Teachers’ Self-Efficacy as a Critical Determinant of the Quality of Drug Education among Malaysia Students

Ciptro Handrianto¹, Ahmad Jazimin Jusoh¹*, Pauline Goh Swee Choo¹, Nazre Abdul Rashid² and Eko Saputra³

¹Department of Human Development, Sultan Idris Education University, Perak, Malaysia
²Department of Art, Computing and Creative Industry, Sultan Idris Education University, Perak, Malaysia
³Department of Teacher Training and Education, University of Bengkulu, Indonesia

*Address Correspondence to Ahmad Jazimin Jusoh, jazimin@fpm.upsi.edu.my

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Abstract
Drug education in school is one of the efforts of the government for eradicating drug abuse among young children in educational institutions. Teachers play significant role in drug prevention because they spend much of their time with students at school. The objective of this study is to highlight the teachers’ self-efficacy and its impact on level of drug abuse in Malaysian schools. This study employed a qualitative approach acquired through secondary data with literature review. The study showed that teachers’ self-efficacy has contributed to the quality of drug education among students due to dominant components, such as: (1) Teaching performance in the classroom; (2) Developing cooperative learning; (3) Teachers’ personal involvement; (4) Teachers’ training; and (5) Students’ engagement in drug prevention. As the conclusion, teachers’ self-efficacy is a critical determinant factor to improve the quality drug education, especially in classroom situation. The higher the self-efficacy, the more quality drug abuse prevention are found among students. The recommendation of this study is that the government body should actively encourage training’s program for teachers in drug prevention. It also suggests to find out the empirical data for teacher’s self-efficacy in drug education for following studies.

Keywords: Teachers’ Self-Efficacy; Drug education; Students

Introduction
The phenomena of young children involved with drug abuse are increasingly worrying these days [1-3]. Drug abuse already spreads in all parts of human life not only among community but also infects the school institutions. Students who suffered with drug are facing difficulties in study. It leads to poor academic performance, indiscipline, mental imbalance, and low competency [4]. Students couldn’t concentrate, provoke mental health problems, and sometimes triggers to criminal actions.

The data from the National Anti-Drug Agency (NADA) of Malaysia showed that in the last two years there were an increasing number of drug cases among youth (13-39 years old) in Malaysia. The increasing can be seen from 18,417 cases in 2018 to 18,986 cases in 2019. Totally, there were 569 (3,01%) new cases increase numbers of users in a year. The efforts for curbing drug and substance abuse among youth and students have been conducted in various strategies. The strategies include school management [5,6], co-curricular activities for students, parental involvement [7,8], community participation, social media, training for teachers, and drug prevention in teaching-learning process in the classroom. These efforts are part of main strategies in several countries to realize drug free school among students. The participation of school for curbing drug and substance abuse is the crucial point because students spend their quality time in schools.

It cannot be rejected that teachers play a significant role in drug abuse prevention because they have regular access to students [9-11]. The role of teachers in drug abuse prevention is related in what extent the teaching competency and teachers’ self-efficacy are applied in their classroom [12]. Teachers spend much time in the school, approaching with students. They are agent of changes, the role models, and designers for an effective teaching-learning process. Teachers are also professional workers who should have abilities in school drug education.

Background of study
The role of teachers in drug abuse prevention is related to their direct connectivity and relation with student in teaching-learning process. Hansen, Fleming, and Scheier [13] emphasized that the teachers’ engagement to their students can be increased through several ways such as giving more attention to their students when giving opinions, ensuring that the participants enjoy the program and bravely share their perspectives, stimulating attentiveness, being well ar-
ranged for intervention delivery, and directing the students to broadly think about the impact of drug prevention as it influences their lives.

In Malaysia, schools have been equipped with drug prevention program in order to protect the students from becoming drug abuse victims. The responsibility to conduct the drug prevention program making sure that the students are knowledgeable in and aware of the danger of drugs to one’s life and future lies on the teachers [14]. It means that drug abuse prevention is not only conducted in co-curriculum activities but also implemented by the teachers in teaching-learning process in the classroom.

