European Journal of Public Health Studies



ISSN: 2668 - 1056 ISSN-L:2668 - 1056 Available on-line at: <u>www.oapub.org/hlt</u>

DOI: 10.46827/ejphs.v2i2.64

Volume 2 | Issue 2 | 2020

THE CORRELATION BETWEEN ADVERSITY QUOTIENT (AQ) WITH THE INTENTION TO RECOVER IN ADDICTION RESIDENTS AT THE DRUG DEPENDENCY HOSPITAL CIBUBUR, EAST JAKARTA, INDONESIA

Rr Lustywulan Ayucahyani Sukmahidayat, Agung Wahyu Prasetyo, Nurul Ismayadhaniⁱ Faculty of Psychology, University of Persada Indonesia Y.A.I, Indonesia

Abstract:

Drug abuse in Indonesia is now increasingly troubling. The spread of drug is now widely spread in the community. Drug dealers have influenced many underage children and they are no longer junior high school children, but also elementary school children. Someone who has drug dependence in general will have a low intention to recover. This is reinforced by the fact that not a few of ex addictions must be treated in rehabilitation centers, because many problems on their way to recover. The purpose of this study was to determine the correlation between adversity quotient (AQ) with the intention to recover from addiction residents at the Drug Dependency Hospital, Cibubur, East Jakarta. The research conducted is quantitative correlation research. The population in this study is the addiction residents who made recovery at the Drug Dependency Hospital, Cibubur, East Jakarta as many as 30 people. The sampling technique uses saturated sampling technique. Retrieval of research instrument test data using an intense recovery scale of 15 items and an Adversity Quotient (AQ) scale of 11 items. On the intention to recover scale there are 14 valid items with a rit = 0.110 - 0.811 and a reliability of 0.931. On the Adversity Quotient (AQ) scale there are 10 valid items with a ratio of 0.409 - 0.852 and a reliability of 0.924. Based on the results of data analysis with Pearson product moment, the results obtained that rxy = 0.788 with p = 0,000 < 0.05. The results of data categorization for the Intended Recovery variable obtained mean = 47.43. These results state that the intention to recover is in the medium categorization. Adversity Quotient (AQ) variable data categories obtained a mean of 33.48 and the results are in the medium categorization. The category is based on categorization with normal distribution. This means (HO) which states there is no correlation between Adversity Quotient (AQ) and the intention to recover is rejected, and (Ha) which states there is a correlation between Adversity Quotient (AQ) with the intention to recover is accepted.

ⁱ Correspondence: email <u>wahyuagung45@gmail.com</u>

Keywords: intention recovered, adversity quotient, addiction

1. Introduction

Drugs or narcotics are substances which when entered into the body will affect the body especially the central nervous system so that when abused it will cause physical, psychological or mental disorders and social functions, therefore the Government enacts a law for drug abuse namely Law No. 5 of 1997 concerning Psychotropic and Law No. 22 of 1997 concerning narcotics (in the Republic of Indonesia Law 1997). According to Hawari (1996: 125), substance abuse is an endemic disease in modern society, namely chronic diseases that repeatedly recur and until now have not found a comprehensive and satisfactory countermeasures both in terms of prevention, therapy and rehabilitation and are never eradicated completely.

The phenomenon of drug abuse has actually been around since prehistoric times. Along with the development of the era, technology, and medical science are increasingly advanced so that humans can process psychoactive substances in more sophisticated ways. The highest number of them are in Jakarta, East Java, and the third rank is occupied by West Java. As many as 15 percent are estimated to be undergoing treatment. Most rehabilitated people come because of coercion, but 75 percent can recover and around 25 percent return to use drugs (within the National Narcotics Agency). Handling drug abuse is not easy. From one side, physically poison has circulated in the blood and caused addiction, while on the other side, psychologically the addicts experienced a very bad decline. The longer the individual becomes a user the more likely it is to relapse (relapse) despite undergoing therapy.

