The Effectiveness of Career Counselling Model towards Career Maturity and Self-Concept Level of Former Drug Addicts

Amin Al Haadi Bin Shafie, Che Syaza Syamimi Binti Che Jamri, Mohd Nurul Hadi Bin Yatau, Hishamuddin Bin Abdul Wahab, Mohd Khairul Anuar Bin Rahimi, Nurhafizah Binti Mohd Sukor and Siti Nubailah Binti Mohd Yusof, Chong Siew Ngoh

To Link this Article: http://dx.doi.org/10.6007/IJARBSS/v8-i3/3915 DOI:10.6007/IJARBSS/v8-i3/3915

Received: 26 Jan 2018, Revised: 03 Mar 2018, Accepted: 15 Mar 2018

Published Online: 26 Mar 2018

In-Text Citation: (Shafie et al., 2018)

To Cite this Article: Shafie, A. A. H. Bin, Jamri, C. S. S. B. C., Yatau, M. N. H. Bin, Wahab, H. B. A., Rahimi, M. K. A. Bin, Sukor, N. B. M., ... Ngoh, C. S. (2018). The Effectiveness of Career Counselling Model towards Career Maturity and Self-Concept Level of Former Drug Addicts. International Journal of Academic Research in Business and Social Sciences, 8(3), 207–222.

Copyright: © 2018 The Author(s)

Published by Human Resource Management Academic Research Society (www.hrmars.com)

This article is published under the Creative Commons Attribution (CC BY 4.0) license. Anyone may reproduce, distribute, translate and create derivative works of this article (for both commercial and non-commercial purposes), subject to full attribution to the original publication and authors. The full terms of this license may be seen at: http://creativecommons.org/licences/by/4.0/legalcode
The Effectiveness of Career Counselling Model towards Career Maturity and Self-Concept Level of Former Drug Addicts

Amin Al Haadi Bin Shafie1*, Che Syaza Syamimi Binti Che Jamri1, Mohd Nurul Hadi Bin Yatau1, Hishamuddin Bin Abdul Wahab2, Mohd Khairul Anuar Bin Rahimi3, Nurhafizah Binti Mohd Sukor3 and Siti Nubailah Binti Mohd Yusof3, Chong Siew Ngoh4

1Asian Centre Of Research on Drug Abuse (ACREDA), Islamic Science Institute (ISI), Universiti Sains Islam Malaysia, Bandar Baru Nilai, 71800, Negeri Sembilan, Malaysia, 2Faculty Of Science and Technology, Universiti Sains Islam Malaysia, Bandar Baru Nilai, 71800, Negeri Sembilan, Malaysia, 3Faculty of Leadership & Management, Universiti Sains Islam Malaysia, Bandar Baru Nilai, 71800, Negeri Sembilan, Malaysia, 4National Anti-Drug Agency, 43000, Kajang, Selangor, Malaysia.

Abstract
The purpose of this research was to investigate the effectiveness of Career Counseling Model towards the inmates’ career maturity and their self-concept level. This research has used experimental design, in which experimental and control group, were involved. The total of 64 respondents was purposively selected, 32 of each group, were from two different drug rehabilitation centers. Two instruments were used in the experiment which were Career Maturity Scale (CMI) and Tennesse Self-Concept Scales (TSCS), to measure two variables which were career maturity and self-concept, respectively. The hypotheses were tested by using t-test and the mean score. The result showed that there is a positive significant difference of the mean score of CMI between pre-test (11.1563) and post-test (15.6250) of the experimental group, t = -4.874 (p = 0.00 < 0.05). The result also showed that there is a significant positive difference in the mean score of TSCS between pre-test (232.9000) and the post-test (241.5667) of the experimental group, t = -3.373 (p = 0.002 < 0.05). Both results implied that there was a positive impact on respondents’ career maturity and self-concept level after going through the treatment. Therefore, this study has proven the effectiveness of Career Counseling Therapy in developing inmates’ career maturity and self-concept level.

Keywords: Career Maturity, Self-Concept, Career Counseling, Drug Rehabilitation
Introduction
To date, it has been reported by National Anti-Drugs Agency (AADK) that there was a total of 30,844 numbers of drug addicts in 2016 signifying an increase in number from 26,668 in 2015. Where 4,533 of them encompasses a fraction of the number of unemployed people. According to Akhbar Satar (2017), rising unemployment rate is among the contributing factor towards drug addiction. Even though the addicts have been discharged after getting treatment and rehabilitation in the center, Boundy and Collelo (2001) claim that unemployment is again, recognized as a major contributing factor towards the relapse rate, which is turning back to addiction behaviors. This statement has been supported by a study conducted by Fauziah, Bahaman, Mansor, & Mohamad Shatar (2012) that clarify most of the former inmates in rehabilitation center were intimidated to start off living and face the real world to seek jobs that could afford them and their families. While McLellan, Lewis, & O’Brien (2000) asserted that lacking in vocational skill has been identified as one of the main contributors to the high unemployment rate among former drug addicts, it is a never-ending cycle experienced by most of the former drug addicts.

