

PREVALENCE OF DRUG AND SUBSTANCE USE AMONG THE MALAYSIAN YOUTH

*Simposium Sains
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UKM
PAKARUNDING



PROJECT TEAM



PROF. DR. ROZMI ISMAIL

HEAD OF
CONSULTANT

FSSK



**PROF. DR. MOHD
RIZAL ABDUL MANAF**

CONSULTANT
MEMBERS

Fakulti Perubatan



**PROF. MADYA DR.
NORHAYATI
IBRAHIM**

CONSULTANT
MEMBERS

FSK



**PROF. MADYA DR.
NOVEL ANAK
LYNDON**

CONSULTANT
MEMBERS

FSSK



**PROF. MADYA DR.
MOHD ROHAIZAT
HASSAN**

CONSULTANT
MEMBERS

Fakulti Perubatan



**PROF. MADYA DR.
AZMAWATI
MOHAMMED NAWI**

CONSULTANT
MEMBERS

Fakulti Perubatan



**DR. EZARINA
ZAKARIA**

CONSULTANT
MEMBERS

FSSK



DR. NOH AMIT

CONSULTANT
MEMBERS

FSK



**DR. HILWA ABDULAH
@
MOHAMAD NOR**

CONSULTANT
MEMBERS

FSSK



**DR. DANIELLA
MARYAM MOHAMED
MOKHTAR**

CONSULTANT
MEMBERS

FSK



**DR. MUHAMMAD AJIB
ABD RAZAK**

CONSULTANT
MEMBERS

FSSK



**DR. NORSHAFFIKA
IZZATY ZAIEDY
NOR**

CONSULTANT
MEMBERS

FSSK



**DR. MD SHAFIIN
SHUKOR**

RESEARCH
ASSISTANT

UKM Pakarunding



**EN. MUHAMMAD
MUSTAQIM ALIAS**

PROJECT
SUPERVISOR

UKM Pakarunding



**EN. AIMI FADZIRUL
KAMARUBAHRIN**

RESEARCH
ASSISTANT

UKM Pakarunding



**DR. ISKANDAR
HASSAN TAN
ABDULLAH**

CONSULTANT
MEMBERS

UiTM

Introduction

Issue & Problem Statement

05 This study are necessary due to the unavailability of recent data related to prevalence.

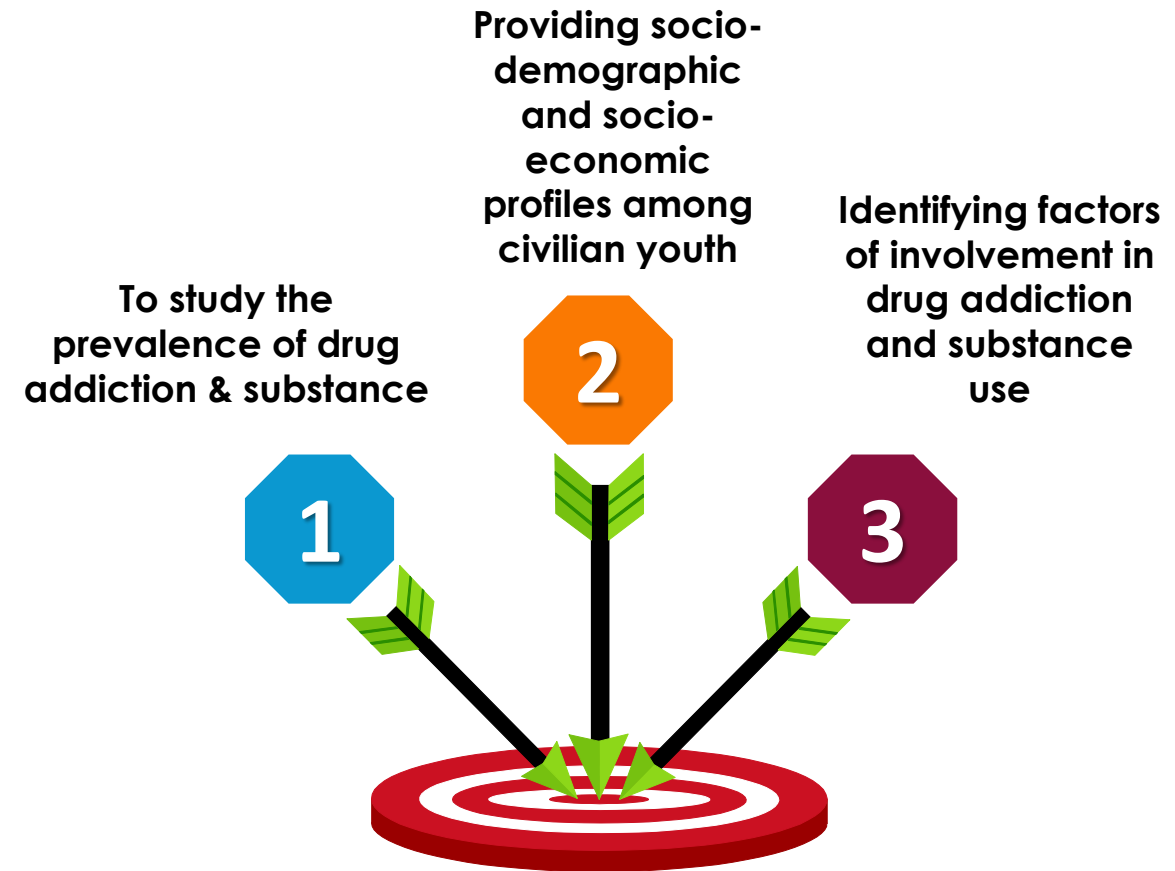
04 Existing statistics are based on the number of operations therefore the actual number of users reports cannot be proven precisely.