Factors that cause addicts difficult to break away from drug dependence according to Hawari (2002), Yani (2001), and Somar (2001) (in Hadriami and Padarangga, 2003: 102) are divided in internal and external. Internal factors are mentioned as critical factors and stressful factors. In this case, the critical factor refers to the personality profile. Addicts in general tend to be easily stressed, easy to blame themselves and others, a reckless personality, easily frustrated and confused, and unable to take care of themselves. In the National Narcotics Agency explained stressful factors such as the presence of thoughts that make drug addicts become tense, painful emotions, and difficulty communicating. Some things that make it hard for addicts to get out of drugs are lack of support from families, inactivity and lack of ability to use free time. The intention to recover is an action based on one's desire to recover from suffering. According to Ajzen (in Azwar, 2002:13) what determines intention is the belief about the availability of opportunities and resources needed, this belief can come from experience with the relevant behavior in the past, can also be influenced by indirect information about the behavior. Thus, it can be concluded that the intention to recover is the belief to recover from drug addiction that comes from experience with behavior from the past.

Usually someone who has drug dependence in general will have a low intention to recover. This is reinforced by the fact that not a few former addictions and must be treated in a rehabilitation center, because many problems must be borne by addicts on their journey to recover. According to Wicaksono (in Astuti and Pranoto, 2006: 108) the most difficult obstacle of addicts is carving, which is a strong desire to use drugs. The intention of drug users to recover 100%, but the feeling of longing to return to using drugs is 95% so that the chances of recovering from drug users are only 5%. In every individual many things that affect each other, therefore each individual is different from one another. One of the factors that influence the intention to recover in drug addicts is Adversity Quotient (AQ). Understanding Adversity Quotient (AQ) is the intelligence to face difficulties or obstacles, the ability to survive in various life difficulties and challenges experienced (Stoltz, 2007: 39).

A similar problem also occurs in addiction residents who are in the Drug Dependency Hospital located in Cibubur, East Jakarta. Based on the limited observations made by the authors, it is known that most addicted residents residing in the Drug Dependency Hospital, Cibubur have difficulties / obstacles to recover. Resident has an obstacle to recover because the resident feels he is not capable enough to undergo a series of programs at the rehabilitation center and the regulations implemented by the rehabilitation institution. In addition, residents do not feel comfortable with the environmental conditions in rehabilitation centers that are free from drugs so that not a few of them feel inadequate and feel easily give up which affects the intense recovery.

Based on the description above, the authors are interested in knowing the correlation of adversity quotient (AQ) with intense recovery in addiction residents at the Drug Dependency Hospital, Cibubur, East Jakarta.

2. Literature Review

2.1 Intention to Recover

Intention comes from the Latin "*intention*" which means effort, effort, attention, will, so intention is simply a person's intention to perform certain behaviors. Chaplin (2005:254) states that intention is "*a struggle to achieve a goal; characteristics that can be distinguished from psychological processes that include references or relation to one object*". According to Ajzen and Fishbein (in Fiedler K. and Semin R. G., 1996: 14) almost every human behavior (human behavior) is preceded by the intention to behave (intention to behavior). The intention to behave is an individual's subjective possibility to carry out a certain behavior. Intention is said to be strong and has the potential to be manifested in the behavior if the individual considers that the behavior is good to do, that he feels he must perform the behavior and that he feels able to realize that behavior.

Planned theory explains that intention to behave is influenced by several components. Ajzen (1991, in Fiedler. K. and R. G. Semin, 1996: 22) explains that the three main components of the formation of intention are behavioral attitudes, subjective norms, and perceived behavioral control.

a. Attitude toward Behavior

Attitude towards behavior is a personal factor obtained from the evaluation of the behavior that appears, both in the form of positive or negative consequences of the behavior, and is influenced by the attitude components, namely: cognitive, affective, and conative.

