

Exploring Spirituality and Resilience Among Recovery Drug Addicts in Drug Rehabilitation Centres

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Abstract

Research has shown that lack in resilience may contribute to relapse among former drug addicts. Furthermore, spirituality is recognized as a factor that can positively influence resilience levels. This study investigates the connection between resilience and spirituality among individuals undergoing treatment in drug rehabilitation centres. The objectives were to assess: (1) the level of spirituality among drug addicts, (2) the level of resilience among drug addicts, and (3) the correlation between spirituality and resilience. Using a correlational research design and quantitative methodology, data were collected from 224 participants who are inmate from drug rehabilitation centre. The Connor-Davidson Resilience Scale (CD-RISC) and the Ummatic Personality Inventory (UPI) were utilized to measure resilience and spirituality, respectively. Results indicated that most participants demonstrated moderate levels of spirituality (75%) and resilience (62.5%). A significant positive relationship between the two variables was found (Pearson's $r = 0.665$, $p < 0.001$), indicating that higher levels of spirituality are associated with increased resilience among drug addicts in rehabilitation.

Keywords: spiritual, resilience, drug rehabilitation, substance abuse, correlation

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INTRODUCTION

Substance abuse is a chronic relapsing disease that continues to be a pervasive global issue, with significant repercussions for individuals, families, and societies. The World Health Organization (WHO) estimates that over 296 million people worldwide suffer from drug use disorders, with 40 - 60% of the cases were relapse cases (World Health Organization, 2024). Malaysia faces a similar challenge, as highlighted by the National Anti-Drug Agency (NADA), which reports persistently high relapse rates among recovering drug addicts despite various rehabilitation initiatives (NADA, 2023). These concerning statistics underline the urgent need for more effective and sustainable strategies to address substance abuse and recovery. Recent research has emphasized the need for interventions that address not only the physical but also the psychological and social dimensions

of addiction recovery (Lacy, 2024). The inability to maintain long-term recovery often stems from a lack of resilience, which is the ability to adapt and recover from adversity.

Resilience is a critical factor in addiction recovery, enabling individuals to navigate stressors, overcome challenges, and avoid relapse (Connor & Davidson, 2003). Defined as the capacity to adapt positively and recover from adversity, resilience plays a pivotal role in overcoming addiction and sustaining long-term recovery. The concept integrates developmental psychology, ecological systems theory, and positive psychology.

Lazarus and Folkman's (1984) Transactional Model of Stress and Coping emphasizes resilience as a dynamic interaction between an individual and their environment. Effective coping strategies and positive cognitive appraisals help individuals reframe challenges, reducing relapse risks. Your research highlights that resilience can be nurtured through psychoeducation and interventions like mindfulness and cognitive-behavioral techniques.

The Connor-Davidson Resilience Scale (CD-RISC) operationalizes resilience through attributes such as adaptability, tenacity, self-efficacy, and emotional regulation. This scale used to measure resilience among participants, reinforcing its importance in understanding and enhancing resilience in rehabilitation. Ungar's (2011) Resilience Framework underscores the influence of cultural and contextual factors. This perspective is particularly relevant in Malaysia, where cultural and religious values shape coping mechanisms. Your research reflects this culturally sensitive approach by integrating Islamic teachings like reliance on Allah and gratitude, demonstrating how spiritual resilience aligns with socio-cultural frameworks.

In conclusion, resilience is a multifaceted construct supported by diverse theories, offering insights into recovery pathways. It bridges stress-coping models, ecological systems, positive psychology, and cultural frameworks, providing a holistic perspective. Spirituality, as a key factor in resilience, further enriches interventions, addressing the psychological, social, and spiritual dimensions of substance abuse recovery.

Defining spirituality has been a complex endeavour due to its multifaceted nature and varying interpretations across different contexts. A recent article highlights the challenges in formulating a precise definition, noting that even within philosophical discourse, attempts are rare and often inconclusive (Reisinger, 2024). Similarly, the *Oxford Research Encyclopedia of Religion* discusses the diverse approaches to understanding spirituality, including theological, historical-contextual, and anthropological perspectives (Nelstrop, 2021). This resource emphasizes that the term encompasses a wide range of meanings, reflecting its evolution and the various ways it is experienced and practiced.

