Research Article

Health Risk Factors As a Predictor Student Learning Achievement Of Junior and Senior High School Urban and Rural Areas In Central Sulawesi Province

Muliani [1(C)], Abd. Farid Lewa [2], Tasnim[3], Kadar Ramadan[1]

[1]Palu Polytechnic of Health Midwifery Department, Indoneesia
[2]Palu Polytechnic of Health Nutrition Department, Indoneesia
[3]Palu Polytechnic of Health Nursing Department, Indoneesia

Abstract: Background: Health issues greatly determine the quality of children in the future, health problems include general health, developmental disorders, behavioral disorders and learning disorders. This will generally hamper the achievement of achievement in school students. Health behavior problems in junior and senior high school (juvenile) children, health problems faced usually associated with risky behaviors such as smoking, fights between students, drug abuse (Narcotics, Psychotropic and other addictive substances), unwanted pregnancies, unsafe abortions, sexually transmitted infections including HIV/AIDS. **Objectives:** to obtain a description of health risk factors and to analyze learning achievement in junior and senior high school students in Central Sulawesi Province.

Method: analytical research design with cross-sectional study approach. Samples were junior and senior high school students in urban and rural areas of Poso Regency, Central Sulawesi Province, with 11 schools with a total sample of 460 students. Sample selection technique is done by multistage random sampling method.

Results: Based on logistic regression equation analysis it is found that one's chance to have achievement decreases if students have drinking alcohol and consumes 96,8%. The result of logistic regression analysis between the habit of consuming alcoholic beverages with student achievement obtained by OR = 3.0 (95% CI 1,2-7,7). Show that students who do not have a habit of consuming alcoholic drinks have three times greater odds to have a good performance than students who have a habit of consuming alcoholic beverages. Similarly, the consumption of drugs obtained by OR = 2,7 (95% CI 1.0-21,6) means that students who do not consume drugs have Odds 2.7 times greater to have a good achievement than students who consume drugs, with the word other that the consumption of drugs can reduce learning achievement.

Conclusion: students who do not have a habit of drinking alcoholic beverages and drug consumption have a chance to have a good achievement than students who have these habits.

Keywords: health risk factors; learning achievement; junior and senior high school students.

Introduction

School-age children in both preschool, elementary, junior high and high school levels are a very different child age range from adulthood. The number of health problems that determine the quality of children in the future. Health problems include general health, developmental disorders, behavioral disorders and learning disorders that will hinder the achievement of school learning. Unfortunately, the problem is less so noticed either by parents or clinicians and other health professionals. In general there are still a lot of priority health of children under five, (Hendra, 2007).

Health behavior problems in junior and senior high school (juvenile) children, health problems faced usually associated with risky behaviors such as smoking, fights between students, drug abuse (Narcotics, Psychotropic and other Additive Substances), unwanted pregnancies, unsafe abortions, sexually transmitted infections including HIV/AIDS, (Atikah, 2015).

The 2015 Global School-Based Student Health Survey (GSHS) Indonesia data shows 13.6% of 13-17 year-olds smoke, 25.1% male and 2.3% are female, 1.4% of Indonesian

students ever used drugs and 84.6% were first used drugs before the age of 14 years. Physical violence rate is quite high, 22.6% of students have ever done physical fighting.

Premarital sex behavior was even more alarming, based on GSHS 2015, as many as 5.2% of students claimed to have had sexual intercourse, 7.0% men and 3.7% were women. Of these, 69% had sexual intercourse for the first time before reaching the age of 14.

Another problem experienced by adolescents is psychological problems. According to estimates from the US Surgeon General, at least 1 in 5 children and teenagers will have severe psychiatric problems in school. Some of these psychiatric problems are more serious than others, but they all have an impact on school behavior and learning. Psychiatric problems experienced by these school-aged teenagers are stress and anxiety, worry about being targeted bullying, problems with family and friends, loneliness or rejection, disabilities, depression, self-injury or others, sexuality-related issues mostly, demands of body image that may be associated with an excessive diet, anorexia or bulimia, unwanted pregnancy, first-time puberty and courtship, etc.), academic problems, to substance abuse addictions, (Prawira, 2013).