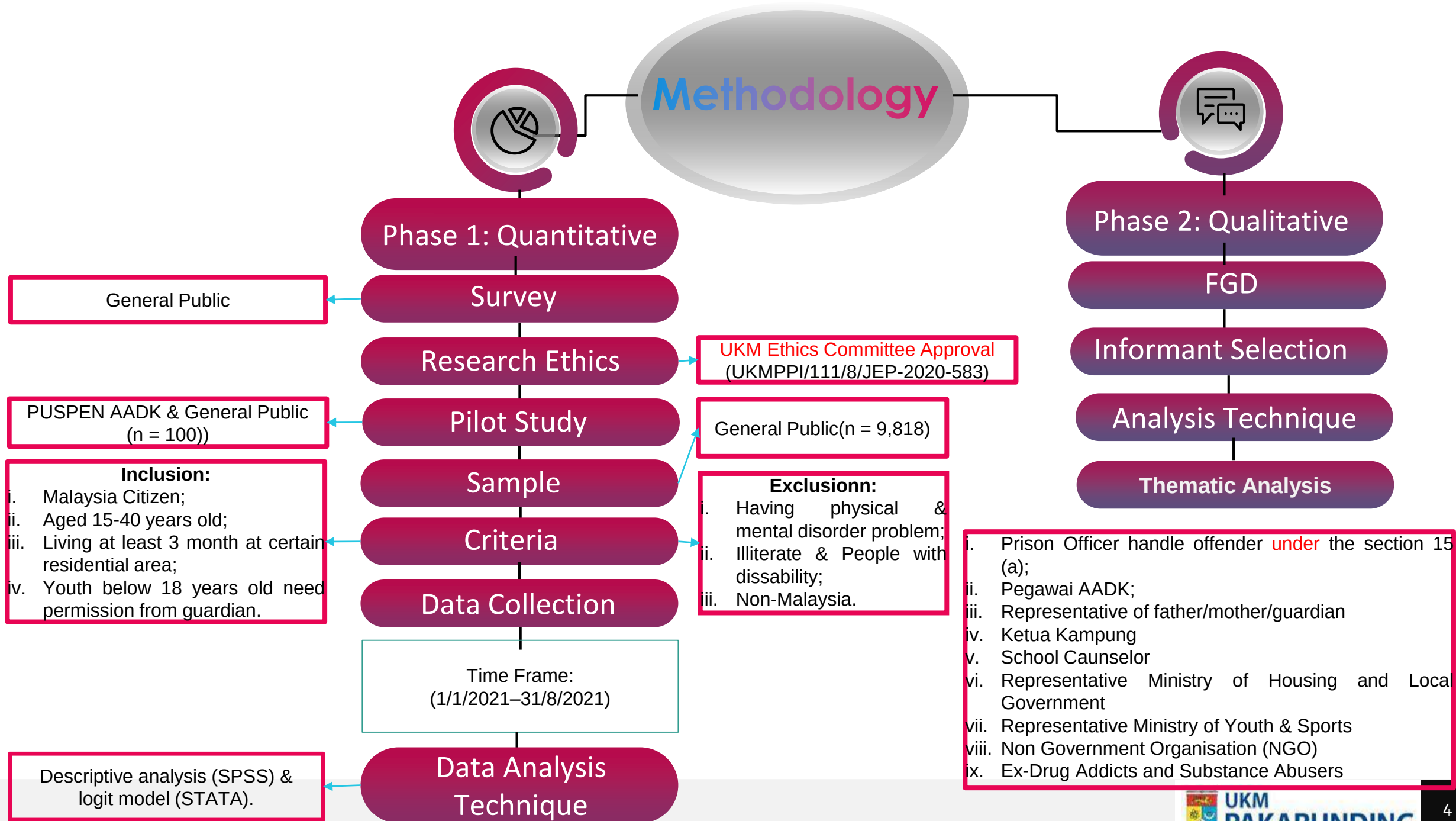
03 The lack of accurate magnitude/estimate makes it difficult for AADK to implement the PDH/DDN policy.

02 Nationwide study on the prevalence of drug addiction among youths have never been studied in Malaysia compared to foreign countries.

