

The Role of Community Social Capital in Building Youth Resilience against Drug Abuse

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Received: 16-4-2025 | Revised: 12-09-2026 | Accepted: 06-04-2026

ABSTRACT

Drug abuse among adolescents has emerged as a multidimensional social issue amid rapid social transformation and technological advancement. Beyond its detrimental effects on physical and mental health, this phenomenon also threatens the moral and social stability of younger generations. This study aims to examine the role of community social capital in strengthening youth resilience against drug abuse in Pontianak City. The research employed a qualitative case study approach involving youth communities, community leaders, educators, and religious and social institutions actively engaged in drug prevention initiatives. Data were collected through in-depth interviews, participant observation, and document analysis, and were analyzed using thematic analysis techniques. The findings indicate that social capital, reflected in social trust, shared norms, and active community participation, significantly contributes to reinforcing youth resilience. Families, schools, and community environments function as strategic social spaces for fostering moral awareness, collective responsibility, and social solidarity among adolescents. The study concludes that community-based drug prevention strategies grounded in social capital are more sustainable and effective than solely repressive approaches, as they are rooted in local values and social networks embedded within society.

Penyalahgunaan narkoba di kalangan remaja telah menjadi persoalan sosial multidimensional di tengah perubahan sosial dan perkembangan teknologi yang berlangsung secara cepat. Fenomena ini tidak hanya berdampak pada kesehatan fisik dan mental, tetapi juga mengancam stabilitas moral dan sosial generasi muda. Penelitian ini bertujuan untuk menganalisis peran modal sosial masyarakat dalam memperkuat ketahanan remaja terhadap penyalahgunaan narkoba di Kota Pontianak. Penelitian menggunakan pendekatan studi kasus kualitatif dengan melibatkan kelompok pemuda, tokoh masyarakat, pendidik, serta lembaga keagamaan dan sosial yang terlibat dalam upaya pencegahan narkoba. Data dikumpulkan melalui wawancara mendalam, observasi partisipatif, dan analisis dokumen, kemudian dianalisis menggunakan teknik analisis tematik. Hasil penelitian menunjukkan bahwa modal sosial yang tercermin dalam kepercayaan sosial, norma bersama, dan partisipasi masyarakat berperan penting dalam memperkuat ketahanan remaja. Keluarga, sekolah, dan lingkungan masyarakat menjadi ruang sosial strategis dalam menumbuhkan kesadaran moral, tanggung jawab kolektif, dan solidaritas sosial di kalangan remaja. Penelitian ini menyimpulkan bahwa strategi pencegahan narkoba berbasis masyarakat yang bertumpu pada modal sosial lebih efektif dan berkelanjutan dibandingkan pendekatan represif semata, karena berakar pada nilai-nilai lokal dan jejaring sosial yang hidup di tengah masyarakat.

Keywords: community, drug abuse, social capital, youth resilience

Introduction

The phenomenon of adolescent drug abuse continues to increase both globally and nationally. According to the UNODC World Drug Report 2024, more than 292 million people worldwide used drugs in 2022, with approximately 39 million aged 15–24 (UNODC, 2024). The report highlights that the number of new adolescent users grows by 12% annually due to social pressure and weak community monitoring. In Indonesia, Badan Narkotika Nasional (BNN)

reported 3.3 million active drug users in 2023, with 57% of them being adolescents (BNN, 2023). In West Kalimantan, particularly Pontianak City, drug abuse cases rose by 18.6% from the previous year (Siregar, 2024). This situation reveals that drug abuse is not merely an individual issue but a social crisis that demands a collective, community-based response.

The significance of this study lies in exploring community social capital as a collective force that strengthens youth resilience against drug abuse. Social capital including social networks, shared norms, and mutual trust has long been recognized as a protective factor in mitigating risky adolescent behavior (Coleman, 1988; Fukuyama, 2007; Putnam, 2000). Recent research by Baggio et al. (Baggio et al., 2016) and Ou (Ou, 2024) demonstrates that adolescents actively involved in social and religious organizations tend to develop stronger psychosocial resilience. In urban contexts such as Pontianak where modernization and digitalization often amplify social individualism (Komdigi, 2024) community cohesion and trust serve as vital foundations for strengthening youth resilience. Understanding how local communities internalize values and norms that reject drug use is therefore crucial in shaping social stability among the younger generation.