The development of school-based clean and healthy living behavior is a strategic effort in laying the foundation of public health and the quality of the nation's next generation resources. Through schools there will be opportunities to reach large numbers of students and through teacher-student-parent-teacher interaction, school-based efforts will have the opportunity to produce effective outcomes to cultivate a healthy lifestyle. The elementary school age itself is the foundation of the learning process students are studying and forming new norms including the introduction and learning lifestyle and healthy and clean living behavior, (Pariatmoko & Anggraeni, 2014).

On the other hand, the health condition of elementary school age children shows poor data. The results of the examination by the MOH through the Household Health Survey in 2004 revealed that the incidence rate of anemia among school age (5-11 years) reached 24% and less nutrition reached 21%. At the age of 5-17 years, it was revealed that malnutrition was less than 18% but at the same time there were 8% of children with more nutrition. Examination of nutritional status by Kusuma Buana Foundation in 2,345 elementary school students in Thousand Islands (2008) found that from the

indicator of body weight by age, 25.5% less nutrition, 2.9% malnutrition. With height indicator according to age revealed less nutrition 22,1% and bad nutrition 7,2%.

The United Nations (UN) union reports teenagers aged 15-19 who are affected by the Human Immunodeficiency Virus (HIV). The year 2014 reached 50 thousand adolescents, with a total of 220 thousand adolescents contracted HIV. In contrast to adults exposed to HIV tend to fall by up to 28% in the Asia Pacific region. What's wrong with teenagers, why do HIV numbers continue to rise, or teenagers do not know the risks.

The world body continues to reduce the spread of HIV disease caused by sexual intercourse. The problem with HIV-infected adolescents continues to increase, and deaths from HIV among teenagers rise. Adolescents do not seem to receive care as adults who are HIV positive to combat with antiretroviral drugs. A third of teenagers in China when they are HIV positive, will be excommunicated, sometimes banned from school. In Mumbai India, about 48% of sex workers aged 18-24 years found HIV positive. It turns out that young people increasingly do not understand the disease HIV.

Around the world, people of adolescence and adolescents already know the risks and causes of HIV. Even the number of patients tends to decline. Indonesia and the Philippines are different. Technology takes part with smartphone communications making communication activities negative, and abnormal behavior easier to communicate.

Deviation of life's behavior, depression, loneliness can be the wrong communication. Apart from the problem of increasing HIV. Patients with HIV at the age of 15-19 years recorded. In Indonesia increased to 3000 people in 10 years. Far more than data from other Asian countries. Except data from China and India are not available. While data in Africa and the Middle East tend to be aware of the declining data of patients to almost 50%.

Hanoi, Jakarta, Bangkok, Chiang Mai and Mumbai are rising with the highest rates of HIV-infected people living there. Even worse than HIV-infected patients in Bangkok, ages 15-21 are two times higher than in other age groups.

Methods

The research design used is analytical research design with cross-sectional study approach. The study was conducted in 5 junior high schools and 6 high schools in Poso District, Central Sulawesi Province, from 14 July to 14 October 2017.

The study population is all junior and senior high school students in Poso District of Central Sulawesi Province. The sample of the study were students in 5 junior high schools and 6 high schools in urban and rural areas of Poso Regency Central Sulawesi Province, a large sample of 460 respondents with multistage random sampling technique.