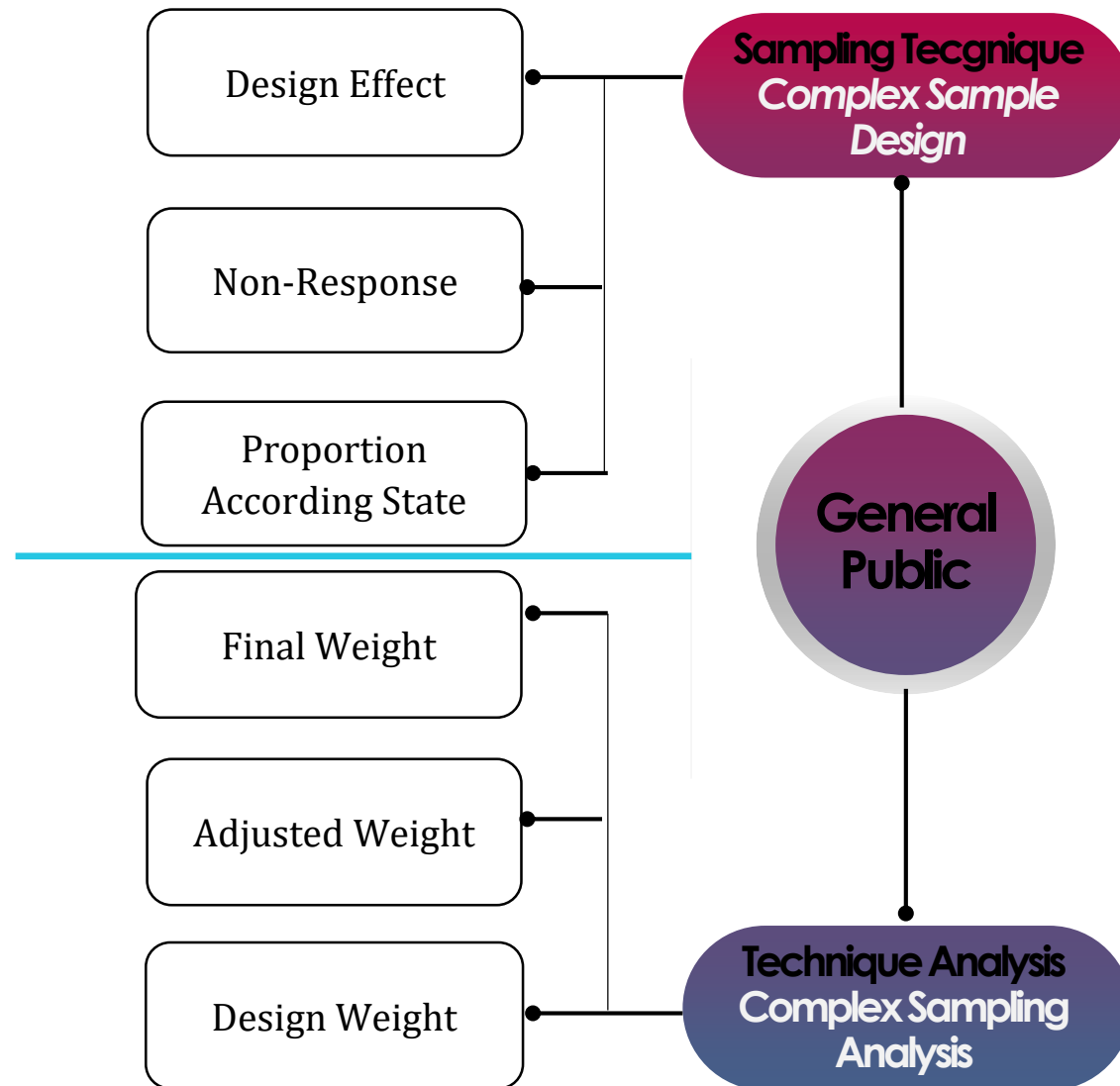
01 This prevalence study is are necessary at the moment to make projections in the future

