

Community Empowerment Model Through the P4GN Program to Develop a Drug-Threat-Responsive

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Abstract

Background – Drug abuse poses a serious threat to social stability and community well-being, particularly in the urban areas of Cimahi City.

Research Urgency – Cimahi City requires a community-based response that mobilizes institutions and residents through the P4GN program.

Research Objectives – This study aims to develop a community empowerment model through the Prevention and Eradication of Drug Abuse and Illicit Trafficking Program (P4GN) as an effort to realize a Cimahi City that is responsive to drug threats.

Research Method – The study employed a qualitative descriptive method involving seven informants (one Head of BNN Cimahi City, two program outreach analysts, and four community representatives) selected purposively, using in-depth interviews, participatory observation, documentary study, and Focus Group Discussions (FGDs), with data validity examined through technique triangulation.

Research Findings – The findings indicate that community empowerment through the P4GN program has the potential to be effective in increasing public awareness and knowledge of the dangers of drugs. These findings were obtained through analysis of data from interviews with stakeholders, review of relevant documents, and focus group discussions involving various community elements.

Research Conclusion – The proposed empowerment model emphasizes active community participation in various drug-prevention and drug-education activities, as well as collaboration among government, educational institutions, and community organizations.

Research Novelty – The novelty of this study lies in the formulation of an empowerment prototype model that integrates five operational stages into a single, systematic development cycle, offering a conceptual contribution to the development of community-empowerment-based P4GN models in other cities with similar characteristics.

Keywords: community empowerment model; P4GN program; prototype model; drug-responsive city

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INTRODUCTION

Drug abuse and illicit drug trafficking remain persistent problems faced by countries around the world (Mahmoud & Dabit, 2020). This issue is largely driven by the complexity of drug distribution networks controlled by transnational organized crime, rendering generic policy strategies insufficient and necessitating innovative policy formulations that balance demand reduction and supply reduction efforts (Thanh-Luong, 2022).

Most nations confront narcotics networks that transcend administrative boundaries (Clark et al., 2021). Since narcotics circulation is predominantly controlled by Transnational Organized Crime (TOC), countermeasures must adopt non-conventional policy approaches that integrate both demand-side and supply-side considerations (Republic of Indonesia, 2020).

The search for effective policy solutions to address drug abuse continues to spark extensive scholarly debate (Hatta, 2022). Discussions on evaluative policy frameworks often generate tensions between legal-action-oriented approaches and prescriptive yet comprehensive public policy models. For instance, the United States' experience in combating drug cartels offers critical reflections for policymakers on the need for atypical public policy analysis, particularly when addressing systemic policy issues such as narcotics (Ahmad, 2024; Thanh-Luong, 2022).

In Indonesia, the challenges posed by drug abuse and illicit trafficking have grown increasingly complex (Ahmad, 2024). As the lead sector, the National Narcotics Board (BNN) cannot work alone; it requires active participation from ministries, government agencies, the public, and even the private sector (Wangsajaya, 2016). The government has pursued a combined criminal-justice and public-health approach, beginning with amendments to Law No. 22/1997 on Narcotics. On 12 October 2009, Law No. 35/2009 on Narcotics (hereinafter the Narcotics Law) was enacted. This law introduced significant measures to divert drug users from the criminal justice system to treatment, such as mandatory reporting mechanisms and judicial discretion to prioritize treatment over imprisonment. However, the same law still contains provisions that may criminalize drug users. Further efforts to foster integrated national action resulted in Presidential Instruction No. 6/2018 and Presidential Instruction No. 2/2020 on the National Action Plan for P4GN, mandating all ministries and regional governments to implement and report P4GN activities annually to the President through the BNN.

The National Action Plan for P4GN mobilizes key stakeholders, including: 1) cabinet ministers, 2) the Attorney General, 3) the National Police Chief, 4) the Commander of the Armed Forces, 5) the Head of the State Intelligence Agency, 6) heads of non-ministerial government institutions, 7) heads of state secretariat institutions, 8) governors, and 9) regents/mayors. The Plan also comprises key strategic pillars, including: 1) establishing P4GN regulations within each ministry/agency and regional government; 2) promoting the Family Planning Movement (GenRe) in schools, campuses, and family-planning villages; 3) strengthening social-ecological support for people with social welfare problems (PMKS); 4) disseminating P4GN guidance to all state-owned and regional-owned enterprises; 5) establishing five Narcotics, Psychotropics, and Addictive Substances Education and Information Centers (PIE NAPZA) in five high-risk regions; 6) strengthening community empowerment in mapping NAPZA-abuse problems in vulnerable, underdeveloped, frontier, and outermost areas; 7) forming anti-narcotics and precursor-narcotics task forces/volunteers; 8) protecting critical and strategic information infrastructure to reduce the BNN's information vulnerability; 9) developing anti-narcotics education modules across official training institutions; 10) developing anti-narcotics modules for basic, leadership, technical, and functional training; 11) integrating anti-narcotics topics into school and higher-education curricula; 12) building the capacity of service-institution personnel under the Ministry of Women's Empowerment and Child Protection related to child-focused narcotics prevention; and 13) developing community potential in high-risk narcotics areas (Republic of Indonesia, 2020).