Spirituality is a multidimensional construct involving connection to a higher power, purpose, and moral guidance. Ellison's (1983) Spiritual Well-Being Framework, extended in later research, highlights two key dimensions: existential well-being (meaning and purpose in life) and religious well-being (connection to the divine).

Positive psychology, particularly through Seligman and Csikszentmihalyi's (2000) work, offers another perspective on spirituality's role in recovery. This approach focuses on strengths such as hope, optimism, and purpose. Spirituality complements these constructs by enhancing positive emotions, building psychological resilience, and mitigating stressors associated with substance abuse. From an Islamic perspective, spirituality is ingrained in daily practices and moral values, serving as preventive and rehabilitative measures against substance abuse.

The Social Ecological Framework (Bronfenbrenner, 1979) intersects with spirituality by acknowledging the influence of cultural and environmental factors on behavior. In Malaysia, where religious and cultural values are central, spirituality is a powerful resilience-building tool. Additionally, Pargament's (2011) Theory of Spiritual Resilience emphasizes how spirituality helps individuals find meaning in adversity, fostering resilience. This theory resonates with your findings, where spirituality provided recovering addicts with renewed hope, self-worth, and motivation.

In conclusion, spirituality is seen as a critical construct that bridges psychological, cultural, and religious dimensions to enhance resilience in substance abuse recovery. Incorporating spiritual

practices into rehabilitation programs addresses not only the physical and psychological aspects of recovery but also individuals' spiritual needs, promoting holistic and sustainable outcomes.

In Malaysia, spirituality holds particular significance due to its rich cultural and religious traditions. Islamic teachings emphasize practices such as prayer, gratitude, self-discipline, and reliance on Allah, which closely align with resilience-building mechanisms. These practices offer moral guidance and emotional support, crucial for rehabilitation. Despite its potential, spirituality remains underutilized in conventional rehabilitation programs, which prioritize physical and psychological recovery while often neglecting the spiritual dimension (Awang et al., 2018). This study addresses this gap by exploring the relationship between spirituality and resilience in Malaysian drug rehabilitation centres. It aims to provide insights into how spiritual practices and beliefs contribute to resilience in recovering addicts, informing the design of more holistic and culturally sensitive programs that integrate spiritual elements alongside psychological and physical strategies.

Previous research underscores the importance of resilience and spirituality in recovery. Resilience equips individuals with coping mechanisms that reduce vulnerability to relapse (Connor & Davidson, 2003), while spirituality is linked to enhanced emotional stability, purpose, and mental health outcomes (Koenig, 2015). However, limited empirical evidence explores their interplay, especially in Malaysia. This study fills this gap by investigating spirituality and resilience levels among individuals in rehabilitation and examining their relationship. The objectives are to evaluate spirituality and resilience levels in substance abuse treatment, analyse their correlation, and recommend integrating spirituality into rehabilitation frameworks. Using a quantitative correlational design ensures robust and applicable findings. Ultimately, this study contributes to holistic addiction recovery approaches, highlighting spirituality's potential in fostering resilience and reducing relapse rates.

METHODS

Research Design

This study employed a quantitative correlational design to investigate the relationship between spirituality and resilience among drug addicts in rehabilitation centres. This design is well-suited for identifying associations between variables without manipulating them, ensuring the natural occurrence of data patterns (Creswell & Creswell, 2023). The approach allows for an in-depth examination of how spirituality influences resilience, providing insights into their interplay in the context of recovery.

Population and Sampling

The study was conducted at a rehabilitation centre in Malaysia, a facility that houses individuals undergoing treatment for substance abuse. A total of 224 participants were selected from different backgrounds to ensure the representation of various demographic and treatment-related characteristics. Inclusion criteria required participants to be actively engaged in rehabilitation programs and willing to provide informed consent. The sampling method employed was convenience sampling, which involves selecting participants based on their availability and willingness to participate. This approach is commonly used in clinical settings where accessibility to participants is a priority. While convenience sampling may have limitations in generalizability, it allows for efficient data collection and provides valuable insights into the specific population being studied (Etikan et al., 2016).