In addition, apart from unemployment, Samuels & Samuels (1974) suggest that low self-concept is a common denominator as a causative factor of drug abuse or relapse. According to Fauziah and Naresh (2009), the firstline factor that can influence the possibility of relapse, is the self-efficacy or the self-concept of the addicts. Former addicts with lower self-concept have little confidence in sustaining sobriety or abstinence and are easier to feel defeated and give up in figuring out their life towards betterment. The findings are also in an agreeable term with the study by Rabani Bajovdan, Towhidi and Rahmati (2010) which found that former addicts with self-concept issues are likely to turn back into addiction behaviors. It can be explained by the fact that a sense of self-concept can help the addicts to manage and control themselves given that they are exposed to negative events or stressful situations.

Addressing the literature above and to cater to employment issue aforementioned, the researchers have come up and developed a Career Counseling Model. Also by taking suggestions from United Nation Office on Drugs and Crime, UNODC (2008) which has outlined two domains, Employment (Domain 5) and Vocational Skill (Domain 6) as important components in a drug rehabilitation program, the aim is to improve the self-concept and the vocational skills of the inmates in the rehabilitation center so that they are better prepared for career alternatives after being discharged from the center. A comprehensive career plans need to be intervened to provide chances and opportunities for the addicts to either re-enter the workplace or to Opp (2007) mentions that Career Therapy is considered as a solid approach to help those who are in drug rehabilitation treatment as it could restore the confidence of individuals to become a full-functioning society member. Canadian Association of Occupational Therapist (2017) also denotes that career therapy could be a huge help to identify strengths, values, interests, sources, and challenges of rehabilitation treatment itself. Whereas, in Career Counseling Model, there are two elements emphasized as the core elements, which are career maturity and self-concept. Both of these elements have been seen as key-factors to ensure the success rate of the treatment program.

One must have career maturity to ensure that the job chosen is going hand-in-hand with the attributes, value and interest of the individuals. Donald Super (1953) defines career maturity as the readiness of the individuals to make a proper career decision. Simply put, career maturity
relates more to intelligence than to age (Zunker, 2012). In light of the Super’s concept of career maturity, Career Therapy Model incorporated five elements of career maturity. The five elements aforementioned include career planning, the readiness for exploration, informational competence (that includes educational requirements, skill requirements, the types of professions available, job climate, and regulations and expectations of a particular field or industry), decision-making skills, and reality orientation (Super, 1953). Hence, this model is targeted to improve the career maturity of the inmates for them to have better skill in developing their own career.

Self-concept is another element emphasized in this Career Counseling Model. Meyer (1995) described self concept as how a person view himself (self-image) and how one will like others to view him (described self). This view is closely related to the way they feel about their strength and weaknesses, as it may be due to their past experiences and what they think of their future. According to O’Connell (2001), to build self-concept, one also looks at the way he or she is viewed or judged by others. Carl Rogers (1951), one of the most well-versed theorists of the self-concept theory introduced a comprehensive understanding about the importance of self-concept. He defines self-concept collectively as a dynamic system of learned beliefs, attitudes and opinions that each person holds to be true about his or her personal existence.

Super, Starishevsky, and Matlin (1963) have suggested that self-concept plays an important role in the formation of career development. They claimed the growth of a person’s knowledge and experience contributes to the complexity of his or her career self-concept. As people grow older, the more they develop a personal image of their own abilities, personal traits, roles, and values. In this sense, individuals usually compare the subjective personal image with their knowledge about occupations. In the other words, individuals translate their self-concept into occupational perspective, or known as ‘occupational self-concept’. Super et. al (1963) defined occupational self-concept is a constellation of self-attributes that are vocationally relevant to their own selves. Essentially, occupational self-concept is a part of self-concept in which it plays a vital role in complementing a positive self-concept as a whole.

Hence, in line with the literature above, the objective of this research is to study the effectiveness of Career Counseling Model toward the career maturity and self-concept level among inmates in drug rehabilitation center.