This aspect is built based on the individual's experiences in overcoming obstacles that arise during his life. Attitudes toward behavior are formed by two basic things, namely:

- 1) behavioral belief: beliefs relating to the consequences or consequences of behavior that are raised by the individual concerned.
- 2) outcome evaluation: the results of individual evaluations of each consequence or consequence resulting from the behavior.

b. Subjective Norm

Subjective norms are beliefs about the social pressures that individuals feel. Through individual beliefs about what other people think that individuals should do and the amount of individual desire to follow the expectations of people who are important to individuals will determine the number of subjective norms that individuals have. Subjective norms are formed by two basic things, namely:

- 1) normative belief: individual belief that other people expect an individual to behave in a certain way.
- 2) motivation to comply: the tendency of individuals to obey the wishes and expectations of others.

c. Perceived Behavioral Control

According to Ajzen, 1992 and Van den Putte, 1991 (in Taylor, 1995: 92) Perceived Behavioral Control is an individual will perform a behavior, if they believe that others will provide motivation. So that individuals must perform the behavior, especially if they have controls and external factors that are useful so that it can affect the outcome of the behavior's goals. According to Ajzen (1991, in Azwar, 2002: 13-14) Perceived Behavioral Control is determined by a major aspect, namely: belief about easy or difficulty of control behavior. It is an individual's belief that there is an impetus or obstacle to recover from drug addiction. Encouragement and obstacles in recovering from drug dependence can be formed through the experience of recovering from previous drug addiction.

Factors that influence intention to recover from addiction resident (in the National Narcotics Agency) include:

a. Adversity Quotient (AQ)

If the addict resident believes that recovering from drugs will bring better benefits in life, the most meaningful person agrees with his actions then the individual will really do it, the intention he has to recover from drugs will be higher. On the other hand, if an individual believes that a friend who is using drugs and has made a recovery, is unhappy

with his behavior to recover and says that recovering from drugs, psychotropic substances and other addictive substances is experiencing pain and is undeniably feeling the desire to use it again, then the intention to recover the individual will be weak. If an individual who has a high intention to recover and has a high adversity quotient then that individual is able to influence recovery faster than individuals who have a low intention and a low adversity quotient will certainly be easily affected to use narcotics again or do not have the intention to recover.

b. Family Support

Victims of drug abuse are those who really need help, not only help from the medical field, but also moral support from all parties, both from family, friends, and the environment in which they live. The addicts who are victims of drug abuse and illicit drug trafficking are already getting a negative stigma from the community, especially if the addict is found to suffer from congenital diseases such as HIV or hepatitis due to drug abuse. Rehabilitation is indeed considered effective as a way to treat addicted residents to escape their dependence, but that does not mean the victim's family or close friends simply let him go to therapy & rehabilitation. They must continue to observe their progress and provide support to the victim. Likewise, when an addict has gone through rehabilitation. In the post rehabilitation phase, the support of family and friends is very important so that victims feel welcome and are not tempted to abuse drugs again (relapse).

c. Social Support

The attitude or treatment of people around will greatly affect the recovery process. The effect is very large on the success of individuals to recover. On the one hand, individuals want to be accepted and supported by their efforts to recover from dependence on drugs. On the other hand, people around still give negative evaluations to individuals, remain suspicious and do not appreciate the efforts that have been made. Individuals who are dependent on drugs are also one of the groups that need special support. They need special support because of their rejection, shame, relatively long recovery or frustration. This is consistent with what was stated by Papalia & Olds (1995) which states that the provision of social support from people who are meaningful around the lives of individuals (significant others) contribute the greatest contribution in increasing one's self-esteem and with high self-esteem can accelerate the recovery process individuals who experience drug addiction.

d. More Coaching

Further coaching in the form of mental coaching with affective processes in the form of habituation of behavior which is then emotionally in the form of restoring self-control and at a later stage spiritual process so that religious values increase and be able to fight the feeling of "longing" for drugs. Then it can be concluded that the factors that influence

the intention to recover in addiction resident are adversity quotient (AQ), family support, social support, and further coaching.

2.2 Adversity Quotient (AQ)

Adversity quotient is a snapshot of a person's habitual response to adversity, a measure of consistent subconscious patterns that have been developed over many years (Stoltz, 2007: 187). Adversity quotient is a variable that determines whether a person remains hopeful and continues to be in control in difficult situations (Stoltz, 2007: 39). Adversity quotient can know how far someone is able to survive facing difficulties and the ability to overcome them, knowing who is able to overcome difficulties and who will be destroyed, who will fail, and know who will surrender and who will survive.

From the description above it can be concluded that adversity quotient is the ability of a person to face and survive the difficulties of life and the challenges experienced and the changes that continue to confront and face all of these difficulties as a process to develop themselves, their potential, and achieve a goal certain.