Instruments

The study utilized two validated instruments to measure the key variables of interest. The Connor-Davidson Resilience Scale (CD-RISC) was employed to assess resilience. This 25-item scale evaluates various dimensions of resilience, including adaptability, emotional regulation, and recovery from adversity (Connor & Davidson, 2003). The CD-RISC has demonstrated high

reliability and validity in diverse populations, making it suitable for this study. To measure spirituality, the Ummatic Personality Inventory (UPI) by Othman (2011) was used. Specifically designed for Islamic contexts, the UPI assesses constructs such as *ibadah* (worship), *amanah* (trustworthiness), and *ilmu* (knowledge). This instrument aligns well with the cultural and religious values of the participants, providing an accurate representation of their spiritual practices and beliefs.

Data Analysis

Data were analysed using SPSS (Statistical Package for the Social Sciences) version 27. Descriptive statistics were used to summarize demographic characteristics and to determine the levels of spirituality and resilience among participants. Pearson correlation analysis was conducted to examine the relationship between spirituality and resilience, allowing for the identification of significant associations between these variables.

FINDING AND DISCUSSIONS

Demographic Profile

Table 1.1 below shows the demography profile of the whole respondents which include age, marital status, education level, education level, age involved drugs, period involved in drugs, factors involved in drugs, frequency of receiving treatment and factors of relapse.

Table 1. Demography Profile

Age	Frequency	Score
20 – 30 years	77	34.4
30 – 39 years	98	43.8
40 – 49 years	42	18.8
50 – 59 years	7	3.1
Marital status	Frequency	Score
Single or divorced	168	75
Married	56	25
Education level	Frequency	Score
STPM	7	3.1
SPM	119	53.1
PT3	77	34.4
Primary School	14	6.3
Dropout	7	3.1
Age involved in drugs	Frequency	Score
10 – 19	42	18.8
20 – 29	161	71.9
30 – 39	14	6.3
40 – 49	7	3.1
Period involved in drugs	Frequency	Score
1 – 10 years	175	78.1
11 – 20 years	42	18.8
21 – 30 years	7	3.1
Factors involved in drug	Frequency	Score
Peer Influence	86	38.4
Curiosity	69	30.8
Working Place	31	13.8
Stress	38	17
Frequency of receiving treatment	Frequency	Score

Once	93	41.5
Twice or more	131	58.5
Factor of relapse	Frequency	Score
Working Place	32	14.3
Bored	39	17.4
Peer Influence	49	21.9
Addiction	32	14.3
Hometown	31	13.8
Stress	41	18.3

The demographic profile of respondents in this study offers essential insights into their background and its potential influence on spirituality and resilience. A total of 224 participants were included, with 43.8% aged 30–39 years, 34.4% aged 20–30 years, 18.8% aged 40–49 years, and 3.1% aged 50–59 years. This distribution highlights the prevalence of substance abuse during productive adult years, a critical life stage marked by responsibilities like career-building and family. Substance abuse during these years disrupts developmental trajectories, leading to long-term social and economic consequences (Bell & Hadland, 2024). Younger individuals, especially those initiating drug use in their 20s, face heightened risks due to neurobiological vulnerabilities during early adulthood (Volkow et al., 2016). These findings underscore the need for age-specific interventions addressing unique developmental challenges.

Regarding marital status, 75% of respondents were single or divorced, while 25% were married. This suggests a lack of marital support, potentially influencing resilience and recovery. Stable marital relationships enhance resilience and reduce the likelihood of substance use by providing emotional and social support (Yang et al., 2020). Conversely, the absence of such support may exacerbate vulnerabilities, hindering recovery. Tailored interventions incorporating social support mechanisms, such as peer groups or family counseling, could address this gap and improve outcomes (Lopez et al., 2021).