Existing literature indicates that social capital contributes significantly to prosocial development among adolescents. Dufur, Parcel, and McKune (Dufur et al., 2013) found that high levels of social capital within families and schools correspond to lower levels of substance use. Similarly, Åslund and Nilsson (2013) confirmed that community social capital reduces drug use intentions through informal social control. However, most studies are situated in Western societies, leaving Southeast Asian contexts underexplored (Lin, 2017; Steinmo & Rasmussen, 2018). Indonesia's social structure, characterized by *gotong royong* and collective solidarity, presents a unique foundation for drug prevention, although digitalization has weakened interpersonal trust and social ties (Allen et al., 2021; Claridge, 2018)

The research gap arises because most Indonesian studies focus on punitive approaches rather than social-community mechanisms as preventive strategies. Cockerham et al. (2017) emphasized that social determinants such as networks, shared norms, and collective participation play a crucial role in reducing risk behaviors but are rarely prioritized in local policies. Community-based initiatives such as *Posyandu Remaja* and *Desa Bersinar* have shown encouraging results, with youth drug involvement reduced by up to 22% (BNN, 2023, 2024; Oxtora, 2024). Nevertheless, little research has examined their effectiveness through the lens of social capital. This study thus addresses this gap by analyzing how community social capital operates in shaping collective norms, trust, and social resilience among urban youth. Consequently, this research aims to contribute both theoretically and practically to the study of social capital in the field of social and public health education. Theoretically, it enriches understanding of how trust, norms, and social networks interact synergistically to build youth resilience. Practically, it offers a foundation for inclusive, participatory, and sustainable community-based policies that prevent drug abuse among adolescents in urban settings such as Pontianak.

Methods

This research employed a qualitative case study design to explore the dynamics of community social capital in strengthening youth resilience against drug abuse in Pontianak City. This approach was chosen because it allows a deep understanding of social meanings and inter-actor relationships within a complex social context (Creswell, 2018; Suhirman et al., 2026). Pontianak was selected as the research site due to its distinctive characteristics multiethnic,

religious, and urban as well as its increasing trend in adolescent drug abuse cases (BNN, 2023). The study focused on three key social institutions directly involved in drug prevention efforts: the Al Hijrah Rehabilitation Community, the Pontianak City National Narcotics Agency (BNN), and the Narcotics Division of Pontianak City Police. These institutions represent collaboration between communities, government, and law enforcement agencies in fostering a socially resilient system against drug abuse.

Informants were selected using purposive sampling, emphasizing individuals who actively participate or hold strategic roles in adolescent drug prevention initiatives. The participants included adolescents involved in social or school-based organizations, community leaders, parents, and officials from relevant institutions. Data collection was conducted through in-depth interviews, participant observation, and document analysis. The semi-structured interviews, lasting approximately 60–90 minutes each, enabled participants to articulate their experiences and perceptions in depth (Sugiyono, 2019, 2023). Participant observation was carried out during community-based youth activities, religious gatherings, and rehabilitation programs to examine how social norms, networks, and trust are enacted in daily life. Documentary data such as institutional reports, educational materials, and community records were used to reinforce the credibility of findings.

Data were analyzed using the thematic analysis model proposed by Miles and Huberman (2014), consisting of data reduction, data display, and conclusion drawing or verification. During reduction, the researcher organized data based on major themes—social trust, community norms, and social networks followed by thematic presentation and interpretation. Verification was conducted continuously through data triangulation across different sources and collection methods (Denzin, 2017; Denzin & Lincoln, 2018). This methodological approach provided a holistic and credible understanding of how community social capital operates as a social mechanism that enhances youth resilience against drug abuse in the urban Indonesian context.

