



The Relationship Between Family Support and Teenage Activity in Youth Integrated Service post in Purwosari District, Surakarta

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<p>Track Record Article</p> <p>Accepted: 5 September 2024 Revised: 31 July 2024 Published: 14 September 2024</p> <p>How to cite : Saputri, A., & Wardani, K. E. (2024). The Relationship between Family Support and Teenage Activity in Youth Integrated Service post in Purwosari District, Surakarta. <i>Contagion : Scientific Periodical of Public Health and Coastal Health</i>, 6(2), 957–969.</p>	<p style="text-align: center;">Abstract</p> <p><i>Adolescence is a transition period from childhood to adulthood where a person experiences significant biological, psychological, and social changes. This development encourages more mature behaviors in adolescents related to various adolescent health problems, thus requiring comprehensive and integrated services that include all elements of different programs and sectors, such as the development of adolescent care health services in the form of an Adolescent Integrated Service Post. This study aimed to determine the relationship between family support and adolescents' activity in adolescent integrated service posts in Purwosari district, Surakarta, Central Java. This study is a quantitative study with a cross sectional design. This research was conducted from October to December 2023 in Purwosari Village, Laweyan District, Surakarta. The total population was 818 adolescents aged 15-19 years. The research sample was 80 adolescents selected by snowball sampling technique. The research instrument used a questionnaire. The research data were analyzed univariately and bivariately (chi-square test). The results showed a p-value = 0.028, which means that there is a relationship between family support and adolescents' activeness at the integrated youth service post in Purwosari Village. Recommendations given to the health department to improve the implementation of integrated service post activities aimed at adolescents so that it can run optimally and more often conduct activities that can arouse the interest of adolescents who do not participate in youth activities, as well as appeal to parents to encourage the younger generation to start actively participating in youth integrated service post activities.</i></p> <p>Keywords: <i>Family Support, Adolescent Activities, Youth Integrated Service Post</i></p>
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INTRODUCTION

Adolescence is a transition from childhood to adulthood when a person experiences significant biological, psychological and social changes (Hegde et al., 2022). This development encourages teenagers to behave more maturely so they can solve various problems themselves. However, the problems of the younger generation are still significant, leading to bad behaviour among the younger generation (Eliyawati et al., 2021).

Among Western countries, the United States is the country with the most drug users. According to research conducted by Swaim & Stanley (2018), teenagers in America have a lifetime rate of using alcohol, marijuana and other drugs of 95%. In the Asian country, China, Beijing, to be precise, the percentage is 16.7%, with the number of criminals under 18 years of age increasing. The results were released by the China Youth and Children Research Center and the International Liaison Department of the Central Committee of Communist Youth (Wan et al., 2022).

According to the Indonesian Child Protection Commission, in 2018, the most common social problems among teenagers in Indonesia were fighting among teenagers (12.9%), increasing (14%), drug addiction was highest among working teenagers (59) while teenagers who are still in school or college (24%). (Setyantoro & Hanggara, 2023). According to WHO 2020 confirmation, every year, there are 200 thousand murders among young people aged 12-29 years, where 84% of cases involve young men (Syam et al., 2023).

Adolescent psychological problems are reproductive health problems and risky adolescent behaviour. According to the 2015 Global School Health Survey, 3.3% of adolescents aged 15-19 years have AIDS, 9.9% and 10.6% of males aged 15-19 years have complete information about HIV AIDS and up to 0.7%. Teenage girls and 4.5 per cent of teenage boys have premarital sex (Ministry of Health of the Republic of Indonesia, 2019). Around 2.3 million abortions are carried out in Indonesia every year, 20 per cent of which are carried out by teenagers (Mirani et al., 2022).

The results of the Indonesian Demographic Health Survey adolescent reproductive health Indonesia in 2012 show that adolescent knowledge about reproductive health is still lacking; this can be seen in only 35.3% of adolescent girls and 31.2% of adolescent boys aged 15-19 years who know that women can get reproductive health. Get pregnant once you have sexual intercourse. However, the symptoms of sexually transmitted diseases and the location of youth services are not yet known to many teenagers (Atik & Susilowati, 2021). One of the provinces in Indonesia where youth problems are relatively high is Central Java.