2.3 Adversity Quotient (AQ) Dimensions

According to Stoltz (2007: 140), adversity consists of four CO2RE dimensions, which are:

a. C = Control (Full)

People with higher AQs feel more control over life events than lower AQs. As a result, they will take actions that will produce even more control. The higher the C score, the more likely it is to endure difficulties, and remain firm in intentions and agile in approaches to finding a solution.

b. Origin and ownership

People with low AQ tend to place undue guilt over bad events that occur. In many cases, a person sees himself as the sole cause or origin (origin) of the difficulty. The lower the person's origin score, the greater the tendency for people to blame themselves, beyond constructive boundary points. Conversely the higher the score of a person's origin score, the greater the tendency for that person to assume the sources of the difficulty come from other people or from outside and place the role of one's own place where appropriate.

c. R = Reach

A response with low adversity quotient (AQ) will make it difficult to go to other aspects of one's life. The higher the adversity quotient (AQ) and one's score in this dimension, the more likely someone is to respond to adversity as something specific and limited. The more effective a person withholds or limits the range of difficulties; a person will feel more empowered and feeling less overwhelmed. Whereas the lower the adversity quotient (AQ) and score of a person in this dimension, the more likely a person sees adversity as something that enters other areas of the person's life. (Stoltz, 2007: 158-161).

d. E = Endurance

Seligman (in Stoltz, 2007: 163) says that people who see their ability as the cause of failure tend to be less persistent compared to people who associate failure with the effort that they do.

2.4 Drug Abuse

Drug is an abbreviation of narcotics, psychotropic substances and other addictive substances including natural substances or synthesis that can be consumed and that cause changes in physical and psychological function and cause dependence. Drug abuse is the use of drug without instructions from a health professional and is not for medicinal purposes that causes changes in physical and psychological function and causes dependency without a prescription and supervision from a doctor (in the Reading Module of Counseling for the Dangers of Drug Abuse).

Whereas what is meant by drugs, psychotropic substances and other addictive substances according to RI Law No.22 of 2007 (in Suryono, 2001: 4) is a substance or drug either from plants or non-plants, either synthesis or semi-synthetic which can cause a decrease or change in consciousness, loss of taste, reduce to relieve pain and cause dependence and addiction.

According to Danny I. Yatim Irwanto (1991: 3), the substances contained in drugs have many effects on humans, and often can make humans as if migrated to another realm so that humans can forget the pain and the severity of life pressure. The special nature of the drug is what often makes people abuse drugs to find mere pleasure. Drug abuse has a negative impact on health and usage behavior, as well as on the environment. These problems cause physical and mental health disorders, even permanent disability, death, loss of productivity, deterioration in socio-cultural and moral-spiritual values, destruction of family and community resilience, and increased crime. (Practical Handbook, 2007: 48).

The reasons the community pays serious attention to the problem of narcotics abuse include:

- a) The number of cases is increasing rapidly. The number of drug abuse is increasing rapidly from year to year. The pattern of usage also changes from time to time.
- b) High relapse rate.

Most substances in narcotics are actually used for treatment and research. But for various reasons from the desire to try, to follow the trend/style, slow social status, want to forget the problem, etc., then narcotics are abused. Continuous and continued use will cause dependency or addiction (National Narcotics Agency).

According to the description above, it can be concluded that drug abuse can lead to dependency syndrome if its use is not under the supervision and guidance of health workers who have the expertise and authority to do so. This is not only detrimental to abuse, but also has social, economic and national security impacts, so this is a threat to the life of the nation and state. Drug abuse encourages illicit trafficking, while illicit drug trafficking causes increased widespread abuse. Therefore, prevention and control of drugs is needed.