Materials and Method
Research Design

This research has adopted an experimental research design, with one experimental group and one control group, that can be called ‘true experiment’ according to Creswell (2008). Experimental study requires respondent to have the pre-test and the post-test in order to determine the effects of the treatment used in this study. A pretest provides a measure on some attribute or characteristic that assesses for participant in an experiments before they receive an intervention, while the posttest is a measure on some attribute or characteristic that assesses for participant in an experiments before they receive an intervention (p. 297). Creswell (2008) further explains the experiment research is used when the researcher test an idea (or intervention) to determine whether it influences an outcome or dependent variable. The experimental group was the group of inmates receiving treatment of Career Counseling Model whereas the control group is the group of inmates that are not receiving the same intervention.
The pre-test was conducted during the early stages of the study. While the post-test was conducted after the intervention has completed. Then comparison between the pre-test and post-test scores will be carried out to examine the changes in terms of career maturity and self-concept level among the inmates.

Sampling
The population of the study involved inmates in two different rehabilitation centers, which were chosen as the experimental group and the control group, respectively. The purposive sampling was employed because there were some preconditions to be fulfilled by the respondents (Chua, 2006). The preconditions were 1) inmates have been admitted into the rehabilitation center for a two month period, 2) inmates already completed the detox treatment. A total of 64 respondents was selected, where 32 respondents were placed in each of the groups. The number of 32 respondents was selected because an experimental research requires at least 15 to 30 (Russell, 1974). In addition, a smaller sample size helps to minimize the occurrence of extraneous effects that would affect the research findings (Fraenkel & Wallen, 2006; Mohd Majid, 2000). In order to answer the research questions and the hypotheses of the study, the researchers have collected and analyzed quantitative data. Quantitative data include the scores from the instruments used in the pre-test and the post-test, which were Career Maturity Inventory (CMI) and Tennesse Self-Concept Scales (TSCS).

CMI is one of the psychological instruments used to measure the level career maturity of the individuals (Savickas, 1984). CMI has 24 items with four domains, including Concern, Curiosity, Confidence, and Consultation. The items of CMI provide the respondents two choices of answer which are YES or NO. Another instrument used in this research was TSCS (Fitts & Warren, 1996). TSCS was used to measure the level of self-concept of the respondents. TSCS has 82 items that consist of 11 domains, including self-critic, negativity, self-identity, behavior, physical, moral, personality, social, family and academic.

Both instruments were translated into Malay language by the researcher and validated by experts. The translation was done by using back translation process. Back translation is the process of ‘re-translation’ of a translated items back into the original language and the subsequent comparison of the original version and the back translation (Brislin, 1970). Although this method have receive a few criticisms due to its weakness in ensuring the reliability (Behr, 2016; Maneesriwongul & Dixon, 2004), yet in this current study, the reliable value is acceptable. The reliability of CMI was tested through field study over 85 respondents, resulting the accepted value of reliability was .723, while the TSCS reliability was .733. According to Chua (2014), the items in the instruments are considered reliable when it has value .700 and above.

On another important note, a face validity test was used to test the validity of the instruments. According to Streiner and Norman (1989), face validity is used to identify whether the instrument is actually measuring the subject its supposed to measure. Kidder (1982) also points out, face validity is one simple technique without implementing any statistical measure. The pre-test and post-test were important to examine the changes in respondents’ maturity in career and their self-concept level before and after receiving intervention, as well as to compare the scores between the control group and experimental group throughout the study.
Career Counseling Model
This research administered the Career Counseling Model. This model was adapted from Career Counseling Model by Magnusson (1995) and Kidd (2007) that has been influenced by Super’s Career Development [22], in which it emphasizes on self-concept in the career development of an individual. Table 1.0 shown below visualizes the Model of Career Counseling Therapy:

| Session (2 hours duration) | Theme          | Activity                                      |
|---------------------------|----------------|-----------------------------------------------|
| 1                         | Pre-Test       | - Ice-breaking - CMI - TSCS                   |
| 2                         | Knowing One Self | Self-concept 1                               |
| 3                         |                 | Self-concept 2                                |
| 4                         |                 | Career Interest                               |
| 5                         |                 | Career Maturity                               |
| 6                         | Career         | Decision Making                               |
| 7                         |                 | Lecture by Human Resource Department of Malaysia |
| 8                         |                 | Job Preparation                               |
| 9                         |                 | Action plan                                   |
| 10                        | Post-Test      | - CMI - TSCS - Termination of session         |

Data Analysis
Quantitative data were obtained from the score of the instruments used in the pre-test and post-test, that were administered to the experimental and control group. By using the t-test, the data were analyzed to compare between pre-test and post-test scores from the experimental and control group in order to determine the effectiveness of treatment used.

Results
Career Planning (Career Maturity Inventory)
In order to investigate the effectiveness of Career Counseling Model towards career planning of the respondents, Career Maturity Inventory (CMI) was used. The results from CMI will be used in the pre-test and the post-test data to compare the change of their maturity in career planning,
as well as to compare between control and experimental group. There were three hypotheses that have been tested.