According to UNICEF (2021), it shows that most violence occurs in Central Java province, including 27% of bullying cases occurring in junior high schools and 20% in high schools (Rasidah, 2018). According to Indonesian Family Planning Association Central Java, in 2010, there were 863 teenagers having premarital sex, 452 premarital pregnancies, 283 sexually transmitted diseases, 337 masturbators, and 244 abortions (Dewi et al., 2021). In Central Java Province, there is a city that has youth problems, namely Surakarta.

Data obtained from the Surakarta City Health Service in 2021 shows that 86 pregnant women/adolescents suffered from unplanned pregnancy, while 42 people gave birth under the age of 20 years. Forty-two teenagers aged 10 to 19 years were attacked by venereal disease; 31 of them were boys, and 11 were girls. There were 31 teenagers aged 10-19 years who were infected with HIV, consisting of 17 boys and 14 girls. At the same time, 108 cases of AIDS were detected in girls aged 10-19 years (Dinas Kesehatan Kota Surakarta, 2021).

Based on data from the Jebres Surakarta Police, juvenile crimes reported and recorded in the Jebres area in 2016 were (1) 12 cases of alcohol consumption, (2) 10 cases of motor

vehicle theft, (3) 3 cases of theft, (4) fraud totalling 20 cases, (5) traffic violations totalling 7,725 cases, (6) drug addiction totalling 12 cases, (7) disruption at school during lessons totalling more than a hundred cases, and (8) promiscuity totalling five cases involving causes early adolescent growth and development. marriage (Budiwati and Yudanto, 2021). Based on Prananingrum's research (2021), one in eight students (12.5%) at Junior High School Negeri 9 Surakarta knew about HIV/AIDS, seven students (87.5%) did not know about HIV/AIDS, this happened to 3 students in 3 years. Who became pregnant before marriage.

Of course, the complexity of youth problems requires comprehensive and integrated treatment that includes all factors from various programs and fields. Efforts to address adolescent health problems have actually been promoted since the establishment of the Adolescent Friendly Reproductive Health Services (AFRHS) program in 1994 at the International Conference on Population and Development (ICPD) meeting in Cairo (Violita & Hadi, 2019). However, as time went by, the Ministry of Health also developed Adolescent Health Services for community health centers which included a comprehensive adolescent health service package. Apart from health centres, through the school health effort, health services aimed at the younger generation are available at schools, health centres, and, most recently, the youth integrated service post program. (Kemenkes RI, 2018).

Youth integrated service post is a form of community resource health initiative (UKBM) that is managed and organized by, for, and with the community, including teenagers. It carries out health development to empower the community and facilitate access to adolescent health services (Pangaribuan, 2020). We hope that the existence of a Youth integrated service post can help understand and overcome adolescent health problems, especially reproductive health (Purnamasari et al., 2022).

The establishment of a Youth integrated service post can help teenagers understand the importance of healthy lifestyles, increase teenagers' knowledge about reproductive health and nutrition, and reduce juvenile delinquency (Andriani et al., 2023). Barriers to the existence of youth integrated service post are still not optimal because the management of youth integrated service post has yet to achieve optimal efficiency, effectiveness and program objectives in the youth catchment area, which consists of several functions, including planning and organization, tracking, recording and reporting (Ruwayda & Izhar, 2021).

The current problem with youth integrated service post is that the existence of youth integrated service post is less attractive to teenagers, there are very few visits by teenagers to integrated service post activities because several previous research results show that the participation of teenagers in integrated service post activities in Bedikulon village is 82

respondents, 52 respondents (63.4%) who do not go to integrated service post regularly (Endang, 2019). Another survey conducted on 46 teenagers in Lena Village showed that 23 teenagers (50%) were not interested in participating in youth integrated service post activities (Arfiah, 2020). Another survey of 105 teenagers in Nagrog Village showed that 55 teenagers (52.4%) were not interested in establishing a youth integrated service post (Saadah & Silalahi, 2019). Youth integrated service post activities are a form of healthy behaviour.

Based on Lawrence W. Green's (1974) health behaviour theory, predisposing factors such as knowledge, attitudes, values, and beliefs about certain behaviours, such as age, gender, and level of education, can influence the level of adolescent participation in integrated service post during adolescence. The availability of health services, as well as distance and ease of access to services, are possible factors. Strengthening factors include support from family, friends, peers and health workers. (Mahendra et al., 2019).

Family support is family service behaviour in the form of emotional support, recognition/appreciation, information and resources (Pustikasari, 2019). Perceived family support is mainly related to how adolescents receive help from family members, especially parents (An et al., 2024). Supported this statement Kadek Winda Arpyan and Dr. I Made Sutarga (2018) found that respondents with low family support had lower participation (86.36%) than respondents with good family support (56.25%) $p = 0.001$, so family support had a significant effect on participation.