Education levels revealed that 53.1% of respondents had completed secondary school (SPM), 34.4% lower secondary education (PT3), 6.3% primary education, and 3.1% pre-university education (STPM) or had dropped out. Limited education can hinder comprehension and engagement with rehabilitation programs, reducing their effectiveness. Additionally, low educational attainment is linked to fewer economic opportunities and higher stress levels, which can exacerbate substance use (Schmengler et al., 2022). Rehabilitation efforts should prioritize accessible language and culturally appropriate methods to ensure inclusivity and effectiveness.

Drug use patterns further illuminate the respondents' profiles. Most (71.9%) initiated drug use between 20 and 29 years, while 18.8% started between 10 and 19 years. A smaller proportion began in their 30s (6.3%) or 40s (3.1%). Prolonged drug use was common, with 78.1% involved for 1–10 years, 18.8% for 11–20 years, and 3.1% exceeding 20 years. Prolonged use compounds physical and mental health issues, necessitating sustained and comprehensive treatment approaches (Ee et al., 2020). These findings emphasize the importance of early intervention programs targeting at-risk youth to prevent escalation.

Factors contributing to drug involvement included peer influence (38.4%), curiosity (30.8%), stress (17%), and work environments (13.8%). Peer influence, particularly during adolescence and early adulthood, plays a significant role in shaping behaviors (Dishion & Tipsord, 2011). Curiosity and stress reflect psychological drivers where individuals seek novel experiences or coping mechanisms. Stress, specifically, interacts with neurobiological systems, increasing addiction susceptibility (Cadet, 2016). Addressing these factors requires fostering healthy coping strategies and building resilience against peer pressure through targeted interventions.

Treatment frequency revealed that 58.5% of respondents had undergone treatment two or more times, while 41.5% reported only one episode. This highlights the recurring need for

rehabilitation services and challenges in achieving long-term recovery. Relapse analysis identified peer influence (21.9%) as the most common trigger, followed by stress (18.3%), boredom (17.4%), work environment (14.3%), addiction (14.3%), and returning to one's hometown (13.8%). These findings reflect the complex interplay of social, psychological, and environmental factors in recovery. Relapse prevention strategies should incorporate stress management techniques, behavioral therapies, and ongoing support systems to mitigate these risks (Hendershot et al., 2011).

Tailored interventions are crucial for addressing the interplay of demographic factors, drug use patterns, and relapse triggers. Age-specific programs could focus on the developmental needs of younger users, while interventions for older adults might emphasize reintegration into stable social roles. Simplified educational workshops can improve engagement for participants with lower education levels. Addressing peer influence through group therapy and fostering alternative social networks can reduce one of the most significant relapse triggers.

Holistic approaches integrating psychological, social, and environmental factors are critical for improving recovery outcomes. Mindfulness-based therapies, cognitive-behavioral interventions, and community-based support programs show promise in enhancing resilience and reducing relapse rates (Chiesa & Serretti, 2014). Additionally, aftercare services and continuous monitoring are essential to provide the support necessary for sustaining recovery.

Overall, this demographic analysis highlights the multifaceted challenges faced by individuals in substance abuse rehabilitation. Understanding their backgrounds and the factors influencing drug use and relapse can guide the development of comprehensive rehabilitation programs. By addressing the psychological, social, and cultural dimensions of recovery, interventions can be better tailored to meet the needs of this demographic group, ultimately enhancing their resilience and long-term recovery outcomes.

Levels of Spirituality

Table 2. Level of Spirituality

Resilience	Frequency	Percent (%)	Standard deviation	Mean
Low	21	9.4	0.5	2.06
Medium	168	75		
High	35	16		

Table 2 presents the distribution of spirituality levels among the 224 respondents in the study, categorized as low, medium, and high. Most respondents, 168 individuals (75%), reported medium levels of spirituality. This indicates that most participants exhibit a moderate degree of engagement with spiritual practices and beliefs, such as prayer, reflection, and moral values, which likely provide them with a foundation for personal growth and recovery. These individuals may benefit from further spiritual development to enhance their coping mechanisms and resilience.

A smaller proportion, 35 respondents (16%), were classified as having high levels of spirituality. This group demonstrates a strong connection to spiritual values and practices, reflecting significant internalized belief systems that may contribute to their recovery journey. The high spirituality scores suggest that these individuals derive meaning and purpose from their spiritual engagement, which could act as a protective factor in their rehabilitation and help prevent relapse.