The comparison of mean score between pre-test and post-test of the experimental group

H0: there is no significant difference towards career planning among the experimental group of respondents before and after undergoing the Career Counseling Model.

For the experimental group that has undergone the Career Counseling Model, the data obtained through Career Maturity Inventory (CMI) were as follows. There was an increase in the mean score of the pre-test (11.1563) as compared to post-test (15.6250) of the experimental group. The mean score difference was shown in the table below:

Table 2.0: The comparison of mean score between pre-test and post-test for the experimental group towards their career planning

|       | Mean   | N    | Std. Deviation | Std. Error Mean |
|-------|--------|------|----------------|-----------------|
| Pre   | 11.1563| 32   | 3.3224         | .58906          |
| Post  | 15.6250| 32   | 3.07697        | .54394          |

Table 3.0: the comparison of t-test score between pre-test and post-test for the experimental group towards their career planning

| Paired Differences | Mean | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | t    | df | Sig. (2-tailed) |
|--------------------|------|----------------|-----------------|------------------------------------------|------|----|-----------------|
|                    |      |                |                 |                                          |      |    |                 |
| Pre-Post           | -4.46875 | 5.18673 | .91689 | -6.33877 | -4.874 | 31 | .000            |

Based on Table 3.0, the t-test value shown is -4.874 (p= 0.00 < 0.05), which means null hypothesis was rejected and hypothesis H1 was accepted. This result showed that there is a positive significant difference towards career planning among the experimental group of respondents before and after undergoing the Career Counseling Model.

The comparison of mean score between pre-test and post-test of the control group

H0: there is no significant difference towards career planning among the control group of respondents in the pre-test and the post-test.

In the control group of respondents, the data were collected from the CMI. A decrease in the mean score for pre and post-test was shown. The negatively significant difference was shown in the table below:
Table 4.0: The comparison of mean score between pre-test and post-test for the control group towards their career planning

|       | Mean  | N   | Std. Deviation | Std. Error Mean |
|-------|-------|-----|----------------|-----------------|
| Pair 1 | PRE   | 10.2188 | 32             | 3.73073         | .65951          |
|       | POST  | 8.9688  | 32             | 3.60541         | .63735          |

Table 5.0: The comparison of t-test score between pre-test and post-test for the control group towards their career planning

|       | Paired Differences |       |       |       |       |
|-------|--------------------|-------|-------|-------|-------|
|       | Mean               | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | T     | df  | Sig. (2-tailed) |
| Pair 1 | PRE - POST         | 1.25000   | 3.13153 | .55358 | .12096 | 2.37904 | 2.258 | 31 | .031 |

Based on Table 5.0, the t-test value shown was 2.258 (p = 0.031 < 0.05), in which the null hypothesis was rejected and the H1 was accepted. This result showed that there is negatively significant difference towards career planning among the control group of respondents.

The comparison of the mean score between post-test of control group and experimental group

H₀: there is no significant difference towards career planning among the control and experimental group of respondents in the post-test.

The data for the post test for both, control and experimental group were collected by using CMI. There was significant difference shown in the result as follow:

Table 6.0: The comparison of the mean score between post-test for control group and experimental group

|       | Mean  | N   | Std. Deviation | Std. Error Mean |
|-------|-------|-----|----------------|-----------------|
| Pair 1 | POST  | 8.9688 | 32             | 3.60541         | .63735          |
|        | POST  | 15.6250 | 32             | 3.07697         | .54394          |
Table 7.0: the comparison of the t-test score between post-test for control group and experimental group

**Paired Samples Test**

| Paired Differences | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | t  | df  | Sig. (2-tailed) |
|--------------------|----------------|-----------------|------------------------------------------|----|-----|----------------|
| Mean 1 POST - POSTJEL | -6.65625 | 5.04566 | -8.47540 - 4.83710 | -7.463 | 31 | .000 |

Based on the Table 7.0, t-test score shown was -7.463 (p = 0.00 < 0.05) indicated that the null hypothesis was rejected and the hypothesis H1 was accepted. This proved that there is a significant difference in the maturity of career planning among respondent of control and experimental group, in which the experimental group showed a higher mean score.

**Self-Concept (Tennesse Self-Concept Scale)**

This study also would like to identify the effectiveness the Career Counseling Model toward the respondents’ self-concept. Self-concept is considered a key-factor for individuals to be independent and have full confidence to face the challenges in their career path. A positive self-concept was perceived to be important for the effectiveness of Career Counseling Model.

There were three hypotheses to be tested in order to measure the difference of self-concept among respondents. The hypotheses had been measured by using Tennesse Self-Concept Scale (TSCS) in the pre-test and the post-test for the control and experimental group.