Result

1. Social Capital as a Foundation for Adolescent Resilience Against Drug Abuse

The findings of this study demonstrate that social capital among adolescents in Pontianak City is primarily constructed through intensive and continuous social interactions within the spheres of family, school, and community life. Social relationships developed through participation in student organizations, youth religious groups, neighborhood youth associations, and sports communities foster not only emotional closeness among adolescents but also a shared sense of collective responsibility. Within these social environments, adolescents do not merely engage in recreational interaction, but also internalize shared expectations, social obligations, and communal values that shape acceptable patterns of behavior. Consequently, drug abuse is not perceived solely as an individual moral failure, but also as an act that disrupts collective harmony and undermines the moral integrity of the social group.

The study further reveals that strong interpersonal networks within adolescent communities generate informal mechanisms of social control that operate organically in everyday life. Adolescents tend to regulate their behavior according to collective norms because they fear losing social trust, respect, and acceptance within their peer groups and surrounding communities. One participant actively involved in a youth organization explained, “When one of our friends begins to associate with negative circles or shows unusual behavior, we immediately try to remind and support them. We feel that we represent one community, so if one person is damaged, the reputation of the whole group is also affected.” This statement

illustrates how solidarity and communal attachment function as protective social mechanisms that encourage adolescents to maintain behaviors consistent with shared moral expectations.

In addition, social capital is reflected in the development of mutual trust between adolescents and their surrounding social environments. Such trust creates safe spaces in which young people can openly discuss personal concerns, emotional struggles, and social pressures without fear of judgment or exclusion. Several participants reported that supportive peer relationships enabled them to resist negative external influences more effectively. In this regard, social capital functions not merely as a network of social relations, but also as a source of emotional reassurance, moral guidance, and social belonging that strengthens adolescent resilience against the risks of drug involvement.

2. The Role of Family, School, and Community Values in Strengthening Social Control

The findings indicate that the family constitutes one of the most influential social institutions in strengthening adolescent resilience against drug abuse. Open communication between parents and children emerged as a critical factor in fostering emotional security, moral awareness, and psychological stability among adolescents. Young people who regularly engaged in conversations with their parents regarding personal problems, peer relationships, educational aspirations, and future plans demonstrated a stronger commitment to avoiding deviant behavior. One adolescent participant stated, "My parents always ask about my daily activities. Sometimes we spend hours talking about school, friendships, and my future plans. Because of that, I feel responsible for maintaining their trust and not disappointing them." This finding suggests that parental attentiveness and emotional involvement cultivate a sense of moral accountability that discourages adolescents from engaging in risky behaviors.

Within the educational sphere, positive teacher and student relationships also emerged as a significant component of informal social control. Teachers were not perceived merely as formal educators, but also as approachable mentors and trusted listeners capable of providing emotional support and moral direction. Several participants acknowledged that they felt more comfortable sharing their concerns with teachers who demonstrated empathy, openness, and nonjudgmental attitudes. Relational approaches characterized by dialogue, encouragement, and personal attention were considered far more effective in preventing risky behavior than disciplinary methods based solely on punishment and intimidation. The presence of supportive teachers contributed to students' emotional attachment to the school environment and reinforced their sense of social responsibility.

Furthermore, socially embedded community values play a substantial role in shaping collective awareness regarding the dangers of drug abuse. Norms associated with preserving family honor, respecting communal reputation, and avoiding shameful conduct are continuously transmitted through recurring religious, cultural, and social activities. Community gatherings, religious study circles, mutual cooperation initiatives, and local cultural events function as important spaces for the intergenerational transmission of moral values. A community leader explained, "Young people here are constantly reminded that harmful behavior does not only disgrace themselves, but also their families and the wider community." This statement demonstrates that communal norms operate as subtle yet powerful moral regulators that shape adolescent behavior through internalized social expectations rather than formal sanctions.