Teacher’s self-efficacy in classroom management has been studied for a long time as one of the central points in teaching-learning activities. Self-efficacy refers to the ability of an individual to assess the level of his/her competence in performing the required actions when dealing with any possible situations [15]. According to the self-efficacy theory, a person easily feels worry when they have low efficacy level as the learning ability, motivation and performance are affected by his or her self-efficacy. When they believe that they will be successful at doing a task they will try to learn and do it if they do not, they would rather not [16,17]. Teachers’ self-efficacy in drug education can be understood as the teachers’ view about their abilities to prevent their students from drug abuse. Based on that, they will manage their teaching-learning activities with a good performance and motivate their students to avoid drug.

However, Sukor and Hussin [14] mentioned that studies on teachers’ self-efficacy, particularly in drug prevention program in school is far from sufficient, thus requiring further investigation. The importance of teachers’ self-efficacy is related to teacher belief to their abilities in drug education, especially in teaching-learning process in the classroom. This study has placed teachers’ self-efficacy as a critical determinant of the quality of drug education among students.

Methodology

This study was designed as a qualitative research as part of the data was secondary data obtained from library research. Secondary data are the data that are not directly collected from the users. Among many of secondary data for social sciences purposes are censuses, information that government departments gather organizational records and the ones originally gained for other research purposes [18].

Mills and Birks [19] in the book of Qualitative Methodology: A Practical Guide has explained that qualitative research refers to the research findings without statistical procedures or other forms of calculation [18]. Furthermore, secondary data of this study were obtained in literatures of teachers’ self-efficacy in quality of drug education, theories of teachers’ self-efficacy, and the data from National Anti-Drug Agency (AADK) of Malaysia. The data and information were received in the form of reports, slides, maps, tables and statistics.

Results and Discussion

School-based drug prevention program has amassed more than 40 years of program assessment discoveries recommending that a wide scope of projects work to lessen drug abuse in youth [20]. Various drug prevention education programs in Malaysian schools have been conducted since a long time [21,22]. The government bodies such as National Anti-Drug Agency (AADK) and Ministry of Education Malaysia (KPM) sign many agreements for joining and collaboration programs in drug prevention for students. In school context, teachers’ participation and involvement determine the success of the program. Therefore, teachers’ self-efficacy in quality of drug education needs to be explored and discussed as the comprehensive effort for drug free school.

Teachers’ self-efficacy

Teacher’s self-efficacy refers to the confidence of an individual (teacher) in their abilities to undertake certain actions or assignments until success. Self-efficacy plays a significant part on how the teachers feel, think, motivate, and behave. Confidence creates various effects through four main processes. The four processes are cognitive, motivational, affective, and selection process [16]. The teacher’s self-efficacy is not only useful for the teacher himself; it also has impacts on student performance result such as; learning achievement and student efficacy level [23]. In teaching learning process, teachers’ self-efficacy is bridge’s connection between teachers and students because it determines the quality of classroom management. The teacher’s self-efficacy influences students’ commitment, participation, and achievement in the classroom.

The concept of a teacher’s self-efficacy refers to what he or she can do. Research has shown that the teachers’ judgment regarding their self-assessment gives an effect to their student learning as it impacts their instructional choice and persistence. As an example, teachers with good efficacy tend to maintain high level of engagement to their students and allocate more time for struggling students believing that they are teachable and just need more attention [24]. It has a strong relation with students’ motivation in learning. Teachers motivate their students to master in material subjects that she or he teaches. The belief that has been developed by teachers will bring positive value for students’ performance.

Zee and Koomen [25] introduced Heuristic Model which explained that teacher’s self-efficacy has a positive relationship with student academic adjustment, teacher’s behavior and practice pattern that is related with class quality, and factors in underlyng teacher’s psychological welfare, including personal achievement, work satisfaction, and commitment. The illustration of these relationships can be seen in Figure 1.

Figure 1. Heuristic model of teacher self-efficacy in relation to classroom processes, academic adjustment, and teacher well-being.
Huber, Fruth, Avila-John and López-Ramírez, [26] create a distinct interventions and trainings of professional development that have exhibited unique methods in increasing a teacher’s perception about his or her ability in becoming a successful teacher; increasing their opportunity to keep doing their practices in each of their teaching fields, and convincingly arguing for trainings and experiences which can directly improve their skillsets and increased their success. This situation will lead to a sense of empowerment and improvement in their TSE. Therefore, inventing a mediator or intervention for increasing TSE would possibly and profoundly impact the profession through impacting the professional effectiveness, retention and subsequently, the performance and outcomes of the students. Türkoğlu, Cansoy and Parlar [27] argued that when a teacher has a high degree of self-efficacy, he or she will be successful in managing student engagement, instructional strategies and classroom management as he can direct the students to participate in the lesson, improve the teaching practice and set up a good condition for learning environment.