Based on the results of a preliminary study in Surakarta Health Department, the Purwosari Health Center is an Integrated Health Center with 52% adolescent health service coverage in 2023 (Dinkes Surakarta, 2023). Purwosari Health Center has several target villages, one of which is Purwosari Sub District. Youth integrated service post in neighbourhood number 2, Purwosari Sub-District named CoE (Centre of Excellent), was founded on 4 November 2023; the main target is pregnant women, breastfeeding mothers, postpartum mothers, babies under two years old, toddlers, school age, teenagers, productive age, and elderly. The low level of youth participation in youth integrated service post can cause obstacles to the implementation of youth empowerment, which is the primary goal of youth integrated service post. In Purwosari Sub-District, there has been no study of problems regarding relationship between family support and teenage activity in youth integrated service post in Purwosari Sub-District, Surakarta. Therefore, this research aims to analyze the relationship between family support and teenage activity in youth integrated service post in Purwosari Sub-District, Surakarta.

METHODE

This research method applies a quantitative approach with a *cross-sectional design*, aiming to analyze the relationship between family support and youth activity in youth integrated service post. It was conducted from October to December 2023 in Purwosari Sub-District, Laweyan District, Surakarta. The total population used was 818 teenagers aged 15-19.

The sampling technique in this research is the *snowball sampling technique*. The *snowball sampling* technique was carried out by determining the starting point for determining respondents, namely the Purwosari Sub-District building. Information about respondents was obtained from health cadres in Purwosari Sub-District. Then, the next respondent is obtained on a rolling basis based on the previous respondent's information. The process of searching for respondents is carried out continuously until the number of research samples is met. The total number of samples obtained was 47 people, but the respondents involved in the research were 80 people.

The independent variable in this study is family support with the high support category; if the total score is ≥ 16 , it is given a value of 2, while support is low; if the total score is < 16 , it is given a value of 1. Meanwhile, the dependent variable is the youth's activeness in the youth integrated service post with the high activity category, if the total score ≥ 2 it is given a value of 2, while the low activity, if the total score < 2 is given a value of 1.

Data collection was carried out using a questionnaire as a research tool. The questionnaire contained general information regarding age, gender, class, and the occupation of the father and mother. The youth integrated service post activity variable consists of 10 questions with answer choices of yes and no, and the family support variable consists of 13 questions with answer choices of ever, rarely, and never. Validity and reliability tests were carried out to determine the validity and reliability of the questionnaire.

The validity test of the questionnaire was carried out on students of Madrasah Aliyah Negeri 2 Surakarta because this group had the same characteristics as the research sample. The number of samples in the validity test was 34 respondents. The *r* table value can be obtained through the *product moment r table* with $df = n - 2$, so if there are 34 respondents, then $df = 34 - 2 = 32$ with a significance level of 5%, it is known that the *r* table is 0.3388. So it can be seen that $r \text{ count} > r \text{ table}$ 13 questionnaires are declared valid, and three questionnaires $r \text{ count} < r \text{ table}$ is declared invalid because the results are less than the number of *r* table, namely 0.3388. After the validity test is carried out, the reliability test is then carried out. The reliability test can be seen from the *Cronbach alpha value* > 0.60 . The reliability test shows that *Cronbach's alpha* is $0.901 > 0.60$, so it can be declared *reliable*.

The data is then managed by manual and computerized *editing, coding, scoring, data entry, tabulation, and analysis, which are* to be arranged in a frequency distribution table. Data analysis was carried out using univariate analysis to determine the frequency of adolescent activity and family support. Bivariate analysis was carried out using *the Chi-Square test*, which has a *significant value of $\alpha = 0.05$* , to determine the strength of the relationship between family support and youth activeness in youth integrated service post. This research has Ethical Clearance (EC) Number: 1.622/VI/HREC/2024.

RESULTS

The characteristics of research respondents (adolescents aged 15-19 years) totaling 80 teenagers in Purwosari Sub-District are presented in Table 1.