3. Community Collaboration and the Challenges of Strengthening Social Capital in the Digital Era

The study also reveals that religious institutions and civic organizations play a strategic role in fostering adolescent resilience through participatory and developmental activities. Programs involving spiritual mentoring, leadership training, social volunteering, and skills development provide constructive social spaces where adolescents can build positive identities and meaningful life orientations. These activities not only reduce opportunities for engagement in harmful behavior, but also encourage adolescents to develop discipline, self confidence, and social responsibility. One participant involved in a youth religious organization stated, “When we are actively involved in mosque activities or community programs, we spend our time on productive things. It keeps us away from negative experimentation because we feel that our activities have purpose and value.” This finding highlights the importance of community engagement in cultivating protective routines and healthy social environments for adolescents.

Despite these strengths, the findings also identify substantial challenges in the consolidation of social capital among contemporary youth, particularly in relation to the expansion of digital individualism. Increasing dependence on social media and virtual interaction has gradually reduced the quality of direct interpersonal relationships among adolescents. Many participants acknowledged that online communication often creates superficial connections rather than deep emotional bonds rooted in trust and mutual care. At the same time, socioeconomic pressures, parental overwork, labor migration, and domestic instability have weakened family supervision and reduced opportunities for meaningful face to face interaction within households. As a result, one of the most important protective mechanisms against adolescent vulnerability, namely sustained social connectedness, has become increasingly fragile.

Nevertheless, the study identifies emerging forms of cross sector collaboration that utilize social capital as a preventive resource against drug abuse. Schools, community organizations, government institutions, and youth groups have begun implementing collaborative initiatives such as social campaigns, peer educator training, youth outreach programs, and community based awareness activities. Within these initiatives, adolescents are positioned not merely as passive recipients of intervention programs, but as active agents capable of influencing their peers and contributing to collective prevention efforts. A youth community participant explained, “Young people usually listen more carefully when the message comes from someone their own age. That is why we feel responsible for protecting and reminding each other.” This finding demonstrates that social capital becomes more effective when it is activated through participatory collaboration that empowers adolescents to function as social actors and agents of positive change within their communities.

Discussion

The findings of this study reaffirm that social capital serves as a central determinant of adolescent resilience within the urban context of Indonesia. As posited by Putnam (2000) and Coleman (1988), social networks, trust, and shared norms create a moral infrastructure that guides individual actions toward socially approved behavior. In line with this theoretical foundation, the present research demonstrates how the communal cohesion of Pontianak’s youth networks fosters mutual accountability and moral responsibility, reducing tendencies toward deviant acts such as drug use. The mechanism aligns with Bourdieu’s (2002, 2020) conception of social capital as a collective asset that confers both symbolic and practical

advantages in maintaining social order. By internalizing collective expectations, adolescents transform moral supervision from an external obligation into an internalized social identity.

The role of family and school observed in this research supports extensive literature highlighting the micro-social roots of social capital formation. Studies by Dufur, Parcel, and McKune (2013) and Fergus and Zimmerman (2005) reveal that cohesive family interactions and supportive school climates contribute significantly to prosocial development and the avoidance of risk behaviors. This study echoes those findings, showing that open communication within families strengthens emotional security and moral reasoning. Teachers' empathetic engagement with students, as described by Dufur et al., (2024), not only enhances academic motivation but also reinforces behavioral self-regulation. Together, these environments provide adolescents with overlapping layers of attachment and trust, forming a buffer that deters the allure of substance use.

The influence of social norms and religiosity emerges as a key cultural mechanism of prevention. Consistent with Åslund and Nilsson (2013) and Baggio et al. (2016), the study finds that community-based moral frameworks rooted in religious values provide adolescents with cognitive and emotional resources that make drug consumption incompatible with moral identity. These findings also align with Ellison (1991) and Aranda (2008), who noted that religious participation fosters collective efficacy and a sense of belonging that protect against risky behavior. In Pontianak's context, social norms are transmitted through daily practices religious study circles, youth gatherings, and communal rituals that continually reproduce collective values. This supports Fukuyama's (Fukuyama, 2007) notion that moral trust serves as a foundation for cooperation, where adherence to shared beliefs functions as a self-regulating system of social control.