Research Objective

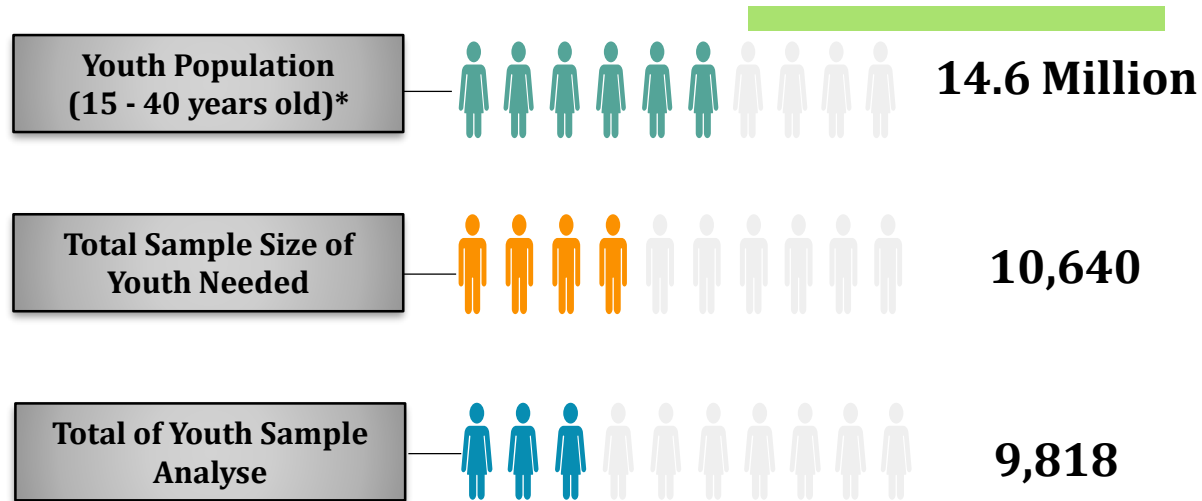




Sampling Technique & Data Analysis



Information of Quantitative Data Collection



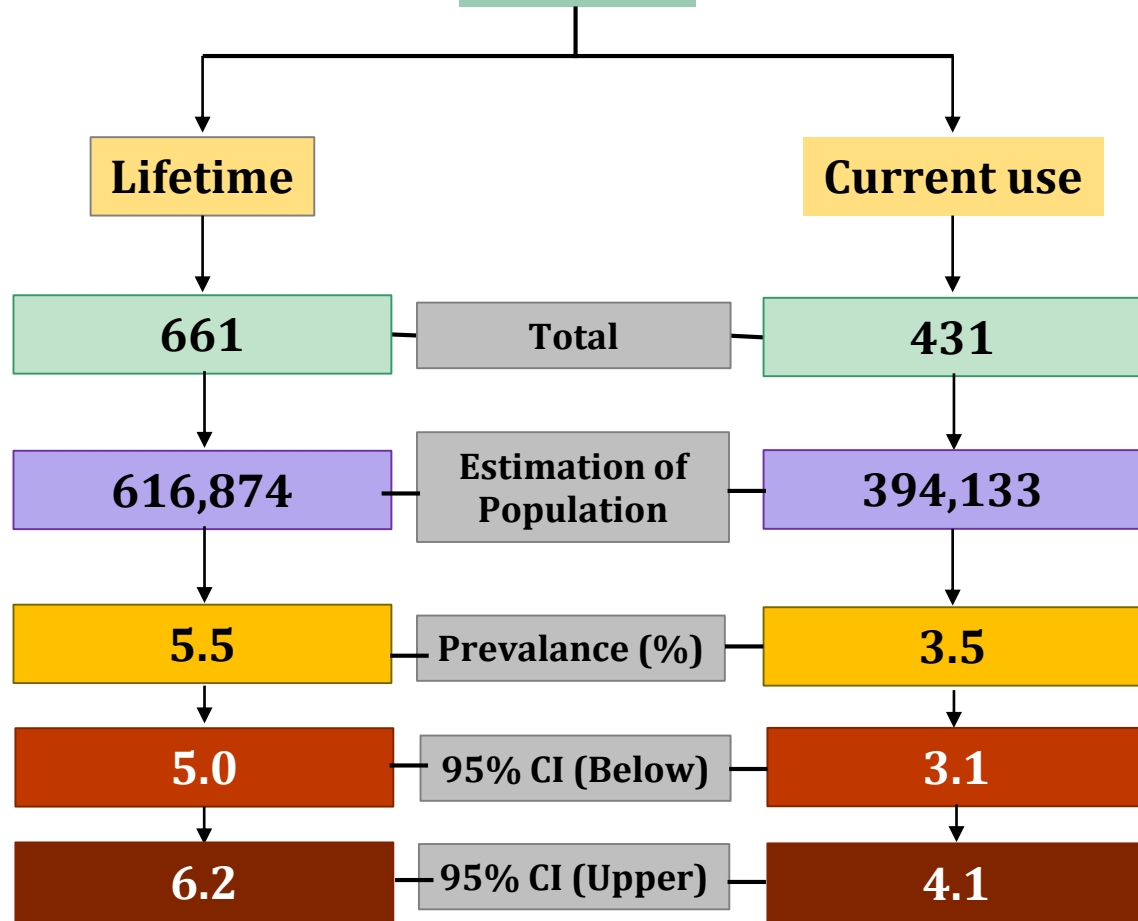
Total data collected are 10,640 including of data replacement. However, for the purpose of analysis replacement data are a total of 822 (7.7%) are not count. *DOSM (2019)