Discussion and Result

After data collected as many as 460 people from 5 junior high and 6 high school / vocational urban and rural areas in Poso District, then univariable, bivaribel and multivariable analysis, the following results are obtained:

1. Univariable Analysis

Tabel 1. Distribution of Respondents based on Researched Variables in Junior High Schools and Senior High Schools in Poso District, Central Sulawesi Province, 2017

Variables	Junior high school		Senior high school		Total	
Age						
12 – 15 years	210	96,3	19	7,9	229	49,8
16 – 18 years	8	3,7	223	92,1	231	50,2
Gender						
Female	130	59,6	138	57,0	268	58,3
Male	88	40,4	104	43,0	192	41,7
Physical abuse						
Never	129	59,2	170	70,2	299	65,0
Ever	89	40,8	72	29,8	161	35,0
Relationship with friends						
Good	199	91,3	210	86,8	409	88,9
Less	19	8,7	32	13,2	51	11,1
Harassment / Discrimination						
Never	182	83,5	201	83,1	383	83,3
Ever	36	16,5	41	16,9	77	16,7
Sexual behavior						
Never	207	95,0	217	89,7	424	92,2
Ever	11	5,0	25	10,3	36	7,8
HIV AIDS knowledge						
Good	159	72,9	198	81,8	357	77,6
Less	59	27,1	44	18,2	103	22,4
Smoke						
No	188	86,2	182	75,2	370	80,4
Yes	30	13,8	60	24,8	90	19,6
The habit of drinking alcohol						
No	204	93,6	194	80,2	398	86,5
Yes	14	6,4	48	19,8	62	13,5
The habit of taking drugs						
No	213	97,7	234	96,7	447	97,2
Yes	5	2,3	8	3,3	13	2,8
Suicide attempt						
Never	204	93,6	233	96,3	437	95,0
Ever	14	6,4	9	3,7	23	5,0
Achievement						
Good	50	22,9	39	16,1	68	19,3
Less	168	77,1	203	83,9	371	80,7

Based on table-1 shows that 50.2% of respondents aged 16-18 years and 49.8% of respondents aged 12-15 years. By gender, 58.3% of respondents were female and 41.7% were male. There were 35% of respondents had experienced violent acts, which most often occurred in junior high school students (40.8%) and high school students (29.8%). The majority of

respondents have good friendship relationships among students, while 16.7% of respondents have experienced abuse/discrimination. Abuse /discrimination arises when a student or group of students says or behaves inappropriately toward another student.

A total of 7.8% of all respondents had sexual intercourse with the opposite sex, 5% were junior high school students and

10.3% were high school students. The majority of respondents' knowledge about HIV / AIDS is well-assured of 7.6%. has a smoking habit of 19.6% of respondents, junior high school students (13.8%) and high school students (24.8%).

Other risk behaviors undertaken by respondents were 13.5% consuming alcoholic beverages, junior high school students (6.4%) and having a 3-fold increase in high school students (19.8%). Respondents who had consumed drugs as much as 2.8%, junior high school students (2.3%) and high school students (3.3%). There were 5.0% of respondents claimed to have committed suicide, 6.4% in junior high school and 3.7% in high school students. Based on the achievement, 19.3% of respondents have good achievement, while 80.7% of respondents have enough achievement.

2. Bivariable Analysis

Bivariate analysis is to provide an overview to analyze health risk factors as a predictor of achievement of junior and senior high school students in Poso Regency can be seen in the following table:

Table-2. Health risk factors as a predictor of student achievement Junior and senior high schools in Poso District, Central Sulawesi Province, 2017

| Variable | Achievement | | | |
| | Good | | Enough | |
	n	%	n	%
Age				
12 – 15 years	51	22,3	178	77,7
16 – 18 years	38	16,5	193	83,5
Gender				
Female	54	20,1	214	79,9
Male	35	18,2	157	81,8
Physical Abuse				
Never	57	19,1	242	80,9
Ever	32	19,9	129	80,1
Relationship with friends				
Good	80	19,6	329	80,4
Less	9	17,6	42	82,4
Harassment/Discrimination				
Never	71	18,5	312	81,5
Ever	18	23,4	59	76,6
Sexual Behavior				
Never	84	19,8	340	80,2
Ever	5	13,9	31	86,1
HIV AIDS Knowledge				
Good	68	20,4	289	79,6
Less	21	19,0	82	81,0
Smoke				
No	76	20,5	294	79,5
Yes	13	14,4	77	85,6
The habit of drinking alcohol				
No	84	21,1	314	78,9
Yes	5	8,1	57	91,9
The habit of taking drugs				
No	88	19,7	359	80,3
Yes	1	7,7	12	92,3
Suicide attempt				
Never	85	19,5	352	80,5
Ever	4	17,4	19	82,6