Conversely, 21 respondents (9.4%) were categorized as having low spirituality levels. This group likely has minimal engagement with spiritual practices or understanding of spiritual principles, which may limit their ability to use spirituality as a coping mechanism during recovery. These individuals are at a greater risk of struggling with challenges and could benefit from targeted spiritual interventions, such as guided reflection, group discussions, or personalized spiritual counselling.

The mean spirituality score for the sample is 2.06, which falls within the medium range of the scale, reflecting the overall moderate spiritual engagement of the respondents. The standard deviation is 0.5, indicating relatively low variability in spirituality levels across the sample. This suggests that while most participants share similar levels of spiritual engagement, there are distinct groups at the lower and higher ends of the spectrum.

Overall, the findings emphasize the importance of fostering spirituality as part of the rehabilitation process. While most participants exhibit moderate spirituality levels, interventions aimed at strengthening spiritual values and practices could help those with low scores while further enhancing the growth of individuals with medium and high spirituality levels. These efforts could contribute significantly to participants' resilience, well-being, and overall recovery outcomes.

The findings indicating that 75% of respondents reported medium levels of spirituality highlight the significant role of spiritual engagement in personal growth and recovery. Spirituality, often defined as a sense of connection to something greater than oneself and a search for meaning, is recognized as a critical resource for individuals navigating challenges, particularly in rehabilitation contexts (Koenig, 2015). Medium levels of spirituality suggest that most participants engage in practices such as prayer, reflection, and adherence to moral values, which likely contribute to their coping mechanisms and ability to manage stress. However, these respondents could benefit from further spiritual development to deepen their resilience and recovery outcomes.

A smaller group, 16% of respondents, demonstrated high levels of spirituality, reflecting a deep internalization of spiritual practices and beliefs. High spirituality levels are often associated with greater emotional regulation, a sense of purpose, and enhanced coping strategies (Pargament, 2011). These individuals likely derive meaning and strength from their spiritual engagement, which can act as a protective factor against relapse and contribute to sustained recovery. Studies have shown that individuals with high levels of spirituality are more likely to experience positive mental health outcomes, including lower levels of anxiety and depression, and a stronger sense of life satisfaction (Shabani et al., 2023). Their strong connection to spiritual values and practices suggests that they are well-equipped to navigate the challenges of rehabilitation, making them an important group to study further for insights into effective recovery strategies.

Conversely, the 9.4% of respondents categorized as having low spirituality levels represent a critical area for intervention. Low spirituality often correlates with limited access to the coping mechanisms provided by spiritual engagement, potentially leaving these individuals more vulnerable to stress and less equipped to overcome challenges (Nagy et al., 2024). This group may benefit significantly from targeted spiritual interventions, such as guided reflection, group discussions, or personalized spiritual counseling. These approaches have been shown to enhance spiritual well-being and improve recovery outcomes (Snodgrass et al., 2024). For example, a study by Carneiro (2023) demonstrated that spiritually focused therapies can significantly reduce levels of stress and enhance coping in individuals facing chronic health challenges, suggesting potential benefits for those with low spirituality in rehabilitation settings.

The mean spirituality score of 2.06, falling within the medium range, coupled with a standard deviation of 0.5, indicates relatively low variability in spirituality levels across the sample. This consistency suggests that most participants share similar levels of spiritual engagement. However, the presence of distinct groups at the lower and higher ends of the spectrum underscores the importance of tailoring interventions to meet diverse spiritual needs. Research highlights that spiritual engagement can influence emotional and psychological well-being differently depending on an individual's baseline spirituality level (Pazer, 2024). For individuals with low spirituality, initial efforts might focus on introducing basic spiritual practices, while those with medium or high levels could benefit from deeper explorations of spiritual meaning and purpose.