Objective 1

To study the prevalence of drug addiction & substance

Prevalence of Drug and Substance Addiction

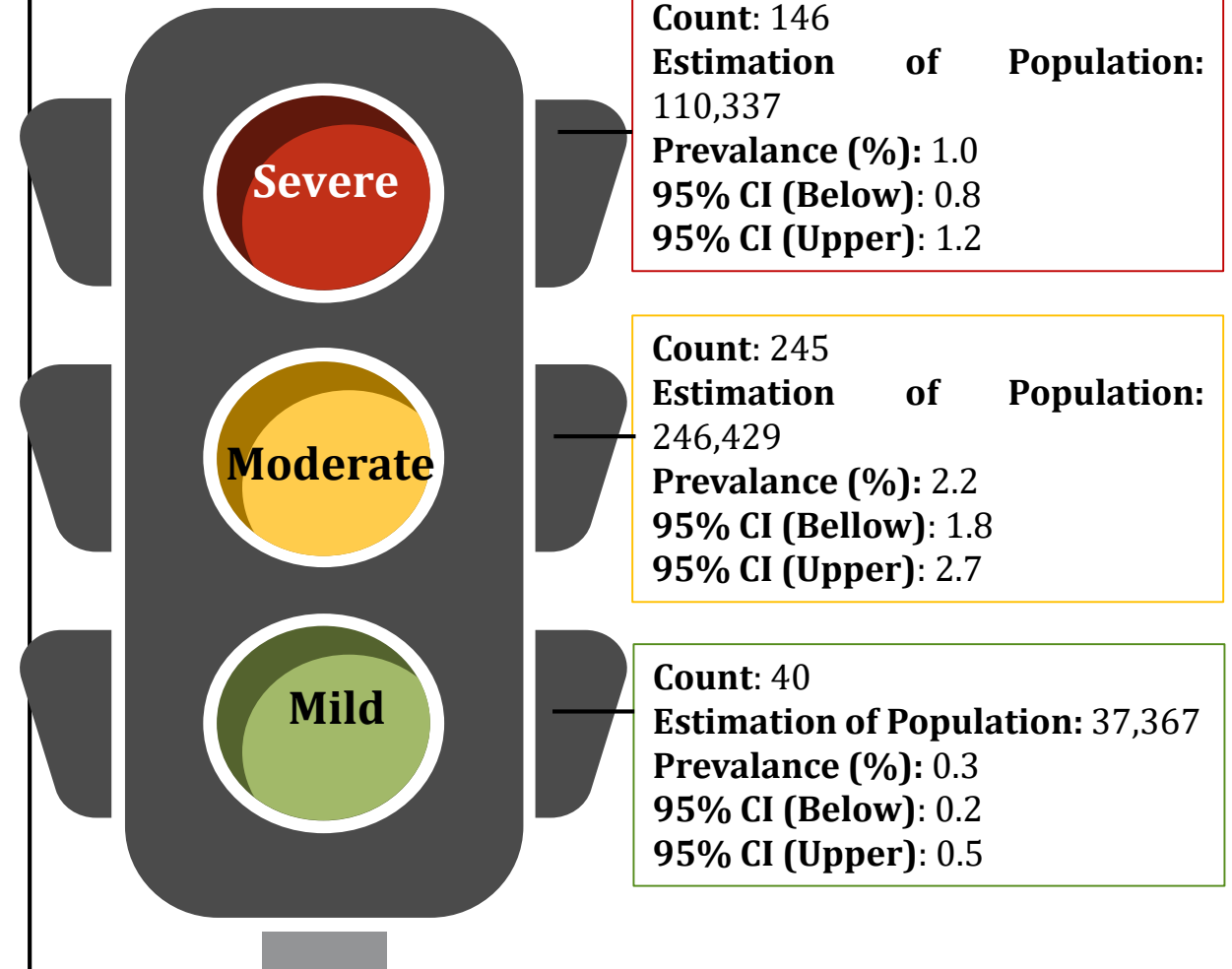
Category



CI=Confidence Interval, Population Size= 11,129,316

Lifetime: Lifetime Drug Users
Current use: Current Drug Users

Dividing of Current Use According to Severity



Current use: Were Analysed Based on Severity.

Prevalence of Drug and According to Age Group

		Age category	Sampel	Population estimate	Prevalens (%)	95% CI	
						low	high
Lifetime		15-18 ² (n=959)	20	35,422	2.5	1.0	5.9
		19-24 ³ (n=2541)	170	147,028	4.9	4.0	6.0
		25-30 ⁴ (2,729)	252	250,839	7.7	6.4	9.2
		31-40 ⁵ (3,589)	219	183,586	5.3	4.5	6.3
Current use		15-18 ² (n=959)	19	34,297	2.4	1.0	5.8
		19-24 ³ (n=2541)	119	101,440	3.4	2.6	4.4
		25-30 ⁴ (2,729)	176	157,654	4.8	3.9	6.0
		31-40 ⁵ (3,589)	117	100,742	2.9	2.3	3.7

CI=confidence interval, ² Population size= 1,417,268, ³ Population size= 2,991,695, ⁴ Population size = 3,256,320, ⁵ Population size = 3,464,034.

Note: 9,818 respondents used as denominator and age category was based on definition provided by the Ministry of Youth and Sport (KBS) 2020

The Prevalence of Drug According to Severity

Level of severity (Current Use)		Age Category	Sampel	Population estimate	Prevalens (%)	95% CI	
						Low	High
Mild		15-18 ² (n=959)	6	6,744	0.5	0.2	1.2
		19-24 ³ (n=2541)	11	12,022	0.4	0.2	0.8
		25-30 ⁴ (2,729)	7	6,647	0.2	0.1	0.5
		31-40 ⁵ (3,589)	16	11,954	0.3	0.2	0.6
Moderate		15-18 ² (n=959)	8	23,042	1.6	0.4	5.8
		19-24 ³ (n=2541)	62	49,384	1.7	1.2	2.3
		25-30 ⁴ (2,729)	103	110,825	3.4	2.6	4.4
		31-40 ⁵ (3,589)	72	63,178	1.8	1.4	2.5
Severe		15-18 ² (n=959)	5	4,512	0.3	0.1	0.9
		19-24 ³ (n=2541)	46	40,035	1.3	0.8	2.1
		25-30 ⁴ (2,729)	66	40,181	1.2	0.9	1.7
		31-40 ⁵ (3,589)	29	25,610	0.7	0.5	1.2

CI=confidence interval, ² Population size= 1,417,268, ³ Population size= 2,991,695, ⁴ Population size = 3,256,320, ⁵ Population size = 3,464,034.

Note: 9,818 respondents used as denominator and age category was based on definition provided by the Ministry of Youth and Sport (KBS) 2020

Ratio of Drug Addict and Substance Users

Current use

394,133 person (Estimation of Drug User Population)
89,916 orang (AADK Data Base)