Based on table-2 shows that respondents aged 12-15 years have a good learning achievement (22.3%) than age 16-18 years (16.5%). Similarly women have a good achievement (20.1%) compared with men (18.2%).

Cases of physical violence appear to be comparable between respondents who have never experienced violence and who have experienced violence each with good achievement (19.1%) and (19.9%), Relationships with friends, 19.6% of respondents who have good friendship relationship is also good achievement, whereas the friendship relationship is not

good only 17.6% who perform well.

Respondents who have experienced abuse, 23.4% have a good achievement. 19.8% of respondents who had never had sexual intercourse had a good performance. Respondents who have good knowledge about HIV/AIDS 20.4% have a good learning achievement.

Respondents who did not take action with health risks such as smoking, alcoholic drinking, taking drugs, suicide attempts with each other having a good achievement were 20.5%;

21.1%; 19.7%; and 19.5% have a good achievement.

3. Multivariable Analysis

Multivariable analysis uses logistic regression by including all independent variables into the equation. Logistic regression method used is the backward method, that is to include all predictors and then eliminate one by one until the remaining predictors are significant only. Logistic regression results as follows:

Table-3 Full Model of predictor regression of learning achievement in junior and senior high school students in Poso District, Central Sulawesi Province, 2017

Variable	B	Wald	Sig.	Exp(B)	95% C.I.for EXP(B)	
					Lower	Upper
Age	.252	1.017	.313	1.287	.788	2.101
Gender	.056	.039	.843	1.058	.605	1.852
Physical abuse	.002	.000	.994	1.002	.593	1.693
Relationship with friends	.130	.105	.746	1.139	.519	2.500
Harassment / Discrimination	-.366	1.354	.245	.693	.374	1.285
Sexual behavior	-.115	.042	.837	.892	.299	2.662
Knowledge of HIV/AIDS	-.032	.012	.914	.969	.545	1.721
Smoke	-.135	.099	.754	.874	.377	2.026
The habit of drinking alcohol	1.227	4.604	.032	3.410	1.112	10.459
The habit of taking drugs	1.128	3.963	.057	3.091	.324	29.443
Suicide attempt	.196	.113	.737	1.217	.387	3.826
Constant	1.156	4.460	.035	3.177		

After passing logistic regression analysis with backward method with 10 steps then obtained final model as follows:

Table-4 Final model of achievement predictors in junior and senior high school students in Poso District, Central Sulawesi Province, 2017

Variable	B	Wald	Sig.	Exp(B)	95% C.I.for EXP(B)	
					Lower	Upper
The habit of drinking alcohol	1.101	5.198	.023	3.006	1.167	7.744
The habit of taking drugs	1.009	3.919	.048	2.742	1.049	21.568
Constant	1.300	110.495	.000	3.669		

Table-4 Shows that the variables that become predictors of learning achievement in junior and senior high school students in Poso district are the habit of drinking alcohol and drugs.