In Cimahi City itself, prevention and eradication of drug abuse and illicit trafficking efforts have been carried out through the formation of P4GN activists (Darodjat et al., 2024); however, implementation still faces several persistent challenges, including: 1) varying interpretations among government institutions as stakeholders responsible for implementing the National Action Plan for P4GN, leading to disparities in achievement benchmarks across ministerial, agency, and community-institution programs emphasis on forming an integrated team to implement the Plan at the regional level through directives to establish cross-district/city Regional Action Plans (RAD) tends to be treated by local governments merely as an additional program alongside the core duties of

Regional Government Organizations (OPD); 2) limited public-communication strategies for disseminating the Plan's steps to local governments, including socialization of the existing Monitoring and Evaluation Reporting System, which adds to the disparity in achievement benchmarks at the regional level; and 3) the directive to form an Integrated Team supporting the Plan at the territorial level, in accordance with Minister of Home Affairs Regulation No. 12/2019 on P4GN Facilitation, still lacks a model for interaction among central and regional government institutions, including a partnership model with community institutions, leaving room for conflicting policies between the National Action Plan for P4GN and existing regional regulations.

Prior studies on KOTAN and P4GN, such as [Darodjat et al. \(2024\)](#) and [Hidayat and Widodo \(2024\)](#), have generally remained at the level of policy description or program-implementation evaluation in a single city without formulating an operational, replicable empowerment model. [Putri's \(2024\)](#) study in Bubunan Village likewise only assessed the general effectiveness of community-based intervention, without producing a structured prototype model. The novelty of this study lies in formulating a community empowerment prototype model that integrates five operational stages (identification, cadre formation, establishment of anti-drug posts, cross-sector collaboration, and monitoring and evaluation) into a systematic model-development cycle, thereby addressing the limitations of previous P4GN empowerment models, which have tended to be partial and unstandardized.

Given the challenges that persist to this day, an intervention model is needed to optimize ongoing efforts in the Prevention and Eradication of Drug Abuse and Illicit Trafficking, particularly in Cimahi City.

The Community Empowerment Model through the P4GN Program (Prevention and Eradication of Drug Abuse and Illicit Trafficking) is designed to build a community that is responsive and resilient to drug threats, particularly in Cimahi City. This model emphasizes active community participation at every stage of prevention, intervention, and response to drug-related problems, with the aim of empowering individuals and communities to take a leading role in P4GN efforts. It focuses on increasing community awareness and capacity to recognize, prevent, and address drug-related problems within their own environment. The community is positioned not merely as an object but as the primary subject empowered to play an active role in the P4GN program. This participation is realized through training, outreach, and activities involving all elements of society, including youth, parents, community leaders, and religious figures. Education and outreach are also carried out continuously and sustainably, targeting various age groups and social strata. The program covers outreach on the dangers of drugs, prevention methods, and how to play an active role in eradication efforts, delivered through various media such as talks, group discussions, campaigns, and social media. A key element of this model is the development and strengthening of anti-drug cadres in every neighborhood (RT/RW, village, or specific community). These cadres are specially trained to become agents of change capable of early detection, providing education, and serving as intermediaries between the community and relevant institutions. These design features align with nonformal education evidence that emphasizes contextual skills, community autonomy, and sustained learning outcomes ([Prasetyo et al., 2021](#); [Saripah & Uyuandi, 2021](#); [Simac et al., 2021](#)).

METHODS

This study employs a qualitative approach with a descriptive method to provide an in-depth account of the implementation of the Prevention and Eradication of Drug Abuse and Illicit Trafficking Program (P4GN) in Cimahi City. The research was conducted at the National Narcotics Board (BNN) Cimahi City Office. The study was conducted over three months, from March to May 2025. The research involved seven informants: one Head of BNN Cimahi City, two program outreach analysts, and four community representatives (community leaders, cadres, and P4GN activists). Informants were selected purposively, based on their direct involvement in and in-depth understanding of the implementation of the P4GN program in Cimahi City.

Data were collected through three techniques: (1) semi-structured in-depth interviews with all informants; (2) passive participatory observation of P4GN activities in the field, such as outreach sessions and anti-drug cadre activities; and (3) documentary study of reports, regulations, and supporting data related to P4GN in Cimahi City. Data validity was examined through technique triangulation, comparing and cross-checking information obtained from interviews, observations, and documents to ensure consistency of findings across sources. As the interviews were conducted in Indonesian, all quotations presented in this article have been translated into English by the

authors. Data analysis was conducted inductively following the interactive model of [Miles, Huberman, and Sald  a \(2014\)](#), comprising four cyclical stages: data collection, data reduction, data display, and conclusion drawing/verification, continuing until the data reached saturation.

RESULTS AND DISCUSSION

Empirical Conditions of the Prevention and Eradication of Drug Abuse and Illicit Trafficking Program in Cimahi City

The policy of Drug-Threat-Responsive Regencies/Cities, also referred to as KOTAN, is a policy aimed at establishing preparedness and strengthening the capacity of local governments to anticipate, adapt to, and mitigate potential narcotics-related threats, managed in an integrative, comprehensive, and sustainable manner within a regional development policy, program, or activity involving all development stakeholders ([Darodjat et al., 2024](#)).

