Family Functioning Dynamics in Post-Drug Rehabilitation Recovery (Case Study in Banjarbaru City)

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Abstract

This study discusses the dynamics of family functioning in optimizing support for the child's recovery process after undergoing drug rehabilitation. The research location was in Banjarbaru, Landasan Ulin Sub-District. This study used a qualitative approach with case study methods and analysis using the Structural-Functional theory of Robert K. Merton. The results show that the external aspect of the family has a positive impact because they work together in maximizing post-rehabilitation recovery even though it does not directly impact the level of family functioning. While on the internal aspect, post-rehabilitation recovery is not optimal because both parents do not play an active role in both post-rehabilitation treatments nor maintain the family system's resilience. Therefore, it can be concluded that the balance of structure and function is the main component in maintaining the functioning of the family because the family environment is an essential factor in achieving and maintaining healing.

Keywords: family functioning, post-rehab recovery, structural functional

INTRODUCTION

Post-rehabilitation recovery, of course, really needs the presence and support of the family environment. Both parents’ handling and attention are essential in achieving a successful recovery process, especially for clients who are still teenagers. In Banjarbaru City, many clients undergoing rehabilitation are underage or teenagers [1]. Teenagers are easy targets for drug abuse because they have unstable emotional development and mindsets. Therefore, the functioning of the family plays a vital role in guiding children to become individuals who have good self-control abilities and can adapt to the community.

An understanding of the functioning of the family aims so that parents can apply appropriate parenting patterns for the growth and development of children [2]. However, over time, the family environment has experienced many shifts in functions and roles. It is no longer the only place of refuge that provides a sense of security for children [3]. This condition requires further studies on the dynamics of family functioning in solving problems and the ability to adapt to various social changes that occur both from internal aspects of the family and external aspects that can affect the functioning and functionality of the family environment.

Previous research has discussed the importance of rehabilitation in optimizing the recovery of physical, mental, and social functioning from an institutional point of view [4]. Previous research has also discussed the recovery process from the perspective of rehabilitation clients by increasing assertiveness in adolescents and developing good communication patterns between parents and children [5]. There are no studies that discuss the recovery process from the point of view of the family environment more specifically.

Based on the problems that have been presented, this study seeks to provide an overview related to the optimization of the post-rehabilitation recovery process based on the point of view of the experience of family members and the dynamics of family functioning that affect the success rate of the process through structural-functional theory analysis.

MATERIAL AND METHOD

This research uses a qualitative approach through the case study method to generate an in-depth understanding of a case [6]. This study provides a specific illustration according to the point of view of the subject being studied regarding the efforts of low-income families in optimizing their children’s post-drug rehabilitation recovery [7].

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case study method aims to examine the factors and backgrounds, and patterns of inter-subsystem relationships in the family structure that affect the process of restoring children's social functioning in the family environment based on various facts of life experienced directly by the subject and the impact can still be felt until this research process is carried out [8].

Data Collection

The data collection techniques used in this research are observation, semi-structured in-depth interviews, documentation in pictures and private documents, and field reports obtained from an uninvolved observation process, where researchers make observations regarding family interactions with the surrounding environment [9]. This technique can produce a broad, in-depth, and comprehensive description of a case under study [7].

The selection of informants was determined through a purposive technique. The key informant was the teenager's family with the initials HS, a family environment with functional problems in the family structure, especially in the economic aspect, and HS's uncle, who acted as a family member who helped care for HS. Other parties who became supporting informants were assistant officers and fellow post-rehabilitation clients who knew information related to the condition of the family that was the subject of the study.

All data and information collected were analyzed using an interactive model according to Miles, Huberman, and Saidana, which involves three stages. The three stages are data condensation by processing and compressing all the data that has been obtained. The data is presented based on the focus category of discussion and interpreted according to structural-functional theory, and produces a conclusion [10].

RESULT AND DISCUSSION

Family’s Background

When HS's father fell ill and became paralyzed, his family began to experience economic hardship. This condition required HS's mother to replace his father's role and function as the head of the household and the breadwinner and take care of various needs, including taking care of his father. Limited abilities and a low level of education made HS's mother work as a daily laundry worker. The income was not sufficient for living expenses, the cost of caring for HS's father, and the two children's school fees. Meanwhile, to maximize the functioning of the family, it is closely related to the background of the parents' life, financial ability, education level, and the ability to access information [11]. The following is an excerpt from an interview with HS’s mother:

“saya kan kade begawi, pas abahnya garing bingung ai kayapa cara duit. Begawi jadi buruh cuci duityna kade seberapa padahal kebutuhannya banyak”. I don’t work, since his father was sick, I was immediately confused about how to find money. Working as a laundering laborer is not much money, even though we have a lot of necessities.” (Interview of HS’s mother)

The lack of funds made HS drop out of school and could not complete his education in junior high school. The mother had a solution to overcome her family’s difficulties, which was to entrust HS to the family of his mother’s brother so that HS could have a better life and ease the burden his mother had to bear. While living with his uncle, HS decided to work in the same place as RM (his uncle's son). However, RM turned out to be a methamphetamine (shabu) user and influenced HS to use drugs.

