CHAPTER VI

CONCLUSIONS, LIMITATIONS & SUGGESTIONS
Results of part - A of the study lead to the following conclusions:

- Problems of adjustment due to physical and emotional transition or changes during adolescence, depression, aggression, anxiety, feelings of loneliness, helplessness, insecurity and guilt, unmet needs, poor and negative self-concept, poor parental monitoring, lack of parental support, parent’s/sibling’s substance abuse behaviour, dissatisfaction with school and teachers, peer pressure, stressful life events and poor coping skills are important predictors of substance abuse among rural and urban adolescents.

- There are some differences in the causes of substance abuse among rural and urban adolescents e.g. unsatisfactory adaptation in life, depression, anxiety, feelings of loneliness, insecurity and guilt, stressful interpersonal familial relations, stressful relations with teachers, dissatisfaction with school, and stress due to intense competition, are found higher in urban adolescents than in rural adolescents. On the other hand stress due to financial problems, stress due to health problems, feeling of hopelessness, irritation, aggression, poor and negative self-concept, and poor coping potential are found higher in rural adolescents than in urban adolescents.

- Socio-economic status is not an important variable in causing substance abuse among adolescents. Adolescents of any socio-economic status can have the problem of substance abuse.
LIMITATIONS AND SUGGESTIONS:

- The study has been conducted on a limited sample of 80 adolescents (40 rural and 40 urban) due to constraint of time and resources. Since detailed analysis of personality of each adolescent with the help of case study and projective test like TAT required extensive data collection and analysis, it was not feasible to take a larger sample in the present research. It is suggested therefore, that research on larger sample of adolescents who abuse substances, may be conducted to confirm the results of this research.

- The sample for the study was confined to rural and urban areas of Agra and Mathura city only. A more exhaustive study needs to be conducted on a wider sample selected from various geographical areas. Before generalizing the results of the study, cross-cultural research is suggested.

- The study is limited to the adolescent substance abusers who abuse inhalants or painkillers only. Further extensive research should be conducted on other types of substance abuse.

- The study is limited to adolescents of age 10-15 years only. Further research may be conducted on substance abusers of other age groups.

- The study is limited to male substance abusers only. Further research may be conducted on female substance abusers also.

- Analysis of causes of substance abuse is done on the basis of case study and TAT. To increase the reliability and validity of results of the study, other objective measures (or personality tests) may also be used.
PART - B

Results of part - B of the study lead to the following conclusions:

➤ Behaviour intervention is effective in reducing substance abuse among adolescents. It is effective in case of all the subjects who abuse substances, though the effectiveness of behaviour intervention varies from subject to subject due to individual differences and differences in the type and amount of substance abused.

➤ Behaviour intervention with BSCT in combination with JPMR is more effective than BSCT alone in reducing substance abuse among adolescents. Among subjects intervened with BSCT only, none of the subjects has completely overcome substance abuse behaviour and relapse was found in many subjects during follow-up. On the contrary, among subjects intervened with BSCT in combination with JPMR, 45% subjects completely gave up substance abuse and maintained it during follow up. Others also improved significantly and frequency of substance abuse behaviour of some other subjects has also reached zero level during follow-up.

LIMITATIONS AND SUGGESTIONS:

➤ Behaviour intervention has been given to a small group of 80 adolescents only. The same should be tried on larger groups of various age levels before drawing generalization.

➤ Only six months intervention was given in the present research. In future researches it should be ascertained whether longer interventions can give still better results.
Comparative and constructive design with pre and post measure has been used in the present research. Multiple assessments approach can also be used in future researches in the area to get more reliable results.

Lastly, follow up of each subject has been done for a period of one year only. Follow up at longer intervals may be continued to confirm the long term maintenance of results.