2.5 Therapeutic Community (TC)

Understanding Therapeutic Community (TC) according to the Directorate of Social Service and Rehabilitation of Drug Victims of the Ministry of Social Affairs (2003: 24) are:

Therapeutic community is an environment where a group of individuals who previously lived 'alienated' from the general public, trying to know themselves and learn to live life based on the main principles in correlations between individuals, so they are able to change behavior that has not been in accordance with the norms. Social norms towards behaviors that are acceptable to the norms of society. With a high spirit of togetherness, they support each other in preparing themselves to return to society as citizens who can function socially and productively. Therapeutic Community (TC) for the treatment of addictions is defined as follows: A Therapeutic Community is a drug-free environment in which people with addictive (and other) problems live together in an organized and structured way in order to promote change and make possible a drug-free life in the outside society. *"Therapeutic community forms a miniature society in which residents, and staff in the role of facilitators, fulfilling distinctive roles and there are clear rules, all designed to promote the transitional process of the residents"* (Ottenberg, 1993 in Wendy Gibbons, 2002: 2).

From the above understanding it can be explained that, the therapeutic community (TC) is an environment that is free from drugs, where users who are dependent on drugs, live together in an organized and structured manner which has the same goal of changing and proving to the outside community that it is clean from drugs, psychotropic substances and other addictive substances.

From the two explanations suggested above, it can be concluded that the therapeutic community (TC) is an environment consisting of victims of drug abuse who gather in an organized and structured manner that has the same problem and has the same goal of changing and proving that the outside community is clean from drugs, they help each other in overcoming the problems they face.

2.6 The Correlation between Adversity Quotient and the Intention of Recover in Addiction Residents

A person's ability to withstand adversity and not easily succumb to changes that occur inside and outside a person is an opportunity to grow not as a threat to him. So, individuals who have hardiness are considered to be able to maintain a healthy despite experiencing events that are full of stress (in Hadjam, et al, 2004: 124). According to Suzzane Oullete (in Stoltz 2007: 86) hardiness such as optimism is a strong predictor of physical and mental health in the face of adversity. Those who respond to adversity as an opportunity, by having certain goals and ability to hold control will remain strong, while those who are victims of those difficulties whose responses without power become weak.

Individuals with Adversity Quotient (AQ) high will have the intention that high anyway to recover from addiction to drugs and vice versa individuals with Adversity Quotient (AQ) low will have the intention of which is low anyway to recover from addiction to drugs, that they feel when people are addicted will feel hard to recover from the influence of drugs then they have no intention to recover from the suffering caused by drugs. This statement is supported by Stoltz (Akung, MA, 2007: 50) the extent to which someone who is intelligent in dealing with difficult situations and stresses (stress) and makes an opportunity. With Adversity Quotient (AQ) able to provide information on the extent to which a person is able to survive in the face of pressures that arise both from oneself and from the external environment.

3. Material and Methods

3.1 Design

The sampling method used in this study is the saturation sampling technique, which is a sampling technique when all members of the population are used as samples. According to Sugiyono (2003: 61), another term for saturated samples is the census, where all members of the population are sampled. The reason for using this technique is if the population is relatively small.

3.2 Participants

According to Sugiyono (2003: 55), population is a generalization area consisting of subjects or objects that have certain quantities and characteristics that are applied by researchers to be studied and then drawn conclusions. In this study, the population in question is the addicted resident who did recovery at the Drug Dependency Hospital, Cibubur, East Jakarta, amounting to 30 people with characteristic ages between 18-38 years.

3.3 Materials

Data collection methods are an important part of the research process. The extent to which the data collected can reflect the actual state of the respondent or subject. It really depends on the method used in the study. In this study data collection is done by using a scale, which is a set of symbols or numbers arranged in a certain way so that it can be given to individuals who are given a scale to obtain conclusions about the subject of research (Kerlinger, 2002: 788). To obtain data in this study, researchers used the Likert scale method.

This study uses two scales, namely the adversity quotient (AQ) scale and the intention to recover. The two scales used consisted of statements and were prepared using a modified Likert scale method. Both of these scales have 5 alternative answers, including very good, good, enough, less, and very less.

Data analysis calculations were performed using the SPSS computer program version 17.00 for windows. Analysis of the data used is the Spearman's rank order

correlation. This test is carried out to determine whether there is a significant correlation between adversity quotient with intense recovery in addiction residents.

4. Results and Discussion

The data analysis of this study aims to determine whether there is a correlation between adversity quotient (AQ) and intense recovery in addiction residents at the Drug Dependency Hospital, Cibubur, East Jakarta. Based on the analysis of research data using the help of SPSS Version 17.00 for windows obtained by the coefficient (rxy) between Adversity Quotient (AQ) with a recovered intention of 0.788.