The integration of spirituality into rehabilitation programs has been extensively studied, with evidence supporting its role in enhancing resilience, promoting emotional regulation, and

improving overall recovery outcomes (Vis & Boynton., 2024). Spirituality-based interventions can foster a sense of community and belonging, provide frameworks for meaning-making, and enhance motivation for recovery. For instance, 12-step programs, which emphasize spiritual principles, have been widely recognized for their effectiveness in supporting sustained recovery from substance use disorders (Kelly et al., 2020). Similarly, mindfulness-based interventions, often grounded in spiritual traditions, have been shown to improve emotional well-being and reduce the risk of relapse (Ramadas et al., 2021).

The findings also emphasize the importance of fostering spiritual growth across all levels of engagement. Strengthening spiritual values and practices among individuals with low spirituality can help them develop the coping mechanisms necessary for successful recovery. Meanwhile, supporting further growth for those with medium and high spirituality can enhance their resilience and promote sustained personal development. This aligns with the broader literature suggesting that spirituality is not only a protective factor but also a resource that can be cultivated to support recovery and overall well-being (Jones et al., 2020).

In conclusion, the findings underscore the critical role of spirituality in the rehabilitation process. While most respondents exhibit medium levels of spirituality, targeted interventions are essential for those with low scores to enhance their resilience and recovery potential. Simultaneously, fostering spiritual growth among medium and high spirituality groups can further strengthen their capacity to navigate challenges and maintain recovery. Future research should explore the specific mechanisms through which spirituality influences recovery outcomes and identify best practices for integrating spiritual interventions into rehabilitation programs. Such efforts can contribute to the development of holistic approaches that address the diverse spiritual needs of individuals in recovery.

Levels of Resilience

Table 3. Level of Resilience

Resilience	Frequency	Percent (%)	Standard deviation	Mean
Low	35	15.6	0.61	2.06
Medium	140	62.5		
High	49	21.9		

N = 224

Table 3 presents the levels of resilience among the 224 respondents in the study, categorized into three levels: low, medium, and high. The analysis reveals that the majority of respondents, 140 individuals (62.5%), fall within the medium level of resilience. This indicates that most participants have a moderate capacity to cope with adversity, adapt to challenges, and recover from stressful situations, though there remains room for improvement in enhancing their resilience.

In addition, 49 respondents (21.9%) were classified as having high resilience. These individuals demonstrate strong adaptability and the ability to manage stress effectively, which is critical in overcoming challenges such as substance abuse and maintaining sobriety. This group represents a smaller but significant portion of the sample, highlighting a segment of the population that may already possess strong internal coping mechanisms and emotional regulation skills.

Conversely, 35 respondents (15.6%) were categorized as having low resilience. This group faces substantial challenges in coping with stress and adapting to life's adversities. These individuals are likely at a greater risk of struggling with recovery and may benefit from targeted interventions to build their resilience through structured programs, counselling, and support systems. The mean resilience score for the sample is 2.06, which falls within the medium range of the scale used. The standard deviation is 0.61, indicating a moderate variation in resilience scores across the sample. This reflects some degree of diversity in resilience levels among the respondents, ranging from those with minimal coping abilities to those with strong adaptive skills.

Overall, the results suggest that while most respondents exhibit a moderate level of resilience, significant attention should be given to those with low resilience to enhance their ability to navigate challenges effectively. These findings highlight the importance of integrating resilience-building activities into rehabilitation programs to support the recovery process and reduce the likelihood of relapse. Additionally, efforts to strengthen the medium and high resilience groups can further fortify their capacity to maintain recovery and sustain personal growth.

With most respondents (62.5%) exhibiting medium resilience levels, the results reflect a moderate ability among participants to adapt to challenges, cope with adversity, and recover from stress. However, this also signals room for improvement in building stronger resilience, which is essential for effectively managing life's difficulties, particularly in contexts like substance abuse recovery. Meanwhile the group of respondents with high resilience, comprising 21.9% of the sample, represents individuals who exhibit strong emotional regulation, adaptability, and effective stress management.

