

## CHAPTER VI : CONCLUSIONS AND RECOMMENDATIONS

### 6.1 Conclusion

The findings of this study have implications for developing self-reliance among former drug addicts who are attempting to remain drug-free. This is due to the importance of variables such as the necessity to adhere to a treatment and rehabilitation programmed, as well as support from family, employers, and the surrounding community, in strengthening self-reliance among former drug users. Ex-addicts with high self-resilience are less likely to relapse. Former addicts with high self-resilience have the fortitude and ability to rise again when confronted with unpleasant conditions and scenarios. (Santa, 2006) According to Fauziah et al. (2013), former addicts' self-resilience permits them to logically regulate and manage whatever negative that occurs in them. With the presence of self-resilience, a former addict is able to handle obstacles in a positive manner when confronted with high-risk scenarios that may lead to the recurrence of drug addiction behavior (Cooper S, 2018).

Overall, recovery capital may be a promising alternative treatment target to abstinence as targeting recovery capital in treatment may improve resources and support networks that help reduce risk even with substance use recurrence. Integrating recovery capital assessments into substance use treatment could be useful to systematically tailor available multimodal services to an individual's specific

recovery needs while simultaneously integrating harm reduction principles into addiction treatment.

## 6.2 Recommendation

The researcher gives some suggestions to help future research overcome the research weaknesses and improve. Things that need to be improved: (1) increase the number of respondents to enrich participant data. For example, future researchers may set a sample above 384 as is generally recommended for an unknown population with a significance level of 0.05. Future researchers may also focus on selecting a specific sample, such as a sample that has been selected in such a way as to cater for a respondent with a year of polydrug and non-polydrug user disorder. (2) Conducting a qualitative study on respondents who have substance use disorder for both groups, i.e. polydrug and non-polydrug. This qualitative study also needs to include various aspects of the respondent's background which will have an impact on the results of the study related to their capital recovery.

Researchers also suggest (3) conducting further research by conducting a longitudinal study where the respondent's motivation and recovery capital are measured in the long term. Which can be done periodically to see the changes that happen to them, for example at the beginning of treatment, in the middle of treatment and also after being with the community and doing daily activities like normal people. In addition, research can be done to see differences in terms of gender. How gender differences will affect polydrug and non-polydrug consumption and its effect on recovery capital and treatment motivation. Practitioners could use the ARC to identify any barriers, provide

interventions to increase recovery capital (Best et al., 2012; Hibbert & Best, 2011; Moos & Moos, 2005), and improve clients' chances of successfully completing the treatment.