The Prevention and Eradication of Drug Abuse and Illicit Trafficking Program (P4GN) is a strategic initiative implemented by the Indonesian government to address the increasingly complex drug problem ([Hidayat & Widodo, 2024](#)). The program is designed to counter drug threats through a comprehensive approach encompassing prevention, eradication, abuse-response, and rehabilitation for drug users. According to a National Narcotics Board (BNN) report on the 2023 national survey ([National Narcotics Board of the Republic of Indonesia, 2024](#)), Indonesia faces serious challenges in addressing drug distribution, particularly among youth and urban communities. The P4GN program therefore aims to protect the public from drug-related harm by involving multiple parties, including the government, law enforcement, communities, and individuals ([Putri, 2024](#)).

Prevention is a major component of the P4GN program, aimed at reducing drug demand through education, awareness campaigns, and strengthening community resilience. According to a systematic review by [Hutchison and Russell \(2021\)](#), community-based prevention approaches have proven effective in reducing drug misuse in urban settings. The P4GN program emphasizes the importance of early education in schools and communities through outreach on the dangers of drugs, life-skills training, and the promotion of healthy lifestyles. Recent reviews emphasize developmentally appropriate, participatory, and community-based prevention across school, family, and community settings ([Aresi et al., 2023](#); [Liu et al., 2023](#); [Lu et al., 2024](#)).

In terms of eradication, the P4GN program collaborates with law-enforcement agencies, such as the police and BNN, to take firm action against drug traffickers. This collaboration aims to break the chain of drug distribution, which often involves international networks. Based on regional analysis by [Thanh-Luong \(2022\)](#), eradication strategies require coordinated law enforcement, cross-border cooperation, and strengthened intelligence capabilities. The P4GN program also supports the use of information technology to monitor drug movement and accelerate response to public reports of suspicious activity.

The P4GN program also focuses on the rehabilitation of drug users, an important part of breaking the cycle of abuse. The rehabilitation approach applied in this program involves medical treatment, psychological therapy, and social support to help drug users recover holistically. A systematic review by [Erliyani et al. \(2024\)](#) highlights the importance of a rehabilitation approach involving family and community to improve recovery effectiveness and prevent relapse. Within the P4GN program, rehabilitation centers spread across various regions provide comprehensive services that focus not only on physical recovery but also on mental and social recovery.

Prevention and eradication of drug abuse and the illicit circulation of drugs require comprehensive and diverse programs ([Herindrasti, 2018](#)). These programs must integrate multiple strategies, including education, social influence, and policy intervention, to effectively address the complex nature of drug abuse. Social-influence-based programs have shown consistent success in preventing drug abuse; these programs focus on changing social norms and perceptions regarding drug use, which is critical to their effectiveness ([Donaldson et al., 1996](#)). Current evidence likewise recommends multilevel prevention that addresses individual, family, peer, school, and community risk factors ([Nichols et al., 2021](#); [Volkow & Blanco, 2023](#)).

The P4GN program in Cimahi City is designed as a comprehensive response to the growing threat of drug abuse and illicit trafficking that concerns the community, particularly among adolescents and youth. The program integrates various strategies to prevent drug abuse, eradicate its circulation, and provide education and rehabilitation for those affected.

Prevention

The prevention component of this program involves intensive education and outreach in schools, communities, and workplaces. According to a recent study by [Fathian-Dastgerdi et al. \(2024\)](#), effective prevention is achieved through continuous education and strengthening community capacity to independently recognize and address drug threats. In Cimahi City, the program implements drug-awareness campaigns targeting adolescents and youth as a vulnerable group, while also involving families and communities in outreach activities that emphasize early detection and open communication about drug-related risks.

This was echoed by a cadre/outreach analyst from BNN Cimahi City, who explained that outreach is not limited to one-way lectures: “the activities are not just lectures; there is also discussion and direct communication so that people can share what they have experienced or observed in their environment.” The informant also noted that the community, particularly adolescents, initially tended to view drug-related problems as unrelated to their own environment, but that this attitude changed after participating in outreach sessions: “after receiving outreach, the community began to understand that drug prevention is not only the duty of BNN or the police — they also have a role to play.” The main challenge, according to the informant, is sustaining community engagement after activities end, making the role of cadres and community leaders essential to keep residents mobilized.

Eradication

In terms of eradication, the program collaborates with the police, BNN, and other relevant agencies to take firm action against drug traffickers. Strict law enforcement, routine patrols, and periodic joint operations are carried out to reduce illicit drug circulation. [Thanh-Luong \(2022\)](#) emphasized that coordinated law enforcement and community information can strengthen responses to drug trafficking.

Regarding the form of law-enforcement collaboration, one informant from BNN/the police in Cimahi City explained that “the collaboration is carried out according to each party's respective duties. BNN and the police coordinate on handling drug-related problems, while the community helps provide information and takes part in prevention within their own environment.” It was also emphasized that the community does not carry out enforcement directly, but instead serves as a source of initial information, which is then verified and followed up by the authorities: “public reports are very important because the community is closest to the environment — sometimes the initial information is actually first known by residents.” The main challenge in this cross-agency coordination, according to the informant, lies in aligning perceptions and maintaining inter-agency communication so that information can be followed up quickly and accurately.