Table 1 . Respondent Characteristics

Respondent Characteristics	n	%
Age		
15	26	32.5
16	14	17.5
17	13	16.3
18	14	17.5
19	13	16.3
Gender		
Man	30	35
Woman	50	65
Class		
10	31	38.8
11	14	17.5
12	13	16.3
Passed	22	27.5
Father's Job		
Respondent Characteristics		
n		
%		
Self-employed	30	37.5
Private sector employee	44	55
Civil servants	2	2.5
Doesn't work	4	5
Mother's Job		
Self-employed	18	22.5
Private sector employee	21	26.3
Civil servants	4	5
Housewife	37	46.3
Father's Education		
Elementary school	4	5
Junior high School	10	12.5
Senior high School	49	61.3
College	17	21.3

Respondent Characteristics	n	%
Mother's Education		
Elementary school	8	10.0
Junior high School	5	6.3
Senior high School	53	66.3
College	14	17.5
Father's Income		
> 2,000,000	39	48.8
≤ 2,000,000	37	46.3
No income	4	5
Average: IDR 2,125,000.00 Max: IDR 5,000,000.00 Min: IDR 0.00		
Mother's Income		
> 2,000,000	17	21.3
≤ 2,000,000	26	32.5
No income	37	46.3
Average: IDR 1,150,000.00 Max: IDR 5,000,000 Min: IDR 0.00		
<i>Source: Primary data 2023</i>		

Table 1 shows that respondents aged 15 years have the highest percentage, namely 32.5%, likewise for respondents in class 10, namely 38.8%. Then, the highest percentage of respondents was female, namely 65.0%. From the aspect of the respondents' parents' work, the highest percentage was in the father's job as a private employee, namely 55%, while in the mother's job as a housewife, it was 46.3%. Then, the education of the fathers and mothers of respondents who had the highest percentage had a high school education, namely 61.3% and 66.3%. Then, the income of the fathers and mothers of respondents who have the highest percentage of fathers earning more than 2,000,000 is 48.8%, with an average income of 2,125,000.00, while for mothers' income, the highest percentage is for mothers with no income, namely 46.3%.

The frequency distribution of respondents on the independent variable (family support) and the dependent variable (adolescent activeness at the youth integrated service post) can be seen in Table 2 below:

Table 2. Frequency of Family Support and Youth Activity in Youth Integrated Service Post

Category	n	%
Family support		
Tall	51	63.7
Low	29	36.3

Youth Activeness		
Tall	54	67.5
Low	26	32.5

Source: Primary data 2023

Based on Table 2, it shows that the highest percentage of respondents who have high family support for youth integrated service post is 63.7%. Likewise, the percentage of respondents who were highly active in youth integrated service post was 67.5%.

Table 3. Frequency of Family Support Questionnaires in Youth Integrated Service Post

Family Support (N=80)	%
Informational Support	55.8
Emotional Support	57.5
Instrumental Support	57.7
Assessment Support	57.5

Source: Primary data 2023

Based on Table 3, it shows that the highest percentage of family support is instrumental support at 57.7%, while the lowest percentage of family support is informational support at 55.8%.

Table 4. Relationship between family support and youth activity in youth integrated service post in Purwosari Sub-District, Surakarta (N=80)

Family support	Teenagers' Activeness						P-value	PR CI (95%)
	Youth Integrated Service Post							
	High Activeness		Low Activeness		Total			
	n	%	n	%	N	%		
Tall	30	58.8	21	41.1	51	100	0.028	0.298
Low	24	82.7	5	17.2	29	100		(0.098-0.906)

Source: Primary data 2023

Based on the results of statistical tests using Chi-square, a significant $p\text{-value} = 0.028 < 0.05$, meaning There is a relationship between family support and teenagers' activeness in youth integrated service post. In contrast, the risk calculation results show $PR = 0.298$ (95% CI 0.098-0.906) or Prevalence Ratio (PR) < 1 , meaning that respondents with high family support have a 0.2 times chance of being active in participating in posyandu activities adolescents than respondents with low family support.

Among adolescents who have high activity in youth integrated service post, those who receive low family support (82.7%) have a higher percentage than adolescents who receive high family support (58.8%).