From these results it can be concluded that the null hypothesis (Ho) which states that "There is no correlation between Adversity Quotient (AQ) with intense recovery in resident addiction" is **rejected**, while the work hypothesis (Ha) which states that "There is a correlation between Adversity Quotient (AQ) with intense recovery in addiction resident" **accepted**.

Based on the results of the categorization in this study, the Intense Recovery score in the "Medium" category. This can be known by looking at the mean finding of 47.43. While the Adversity Quotient (AQ) score is in the "Medium" category. This can be known by looking at the mean findings of 33.48.

From the statistical test results obtained the correlation coefficient (rxy) between Adversity Quotient (AQ) with intense recovery of 0.788. This shows that there is a significant correlation between Adversity Quotient (AQ) with the intention to recover in addiction resident. This illustrates that the higher the Adversity Quotient (AQ) in addiction residents, the higher the intense recovery, and vice versa if the level of Adversity Quotient (AQ) in addiction residents is low, the intense recovery is also low.

As described by Stoltz (2007: 39), Adversity Quotient (AQ) is the intelligence of facing difficulties or obstacles, the ability to survive in various life difficulties and challenges experienced. Furthermore Masykur, MA (2007: 41) said that AQ has three forms, namely: first, AQ as a new conceptual framework for understanding and improving all aspects of success. Second, AQ is a measure to find out the response to difficulties in which the patterns of the subconscious individual are already owned. Third, AQ is a set of equipment that has a scientific basis to improve responses to difficulties that result in improving overall personal effectiveness.

Furthermore, as stated by Ajzen (in Azwar, 2002: 13) that determines intention is a belief about the availability of opportunities and resources needed, this belief can come from experience with the relevant behavior in the past, can also be influenced by indirect information about that behavior. Logically someone who has drug dependence in general will have a low intention to recover. This is reinforced by the fact that not a few former addictions and must be treated in rehabilitation centers, because many problems must be borne by addicts on their way to recover. Based on the results of categorization in this study, the intense score recovered in the medium category. While the Adversity Quotient (AQ) score is also in the medium category.

5. Recommendations

After conducting research, analyzing, and concluding the data obtained in this study, the author can provide some suggestions as follows:

5.1 Theoretical Suggestions

For other researchers who are interested in the intense recovery variable, it is suggested to add another variable and combine it with different variables, such as self-motivation variables or curative attitudes of drug users. Research can be done in different places or research subjects.

5.2 Practical Advice

A. Addiction Resident

It is suggested that addict residents increase Adversity Quotient (AQ) by suppressing or transferring the desire to use drugs with positive activities and getting closer to God, because religiosity enhances the subject's ability to accelerate the recovery process.

B. Rehabilitation Orphanage

Each drug rehabilitation institution more realizes activities that meet aspects of adversity quotient (AQ) so as to increase adversity quotient in drug users by providing training and skills.

6. Conclusion

Based on the results of data analysis conducted, it can be concluded that there is a correlation with a positive direction between Adversity Quotient (AQ) with the intention to recover in addiction residents. This shows that the higher is the Adversity Quotient (AQ) contained in the addiction resident, the higher is the intention to recover.

Acknowledgements

We are so thankful to our supervisor and the Dean of Faculty of Psychology of University of Persada Indonesia Y.A.I who has been very supportive during this study, also to Drug Dependency Hospital, Cibubur, East Jakarta who gave us humble permission to conduct the study with the addiction residents as our study subject.

About the Author(s)

Rr Lustywulan Ayucahyani Sukmahidayat is a student of the psychology profession at the University of Persada Indonesia Y.A.I who has interest in clinical psychology.

Agung Wahyu Prasetyo is a student of the psychology profession at the University of Persada Indonesia Y.A.I who has interest in clinical psychology.

Nurul Ismayadhani is a student of the psychology profession at the University of Persada Indonesia Y.A.I who has interest in clinical psychology.