Abuse and Rehabilitation

This program provides community-based rehabilitation services to help individuals involved in drug abuse reintegrate into society. These services include counseling, therapy, and life-skills training to support the recovery process. [Erliyani et al. \(2024\)](#) explain that rehabilitation programs involving family and community have proven more effective in supporting long-term recovery and reducing the risk of relapse. In Cimahi City, this service is complemented by the establishment of support groups for families whose members are affected by drug problems. Recent reviews further support structured family involvement and sustained support to strengthen recovery and family functioning ([Aleer et al., 2024](#); [Binumon et al., 2025](#)).

This was echoed by one family member receiving rehabilitation services who took part in the support group: “for families, having a support group is quite helpful because we can get information and don't feel like we're facing this problem alone. We can share experiences with other families and gain an understanding of how to properly support a family member going through the recovery process.” The informant also emphasized the importance of a shift in family attitudes from blaming to supporting: “families are beginning to understand that a family member with a drug problem needs support, not just blame. With that support, communication within the family has become more open.” Looking ahead, the informant expressed the need for continued mentoring after rehabilitation, as well as support from the surrounding community so that individuals who have recovered can be well received back into society.

Collaboration and Community Empowerment

The P4GN program in Cimahi City emphasizes the importance of collaboration among local government, non-governmental organizations, communities, and the private sector. This approach is supported by the systematic review by [Hutchison and Russell \(2021\)](#), which affirm that cross-sector collaboration can strengthen drug-prevention and drug-control efforts. In Cimahi, the program also includes the formation of anti-drug cadres in every village, who serve as agents of change and program drivers at the community level. Within nonformal education, partnership networks, accountable management, and capable program managers are also central to sustainable community empowerment ([Irvansyah et al., 2023](#); [Latief et al., 2022](#); [Rahabav & Souisa, 2021](#)).

The cadres' role as a liaison between the community and relevant institutions was affirmed by one village-level anti-drug cadre: “we help convey information about the dangers of drugs to the community, invite residents to take part in P4GN activities, and try to keep an eye on conditions in the neighborhood. If there is an issue or information that needs to be followed up, we pass it on to the relevant party.” In approaching residents who are initially reluctant to get involved, the informant emphasized the importance of gradually building trust: “we can't force the community. The approach is more about communication and providing understanding little by little.” The cadre's motivation to keep carrying out this role, according to the informant, stems from a desire to create a safe environment for the younger generation and an awareness that the success of the P4GN program depends heavily on the community's active role.

Prototype Model of Community Empowerment through the P4GN Program to Realize a Drug-Threat-Responsive Cimahi City

Empowerment refers to efforts undertaken to enable individuals or groups within a community to become empowered that is, capable of taking action to restore or improve the condition of an individual or group. [Suharto \(2006, p. 57\)](#) explains empowerment contextually, noting that the term derives from the word “power,” understood as an individual's capacity to do what they wish. This capacity is not about domination, but about individuals possessing abilities or potential within themselves that can be developed. Empowerment means giving people the opportunity to enhance their knowledge and skills in order to build their own resource capacity ([Ife, 1995, p. 182](#)). This effort is undertaken to shape communities' future capacity by involving the community itself in the process.

The community empowerment model through the P4GN Program in Cimahi City is designed to create a city that is responsive to drug threats by actively and continuously engaging all elements of the community. This approach positions the community as the primary actor in drug prevention and eradication, focusing on raising awareness, strengthening capacity, and fostering cross-sector collaboration. The model's main objective is to build strong social resilience, in which every individual and group in the community has the knowledge and skills to effectively confront drug threats. This orientation is consistent with recent evidence that nonformal education can connect flexible learning, local participation, and community development ([Catini, 2021](#); [Hayat et al., 2024](#)).

This finding reinforces and extends the concept of empowerment put forward by [Suharto \(2006\)](#) and [Ife \(1995\)](#). While Suharto emphasizes empowerment as the strengthening of power or individual capacity, and Ife frames it as a process of active community participation in shaping one's own future, the Cimahi P4GN prototype model translates both ideas into a more concrete structure: anti-drug cadres represent the strengthening of power at the individual level, while Anti-Drug Posts serve as spaces for collective participation that enable the community to be directly involved in decision-making at the neighborhood level.

One of the model's key components is the training of anti-drug cadres in every village, who serve as agents of change within their communities. These cadres are trained to conduct outreach on the dangers of drugs, detect cases of abuse early, and provide support to victims and their families. The model also includes the establishment of Anti-Drug Posts (Posko Anti-Narkoba) in every neighborhood, functioning as information and coordination centers for P4GN activities as well as venues for consultation and reporting of drug-related cases. These posts also serve as hubs for community activities focused on drug-abuse prevention, such as workshops, seminars, and awareness campaigns. Training that develops practical competence can strengthen participants' capacity to act as community change agents ([García-González & Ramírez-Montoya, 2021](#); [Prasetyo et al., 2021](#)).

This empowerment model also emphasizes the importance of collaboration among various parties, including local government, law enforcement, schools, NGOs, and the private sector, to build a solid network for drug-eradication efforts (Rustam, 2020). Through a participatory and inclusive approach, the model aims to make Cimahi City not only responsive but also proactive in protecting its residents from drug threats, thereby creating a safe, healthy, and drug-free environment. Digital and collaborative learning media may further strengthen access, coordination, and community education (Darmawan et al., 2025).