DISCUSSION

The results of statistical analysis showed a significant $p\text{-value} = 0.028 < 0.05$, meaning There is a relationship between family support and teenagers' activeness in youth integrated

service post. In contrast, the risk calculation results show $RP= 0.298$ (95% CI 0.098-0.906) or $RP<1$, meaning that respondents with high family support have a 0.2 times chance of being active in participating in integrated service post activities adolescents than respondents with low family support. The results of this research are in line with research conducted by Avelina et al. (2023), which found that family support influences the use of youth integrated service post in Tebuk Village, Nita District, Sikka Regency. Apart from that, the correlation between family support and adolescent activity was also found in research by Meliyanti et al. (2024), which explained that the form of family support for adolescents to be able to participate in youth integrated service post activities actively includes attitudes, behaviour and acceptance. Adolescents who receive positive support from their families will tend to participate in youth integrated service post activities regularly

Among adolescents who were active in youth integrated service post, the percentage of those who received little family support was higher (82.7%) compared to adolescents who received a lot of family support (58.8%). The percentage of results of this research is not in accordance with the theory, which states that family support is one of the factors that influence a person to change health behaviour (Lawrence Green, 1997). This can be seen from the frequency table of family support and parental employment.

Based on the analysis of the frequency of family support in this research, the majority of teenagers have support from the family, with an average percentage of 50%. In this case, family members are seen as an inseparable part of the family environment. Supportive family members are always ready to provide help and assistance if needed, especially for teenagers (Rusdiana, 2018). Adolescents with high family support will be more successful in facing and overcoming their problems than those who do not have support. Apart from that, positive family support can increase the level of attendance of teenagers who want to take part in regular youth integrated service post activities. Family support for teenagers can be done by reminding them to come and facilitating their coming to the youth integrated service post (Endang, 2019). Even though the respondent has good family support, it cannot influence the respondent's behaviour in regularly visiting the youth integrated service post because the nature of teenagers is still unstable and easily influenced by the surrounding environment.

Based on the percentage of parents' employment in this study, it is known that most of the respondents' fathers are private employees, with a 55% percentage. For private workers, eight hours of work in one week consisting of five days or seven hours of work in one week consisting of six days are generally applied. Meanwhile, civil servants are similar, namely eight

hours a day for a week consisting of five days, starting from 07.00 (Siregar & Nurdahlia, 2023). This is different from entrepreneurs whose working hours are flexible. However, even if you are flexible and not self-employed, you actually spend more time working than your family. Lack of time for family has an impact on lack of attention, especially for teenagers who are experiencing a transition period from childhood to adulthood.

This is in accordance with Maulidya et al., (2021) showing that parents' work is related to adolescent sexual behavior. Parents with jobs that are at risk have an even higher tendency to force their children to do the same job. Meanwhile, in research by Fitriyanti et al. (2024), the results showed that parents' working hours exceeding eight hours in one day resulted in a lack of attention to teenagers, which in turn caused problems with teenagers' social behaviour. This is because working parents often come home tired, so they give their children what they want directly. Indeed, working families have more ability to meet their children's physiological and nutritional needs (Indrawatiningsih et al., 2021).

The results of the descriptive analysis of the frequency of activity in this study showed that the intention to attend youth integrated service post regularly had the highest score of (83.8%). This shows the high intention of teenagers to participate actively and regularly in posyandu activities. Intentions have an impact on the emergence of motivation to carry out these intentions. Retno (2017) explains that with intention, an individual will try to carry out activities according to his intention. However, this is inversely proportional to the score for routine activity in attending posyandu for teenagers of only 12.5%. It can be understood that teenagers already have the intention but are hindered by other things or need more motivation to participate in youth integrated service post activities regularly. You already have the intention, but lack of support can also be one of the factors causing the behavior not to occur. This is in line with research conducted by Rahman et al. (2013), which states that there is an influence between family support and the intention to visit youth integrated service post with $p\text{-value} = 0.001$.

The results of the descriptive analysis of the frequency of adolescent health checks in this study were mainly carried out in schools with a percentage of (73.8%). This is relevant to the empirical fact that teenagers spend most of their time at school. Thus, using schools as a basis for examining and improving the health status of adolescents is the right step. This is supported by the facilities available, such as school health effort, accompanying teachers, advocacy, and recruiting competent students to be given special assignments as peer educators to their friends (Siswantara, 2019). These steps are a more adaptive and relevant solution to

teenagers' lives compared to forcing integrated service post activities to coincide with school activities.

CONCLUSIONS

There is a significant relationship between family support and youth activity in youth integrated service post in Purwosari Sub-District Surakarta, with a *p-value* of 0.028. At the same time, the risk calculation results show PR = 0.298, meaning that respondents with high family support have a 0.2 times chance of actively participating in youth integrated service post activities than respondents with low family support.