During the post-rehabilitation process, HS remained with his uncle. His mother could not directly accompany HS during the post-rehabilitation process due to the current limitations of his parents’ condition while seeing HS required a large number of travel expenses. The following is an excerpt from an interview with HS’s mother:

“saya merasa bersalah meulah inya putus sekolah, saya titipakan lawan pamannya, habis itu malah kena narkoba. Tapi saya kade bisa apa-apa, penghasilan kade seberapa, mana sambil meurus abahnya lawan adingnya masih SD, ditipikan bair ada yang merhatiakan, kade nyangka malah kaya ini”. I felt guilty for making him drop out of school until I left him with his uncle, then he got drugs... but I can't do anything myself, here my income is small, I have to take care of his father and take care of his sister who is still in elementary school. He was entrusted so that someone will pay attention to him and help take care of him. I didn’t think it would be like this.” (Interview of HS’s mother)

The economic difficulties experienced by his family made HS have to face various problems such as living separately from his parents at a very young age, dropping out of school, being entrusted to another family, being an underage worker, to falling into drug abuse cases. The economic function that is not optimal has triggered various problems in the family such as the family structure that has changed, the distribution of functions and roles has become unbalanced, the application of parenting is not optimal, to the task of parents to maximize
other parties replace the recovery process of post-rehabilitation social function in the family environment. The pressure felt by family members due to economic problems can affect how parents carry out their roles [12].

**Social Support and the Role of the Surrounding Environment**

The recovery process to improve social functioning after undergoing rehabilitation cannot be separated from social support, including the surrounding environment, such as assistance from post-rehabilitation officers, support from fellow clients in rehabilitation programs, and most importantly, the family environment. Living apart from his parents made HS not receive direct care and attention from his parents. However, with the presence of his uncle’s family, the implementation of the functions and roles that should be the duties and responsibilities of HS’s parents was played by his uncle’s family. Therefore, the process of monitoring and communicating related to the progress of HS recovery by assistant officers was mainly conducted through his uncle.

Environmental support and family resilience are essential indicators for individual success in post-rehabilitation recovery [13]. Although it did not directly influence and improve the social functioning of the HS family, the presence and role of the surrounding environment that supported the recovery process had many positive impacts on the development of HS. The more social support you get, the more motivation to heal [14]. Therefore, the functioning of the family remains the main component, and the surrounding environment becomes a supporting component in optimizing the post-rehabilitation recovery process.

**Robert K. Merton’s Structural Functional Perspective**

The structural-functional theory is one of the theories included in the social facts paradigm in sociological studies. This theory views society as a system consisting of interconnected components and cannot function properly if the components in it do not cooperate [15]. One of the significant figures in this theory is Robert K. Merton, who stated that function was ideologically neutral; he also emphasized functional stability in social systems [16]. Therefore, Merton views individuals as shaped by the structures in which they live [17].

Functionalism focuses on studying how to organize systems, while structuralism focuses on the dynamics of structure and function in maintaining the balance of social systems. The structural-functional theory is the result of the strong influence of systems theory. Understanding the form of interaction through systems analysis can help to assess the pattern, nature, and meaning of relationships between family members [18]. Therefore, the application of structural-functional theory in family institutions can be seen from family members’ structure, rules, and functioning.

**Family Structure**

The structure in the family environment can make the family an institution that has a balance and system of unity. There are subsystems within the family structure, namely family members, who carry out their respective duties and functions. Three fundamental aspects that must be considered in the internal structure of the family include social status, social norms, and social functions [19].

In this case, there had been a change in the structure of the HS family, the head of the household, which should have been the duty and responsibility of his father, was played by his mother. This condition made HS’ mother have more duties and responsibilities than other family members. Therefore, the effort to maintain the family structure is borne by one person, while the operation of the structure requires cooperation between family members. Therefore, the social aspect plays a significant role in the individual’s ability to balance family and work [20].