In contrast, 15.6% of respondents were classified as having low resilience, indicating a critical area of concern. Individuals in this group are more likely to struggle with managing stress and adapting to life's challenges, placing them at higher risk for adverse outcomes, including relapse and poor recovery outcomes. The mean resilience score of 2.06 and the standard deviation of 0.61 highlight moderate variability in resilience levels across the sample. This diversity suggests that while some respondents possess strong adaptive skills, others face significant challenges in building and maintaining resilience. Variability in resilience can be influenced by several factors, including personality traits, social support, life experiences, and environmental conditions. For example, individuals with stronger social networks and greater access to supportive resources tend to exhibit higher resilience levels, underscoring the importance of addressing environmental and contextual factors in resilience-building efforts.

The findings also emphasize the need for resilience-building activities as a critical component of rehabilitation programs for individuals recovering from substance abuse. Activities designed to enhance resilience may include stress management techniques, emotional regulation training, and fostering a sense of purpose and self-efficacy. Moreover, interventions aimed at strengthening resilience in the medium and high resilience groups could help these individuals further fortify their ability to sustain recovery and achieve long-term personal growth.

Targeted efforts to enhance resilience among the low-resilience group are particularly important, as they face the greatest challenges in managing stress and adapting to life's adversities. This group may benefit from structured interventions such as individual or group counselling, mentorship programs, and access to community resources. Additionally, incorporating resilience-building components into existing substance abuse rehabilitation programs can help address underlying vulnerabilities and reduce the risk of relapse. Resilience-building activities that emphasize social connectedness, problem-solving skills, and emotional regulation can foster a stronger foundation for recovery.

In conclusion, the findings from Table 1.3 highlight the critical role of resilience in substance abuse recovery and underscore the importance of integrating resilience-building activities into rehabilitation programs. While most respondents exhibit medium levels of resilience, targeted support is needed for those with low resilience to improve their coping mechanisms and adaptability. Strengthening resilience across all levels—low, medium, and high—can enhance the recovery process, reduce the likelihood of relapse, and support sustained personal growth. Future research should explore the effectiveness of specific resilience-building interventions in diverse populations and contexts to develop evidence-based approaches that maximize the potential for recovery and well-being.

Analysis of Correlation Between Spirituality and Resilience

Table 4. Correlation of spirituality and resilience

		Spirituality	Resilience
Spirituality	Pearson correlation Sig (2-tailed)	1	.665**
	N	224	224

Table 4 presents the correlation analysis between spirituality and resilience among the 224 respondents. The Pearson correlation coefficient is used to assess the strength and direction of the relationship between these two variables. The Pearson correlation coefficient for spirituality and resilience is 0.665, indicating a strong positive correlation between the two variables. This means that as spirituality increases, resilience also tends to increase among the participants. The positive direction of the correlation suggests that higher levels of spiritual engagement and practices are associated with stronger coping mechanisms and the ability to adapt to challenges. The significance value (Sig, 2-tailed) is 0.000, which is less than the commonly accepted threshold of 0.01. This indicates that the correlation is statistically significant at the 99% confidence level. In other words, the observed relationship between spirituality and resilience is unlikely to have occurred by chance, and there is strong evidence to support the association.

The sample size for the analysis is 224, which provides adequate power for the statistical test. This strengthens the reliability of the results and the generalizability of the findings within the context of this study. In summary, the results demonstrate a significant positive relationship between spirituality and resilience. This suggests that individuals with higher spirituality levels tend to have greater resilience, which could play a critical role in their ability to overcome challenges, particularly in the context of drug rehabilitation (Ghorbani et al., 2022). These findings highlight the potential value of incorporating spiritual interventions into programs aimed at building resilience among individuals recovering from substance abuse.

The observed Pearson correlation coefficient of 0.665 between spirituality and resilience among 224 respondents underscores a robust positive relationship, suggesting that higher levels of spirituality are associated with greater resilience. This statistically significant finding ($p < 0.01$) aligns with a growing body of literature exploring the interplay between spirituality and resilience, particularly in contexts such as substance abuse recovery (Lee & Kim, 2021).