The empowerment prototype model developed by the researchers the community empowerment prototype model through the P4GN Program (Prevention and Eradication of Drug Abuse and Illicit Trafficking) in Cimahi City was designed as a strategic step to create a city that is responsive and resilient to drug threats. The model focuses on active community involvement at every stage, from problem identification to solution implementation, with the ultimate goal of creating a safe, drug-free environment. Research on formal and nonformal education also shows that structured experiential learning can strengthen practical competence and community-oriented initiative (Debarliev et al., 2022). The components of this prototype include:

This integrated prototype differs from P4GN models reported in other cities — such as the implementation in Surabaya City examined by Hidayat and Widodo (2024) and the community-based intervention in Bubunan Village examined by Putri (2024) the Cimahi City model stands out for integrating five model-development stages (identification, cadre formation, post establishment, cross-sector collaboration, and monitoring and evaluation) into a single, sustained cycle, rather than consisting merely of standalone outreach or enforcement programs. This distinctiveness constitutes the Cimahi model's contribution to the community-empowerment-based P4GN literature, particularly for cities with similarly high population density and mobility.

Identification Stage

The first stage of this prototype involves comprehensive problem identification and analysis (Munawir et al., 2019). Surveys and interviews are conducted with various stakeholders, including the general public, schools, and relevant institutions, to map the extent of drug prevalence and community understanding of drug-related risks. The results of this analysis are used to identify high-risk areas and vulnerable groups, allowing interventions to be more precisely targeted and effective.

Formation of Anti-Drug Cadres

Next, the model prioritizes the formation of anti-drug cadres in every village. These cadres are selected from community members with a strong commitment to drug prevention and are then trained intensively (Sari, 2017). This training covers in-depth knowledge of drug-related dangers, outreach techniques, and effective communication skills. These anti-drug cadres become agents of change within their communities, responsible for carrying out outreach and intervention programs at the community level (Irwan & Mahdang, 2022).

Establishment of Anti-Drug Posts

To strengthen drug-eradication efforts, every neighborhood or village establishes an Anti-Drug Post. This post functions as an information and coordination center for community members who need assistance or wish to report suspicious drug-related activity (Asi & Rasjid, 2022). The post also serves as a venue for educational activities, such as seminars and workshops, aimed at raising community awareness of the dangers of drugs and prevention methods.

Cross-Sector Collaboration

This empowerment model also emphasizes the importance of cross-sector collaboration. Local government, law enforcement, schools, and non-governmental organizations (NGOs) work together to build a solid, integrated network for drug-prevention and drug-eradication efforts (Mukhsalmina et al., 2021). This collaboration ensures that each party has a clear role and can mutually support one another in achieving the program's objectives.

Monitoring and Evaluation

This prototype is equipped with an ongoing monitoring and evaluation mechanism. Evaluations are conducted periodically to assess the program's effectiveness and identify areas requiring improvement. In addition,

the model provides access to rehabilitation programs for individuals already involved in drug abuse, supported by family and community, to help ensure they can recover and successfully reintegrate into society.

Mapped against the eight empowerment indicators of the Inter-American Foundation (access, leverage, choices, status, critical reflection capability, legitimation, discipline, and creative perception), this model most strongly fulfills the access and leverage indicators — through cadre training and posts that expand the community's access to information and strengthen its collective bargaining position in decision-making at the village level. Meanwhile, the critical-reflection-capability and legitimation indicators require further strengthening, for instance through participatory evaluation forums that regularly involve residents, rather than relying solely on cadres and officials. Participatory mechanisms should therefore position residents and young people as co-designers rather than merely as program implementers (Aresi et al., 2023; Prior et al., 2022).