References

- Astuti, D. Y. and Pranoto, S. L. (2006). Effect of Craving in Achieving Clean and Sober Conditions for Drug Users. Psychology, Vol XI, No.22.
- Baron A., R. and Byrne, D. (1997). Social Psychology. Jakarta: Erlangga.
- Chaplin, J. P. (2005). Complete Dictionary of Psychology. Subtitles: Dr. Kartini Kartono. Jakarta: PT. Raja Grafindo Perkasa.
- Dadang Hawari (2003). NAZA Abuse and Addiction (Narcotics, Alcohol, and Addictive Substances). Jakarta: FKUI Publishing Agency.
- Dadang Hawari (1996). Al-Quran: Mental Medicine and Mental Health. Jakarta: Dana Bakti Prima Yasa.
- Directorate of Social Service and Rehabilitation for Drug Victims (2003). Jakarta: Ministry of Social Affairs
- Fiedler, K. and Semin R. G. (1996). Applied Social Psychology. London: Sage Publications.
- Hadjam, M. N. R., Martinah, S. M., Prawitasari, J. E., and Masrun (2004). The role of hardiness personality in automation disorders. Anima, Indonesia Psychological Journal. Surabaya: Faculty of Psychology Quarter Surabaya University. Vol.19. No.2 (122-135).
- Hadriami, Emmanuela and Pandarangga M. A. S. (2003). Psychological Needs of Adolescents who Relapse in Abusing Drugs. Psychodemensia, Vol III, no.2
- Irwanto, Dani Yatim (1991). Personality, Family and Narcotics; Psychological Social Review. Jakarta: Arcan.
- Markman, Gideon D. AQ: The Role of Personal Bounce-Back in New Venture Formation. <u>www.peaklearning.com</u>.
- Masykur (2007). Entrepreneurship in Students in terms of Adversity Quotient. Journal of Projection Psychology. Vol.2, No.2.
- Papalia, D. E., Olds, S. W. (1995). Human Development (6th Edition). McGraw-Hill Inc.
- Prayitno (2004). Counseling Service. Padang: BK FIP
- Reni Kusumowardhani (2007). Don't Run from Problems If You Want Your AQ to Increase. Psychology Plus Magazine. Semarang. Vol.I. No. 07.
- Saifuddin Azwar (2003). Research Method. Yogyakarta: Student Library.
- -----. (2001). Reliability and Validity. Yogyakarta: Student Library.
- -----. (2005). Arrangement of Psychology Scale. Yogyakarta: Student Library.
- -----. (2002). Human Attitudes, Theories and Measurements. Yogyakarta: Offset Library.

- Sarlito Sarwono (2002). Individual Social Psychology and Social Psychology Theories. Jakarta: Balai Pustaka.
- Siswanto Suryono (2001). We Care about the Control of Drug Danger Media Information and Education on the Danger of Drug Abuse. Jakarta: PT. Kloang Klede Putra Timur.

Sugiyono (2005). Statistics for Research. Bandung: CV Alfabeta.

- Stoltz, G. P. (2007). Adversity Quotient Turns Barriers into Opportunities. Jakarta: PT. Gramedia Widiasarana Indonesia.
- Taylor, ES (1995). Health Psychology. Singapore: McGraw-Hill. Inc.

Willis, Sofyan S. (2004). Individual Counseling Theory and Practice. Bandung: Alfabeta

Creative Commons licensing terms

Author(s) will retain the copyright of their published articles agreeing that a Creative Commons Attribution 4.0 International License (CC BY 4.0) terms will be applied to their work. Under the terms of this license, no permission is required from the author(s) or publisher for members of the community to copy, distribute, transmit or adapt the article content, providing a proper, prominent and unambiguous attribution to the authors in a manner that makes clear that the materials are being reused under permission of a Creative Commons License. Views, opinions and conclusions expressed in this research article are views, opinions and conclusions of the author(s). Open Access Publishing Group and European Journal of Public Health Studies shall not be responsible or answerable for any loss, damage or liability caused in relation to/arising out of conflicts of interest, copyright violations and inappropriate or inaccurate use of any kind content related or integrated into the research work. All the published works are meeting the Open Access Publishing requirements and can be freely accessed, shared, modified, distributed and used in educational, commercial and non-commercial purposes under a <u>Creative Commons Attribution 4.0 International License (CC BY 4.0)</u>.