Based on the above table it can be made a logistic regression equation as follows:

$y = \alpha + \beta_1 X_1 + \ldots + \beta_i X_i$

y= 1,3 + 1,0*narkoba + 1,1*alkohol

With this equation can calculate a person's chances to have poor performance. For example, if you are going to calculate how many students' opportunities to have poor performance if students have a habit of drinking alcoholic beverages and have

been taking drugs.

y= 1,3 + 1,0*narkoba + 1,1*alkohol

y= 1,3 + (1,0*1) + (1,1*1)

y=3,4

After obtaining the value of y, the next step is to look for an opportunity value (p) with the formula:

$$p = \frac{1}{1 + exp[-(y)]}$$

$$p = \frac{1}{1 + exp[-(3,4)]}$$

$$p = 0.968016$$

So the chances of someone to have less achievement if the

student has a habit of drinking alcoholic beverages and ever

DISCUSSION

1. The habit of drinking alcohol

The results of Table-2 show that 21.1% of respondents who never drink alcohol have a good achievement while 91.9% who have a habit of drinking alcohol have enough learning achievement.

The result of logistic regression analysis in Table-4 was obtained OR value of 3.0 (95% CI 1,2-7,7), it shows there is correlation between alcohol drinking habit with student achievement. Students who do not have the habit of consuming alcoholic drinks have Odds 3 times greater to have a good achievement than students who have a habit of consuming alcoholic beverages.

Excessive use of alcohol can damage various organs in the body, especially the liver, brain and heart. Long-term effects of alcohol on the brain that result in confusion, lack of coordination and short-term memory to be bad, so it can also affect the achievement of one's academic, especially for students or students who experience addiction or alcohol dependence (Sutrisno, 2005).

Academic achievement is the result that a person achieves in his / her learning effort as stated in his / her rapor score. This learning achievement as a change that occurs due to a learning activity, of course, changes that occur is a change towards progress, improvement or changes in academic achievement is a picture of the ability of individuals who have been studied or taught.

2. The habit of taking drugs

The results of Table 2 show that 19.7% of respondents who never consume drugs have a good achievement while 92.3% of respondents who ever consume drugs have sufficient learning achievement.

The result of logistic regression analysis in Table-4 was obtained by OR value of 2.7 (95% CI 1.0-21,6), it shows there is a correlation between consuming drugs and student achievement. Students who do not consume drugs have Odds of 2.7 times greater to have a good achievement than students who consume drugs, in other words, taking drugs can reduce student achievement.

The use of ecstasy, marijuana and alcohol and tobacco are at risk of lowering academic achievement in adolescents. In two different surveys, the National Survey of Drug Use and Health

taking drugs is 96.8%.

(NSDUH) and the Youth Risk Behavior Survey (YRBS), low academic achievement is more at risk for adolescent drug users than alcohol and tobacco users. Based on school reports that it will not give grade (live class) to adolescent drug users known by the school, but not to alcohol and tobacco users (Martins & Alexandre, 2009).

One of the effects of drug use for adolescents is psychological changes such as lazy learning, irritability, and difficulty concentrating. This is what can cause the learning achievement of these teenagers dropped dramatically. Another impact of drug use that has to do with learning achievement is the change in social behavior. Children so often lie, lack of discipline, likes to ditch and often aloof. If this continues to be allowed then it can increase the number of failed grade and drop out for its users. If this continues it will produce generations that have bad character, furthermore affect the progress of nation's development and morale.

Drug abuse for teenagers can lead to a lack of awareness and will result in decreased concentration. A decrease in concentration may cause a decrease in value. In addition, the use of drugs can also create a burden from the community. Because, involvement of adolescent children on drug use, then the social impact for the family will also receive scorn from the community.

3. Physical abuse

Based on the result of bivariate analysis, there was no difference in the proportion of good achievement between students who had experienced violence with students who never experienced, with the proportion of 19.9% and 19.1% respectively. The results of statistical tests also showed no relationship between violence with student achievement.

Wiyani (2012) revealed that bullying is an issue that should not be underestimated and underestimated, even denied existence. Students who are victims of bullying will spend a lot of time thinking about ways to avoid distractions at school so that students have little energy to learn. This will affect the learning achievement to be achieved by students.