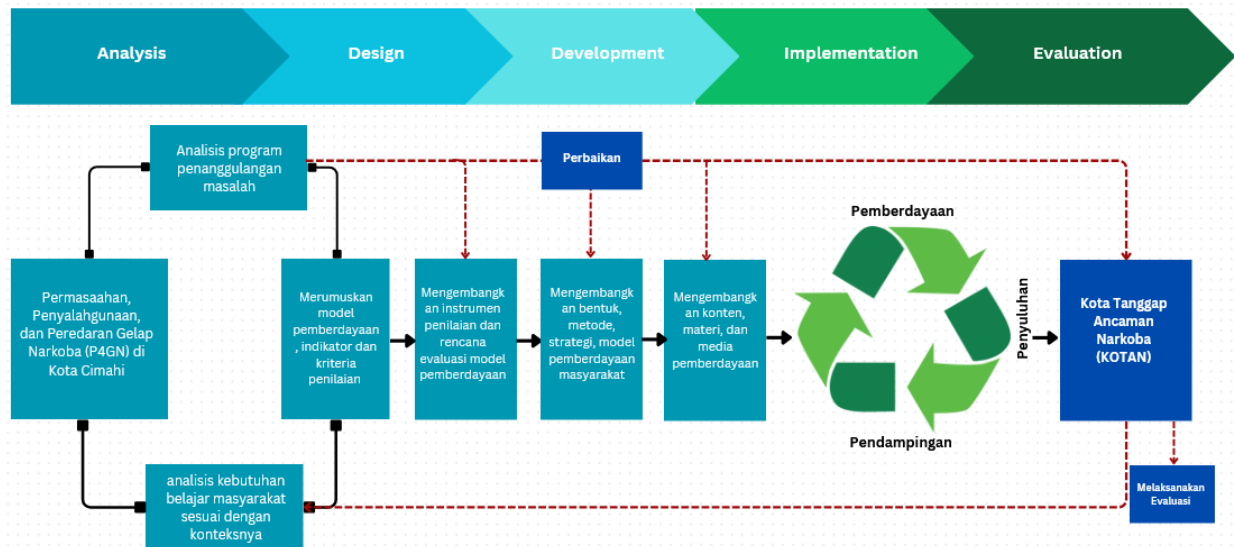


Figure 1. Development Cycle of the Community Empowerment Prototype Model through the P4GN Program in Cimahi City (adapted from the research findings)

Figure 1 illustrates the cyclical structure of the proposed community empowerment model. The process begins with an analysis of local drug-related problems and community learning needs, followed by model design, instrument development, implementation, mentoring, and evaluation. Monitoring and evaluation do not function solely as the final stage; they generate feedback for revising the program, training materials, empowerment strategies, and stakeholder coordination. This continuous cycle enables the model to respond to changing community conditions while maintaining the active involvement of residents, anti-drug cadres, families, government institutions, and law-enforcement agencies. Thus, the model positions community empowerment as an iterative process of participation, capacity building, implementation, reflection, and program improvement.

LIMITATIONS

Nevertheless, these findings are contextual and based on qualitative data from a single research site; generalization to other cities or regencies should therefore be undertaken cautiously, taking into account differences in local socio-demographic characteristics and institutional capacity.

CONCLUSION

The community empowerment prototype model through the P4GN Program (Prevention and Eradication of Drug Abuse and Illicit Trafficking) in Cimahi City indicates that a participatory approach actively and continuously

involving various elements of the community has the potential to be an effective strategy and is expected to strengthen the community's social resilience in facing drug threats. By prioritizing the training of anti-drug cadres, the establishment of anti-drug posts in every village, and cross-sector collaboration among government, law enforcement, schools, and NGOs, this model has the potential to strengthen social resilience and facilitate more targeted responses to drug distribution. Ongoing monitoring and evaluation mechanisms, together with comprehensive access to rehabilitation, are expected to play an important role in supporting the program's effectiveness and minimizing the risk of relapse among individuals previously involved in drug abuse. However, because these findings are derived from qualitative data based on interviews, observations, and focus group discussions, claims regarding the model's effectiveness cannot yet be statistically generalized and still require further testing through experimental research or longitudinal evaluation before being replicated more broadly. With this caveat noted, the model nonetheless offers a meaningful conceptual contribution to efforts to build a safe, healthy environment in Cimahi City that is responsive to drug threats.

REFERENCES

- Ahmad, G. (2024). Kebijakan dan strategi Badan Narkotika Nasional Republik Indonesia dalam menghadapi ancaman nonmiliter kejahatan terorganisir transnasional peredaran gelap narkotika di Indonesia. *Syntax Literate: Jurnal Ilmiah Indonesia*, 9(4), 2338–2354. <https://doi.org/10.36418/syntax-literate.v9i4.15488>
- Aleer, E., Alam, K., & Rashid, A. (2024). A systematic literature review of substance-use prevention programs amongst refugee youth. *Community Mental Health Journal*, 60, 1151–1170. <https://doi.org/10.1007/s10597-024-01267-6>
- Aresi, G., Ferrari, V., Marta, E., & Simões, F. (2023). Youth involvement in alcohol and drug prevention: A systematic review. *Journal of Community & Applied Social Psychology*, 33(5), 1256–1279. <https://doi.org/10.1002/casp.2704>
- Asi, L., & Rasjid, H. (2022). Pentingnya sosialisasi bahaya narkoba bagi generasi muda di Desa Mootinelo Kecamatan Kwandang Kabupaten Gorontalo Utara. *Mopolayio: Jurnal Pengabdian Ekonomi*, 1(2), 108–115. <https://mopolayio.fe.ung.ac.id/index.php/mopolayio/article/view/23>
- Binumon, K. V., Ezhumalai, S., Janardhana, N., & Chand, P. K. (2025). Family intervention models for young adults with substance abuse: A systematic review. *Indian Journal of Psychological Medicine*, 47(4), 326–336. <https://doi.org/10.1177/02537176241246042>
- Catini, C. (2021). Non-formal education: History and criticism of a social form. *Educação e Pesquisa*, 47, Article e222980. <https://doi.org/10.1590/S1678-4634202147222980>
- Clark, J., Gnanapragasam, S., Greenley, S., Pearce, J., & Johnson, M. (2021). Perceptions and experiences of laws and regulations governing access to opioids in South, Southeast, East and Central Asia: A systematic review, critical interpretative synthesis and development of a conceptual framework. *Palliative Medicine*, 35(1), 59–75. <https://doi.org/10.1177/0269216320966505>
- Darmawan, D., Hadiyanti, P., Wibowo, S., Syah, R., & Abdillah, M. F. (2025). Development of digital learning media for community-based education: A collaborative innovation and literacy framework. *Journal of Nonformal Education*, 11(2), 289–300. <https://doi.org/10.15294/jone.v11i2.32060>
- Darodjat, R., Suwandono, A., & Utama, F. A. (2024). Kabupaten/kota tanggap ancaman narkoba (KOTAN): Partisipasi aktif masyarakat dalam upaya menurunkan prevalensi penyalahgunaan. *Jurnal Pengabdian Kepada Masyarakat Nusantara*, 5(2), 2137–2142. <https://doi.org/10.55338/jpkmn.v5i2.3189>
- Debarliev, S., Janeska-Iliev, A., Stripeikis, O., & Zupan, B. (2022). What can education bring to entrepreneurship? Formal versus non-formal education. *Journal of Small Business Management*, 60(1), 219–252. <https://doi.org/10.1080/00472778.2019.1700691>
- Donaldson, S. I., Sussman, S., MacKinnon, D. P., Severson, H. H., Glynn, T., Murray, D. M., & Stone, E. J. (1996). Drug abuse prevention programming: Do we know what content works? *American Behavioral Scientist*, 39(7), 868–883. <https://doi.org/10.1177/000276429603900707>