**The comparison of mean score between pre-test and post-test of the experimental group**

H0: there is no significant difference towards the level of self-concept among the experimental group of respondents before and after undergoing the Career Counseling Model.

Results below revealed the pre-test and the post-test score of TSCS for the experimental group.

Table 8.0: the comparison of mean score between pre-test and post-test for the experimental group

| Paired Differences | Mean | N  | Std. Deviation | Std. Error Mean |
|--------------------|------|----|----------------|-----------------|
| Pair 1 PRE TEST    | 232.9000 | 30 | 12.10400     | 2.20988         |
| POST TEST          | 241.5667 | 30 | 16.71193     | 3.05117         |
Table 9.0: the comparison of t-test score between pre-test and post-test for the experimental group towards their self-concept

| Paired Differences | Mean | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | T   | df  | Sig. (2-tailed) |
|--------------------|------|----------------|----------------|------------------------------------------|-----|-----|----------------|
| Pair 1 PRE TEST    | -8.6667 | 14.07206       | 2.56920        | -13.92126 - 3.41207                      | -3.373 | 29  | .002           |
| POST TEST          |       |                |                |                                         |      |     |                |

Based on the table 9.0, the t-test score of the pre-test and the post-test of the experimental group was -3.373 (p= 0.002 < 0.05). It showed that the null hypothesis was rejected and the hypothesis H1 was accepted. Hence, the result proved that the Career Counseling Model caused a significant difference toward the self-concept of the respondents in the experimental group.

The comparison of mean score between pre-test and post-test of the experimental group

H0: there is no significant difference towards the level of self-concept among the control group of respondents in the pre-test and post-test.

Results below revealed the pre-test and the post-test score of TSCS for the control group.

Table 10.0: the comparison of mean score between pre-test and post-test for the control group

| Mean | N   | Std. Deviation | Std. Error Mean |
|------|-----|----------------|-----------------|
| Pair 1 PRE TEST | 233.3333 | 30 | 18.60169 | 3.39619 |
| POST TEST | 236.5333 | 30 | 19.29040 | 3.52193 |

Table 11.0: the comparison of t-test score between pre-test and post-test for the control group

| Paired Differences | Mean | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | T   | Df  | Sig. (2-tailed) |
|--------------------|------|----------------|-----------------|------------------------------------------|-----|-----|----------------|
| Pair 1 PRE TEST    | -3.20000 | 14.77043       | 2.69670         | -8.71537 - 2.31537                      | -1.187 | 29  | .245           |
| POST TEST          |       |                |                |                                         |      |     |                |

Based on the table 11.0, the t-test score of the pre-test and the post-test of the control group was -1.187 (p= 0.245 > 0.05). It showed that the null hypothesis was accepted and the hypothesis H1 was rejected. This result indicated that there is no significant difference towards
the level of self-concept among the control group of respondents in the pre-test and post-test, although there the score was slightly increased.

The comparison of the mean score between post-test of control group and experimental group

$H_0$: there is no significant difference towards self-concept among the control and experimental group of respondents in the post-test.

The data of the post-test from the both, control and experimental group were collected by using TSCS. The results shown in the table as follows:

Table 12.0: the comparison of the mean score between post-test for control group and experimental group

| Mean       | N  | Std. Deviation | Std. Error Mean |
|------------|----|----------------|-----------------|
| Pair 1     |    | POST TEST (exp)| 236.5333        |
|            |    | POST TEST (con)| 241.5667        |
| 30         |    | 19.29040       | 3.52193         |
| 30         |    | 16.71193       | 3.05117         |

Table 13.0: the comparison of the t-test score between post-test for control group and experimental group

| Paired Differences | Mean | Std. Deviation | Std. Error Mean | 95% Confidence Interval of the Difference | t     | df   | Sig. (2-tailed) |
|--------------------|------|----------------|-----------------|------------------------------------------|-------|------|----------------|
| Pair 1             | -5.03333 | 27.62618      | 5.04383         | -15.34912                                | -998  | 29   | .327           |
| POST TEST (exp-control) |      |                |                 |                                          |       |      |                |
| POST TEST (con)    |      |                |                 |                                          |       |      |                |

Based on the table 13.0, the t-test score of the pre-test and the post-test for the control group was -0.998 (p= 0.327 > 0.05). It showed that the null hypothesis was accepted and the hypothesis H1 was rejected. This result indicated that there is no significant difference towards the level of self-concept among the control and the experimental group of respondents in the post-test, although the experimental group showed a significant difference in the pre-test and the post-test.

Discussion
The Effectiveness of Career Counseling Model towards Respondents’ Career Planning
Six activities were executed focusing on the career development of the respondents, in order to help them to understand their own selves better, to choose a suitable job, to gain information on how to do job-search, and to facilitate them to make decisions. With the aim to measure the effectiveness of the treatment, CMI instrument was used.