However, the research also exposes challenges linked to digital transformation and family disintegration, which weaken the continuity of social capital. As Claridge (Claridge, 2018) observes, the migration of social interactions into digital spaces often reduces the depth and quality of relational ties, resulting in what Allen et al. describe as "shallow connectedness." The weakening of parental presence and community engagement disrupts the process of moral transmission, leaving adolescents vulnerable to alternative sources of social validation. These findings resonate with Twenge et al. (2019), who reported increased loneliness and anxiety among digitally dependent youth. Therefore, the erosion of face-to-face relational contexts not only diminishes interpersonal trust but also undermines the social scaffolding that supports collective resilience.

In addressing these vulnerabilities, cross-sector collaboration appears as a crucial innovation. The observed partnerships between community groups, schools, and public institutions reflect what Cockerham et al. (2017) describe as the health-promoting potential of social structure. The model of bridging social capital linking different social layers enables the co-production of contextually relevant prevention programs. Empirical research by Villalonga-Olives and Kawachi (2017) supports this approach, emphasizing that collective action derived from inter-institutional trust yields stronger outcomes in health-related behavior change. In the Pontianak context, initiatives such as Drug-Free Villages and Youth Health Forums exemplify bottom-up collaboration that integrates government policy with community participation. This multi-actor synergy enhances the sustainability of prevention programs by distributing ownership across diverse stakeholders.

Theoretically, this study extends the discourse on social capital as a multidimensional and dynamic construct. It integrates the structural dimension (networks and participation), the

relational dimension (trust and reciprocity), and the cognitive dimension (shared meaning and moral beliefs), as conceptualized by Nahapiet and Ghoshal (1998) and later refined by Adler and Kwon (2002). Practically, these insights align with Lin's (2017) and Carmichael et al., (2015) argument that access to and mobilization of social capital determine individuals' capacity to cope with stressors. By showing how community-based institutions transform latent social resources into active preventive systems, this study demonstrates the transformative potential of social capital beyond its descriptive function. Nonetheless, limitations persist: the geographic focus on Pontianak constrains generalizability, and the digital dimension of social capital remains underexplored. Future research should thus examine how digital social capital as suggested by Barbosa Neves et al. (2018) can be cultivated to complement, rather than replace, physical social networks in fostering adolescent resilience.

Ultimately, this discussion underscores a critical insight: social capital functions not only as a social lubricant but as a social shield. When trust, shared values, and cooperation coalesce within a coherent moral community, they generate both normative and emotional resistance against deviance. The Pontianak case shows that such resistance is most effective when it is participatory, dialogical, and embedded in lived social relations. Strengthening these dynamics requires revitalizing community spaces, reinvigorating family communication, and reimagining schools as centers of civic care. Through these efforts, social capital can continue to serve as a living architecture of prevention an evolving moral ecosystem that sustains the collective resilience of youth in an increasingly fragmented digital world.

Conclusion

This study concludes that community social capital plays a crucial role in strengthening youth resilience against drug abuse in Pontianak City. The forms of social capital identified include social trust, shared norms, and participatory networks that flourish within families, schools, and religious or social communities. Through these social relationships, adolescents develop collective responsibility and moral awareness that serve as protective barriers against drug-related risks. Cross-sector collaboration among government institutions, schools, and local communities enhances the effectiveness of community-based prevention by positioning youth as active agents of social change rather than passive recipients. Theoretically, this study broadens the understanding of social capital as a multidimensional force shaping youth resilience, while practically, it offers insights for strengthening community-based social policies and character education. Future research is recommended to explore the role of digital social capital in fostering trust and social solidarity among youth in the context of rapid technological transformation.