= 4.38

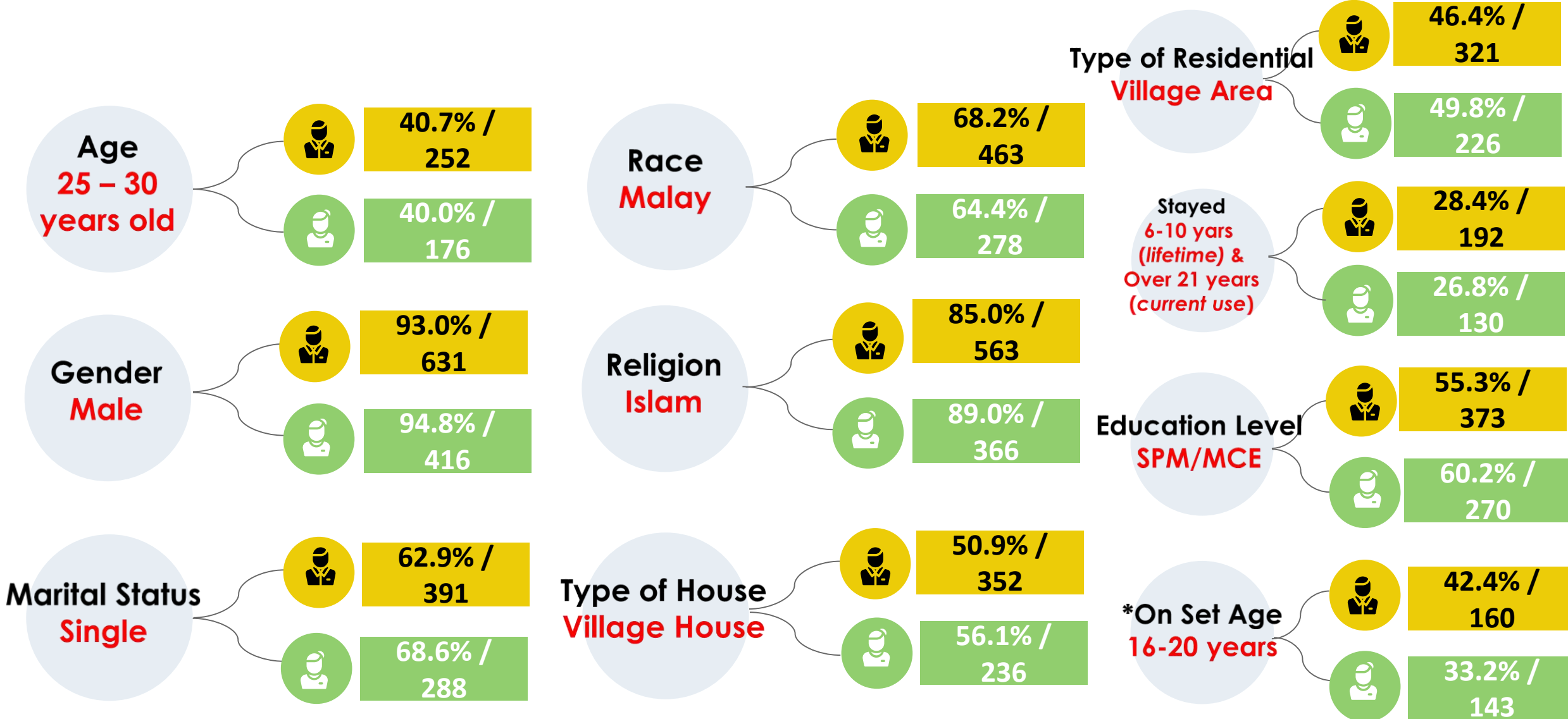
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Objective 2

Providing socio-demographic and socio-economic profiles among civilian youth

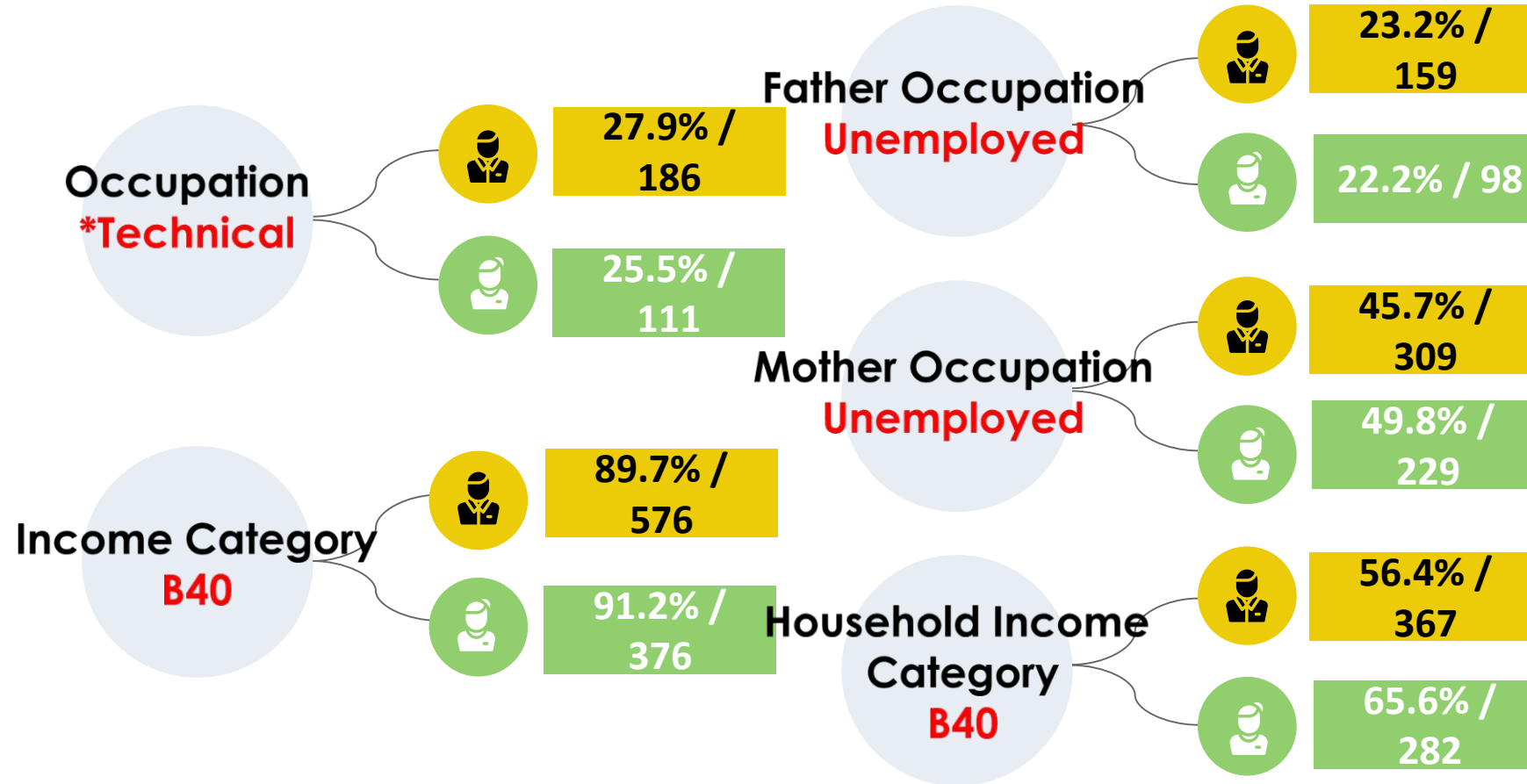
Socio-Demographic Profiles of Civilian Youth Respondents