It is recommended that health agencies improve the implementation of youth integrated service post activities so that they can function optimally and carry out activities more often that can attract the interest of teenagers who are not active in youth integrated service post and invite parents to motivate teenagers to be active in youth integrated service post. This is based on research results that show that teenagers already intend to take part in youth integrated service post activities.

REFERENCES

- An, J., Zhu, X., Shi, Z., & An, J. (2024). A serial mediating effect of perceived family support on psychological well-being. *BMC Public Health*, 24(1), 1–10.
- Arfiah, A. (2020). Faktor-Faktor Yang Berhubungan Dengan Minat Remaja Mengikuti Program Posyandu Remaja Di Desa Lena. *Media Bina Ilmiah*, 15(5), 4565–4574.
- Atik, N. S., & Susilowati, E. (2021). Hubungan Tingkat Pengetahuan Dengan Perilaku Kesehatan Reproduksi Remaja Pada Siswa SMK Kabupaten Semarang. *JIKA*, 5(2), 45–52.
- Avelina, Y., Nababan, S., & Delang, M. A. (2023). Analisis Faktor Yang Mempengaruhi Pemanfaatan Posyandu Remaja. *Jurnal Keperawatan Sriwijaya*, 10(2), 1–12
- Budiwati, Y., & Yudanto, D. (2021). Tinjauan Kriminologis Terhadap Kenakalan Remaja Di Surakarta. *Jurnal Ilmiah Edunomika*, 5(2), 746.
- Eliyawati, Yuline, & Purwanti. (2021). Analisis masalah remaja di sekolah menengah atas negeri 10 pontianak. *Jurnal Pendidikan Dan Pembelajaran Khatulistiwa*, 10(12)
- Endang, L. (2019). *Faktor-Faktor Yang Berhubungan Dengan Tingkat Kehadiran Remaja Di Posyandu Remaja Desa Bedikulon Kabupaten Ponorogo*. Stikes Bhakti Husada Madiun.
- Fitriyanti, D., Suroyo, R. B., & Silaen, M. (2024). Analisis Faktor Yang Berhubungan Dengan Perilaku Seksual Remaja pada SMKN 4 Meulobah Kabupaten Aceh Barat. *Jurnal Riset Kesehatan Terapan*, 6(2).
- Hegde, A., Chandran, S., & Pattnaik, J. I. (2022). Understanding Adolescent Sexuality: A Developmental Perspective. *Journal of Psychosexual Health*, 4(4), 237–242.
- Indrawatiningsih, Y., Hamid, S. A., Sari, E. P., & Listiono, H. (2021). Faktor-Faktor yang Mempengaruhi Terjadinya Anemia pada Remaja Putri. *Jurnal Ilmiah Universitas*