- Erliyani, N., Sriatmi, A., & Adi, M. S. (2024). The implementation of drug abuse rehabilitation to prevent relapse: A systematic literature review. *BIO Web of Conferences*, 133, Article 00043. <https://doi.org/10.1051/bioconf/202413300043>
- Fathian-Dastgerdi, Z., Eslami, A. A., Ghofranipour, F., & Mostafavi, F. (2024). Effects of a community-based substance use prevention program in Iranian adolescents (SUPPIA)—Using social cognitive theory. *Journal of Substance Use*, 29(2), 300–304. <https://doi.org/10.1080/14659891.2022.2157772>
- García-González, A., & Ramírez-Montoya, M. S. (2021). Social entrepreneurship education: Changemaker training at the university. *Higher Education, Skills and Work-Based Learning*, 11(5), 1236–1251. <https://doi.org/10.1108/HESWBL-01-2021-0009>
- Hatta, M. (2022). *Penegakan hukum penyalahgunaan narkoba di Indonesia*. Kencana. <https://digilib.upnvj.ac.id/detail/penegakan-hukum-penyalahgunaan-narkoba-di-indonesia/34253>
- Hayat, A., Qamar, K., & Wulandari, T. C. (2024). Implementation of nonformal education based on rural communities. *Journal of Nonformal Education*, 10(2), 425–434. <https://doi.org/10.15294/jone.v10i2.11434>
- Herindrasti, V. L. S. (2018). Drug-free ASEAN 2025: Tantangan Indonesia dalam penanggulangan penyalahgunaan narkoba. *Jurnal Hubungan Internasional*, 7(1), 19–33. <https://doi.org/10.18196/hi.71122>
- Hidayat, R., & Widodo, J. (2024). Implementasi program pencegahan pemberantasan penyalahgunaan dan peredaran gelap narkoba (P4GN) di Kota Surabaya Provinsi Jawa Timur. *PRAJA Observer: Jurnal Penelitian Administrasi Publik*, 4(5), 179–191. <https://doi.org/10.69957/praob.v4i05.1653>
- Hutchison, M., & Russell, B. S. (2021). Community coalition efforts to prevent adolescent substance use: A systematic review. *Journal of Drug Education*, 50(1–2), 3–30. <https://doi.org/10.1177/00472379211016384>
- Ife, J. (1995). *Community development: Creating community alternatives—Vision, analysis, and practice*. Longman Australia.
- Irvansyah, A., Muljono, P., Fatchiya, A., & Sadono, D. (2023). Social entrepreneurship competence of non-formal education managers for the empowerment of learning communities. *Journal of Nonformal Education*, 9(1), 179–189. <https://doi.org/10.15294/jne.v9i1.42727>
- Irwan, I., & Mahdang, P. A. (2022). Pelatihan kader remaja peduli narkoba. *Jurnal Pengabdian Kesehatan Masyarakat*, 3(1), 15–23. <https://doi.org/10.37905/jpkm.v2i2.12473>
- Latief, S., Hendrayani, S., & Samsuddin, S. (2022). Building partnership network in viewing of manager of nonformal educational institution. *Journal of Nonformal Education*, 8(2), 279–285. <https://doi.org/10.15294/jne.v8i2.38844>
- Liu, X.-Q., Guo, Y.-X., & Wang, X. (2023). Delivering substance use prevention interventions for adolescents in educational settings: A scoping review. *World Journal of Psychiatry*, 13(7), 409–422. <https://doi.org/10.5498/wjp.v13.i7.409>
- Lu, W., Xu, L., Bessaha, M. L., Liu, Y., Matthews, J., & Muñoz-Laboy, M. (2024). Youth participation in substance use prevention: A national profile, 2011–2019. *Preventive Medicine*, 185, Article 108050. <https://doi.org/10.1016/j.ypmed.2024.108050>
- Mahmoud, A. T., & Dabit, J. (2020). Drug abuse and challenges of illicit trafficking in contemporary Nigeria: Issues, problems and solutions. *Fuwukari International Journal of Sociology and Development*, 2(1), 13–20.
- Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook* (3rd ed.). SAGE.
- Mukhsalmina, M., Mukhlis, M., & Yusrizal, Y. (2021). Peran kepolisian, BNNP dan masyarakat dalam penanggulangan narkoba di Aceh Timur. *Suloh: Jurnal Fakultas Hukum Universitas Malikussaleh*, 9(2), 93–110. <https://doi.org/10.29103/sjp.v9i2.4228>
- Munawir, M., Zulfan, Z., Susmanto, S., & Hidayat, T. (2019). Analisa dan evaluasi prototype pengintegrasian data P4GN menggunakan enterprise architecture planning Badan Narkotika Nasional Provinsi Aceh.