Lifetime : 661
Current use : 431

Notes: Information are based on **HIGHEST VALUE** only.
 *On Set Age as early at 9 years old.

Socio-Economic Profiles of Civilian Youth Respondents



Lifetime :

661

Current use :

431

Notes: Information are based on **HIGHEST VALUE** only.

***TEKNIKAL** job refer to "technician; electrition, welder, massager, mechanic, chef, designer and related."

Objective 3

Identifying factors of
involvement in drug addiction
and substance use

Identifying Factors of Involvement in Drug and Substance Use

Group	Theme	Data Based on Current Use (Odd Ratio Value)
Risk Factors	Demography	Gender (Male) (4.534)
		*Age 19-40 years old (2.775, 3.129, 1.900)
		Single (1.821)
	Risky Behaviour	High score of anti-social behaviour (criminal activity) (1.048)
	Influence	High score on negative influence (would like to try) (1.089)
	Source of drug	Source from friends (8.086)
	Mental Health status	Anxiety (2.470)
	Knowledge on drug	Increased knowledge score (general on drug) (1.051)
Protective Factors	Attitude	Negative attitude (dislike) towards drug (0.970)
	Social Support	Good social support from family members & friends (0.925 & 0.963)

* 19-24 years old=2.775, 25-30 years old=3.129, 31-40 years old=1.900

Focus Group Discussion Findings

-Discovered 5 main Themes-

1. Factors of Drug and Substance Use

Peers

Family problems

Curiosity
feelings &
excitement

2. Types of Drug and Substance

ATS type
(amphetamine)

Cocktail drug
(mixed)

New
Psychoactive
Substance (NPS)

3. Effect of Drug and Substance Use

Positive:
Endurance to
hard work

Negative:
Criminal case

4. Prevention Method

Open campaign

Multiracial
community
engagement

Bio-psiko-sosial-
spiritual Module

5. The Role of Stakeholders

Providing data
(IYRES)

Prevention,
treatment &
rehavilitation
(AADK)

Advocacy (NGO)

Notes: For further information, please refer to Full Report.



Recommendation and Policy Implication

Recommendation and Policy Implication

INDIVIDUAL EMPOWERMENT

Program = Formation of identity, personality, values & vision.

→ **Activity** = Sports, Education, Mental Health Campaigns & Programs, Volunteering.

SOCIO-ECONOMIC EMPOWERMENT

Program = Decent, Work, Community

→ **Activity** = Roles & responsibilities of employers, Awareness & prevention programs, Using of technology when involves 3D work (Dirty, Dangerous, Difficult).

Program = Skills Improvement

→ **Activity** = Empowerment of vocational stream learning, Empower Skills, Up-Skilling & Re-Skilling, Re-Draft 'Drug Free Policy'.

SOCIAL SUPPORT & FAMILY EMPOWERMENT

Program = Smart Parenting

→ **Activity** = Program 'Family on Alert' (Risk family), Mental health care, Safe Bubble, Local community power (KRT).

Program = Building a conducive home environment

→ **Activity** = Improving the parent-child relationship.

INSTITUTION & AGENCY EMPOWERMENT

Program = Reducing Drug Resources and Supply

→ **Activity** = Gateway of substance such as cigarettes & alcohol, Refining of co-curricular modules, Developing digital applications.

Mapping Relationship Between Main Findings and Policy Recommendation (Development of Cluster Individual Empowerment)

Research Findings	Support from past studies	Program	Activity	Suggestion	Agencies involve
- Male (<30 years old); - Single; - Sources from friends; - Negative influences (friends & desire to try drugs)	Individual factors are the main factors of addiction (Tunggak, 2015; Ahmad, 2016). Salleh (2012) there are 4 main factors that contribute to the problem of drug addiction, namely the influence of friends, the attitude and desire to try, lack of religious education and self-resilience or poor motivation. In addition, stress, depression and anxiety are also contributing factors.	Formation of identity, personality, values & vision	Sports	Sports activity with the family (hiking, jogging etc).	Ministry of Education; Ministry of Higher Education; Ministry of Youth & Sports; Health Ministry; Ministry of Communications & Multimedia; The Ministry of Human Resources; Ministry of Home Affairs (AADK)
				Electronic sports (e-Sport) by applying educational values.	
			Education, Campaigns & Mental Health Programs	Emphasis on curriculum/modules is appropriate for the age of the child.	
				Education and stress management campaigns start at children <15 years old.	
				Prevention module (smoking, vape & pod) as gateway substance.	
			Volunteering	Re-branding the program <i>rakan muda</i> .	
				Enforcement of community youth involvement.	