- Batanghari Jambi*, 21(1), 331-337.
- Kadek Windha Apriyani dr I Made Sutarga, Mkes. (2018). *Faktor yang mempengaruhi rendahnya kehadiran lansia mengikuti posyandu lansia di desa Sekardadi*. Kementerian RI. (2018). *Profil Kesehatan Indonesia Tahun 2019*. Kementerian Kesehatan RI
- Mahendra, D., Jaya, I. M. M., & Lumban, A. M. R. (2019). Buku Ajar Promosi Kesehatan. *Program Studi Diploma Tiga Keperawatan Fakultas Vokasi UKI*, 1–107.
- Maulidya, I., Musthofa, S. B., & Indraswari, R. (2021). Faktor yang Berhubungan Dengan Perilaku Seksual Remaja Awal Di Lingkungan Prostitusi Bandungan Kabupaten Semarang. *Jurnal Kesehatan Masyarakat*, 9(3), 287-293.
- Meliyanti, F., Astriana, W., & Haryanto, E. (2024). Analisis Tingkat Kehadiran Remaja Di Posyandu Remaja. *Babul Ilmi Jurnal Ilmiah Multi Science Kesehatan*, 16(1)
- Mirani, N., Maulida, & Nala Ramadhani. (2022). Edukasi Peningkatan Self Control terhadap Perilaku Seks Bebas pada Remaja di SMA Muhammadiyah Kota Langsa. *ABDIKAN: Jurnal Pengabdian Masyarakat Bidang Sains Dan Teknologi*, 1(3), 400–406.
- Praningrum, R. (2021). Hubungan Pengetahuan Tentang Hiv/Aids Dengan Sikap Seks Pranikah Pada Siswa Kelas Ix Smp Negeri 9 Surakarta. *Intan Husada: Jurnal Ilmu Keperawatan*, 9(1), 73–79.
- Pont, A. V., Longulo, O. J., & Mangun, M. (2023). Pembentukan Posyandu Remaja di Pesantren Liwa'ul Haq, Kelurahan Tondo, Kecamatan Talise. *Poltekita: Jurnal Pengabdian Masyarakat*, 4(2), 610–617.
- Purnamasari, N., Armalia, A. W., Kusumaningsih, D., Putri, L. A. D., Firdaus, A., Ajeng, B., Aditama, A. K., Rahmahdhani, M. S., Aulia, G., Amelia, T., Sholichah, A. M., Mulyaningsih, E., Melanggawati, A., Indah, Kusumaningrum, T. A., & Darnoto, S. (2022). Posyandu Remaja Sebagai Upaya Pencegahan Anemia Di Desa Ngemplak, Kecamatan Kartasura, Kabupaten Sukoharjo. *Prosiding Seminar Nasional Dan Call for Paper KESMAS UMS*, 15(2), 1–23.
- Rasidah. (2018). Hubungan Keharmonisan Keluarga Dengan Kenakalan Remaja Di Ragita, S., & Fardana, N. (2021). Keterlibatan ayah dalam pengasuhan dan kematangan emosi. *Buletin Riset Psikologi Dan Kesehatan Mental*, 1(1), 417–424.
- Purnamasari, N., Armalia, A. W., Kusumaningsih, D., Putri, L. A. D., Firdaus, A., Ajeng, B., Aditama, A. K., Rahmahdhani, M. S., Aulia, G., Amelia, T., Sholichah, A. M., Mulyaningsih, E., Melanggawati, A., Indah, Kusumaningrum, T. A., & Darnoto, S. (2022). Posyandu Remaja Sebagai Upaya Pencegahan Anemia Di Desa Ngemplak, Kecamatan Kartasura, Kabupaten Sukoharjo. *Prosiding Seminar Nasional Dan Call for Paper KESMAS UMS*, 15(2), 1–23.
- Retno, D. M. (2017). Pengaruh Niat Terhadap Keaktifan Dalam Mengikuti POsyandu Lansia Di Puskesmas Kalijudan, Surabaya: Influencing Of Intention To Elderly Attend Posyandu In Puskesmas Kalijudan, Surabaya. *Jurnal Ilmiah Kebidanan (Scientific Journal of Midwifery)*, 3(1), 60-69.
- Rusdiana, R. (2018). Hubungan Antara Dukungan Keluarga Dengan Penerimaan Diri Pada Orangtua yang Memiliki Anak Berkebutuhan Khusus (ABK). *Psikoborneo: Jurnal Ilmiah Psikologi*, 6(2), 242–248.
- Ruwayda, R., & Izhar, M. D. (2021). Faktor Reinforcing yang Berhubungan dengan Perilaku Remaja Ke Posyandu Remaja Kelurahan Penyengat Rendah Di Wilayah Puskesmas

- Aurduri Kota Jambi. *Jurnal Ilmiah Universitas Batanghari Jambi*, 21(2), 643.
- Syam, R. S. El, Saputra, A., Zumroh, A., Oktavia, N. D., Supangat, Rahmawati, E. N., & Hasanah, N. (2023). Pendampingan dan Sosialisasi Pemahaman Bahaya Kenakalan Remaja Melalui Forum Anak Kreatif Wonosobo (Forkos) Di Desa Pakuncen Kecamatan Selomerto. *Jurnal Pelayanan Dan Pengabdian Masyarakat Indonesia (JPPMI)*, 2(1), 2.
- Swaim, R. C., & Stanley, L. R. (2018). Substance Use Among American Indian Youths on Reservations Compared With a National Sample of US Adolescents. *JAMA Network Open*, 1(1), e180382.
- Violita, F., & Hadi, E. N. (2019). Determinants of adolescent reproductive health service utilization by senior high school students in Makassar, Indonesia. *BMC Public Health*, 19(1), 1–7. <https://doi.org/10.1186/s12889-019-6587-6>
- Wan, X., Ji, S., Liu, M., Hong, B., Shi, W., Du, L., & Zhao, L. (2022). Family functioning and delinquency among Chinese adolescents: Mediating effects of positive behavior recognition according to the humanistic perspective. *Frontiers in Public Health*, 10. <https://doi.org/10.3389/fpubh.2022.985936>