Results of CMI demonstrated that there is a positively significant difference of respondents’ maturity in career planning for those who were exposed to the Career Counseling Therapy (experimental group), as compared to the control group. This statement is proven by the post-test result of CMI which shows the mean score of the experimental group (15.6250) is higher than the mean score of the controlled group (8.9688), where the t-value is -7.463 (p= 0.00 < 0.05). The positive effect of Career Counseling Therapy also could be proven by the increase of
the CMI score between pre-test and the post-test of the experimental group itself, where the t-score is -4.874 (p=0.00 < 0.05) indicating the result is significant.

Career maturity denotes the readiness of the individual to make career decisions (Super, 1953). In Career Counseling Model, there are six activities outlined for improving respondents’ career maturity in planning their career. The six activities include Career Interest, Career Maturity, Decision Making, Lectures from the Human Resource Department, Job Preparation, and Action Plan. Each of the activities has its flow and staged accordingly towards the main goal which are career maturity, as well as self-concept.

During the initial stage of Career Counseling Model, the goal was to spark clients’ hopes and to identify the respondents’ motivation toward their future. Concomitantly, the recognition of values, interest, and abilities also must be done as an anchor for the respondents to reestablish their career. To identify those elements, Self-Directed Search (SDS) by John Holland (1971) was used. SDS is the most widely used career interest inventory in the world, having helped more than 14 million people with career planning decisions (Sigma Assessment System, 2017). SDS is believed to be best used for those who are at an early stage of career exploration. A previous study by McGowan (1977) also reveals that SDS could match the code to the occupations that best suit respondents’ personality types, interests, and skills, and help those who are indecisive in choosing their career path.

Subsequently, the excitement during motivation and hopes instillation lead to absolute awareness and thorough exploration of clients’ skills and knowledge of the job orientation. This is consistent with a previous study by Liu and Lee (2009) revealing that motivation has an influence on individual career planning. Magnusson (1995) also pinpoints that it is important during exploration to ensure that the attitude and the aptitude of the client match with job chosen to facilitate the next level of the process, as well as to keep reality in check.

The skill of decision-making was developed in order to help respondents make the right choice after they have crystallized the alternatives of job choices. The facilitator helped the client to confirm the choice made by making them put themselves in certain situation likely toward the job they have chosen, and they were most likely to choose the job based on their own intuition (Magnusson, 1995).

In addition, a good choice is determined by a well-informed decision, thus, additional job information were also given during the intervention. Apart from the talk given by Human Resource Department, the information was gained through discussion in the group. According to Paul Greenbank (2010), discussion and social interaction provide the opportunity to share experiences, ideas and perspectives which will facilitate a more critical approach. This idea also supported by the previous study by Gentner, Loewenstein, & Thompson (2003). The study indicated that this approach facilitates a more in-depth understanding of the factors influencing the way people make decisions and helps respondents to develop decision-making strategies appropriate to the situations they will face.

As mentioned before, there are five primary dimensions of career maturity incorporated in the Career Counseling Model that cover the awareness of the need to plan ahead, the readiness for exploration, information competencies, decision-making skill, and reality orientation. Hence, it could be concluded that the career maturity of respondents improved due to the comprehensive intervention.
Magnusson (1995) has implemented the model based on the Super’s Career Development that emphasized self-concept in development of one’s career. It implies that self-concept is one of the important factors to ensure the success of Career Counseling Model intervention. Two activities were conducted during Career Counseling Therapy, that concentrated on the self-concept of the respondents. Self-concept can be defined as the way the person sees herself or himself. Super (1953) believes the idea of people makes their career decision based on the beliefs about their own abilities and other self-attributes. Hence, self-concept is considered one of the key elements incorporated into the Career Counseling Model in order to alleviate the effect of the treatment. With the goal to measure the effectiveness towards their self-concept, TSCS instrument was used.

Results of TSCS reveals that there is a significant increment in the level of respondents’ self-concept who were involved in the Career Counseling Model, compared to those who were in the control group. This statement is proven by the mean score of the experimental group (241.5667) is higher than the control group (236.5333). The t-score of the mean score comparison is -0.998 (p= 0.327 > 0.05). The data shown implying that the treatment had a positive impact on the respondents, although the difference is not significant. Nevertheless, as to compared to experimental group alone, which are between pre-test and post-test, the result shows a definite increase in the level of self-concept. The data obtained stating the experimental group’s pre-test score is 232.9000 and the post-test score is 241.5667, while the t-test score is -3.373 (p= 0.002 < 0.05). This shows that there is a positive significant difference of self-concept to those who undergone the Career Counseling Model.