Further explained that self-efficacy is not related to skill possessed but related to individual confidence in what they can do with their skill no matter how big it is. Self-efficacy more prioritizes a component of self-belief that someone possessed in facing a situation that uncertain, unpredictable, and even full of pressure. Even though self-efficacy has a huge influence or cause-effect relation on individual action, self-efficacy combines with the environment, previous behaviour, and another personal variable, especially hopes toward result in producing behavior. Self-efficacy will influence some aspects of one’s behavior and cognition [28].

An instrument with international reputation for self-efficacy measurement named TSES – Teachers’ Sense of Efficacy Scale – [29] indicate three key areas of teaching efficacy: (a) instructional strategies, (b) classroom management, (c) and student engagement. According to Chen and Yeeoung [30] teachers’ self-efficacies are identified by three categories of influential factors which are (a) teacher factors (language, pre-service teaching training, experience, understanding of students) (b) student factors (students’ responses, classroom discipline, motivation, student–teacher relations, age) (c) contextual factors (culture, influence from other teachers, class size, resources).

Drug education

Drug education is defined as a teaching and learning systematic process which deals with knowledge impartment and acquisition of drug understanding; Drug education should be age sensitive, developmental and achievable in terms of learning outcomes; should prepare the participant learner to traverse social context in a safe mode where drugs are accessible and taken [31].

The earliest formulations of drug education are the information or knowledge-based models, which started to be popular in the 1970’s. Two major forms of information/knowledge delivery; models using basic information and models employing fear arousal information. Evidenced-based information about drugs, their effects and related harms are provided by the former approach. The central focus is to let the people gain access to accurate information that will influence their ideas about drugs and hopefully drugs decisions. The later one, the fear inducing approach, is based on the idea that people’s decision on drug use can be hindered by the feeling of fear and anxiety [32].

School drug education programs applying minimized harms principles are required to give the young people the knowledge and skills so that they can make a wise decision regarding drug use, and the harm reduction or prevention for users and others who are affected should be the program central focus [33]. Content and modes of delivery of drug education programs are considerably various. Some programs contain knowledge about drugs, while some are about delaying or reducing use, the others are about reducing abuse and minimizing the harms related with the use [34].

In terms of formal drug prevention education, the main method that one usually experience is through school system. However, it is imperative to understand from the beginning that drug education was rather perceived as marginally less important in society. Ideally education is not the responsibility of the federal government. It is expected that standardized education curriculum is determined by individual province just like in Canada. As the consequence, unfortunately, consistent mandate that schools must offer comprehensive drug education is not present [32]. In Northern Ireland, all school-aged young people receive school-based drug education, and each school equips themselves with policies for their teachers regarding the best way to treat their students who use drugs. Currently, the program of drug education is supported by the information model, which perceives that being uninformed about the risks is the reason of the drug use. This model uses fear-based tactics [35]. The Drug Education in Victorian School Program – a cohort of secondary school students received a harm reduction and drug prevention program for over a tow-year period (and 18 lessons). Lesson on Alcohol and other lessons were delivered in integral mode, and the whole program delve more the connection among substance use and issues such as mental health, gender norms, violence, and antisocial behavior, and sexual vulnerability [36].

In academic discourse, popularized school-based drug education programs also gain considerable criticism, yet many elementary schools still adopt numerous similar types of programs for their classroom setting. Unarguably, research evidence concludes that many types of the programs applied to young people are surprisingly found as ineffective or counterproductive [32,37].

Teachers’ self-efficacy in quality of drug education

The importance of teachers’ self-efficacy in drug education needs to discuss for eradicating drug abuse comprehensively in school institutions. Teachers are central point in delivering message of drug prevention in the classroom. Table 1 identifies several components of teachers’ self-efficacy in school drug education.
Table 1. Components of Self-Efficacy in School Drug Education.

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Based on literatures, there are five dominant components of teachers’ self-efficacy in school drug education that can be highlighted in following discussions.