References

- Adler, P. S., & Kwon, S.-W. (2002). Social Capital: Prospects for a New Concept. *The Academy of Management Review*, 27(1), 17. <https://doi.org/10.2307/4134367>
- Allen, K.-A., Slaten, C. D., Arslan, G., Roffey, S., Craig, H., & Vella-Brodrick, D. A. (2021). School Belonging: The Importance of Student and Teacher Relationships. In *The Palgrave Handbook of Positive Education* (pp. 525–550). Springer International Publishing. https://doi.org/10.1007/978-3-030-64537-3_21
- Aranda, M. P. (2008). Relationship between Religious Involvement and Psychological Well-Being: A Social Justice Perspective. *Health & Social Work*, 33(1), 9–21. <https://doi.org/10.1093/hsw/33.1.9>

- Åslund, C., & Nilsson, K. W. (2013). Social capital in relation to alcohol consumption, smoking, and illicit drug use among adolescents: a cross-sectional study in Sweden. *International Journal for Equity in Health*, 12(1), 33. <https://doi.org/10.1186/1475-9276-12-33>
- Baggio, S., Mohler-Kuo, M., Dupuis, M., Henchoz, Y., Studer, J., N'Goran, A. A., & Gmel, G. (2016). Substance use capital: Social resources enhancing youth substance use. *Revue D Epidemiologie Et De Sante Publique*, 64(4), 255–262. <https://doi.org/10.1016/J.RESPE.2016.01.101>
- Barbosa Neves, B., Fonseca, J. R. S., Amaro, F., & Pasqualotti, A. (2018). Social capital and Internet use in an age-comparative perspective with a focus on later life. *PLOS ONE*, 13(2), e0192119. <https://doi.org/10.1371/journal.pone.0192119>
- BNN. (2023). *Indonesia Drugs Report 2023*. BNN. <https://puslitdatin.bnn.go.id/portfolio/data-statistik-kasus-narkoba/>
- BNN. (2024, December 23). *Siaran Pers Tahun 2024: Penguatan Strategi dan Aksi Kolaborasi Dalam P4GN*. BNN. <https://bnn.go.id/konten/unggahan/2024/12/23122024-FINAL-PRESS-RELEASE-AKHIR-TAHUN-2024-COMPILE-ALL.pdf>
- Bourdieu, P. (2002). The Forms of Capital. In *Readings in Economic Sociology* (pp. 280–291). Wiley. <https://doi.org/10.1002/9780470755679.ch15>
- Bourdieu, P. (2020). *The New Social Theory Reader* (S. Seidman & J. C. Alexander, Eds.). Routledge. <https://doi.org/10.4324/9781003060963>
- Carmichael, D., Archibald, J., & Lund, G. (2015). Social Capital Theory in Social Media Research. *Social Science Research Network*. <https://doi.org/10.2139/SSRN.2612872>
- Claridge, T. (2018). Dimensions of Social Capital - structural, cognitive, and relational. *Social Capital Research*, 1–4.
- Cockerham, W. C., Hamby, B. W., & Oates, G. R. (2017). The Social Determinants of Chronic Disease. *American Journal of Preventive Medicine*, 52(1), S5–S12. <https://doi.org/10.1016/j.amepre.2016.09.010>
- Coleman, J. S. (1988). Social Capital in the Creation of Human Capital. *American Journal of Sociology*, 94, S95–S120. <https://doi.org/10.1086/228943>
- Creswell, J. W. (2018). *Qualitative Inquiry and Research Design: Choosing Among Five Approaches*. Sage Publications.
- Denzin, N. K. (2017). *The Research Act*. Routledge. <https://doi.org/10.4324/9781315134543>
- Denzin, N. K., & Lincoln, Y. S. (2018). *The SAGE Handbook of Qualitative Research* (5th ed.). SAGE Publications, Inc.
- Dufur, M. J., Parcel, T. L., Braudt, D. B., & Hoffmann, J. P. (2024). Is social capital durable?: How family social bonds influence college enrollment and completion. *PLoS ONE*, 19(3 March). <https://doi.org/10.1371/journal.pone.0298344>
- Dufur, M. J., Parcel, T. L., & Mckune, B. A. (2013). Does Capital at Home Matter More than Capital at School? The Case of Adolescent Alcohol and Marijuana Use. *Journal of Drug Issues*, 43(1), 85–102. <https://doi.org/10.1177/0022042612462220>
- Ellison, C. G. (1991). Religious Involvement and Subjective Well-Being. *Journal of Health and Social Behavior*, 32(1), 80. <https://doi.org/10.2307/2136801>
- Fergus, S., & Zimmerman, M. A. (2005). ADOLESCENT RESILIENCE: A Framework for Understanding Healthy Development in the Face of Risk. *Annual Review of Public Health*, 26(1), 399–419. <https://doi.org/10.1146/annurev.publhealth.26.021304.144357>
- Fukuyama, F. (2007). *Trust : Kebijakan Sosial dan Penciptaan Kemakmuran* (1st ed.). Qalam.
- Komdigi. (2024, October 7). *Menkominfo Dorong Generasi Muda Cerdas Berinternet*. Biro Humas Kementerian Komdigi. <https://www.komdigi.go.id/berita/siaran-pers/detail/menkominfo-dorong-generasi-muda-cerdas-berinternet>
- Lin, N. (2017). Building a Network Theory of Social Capital. In *Social Capital* (pp. 3–28). Routledge. <https://doi.org/10.4324/9781315129457-1>
- Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). *Qualitative Data Analysis: A Methods Sourcebook* (3rd ed.). SAGE Publications.