Spirituality, often defined as a personal quest for meaning and connection beyond oneself, has been identified as a crucial factor in enhancing psychological resilience—the capacity to adapt and thrive amidst adversity. Recent studies have reinforced this association. For instance, a 2022 study reported a substantial positive correlation ($r = 0.54$) between spirituality and resilience, indicating that individuals with higher spiritual beliefs exhibit greater resilience when facing life's challenges (Sinchana & Joy, 2023). Similarly, research from 2023 found a significant relationship between spiritual intelligence and resilience among young adults, with a Pearson correlation coefficient of 0.282 ($p = 0.018$), suggesting that spiritual intelligence contributes to resilience in this demographic (Shukla, 2021).

The mechanisms underlying this relationship are multifaceted. Spirituality often provides individuals with a sense of purpose, community, and support, which are essential components in building resilience (Pargament et al., 2013). Engagement in spiritual practices can foster positive emotions, enhance coping strategies, and offer a framework for interpreting and overcoming adversities. A recent article highlights that spirituality and faith can boost resilience by unlocking inner strength, providing hope, and fostering trust, which are crucial in facing life's challenges (Ghorbani et al., 2022; Hayati et al., 2024).

In the context of substance abuse rehabilitation, the integration of spirituality into treatment programs has shown promising results. Spirituality can serve as a protective factor, aiding individuals in coping with stress and reducing the likelihood of relapse. A systematic review and

meta-analysis of observational studies found a moderate positive correlation ($r = 0.40$) between spirituality/religiosity and resilience, suggesting that spiritual or religious involvement can enhance resilience and potentially improve outcomes in substance abuse recovery (Grim & Grim, 2019).

However, it is essential to approach the integration of spirituality into therapeutic interventions with cultural sensitivity and respect for individual differences. Not all individuals may identify with or find solace in spiritual practices, and for some, negative religious coping can exacerbate distress (Adam et al., 2022). Spirituality can be a mental health resource or a barrier to resilience, depending on the situation, emphasizing the need to understand a person's spiritual resources to facilitate care.

Moreover, while the positive correlation between spirituality and resilience is well-documented, the directionality and causality of this relationship warrant further investigation. It remains to be determined whether spirituality leads to increased resilience, whether inherently resilient individuals are more inclined towards spiritual practices, or if a bidirectional relationship exists. Additionally, factors such as social support, community involvement, and personal beliefs intersect with spirituality and can influence resilience. A study explored the relationship between spirituality, quality of life, and resilience, suggesting that higher spirituality levels lead to better quality of life and resilience in facing life's problems (Awang et al., 2019)

The sample size of 224 respondents in the present study provides a solid foundation for statistical analysis, enhancing the reliability and generalizability of the findings. Nonetheless, future research could benefit from longitudinal designs to assess changes over time and to establish causality more definitively. Diverse populations should also be considered to ensure that findings are applicable across different cultural and demographic groups.

In conclusion, the significant positive correlation between spirituality and resilience observed in this study contributes to the growing evidence supporting the integration of spiritual considerations into resilience-building interventions, particularly in substance abuse rehabilitation contexts. By acknowledging and incorporating the spiritual dimensions of individuals' lives, practitioners can develop more holistic and effective approaches to fostering resilience and facilitating recovery. However, it is imperative to tailor these interventions to individual beliefs and cultural contexts, ensuring that they are inclusive and respectful of personal differences.

CONCLUSION

This research underscores the significant relationship between spirituality and resilience, offering compelling evidence that spirituality serves as a critical resource in fostering resilience among individuals undergoing substance abuse rehabilitation. By demonstrating that higher levels of spirituality are associated with greater resilience, the study provides a clear rationale for integrating spiritual practices into recovery programs. These findings are not just theoretical but have practical implications, highlighting the need for rehabilitation initiatives to adopt holistic approaches that address emotional, psychological, and spiritual dimensions. For practitioners, this research suggests actionable steps to incorporate spirituality into treatment, such as tailored spiritual counselling and resilience-building activities. For policymakers, the results advocate for culturally sensitive rehabilitation frameworks that recognize the protective role of spirituality in reducing relapse and supporting long-term recovery. Ultimately, this study contributes to the broader discourse on substance abuse recovery by emphasizing that resilience is not merely an innate quality but a trait that can be cultivated through spiritual engagement, offering individuals a pathway to sustainable transformation and well-being.

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