Teaching performance in the classroom

The relationship between teachers’ self-efficacy and teacher performance and retentions can be traced back to Bandura’s [38] social cognitive theory who defined sense of efficacy as an individual’s judgement in projecting their capabilities to successfully perform a particular course of action. Schwarzer and Hallum [39] in their work found that teachers whose sense of self-efficacy are low were prone to be job stress and job burnout compared to those with high sense of self-efficacy.

Teachers’ performance is related to teachers’ belief to deliver drug education in the classroom. They have sense of efficacy in designing learning materials and integrated with drug abuse prevention. Teachers encourage their students to avoid drug use in learning situation. Teachers with high level self-efficacy will enjoy in teaching and managing their classes. They are opening minded and happy to discuss about the danger of drug with their students. They have a good confident level to talk about discipline in their class.

Developing cooperative learning

United States of America designed All Stars curriculum that reduced adolescent substance use, sexual behavior, and violence via changes in specific mediating variables [40,41]. The program provides interactive and cooperative learning activities which were debates, games, and general discussion. For increasing the interaction between students and parents, homework is assigned allowing the parents to play an active role in the program. Each of the sessions is planned to affect at least one of the intervening variables of the curriculum [42].

Cooperative learning is one of classroom teachers’ strategies of drug education. Teachers involve students, parents,
and facilitators to improve their interaction in drug prevention among students. Students feel enjoy because they can share their opinions with interactive activities. They have people around them who care to themselves. Teachers give opportunity to students in participating to the drug prevention program.

Teachers’ personal involvement

The individual involvement of teachers with drug prevention programs is crucial as well because their involvement in terms of frequency is integrated into the process of learning [43]. Drug education is delivered by the awareness of teachers. Teachers should actively involve themselves with drug prevention activities in the school. In learning process, teachers have to integrate material subject with drug education. Teachers can encourage students with problem-based learning of drug prevention.

The awareness of school drug education should start from teachers and school administration. All school communities support each other to prevent drug. But teachers have significant role in drug prevention because they have multiple relations with students. Teachers are the role model for their students and their personal involvement is needed by the students.

Teachers’ training

Having this probability and the reality that classroom teachers implement school-based prevention interventions with little (if not zero) training in narrative pedagogy, the current study tries to investigate the use of narratives in a narrative-based middle school drug prevention intervention by teachers [44].

Teachers’ self-efficacy in drug education is supported by teacher’s training. Joining training carries up fresh motivation, knowledge, understanding, readiness, and awareness of teachers in delivering drug prevention in their class. Teachers are more ready and have belief in teaching communication with the students. They will have new strategy in approaching students in drug education.

Students’ engagement in drug prevention

Amid classroom time, drug prevention programs depend intensely on the interactions of students to augment newly acquired skills. As an example, students become active and engaged in a role-play scenario to experience the skills of social assertiveness and drug refusal skills. These endeavours require that the students can enjoy their participation in the program, discover the program materials appealing, and eagerly take part through dynamic talk where they can inquire questions and learn. Students who can get themselves psychologically invested in the program tend to learn new material and master the fundamental skills to drug preventions (e.g., social skills that promote drug refusal efficacy) [13].

Participation and engagement of students in drug prevention reflect how level of teachers’ self-efficacy in teaching-learning process. It is assumed that teachers have a good self-efficacy if their students have strong desire to avoid drug in their life. Students are deeper involved with drug prevention and have awareness that drug abuse is common enemy. They help teachers to eradicate drug and offer themselves as agent of change in their school. There are many drug prevention activities that can be conducted in schools with helps of students. In teaching learning process, students actively discuss and sharing knowledge to their peers. They gain more understanding about the drug abuse and have skill in drug refusal [45-59].

Conclusion

The role of teachers in drug education has been highlighted by several research and policies in some countries. Teachers’ self-efficacy in classroom management has been discussed for a long time. However, it is still limited studies which explore the teachers’ self-efficacy as critical determinant for the quality of drug education. Based on the library studies and systematic reviews, it is concluded that teachers’ self-efficacy has contributed to the quality of drug education in Malaysian secondary schools due to some dominant components, such as: (1) Teaching performance in the classroom; (2) Developing cooperative learning; (3) Teachers’ personal involvement; (4) Teachers’ training; and (5) Students’ engagement in drug prevention.

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