- Ou, X. (2024). Study of the Impact of Sports Participation on Social Capital among Drug Addicts. *International Journal of Social Sciences and Public Administration*, 3(2), 382–392. <https://doi.org/10.62051/ijsspa.v3n2.47>
- Oxtora, R. (2024, December 31). BNNP Kalbar tangani 741 penyalahgunaan narkoba sepanjang tahun 2024. *Antara Kalbar*. <https://kalbar.antaranews.com/berita/615162/bnnp-kalbar-tangani-741-penyalahgunaan-narkoba-sepanjang-tahun-2024>
- Putnam, R. D. (2000). Bowling alone: The collapse and revival of American community. *Proceedings of the 2000 ACM Conference on Computer Supported Cooperative Work*, 357. <https://doi.org/10.1145/358916.361990>
- Siregar, S. (2024, July 20). Kalbar Catat 16.755 Pecandu Narkoba, Perlu Adanya Upaya Pencegahan Pemberantasan Penyalahgunaan dan Peredaran Gelap Narkotika (P4GN). *Pontianak Post Jawa Pos*. https://pontianakpost.jawapos.com/metropolis/1464884183/kalbar-catat-16755-pecandu-narkoba-perlu-adanya-upaya-pencegahan-pemberantasan-penyalahgunaan-dan-peredaran-gelap-narkotika-p4gn#google_vignette
- Steinmo, M., & Rasmussen, E. (2018). The interplay of cognitive and relational social capital dimensions in university-industry collaboration: Overcoming the experience barrier. *Research Policy*, 47(10), 1964–1974. <https://doi.org/10.1016/j.respol.2018.07.004>
- Sugiyono. (2019). *Metode Penelitian Kuantitatif, Kualitatif, dan R&D*. CV Alfabeta.
- Sugiyono. (2023). *Metode Penelitian Pendidikan (Kuantitatif, Kualitatif, Kombinasi, R&D Dan Penelitian Pendidikan)* (3rd ed.). Alfabeta.
- Suhirman, L., Nugroho, A. Y., Dhyanaputri, I. G. A. S., Adawiyah, R., Soraya, A., Dzaky, M. I., Alunaza, H., Akbar, S. A., Hafizi, M. Z., & Junida, D. S. (2026). *Dasar Metodologi Penelitian*. CV. Askara Sastra Media.
- Twenge, J. M., Spitzberg, B. H., & Campbell, W. K. (2019). Less in-person social interaction with peers among U.S. adolescents in the 21st century and links to loneliness. *Journal of Social and Personal Relationships*, 36(6), 1892–1913. <https://doi.org/10.1177/0265407519836170>
- UNODC. (2024). *World Drug Report 2024*. UNODC. <https://www.unodc.org/unodc/en/data-and-analysis/wdr.html>
- Villalonga-Olives, E., & Kawachi, I. (2017). The dark side of social capital: A systematic review of the negative health effects of social capital. *Social Science & Medicine*, 194, 105–127. <https://doi.org/10.1016/j.socscimed.2017.10.020>