The location is currently not sufficient to accommodate the number of drug addicts originating from the districts of North Aceh and Lhokseumawe, and does not receive funds from BNNP for rehabilitation. BNNK wishes to collaborate with all parties, both private and public, to participate in providing drug addiction rehabilitation services.

Not all users were rehabilitated at the Tabina Rehabilitation Center in Lhokseumawe, but were rehabilitated outside Lhokseumawe due to various limitations. The number of drug treatment and rehabilitation services according to the rehabilitation site in the following table:

Therapeutic and drug rehabilitation services are performed in several locations with diverse user conditions. Generally, drug addicts who undergo rehabilitation process are still of productive age and even including some students. For the students to undergo the process of rehabilitation by way of treatment, so it is not disturbed the process of education. Rehabilitation is done in various places. For the rehabilitation process is free of charge, everything is borne by the government, ranging from the cost of treatment until the cost of care. Based on the results of urinetests, generally drug users are using marijuana and shabu-shabu. Both types of drugs are very dangerous, because it can damage the nervous system. The policy of rehabilitation is done through the Lhokseumawe-BNNK program as shown in the following graph:

Table 4.4 Tertiary Prevention Policy 2014-2017

<table>
<thead>
<tr>
<th>No</th>
<th>Policy/Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Destruction of the Laboratory of Methamphetamine Production</td>
</tr>
<tr>
<td>2</td>
<td>Arrest of Bandar, Drug Dealers and Users</td>
</tr>
<tr>
<td>3</td>
<td>Outpatient Rehabilitation Therapy Drug Users</td>
</tr>
<tr>
<td>4</td>
<td>Training for Former Drug Addicts</td>
</tr>
<tr>
<td>5</td>
<td>Coordination Meeting of Former Drug Addicts</td>
</tr>
<tr>
<td>6</td>
<td>Post-Rehabilitation Assistance for Former Drug Addicts</td>
</tr>
<tr>
<td>7</td>
<td>Feusijuak Ganpong Ujung Pucu asan Anti-Narcotics Village</td>
</tr>
<tr>
<td>8</td>
<td>Rehabilitation of Drug Users</td>
</tr>
<tr>
<td>9</td>
<td>Focus Group Discussion (FGD)/Parents/Guardians of Narcotics/ Addicts</td>
</tr>
<tr>
<td>10</td>
<td>Destruction of Evidence</td>
</tr>
</tbody>
</table>

Source: BNNK Lhokseumawe, August 2017

Drug rehabilitation is a repressive level undertaken for drug addicts. Rehabilitation actions addressed to victims of drug abuse to restore order in the physical, mental, and social abilities of patients. In addition to restoring rehabilitation as well as treatment for drug addicts, so that addicts can recover from addiction to drugs, rehabilitation has two parts: medical rehabilitation and social rehabilitation.

Medical rehabilitation is an integrated process of treatment activity to relieve addicts from drug addiction. Medical Rehabilitation Drug addicts can be conducted in hospitals designated by the Ministry of Health, namely hospitals organized by the government, as well as the community. In addition to treatment the treatment through medical rehabilitation, the healing process of drug addiction can be organized by the community through religious and traditional approach. While social rehabilitation is a process of recovery activities in an integrated manner both physically, mentally and socially so that former drug addicts can re-implement social functions in public life.

BNNK Lhokseumawe provides post-rehabilitation assistance to former drug addicts.
and empowerment through training. Assistance activities against former addicts conducted with the accompanying family respectively. Mentoring activities as an effort to prevent the occurrence of relapse (relapse) against the desirous drugs. The role of families and parents is very important in embracing families that are indicated dabase of post-rehabilitation and return home so as not to fall into the same hole that can help in the healing process and needed support of elements of society against former drug users not to discriminate them.

The former drug addicts who followed the mentoring activities have been undergoing rehabilitation for six months in various places. In terms of empowerment, BNNK has also conducted basic electrical training for former drug addicts and through training it is expected that former drug addicts have basic household electrical skills and can become independent individuals and no longer engage in drug abuse and become anti-narcotics activists in their respective neighborhoods -masing to break the chain of abuse and illicit drug trafficking.