- Prosiding Seminar Nasional USM*, 2(1), 183–195.
<https://ojs.serambimekkah.ac.id/semnas/article/view/1700/1360>
- National Narcotics Board of the Republic of Indonesia. (2024, June 27). *HANI 2024: Masyarakat bergerak, bersama melawan narkoba mewujudkan Indonesia Bersinar*. <https://bnn.go.id/hani-2024-masyarakat-bergerak-bersama-melawan-narkoba-mewujudkan-indonesia-bersinar/>
- Nichols, L. M., Pedroza, J. A., Fleming, C. M., O'Brien, K. M., & Tanner-Smith, E. E. (2021). Social-ecological predictors of opioid use among adolescents with histories of substance use disorders. *Frontiers in Psychology*, 12, Article 686414. <https://doi.org/10.3389/fpsyg.2021.686414>
- Prasetyo, I., Suryono, Y., & Gupta, S. (2021). The 21st century life skills-based education implementation at the non-formal education institution. *Journal of Nonformal Education*, 7(1), 1–7. <https://doi.org/10.15294/jne.v7i1.26385>
- Prior, K., Ross, K., Conroy, C., Barrett, E., Bock, S. G., Boyle, J., Snijder, M., Teesson, M., & Chapman, C. (2022). Youth participation in mental health and substance use research: Implementation, perspectives, and learnings of the Matilda Centre Youth Advisory Board. *Mental Health & Prevention*, 28, Article 200251. <https://doi.org/10.1016/j.mhp.2022.200251>
- Putri, V. I. (2024). *Efektivitas intervensi berbasis masyarakat dalam upaya pencegahan pemberantasan dan penyalahgunaan peredaran gelap narkoba (P4GN) dalam mencegah dan menanggulangi kasus narkoba di Desa Bubunan* [Undergraduate thesis, Universitas Pendidikan Ganesha]. <https://repo.undiksha.ac.id/19177/>
- Rahabav, P., & Souisa, T. R. (2021). Evaluation of non-formal education management in Maluku Province, Indonesia. *International Journal of Evaluation and Research in Education*, 10(4), 1395–1408. <https://doi.org/10.11591/ijere.v10i4.21116>
- Republic of Indonesia. (2020). *Presidential Instruction No. 2 of 2020 on the National Action Plan for the Prevention and Eradication of Drug Abuse and Illicit Trafficking and Narcotics Precursors 2020–2024*. <https://peraturan.bpk.go.id/Details/133160/inpres-no-2-tahun-2020>
- Rustam, I. (2020). Pemberdayaan pemuda desa melalui edukasi pencegahan peredaran narkoba di daerah pariwisata Buwun Mas. In A. R. L. Teluma, M. J. Nur, & B. V. Safitri (Eds.), *Komunikasi, resiliensi sosial dan pembangunan berkelanjutan* (p. 82). Program Studi Ilmu Komunikasi Universitas Mataram.
- Sari, D. M. (2017). Peran kader anti penyalahgunaan narkoba berbasis pelajar oleh Badan Narkotika Nasional Surabaya. *Jurnal Promkes: The Indonesian Journal of Health Promotion and Health Education*, 5(2), 128–140. <https://doi.org/10.20473/jpk.V5.I2.2017.128-140>
- Saripah, I., & Uyuandi, A. E. (2021). Community development: Optimizing the independence attitudes of Al Muttaqien Saving and Loan Cooperative members. *Journal of Nonformal Education*, 7(2), 173–179. <https://doi.org/10.15294/jne.v7i2.28391>
- Simac, J., Marcus, R., & Harper, C. (2021). Does non-formal education have lasting effects? *Compare: A Journal of Comparative and International Education*, 51(5), 706–724. <https://doi.org/10.1080/03057925.2019.1669011>
- Suharto, E. (2006). *Membangun masyarakat memberdayakan rakyat: Kajian strategis pembangunan kesejahteraan sosial dan pekerjaan sosial*. Refika Aditama.
- Thanh-Luong, H. (2022). Transnational drug trafficking in Southeast Asia: Identifying national limitations to look for regional changes. *Revista Criminalidad*, 64(1), 177–192. <https://doi.org/10.47741/17943108.338>
- Volkow, N. D., & Blanco, C. (2023). Substance use disorders: A comprehensive update of classification, epidemiology, neurobiology, clinical aspects, treatment and prevention. *World Psychiatry*, 22(2), 203–229. <https://doi.org/10.1002/wps.21073>
- Wangsajaya, Y. (2016). *Meningkatkan kewaspadaan nasional terhadap proxy war*. Rajawali Pers.