**Family Functions**

In the family system, to manage the level of functionality so that family members can carry out their duties properly, it is necessary to distribute functions and roles within the family, including 1) allocation of roles related to tasks and obligations that must be carried out; 2) allocation of solidarity, related to forms of cooperation and interaction; 3) economic allocation, related to the division of financial tasks; 4) political allocation, related to power-sharing; 5) integration allocation, related to behavioral socialization [21].

In the internal environment of the HS family, there was much unbalanced functional distribution due to one of the family members who could no longer carry out their functions and roles. This unbalanced functional distribution included the many roles assigned to one individual, the weak cooperative relationship between HS and his mother, unmet needs due to economic difficulties, and the application of parenting that was not optimal due to living apart from parents. At the same time, a child’s life experience starts from the family environment, so it requires the presence of parents who support the child’s growth and development process [22].
Family Functioning Dynamics

a) Family’s external aspects

The community environment is a social system with various essential components that are functionally interconnected [19]. Therefore, the function and role of rehabilitation institutions and assistant officers in the post-rehabilitation recovery process is a form of effort to maintain the balance of the system in the community. In this case, much of the social support that HS received came from assistant officers, his uncle’s family, and fellow clients in the post-rehabilitation program. These components are relations outside the nuclear family environment. They have collaborated to optimize the process of restoring social function that HS was undergoing, even though the function and role of parents in the relationship of the internal structure of their family was not carried out optimally.

**Figure 1.** Scheme of external relations of the family environment

This scheme provides an overview of the position of the nuclear family in a social system relation divided into three levels.

- A microsystem is an environment that interacts directly and is the closest group that HS has.
- Mesosystem is a broader environment, resulting in inter-group relations with an enormous scope of interaction. Each component plays an active role in complying with the rules and norms that apply in society.
- Macrosystem is the last level with the most extensive environment because it includes the socio-cultural structure in general.

Structurally, HS’s family also did not have access to social assistance from the local government due to administrative requirements and a lack of active involvement in community activities. However, from the post-rehabilitation treatment process conducted by HS, external aspects have positively influenced the process of restoring social functioning. Therefore, it can be said that the functioning of the nuclear family is limited by the characteristics of the family itself and is also influenced by social demands in society [23].

b) Family’s internal aspects

In the internal structure of the family, there is a relationship that is applied in the form of continuous cooperation and complementarity between nuclear family members in carrying out their duties, functions, and roles to maintain the balance of the family social system. When fellow family members have weak relationships, of course, this condition will affect restoring HS’s social functioning because the implementation of functions in the family structure is not optimal and raises various problems in the family environment. In this case, there has been a structural change in the nuclear family. Despite having limited abilities, HS’s mother must try to replace all of her husband’s roles by becoming the head of the household so that the distribution of roles becomes unbalanced. This pattern of relationships can impact the emotional bonds between family members that are not well maintained [24].

Changes in structure have had an impact on the relations between members of the HS family. Both parents of HS did not play many roles in the growth and development of HS in his teens. Living apart from parents had limited communication and interaction patterns. It impacted the application of parenting that was not optimal and caused HS to be quickly affected by a hostile environment. Optimizing post-rehabilitation recovery, which should be the responsibility and role of parents by strengthening the family structure and maintaining functional balance, had not been carried out correctly.

In this condition, economic difficulties and the unequal distribution of roles have weakened the internal structure of the family, thus disrupting the operation of the social system in it and resulting in post-rehabilitation recovery that is not optimal when viewed from the internal aspect of family. Therefore, the importance of maintaining and maximizing the functioning of the family is a prevention effort so that children do not have deviant behaviour [25]. The internal dynamics of the HS family can be seen in the following figure:
CONCLUSION

Structure and function are essential components in maintaining the balance of the social system and the functioning of the family. Structural-functional theory analysis has provided an overview of the dynamics of family roles and functions that are not optimal and can disrupt the family structure. When this condition is not handled properly, it will lead to various problems, harming the child's life.

The external aspect has had a positive impact because the surrounding environment works together to optimize post-rehabilitation recovery. However, it does not directly help improve the social functioning of the nuclear family as a whole. However, from the internal aspect of the family, the recovery process is not optimal because parents do not play an active role both in the post-rehabilitation treatment process and in maintaining the balance and resilience of the family system. Therefore, the functioning of the family is an essential factor to provide support and motivate individuals in achieving healing.

This study illustrates that in the post-rehabilitation process, assistance is not only needed by clients undergoing the program. Further assistance to achieve family welfare and harmony is also needed for the client's family, who experience social functioning problems. Because of disturbed family functioning, it can be an obstacle to achieving optimal healing for children.

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