On the other hand, the prevention of drugs in the community environment is also supported by empowerment approach through education as conducted by Pemuda Gampong Mon Geudong / Young Volunteer Pageu Gampong (RMPG) through the program "Young Scholarship Meuripee Sieribe". This program has been realized to the drug drop out youth who are vulnerable to drugs by providing assistance to 4 (four) children in the form of scholarships. The names of the children who are in the group are vulnerable to drugs, scholarships and educational institutions are in the following table:

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sf(*)</td>
<td>ITNurul Islam Meurah Mulia</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kabupaten Aceh Utara</td>
</tr>
<tr>
<td>2</td>
<td>No(*)</td>
<td>Dayah Salafi Cot Truong</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kabupaten Aceh Utara</td>
</tr>
<tr>
<td>3</td>
<td>Da(*)</td>
<td>Dayah Salafi Cot Truong</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kabupaten Aceh Utara</td>
</tr>
<tr>
<td>4</td>
<td>Fa(*)</td>
<td>Dayah Salafi Cot Truong</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kabupaten Aceh Utara</td>
</tr>
<tr>
<td>5</td>
<td>Ik(*)</td>
<td>Dayah Salafi Samalanga</td>
</tr>
</tbody>
</table>

*) initial name
Source: Head of Pemuda Gampong Mon Geudong, 2011

Young Scholarship Assistance Meuripee Sieribe becomes from community and youth in the form of infak/sadakah and Routine Cash contribution/month 20,000-100,000/month, donations from philanthropic social media, Facebook from various regions (Ambon, Pekanbaru Riau, Medan, and Sigli Aceh) 50,000-100,000/month. Fund that have been collected are used to pay the en trance fees of Rp. 200,000 and the cost of student life is Rp. 460,000/bulan for TNurul Islam students and Rp. 200,000-Rp. 300,000/month for Salafi Dayah students.

This is done because the citizens have committed to combat drug trafficking among the public to save the youth generation from the influence of drugs. The dangers of drug abuse both shabu-shabu and marijuana not only eliminate the future of the youth generation, but also affect the family and the environment. With the establishment of Young Volunteer Pageu Gampong this will be able to help BNNK, police and the city government to minimize the number of drug abuse. We have put a strong warning pamphlet for drug dealers in strategic and crowded places, even wetogether with the village apparatus are making draft Reusam gampong to narrow the circulation space.

Young Scholarship Program Meuripee Sieribeone approach to prevent drug abuse through community empowerment. The community is empowered by improving education, knowledge and skills so that they are able to identify and prioritize their needs. Then the community can find resources to overcome the problems faced. Community empowerment has a goal with the goal of creating an healthy environment free from drugs. Its main objective includes a clean community environment of drug abuse. The environment of a healthy society and free from drug abuse has a positive impact supporting the productivity of conducive environment. The empowerment of the community through various approaches is based on awareness of the importance of empowerment so that the community has high resistance / immune to the danger of drug abuse.

The tertiary drug prevention policy for former drug users related to the healing process can be reorganized by the community through religious approach and followed by economic empowerment as conducted by Gampong Mon
POLICY DRUGS PREVENTION MODEL BASED ON LOCAL WISDOM LHOKEUMAWE

Geudong. Besides requiring drug-prone groupsto participate in the recitation of the Saturday night prayer, it also empowered them economically.

The form of economic empowerment is the form of small-scale livestock assistance, which was realized for one person, and in the future will be undertaken by empowerment of fishpond and hydroponic training to the mothers/wives of former drug users and other deviant social behavior. Follow-up training with the collaboration of the office of the wall around the environment for hydroponic cultivation. The final target of the area becomes an agro-tourism area combined with Meusum Reumoh Aceh.

Establishing policy collaboration through policy networks in drug prevention in Kota Lhokeumawe needs to be done. There are three basic reasons why this is important and need to be understood by policy makers. First, the fact that the policy makers are not the only actors determining the policy. Secondly, the importance of other actors that lead the collective decision-making makes the policy network very important and urgent. The three demands of public accountability, the better the policy network, the better the accountability and acceptability of the public.

II. CONCLUSION

Based on the results of research and discussion, it can be taken some conclusions as follows:

1. Primary prevention, secondary prevention, and tertiary prevention policies have been fully integrated in the actor’s collaborative framework. The relationship between primary actors and secondary actors is still dominant, bureaucratic, and the position of secondary actors is passive in the prevention institutions. Secondary actors have a central role in drug prevention in each community with local wisdom-based policies.

2. Drug prevention policies with single actor strategies are ineffective in preventing drug abuse. Policy collaboration with the introduction of local wisdom is key to addressing the social problem of drugsmore comprehensively.

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