In the first session of the treatment, the respondents were asked to reflect their past experience, the current situation they were in, and what their future would be. This is aimed to increase their self-acceptance based on their own identity. As indicated by Oyserman, Elmore, and Smith (2012), identity of oneself is basically made up of 1) the past which is used to be identity of an individual, 2) the present which is the current identity of an individual, and 3) the future which is the ideal self that an individual would like to be, or feels obliged to become. As respondents make the attempt in reflecting, it could help them to know themselves better, thus facilitating them to make a better choice (that is crucial in career planning).

The following session, the respondents were asked to identify their strengths and weaknesses. Through this activity, they also could acknowledge other attributes that pinpointed by fellow group members. This activity is supported by Roger’s (1951) argument implying that the ‘self’ is a social product, in which it develops out of interpersonal relationships and continuously strives for consistency. He further explains that there is a basic human need for positive regards which are both from oneself and from others. A past research has found that individuals make career decisions based on their own belief about their abilities and self-attributes (1953). Thus, both of the activities that aimed to improve self-concept became the strong foundation of the model before it proceeds to the next phase, which is career maturity.

Nevertheless, the idea of self-concept itself developed throughout the treatment, not only just in the first two sessions. This is because the respondents were encouraged to express themselves and to interact with other group members throughout counseling session. In fact, the group career counseling itself has been proven to be effective in the previous studies that conducted among the former drug addict (Powers, 1978) and to the high schoolers (Gallambardo, 2005).
Conclusion
In conclusion, this study has proven the effectiveness of Career Counseling Model toward inmates’ career maturity and self-concept level. The result shows the significant improvement in career maturity and self-concept of the respondents in the experimental group, after going through a full session of Career Counseling Model. This explains the major improvement in clients’ awareness, knowledge and skills for career planning and also the enhancement of self-concept after undergoing this career model. However, the limitation of this research is said to be having the less touch from counsellor experts from organization to run the intervention sessions. The facilitators should be the qualified counsellors who are specializing in organizational counselling with strong advocacy in human resource management as so clients get the direct information about the industrial demands and particular consultation on clients’ inclination in career development. The duration of the intervention sessions is also recommended to be conducted consistently so that the nurturing process to all clients about the importance of having career for life can be successfully accomplished. Nevertheless, is a clear cut alternative to address the productivity rate issue among Malaysians as mentioned earlier that is rooted from the drug addiction problem as one of the contributing factors. Through the findings obtained, this Career Counselling Model is provenly effective in the way of elevating the clients’ career maturity and self-concept as so they will be able to restore their functions in society, thus becoming a fully-functioning entity.

It is to acknowledge that this article is fully funded by National Anti-Drug Agency, Ministry of Home Affairs Malaysia through the Academic Research Grant Scheme 2017.

*Corresponding author: Amin Al Haadi, Asian Centre of Research on Drug Abuse (ACREDA), Islamic Science Institute (ISI), University Sains Islam Malaysia, Bandar Baru Nilai, 71800, Nilai, Negeri Sembilan, Malaysia. E-mail: amin@usim.edu.my

References
Akhbar, S. (2017). *The Star Online*. Institute of Crime and Criminology. Malaysia: HELP UNIVERSITY.
Behr, D. (2016). Assessing the use of back translation: the shortcomings of back translation as a quality testing method. *International Journal of Social Research Methodology*, 573-584.
Boundy, D., & Collelo, T. (2001). *Preventing Relapse Among Inner-City Recovering Addicts*. Retrieved from Reelizations Media: http://www.reelizations.com/rtnorelapse.htm
Brislin, R. W. (1970). Back-translation for cross-cultural research. *Journal of Cross Cultural Psychology*, 187-196.

Canadian Association of Occupational Therapy. (2017). Retrieved from http://www.caot.ca/default_home.asp?pageid=2398
Chua, Y. P. (2014). *Asas Statistik Penyelidikan*. Shah Alam : McGraw-Hill Education (Malaysia).
Chua, Y. P. (2006). *Research Statistic*. Shah Alam : McGraw-Hill Education.
Creswell, J. (2008). *Education Research : Planning, Conducting and Evaluating Quantitative and Qualitative Research* (3rd ed.). Upper Saddle River NJ: Pearson Education Inc.
Fauziah, I., Bahaman, A. S., Mansor, A. T., & Shatar, M. S. (2012). Penagih dahad dan keadaan berisiko tinggi kembali relaps. *Jurnal Sains Sosial dan Kemanusiaan*, 38-49.
Fauziah, I., & Naresh, K. (2009). Factors Effecting Drug Relapse in Malaysia: An Empirical Evidence. 
Asian Social Science, 5(12), 37-44.