Mapping Relationship Between Main Findings and Policy Recommendation (Development of Socio-Economic Empowerment)

Research Findings	Support from past studies	Program	Activity	Suggestion	Agencies involve
- Status of Socio-Economic (B40), - No job & fixed income	In societies with low socio-economic status, youths are highly vulnerable to various health risks and social problems, for example educational dropout, unemployment, involvement in deviant and criminal activities, drug abuse and physical and mental health problems (Carlo & Ali, 2018).	Program DWC (Decent, Work, Community)	Roles & responsibilities of employers	Enterprise relations between employers and trade unions in harmonizing employee health policies	Ministry of Finance; Ministry of Rural Development; Ministry of Entrepreneur Development & Cooperatives; Ministry of Women, Family and Community; Trade Unions; Ministry of International Trade and Industry; Ministry of Science, Technology & Innovation
			Awareness & prevention programs	Employee Assistance Programme (EAP). Schemes that help through provisions to undergo psychological treatment, therapy and so on	
			The use of technology involves 3D work (<i>Dirty, Dangerous, Difficult</i>).	Research & development of artificial intelligence (AI) technology in the 3D industry.	

Limitation

1 Research Design

Cross sectional study difficult to prove cause and effect.

2 Respondent Problem

- Sensitivity; Memory Problems,
- Fear & Suspicion, Communication

3 Pandemic COVID-19

Movement restrictions & SOPs

Way Forward

Focus Area

Studies should be focused on high-risk areas involving urban and rural areas.

Future Research

Drug prevalence studies are recommended to be done every 3 or 5 years.

Target Group

Follow-up study for target group (Multiracial / Occupational Sector / Area).



Thank You

Prof. Dr. Rozmi Ismail



03-8921 3228



rosmi@ukm.edu.my



Prevalence of Drug and Substance Use among Malaysian Youth: A Nationwide Survey

Rozmi Ismail ¹, Mohd Rizal Abdul Manaf ^{2,*}, Mohd Rohaizat Hassan ², Azmawati Mohammed Nawawi ², Norhayati Ibrahim ³, Novel Lyndon ⁴, Noh Amit ³, Ezarina Zakaria ¹, Muhammad Ajib Abd Razak ¹, Norshaffika Izzaty Zaidy Nor ¹, Md Shafiin Shukor ⁵ and Aimi Fadzirul Kamarubahrin ⁵

- ¹ Psychology and Human Wellbeing Research Centre, Faculty of Social Sciences and Humanities, Universiti Kebangsaan Malaysia, Bangi 43600, Selangor, Malaysia; rozmi@ukm.edu.my (R.I.); ezaz@ukm.edu.my (E.Z.); muhdajib@ukm.edu.my (M.A.A.R.); shaffika.izzaty@ukm.edu.my (N.I.Z.N.)
 - ² Department of Community Health, Faculty of Medicine, Universiti Kebangsaan Malaysia, Jalan Yaacob Latiff, Bandar Tun Razak, Cheras, Kuala Lumpur 56000, Selangor, Malaysia; rohaizat@ppukm.ukm.edu.my (M.R.H.); azmawati@ppukm.ukm.edu.my (A.M.N.)
 - ³ Health Psychology Programme, Faculty of Health Sciences, Universiti Kebangsaan Malaysia Kuala Lumpur Campus, Kuala Lumpur 50300, Selangor, Malaysia; yatieibra@ukm.edu.my (N.I.); nohamit@ukm.edu.my (N.A.)
 - ⁴ School of Development, Social and Environmental, Faculty of Social Sciences and Humanities, Universiti Kebangsaan Malaysia, Bangi 43600, Selangor, Malaysia; novel@ukm.edu.my
 - ⁵ UKM Pakarunding, Universiti Kebangsaan Malaysia, Bangi 43600, Selangor, Malaysia; p80550@siswa.ukm.edu.my (M.S.S.); aimifadzirul4@gmail.com (A.F.K.)
- * Correspondence: mrizal@ppukm.ukm.edu.my



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Abstract: Uncontrolled drug and substance use (DSU) may pose unprecedented threats to nation building and a country's socioeconomic development. Despite considerable efforts made and resources used to address DSU concerns, Malaysia has seen a significant annual rise in cases of DSU. The bulk of the reported cases originate from youth between the ages of 15 and 40 years. To date, data related to DSU in Malaysia have been entirely dependent on operation statistics, arrest counts, and reported cases; DSU may therefore be under-reported and the data obtained not representative at the national level. This study aims to determine the prevalence of DSU among Malaysian youth through a large nationwide representative survey. Of the population of 11,129,316 youth aged 15–40 years, the prevalence of DSU among lifetime users was found to be 5.5%, while for those who had taken drugs in the past 30 days or who currently use them, the prevalence of DSU was found to be 3.5%. The most popular drugs for lifetime users were kratom or *Mitragyna speciosa*, while for current users the most popular drug was cannabis. The current study reports the magnitude of the problem at a country-wide level, which is a crucial preliminary effort for crafting evidence-based and well-informed policies.