Fitts, W. H., & Warren, W. L. (1996). The Tennesse Self Concept Scale: Second Edition (TSCS:2). 
Western Psychological Service.

Fraenkel, J., & Wallen, N. (2006). How to Design and Evaluate Research in Education (7th ed.). 
Boston: McGraw Hill.

Gentner, D., Loewenstein, J., & Thompson, L. (2003). Learning and Transfer: a General Role for Analogical Encoding. Journal of Educational Psychology, 95 (2), 393-408.

Giallombardo, L. (2005). Using Group Counseling to Implement a Career Development Program with Highschool Students. Counselor Education Master's Theses.

Greenbank, P. (2010). Developing Decision Making Skill in Student: An Active Learning Approach. Teaching and Learning Development Unit: Edge Hill University.

Holland, J. L. (1971). A Theory Ridden, Computerless, Impersonal Vocational Guidance System. Journal of Vocational Behavior, 167-175.

Kidd, J. (2007). Career Counseling: Handbook of Career Studies. SAGE Publications, Inc.

Kidder, L. (1982). Face validity from multiple perspectives. San Francisco: Jossey-Bass.

Lee, H., & Liu, C. (2009). The Relationship among Achievement Motivation, Psychological Contract and Work Attitudes. Social Behavior and Personality: An International Journal, 37, 321-328.

Magnusson, K. (1995). Five Processes of Career Planning. ERIC Clearinghouse on Counseling and Student Services.

Maneesriwongul, W., & Dixon, J. K. (2004). Instrument translation process: a methods review. Journal of Advanced Nursing, 175-186.

McGowan, A. S. (1977). Vocational Maturity and Anxiety among Vocationally Undecided and Indecisive Students: The Effectiveness of Holland's Self-Directed Search. Journal of Vocational Behavior, 10 (2), 196-204.

McLellan, A. T., Lewis, D. C., & O'Brien, C. P. (2000). Drug Dependence, a Chronic Medical Illness: Implications for Treatment, Insurance, and Outcomes Evaluation. Journal of the American Medical Association, 284 (13), 1689–1695.

Majid, M. K. (2000). Kaedah Penyelidikan Pendidikan. Ampang: Dewan Bahasa dan Pustaka.

Myers, D. (1995). Psychology. Hope College, Holland: Michigan Worth Publishers.

O'Connell, T. S. (2001). Self-Concept: A Study of Outdoor Adventure Education with Adolescents. New York: New York University, School of Education.

Oyserman, D., Elmore, K., & Smith, G. (2012). Handbook of Self and Identity: Self, Self-Concept, and Identity (2nd ed.). New York: The Guilford Press.

Powers, R. J. (1978). Enhancement of Former Drug Abusers' Career Development through Structured Group Counseling. Journal of Counseling Psychology, 25 (6), 585-587.

Bajovdan, R. M., Towhidi, A., & Rahmati, A. (2011). The Relationship between Mental Health and General Self-Efficacy Beliefs, Coping Strategies and Locus of Control in Male Drug Abusers. Journal of Addicts & Health, 3(3-4), 111-118.

Rogers, C. (1951). Client-Centered Therapy: Its Current Practice, Implications and Theory. London: Constable.

Rogers, C. R. (1961). On becoming a person: A therapist's view of psychotherapy. Boston: Houghton Mifflin.
Rusell, J. D. (1974). *Modular Instruction: A Guide to the Design, Selection, Utilization Readiness for Change*. New York: John Wiley & Sons.

Samuels, D. J., & Samuels, M. (1974). Low Self-Concept as a Cause of Drug Abuse. *Journal of Drug Education*.

Savickas, M. L. (1984). Career maturity: The construct and its appraisal. *Vocational Guidance Quarterly*, 32, 222–231.

Sigma Assessment System. (2017). Retrieved from Self-Directed Search (SDS): http://www.sigmaassessmentsystems.com/assessments/self-directed-search/#heading-why-should-i-use-the-sds

Streiner, D., & Norman, G. R. (1989). *Health Measurement Scales: A Practical Guide to their Development and Use*. New York, USA: Oxford University Press.

Super, D. (1984). *Career and Life Development*. San Francisco, CA: Jossey-Bass.

Super, D. E. (1953). A Theory of Vocational Development. *American Psychologist*, 30, 88–92.

Super, D. E., Starishevsky, R., & Matlin, N. (1963). *Career Development: A Self-Concept Theory*. New York: College Entrance Examination Board.

United Nations Office on Drugs and Drug. (2008). Retrieved from Drug Dependant Treatment: Sustained Recovery Management: www.unodc.org/treatnet

Zunker, V. G. (1986). *Career Counseling: Applied Concepts of Life Planning* (2nd ed.). California: Wadsworth, Inc.