Other research results that also support the results of this study, the victims of bullying have poor social adjustment victims are afraid to go to school even do not want to school, withdraw from the association, decreased academic achievement because it has difficulty to concentrate in

learning even bad victims have the desire to kill rather than face the pressures of insults and punishment (Trigg in Siswati & Widayanti, 2009).

Bullying acts experienced by child victims of bullying will have an impact on learning achievement obtained by child victims of bullying because the victims of bullying will have difficulty concentrating and often absent to school which is the aspect that determines the success of student learning. The results obtained from statements from the questionnaire illustrate that the victim of bullying is sad when the perpetrator commits bullying to her, the victim is also afraid to go to school, and the victim does not concentrate on following the lesson because of the bullying action she receives.

The practical advice offered by the researcher to the school is to pay more attention to the bullying actions that occur in the school and increase the understanding of what is bullying. In reducing the occurrence of bullying in schools, the school can implement a peaceful school program to create a safe and comfortable school because every component of the school has a sense of affection, attention, trust, and comfort (Wiyani, 2012).

The school should also hold regular meetings with parents regarding the issue of violence that occurs among students. This is done so that parents also know about the development of their children in school so that teachers and parents can together to increase attention to the issue of violence. For parents more time to pay attention to activities carried out by children. Parents should also spend time listening to child complaints and parents should report bullying to their children so the school can follow up on it.

4. Relationship with friends

The results showed that 19.6% of respondents who have good friendship relationships have good achievement, whereas respondents whose friendship relationship less 82,4% have less achievement. Statistically there is no relationship between friendship relationship with student achievement.

Opinions Abu Ahmadi and Widodo Supriyono (2011) which states that factors that contribute to student achievement are factors that come from outside and factors derived from students themselves. Interaction, especially association with peers is one of the determinants of student achievement that comes from outside.

Interaction must be qualified in order to be able to make optimal learning achievement. These qualities can be observed from the parties involved when socializing with students, activities undertaken, and the intensity. Intercourse of peers to students in the medium category. Thus, the association of sebaungsung peer is not yet optimal in upholding the learning culture. These include poor student behavior, such as underestimating bad grades, joking during lessons, less selective in choosing friends, doing less useful activities, and not maximizing interpersonal intensity. Of course, student achievement is also achieved in the category of being also.

5. Sexual behavior

The results of Table-3 showed that 19.8% of respondents who never had sexual intercourse had a good achievement while 86.1% of respondents who had had sexual intercourse had sufficient learning achievement.

Compared to abstentions that, if unlike teenagers who have sex, teenagers who have sex only with couples who are not romantically engaged are at greater risk for the following actions: (1) having problems at school, (2) suspended or expelled, (3) less for school, (4) under-schooling, and (5) getting lower grades. Conversely, adolescents who only have sex with a romantic partner are not statistically different in the five actions, adjusting other characteristics of the students. The only outcome in which adolescents who engage in sexual intercourse are at greater risk than those who do not do is truancy and, in some cases, drop out.

6. Smoke

Table-3 shows that 20.5% of respondents who do not smoke have good achievement, whereas only 14.4% of respondents who smoke have good learning achievement.

Smoking teenagers who have smoking behavior are not at risk with good grades because there is a new tendency of trying to smoke and still afraid of doing so. Therefore the final exam score is still good category, whereas adolescent smokers who smoke behavior is not risk with less value caused by other factors such as less understanding lesson given by teacher. Adolescent smokers who have risky smoking behavior with less value due to the habit of smoking tobacco affect the health of brain function and psychic.

According to Haustein and Groneberg 2010 in Yuliarti 2014, one of the nicotine cigarettes, has effects on the brain, among

others, causing dependence and toxicity on cognitive function that leads to symptoms of concentration difficulty.

The effects of nicotine dependence is what causes the continuous exposure of cigarettes in smokers will result in decreased cognitive function for the age of students. Decreased cognitive function will affect the learning process and final value. While adolescent smokers who have risky behavior with good value is caused by other factors that did not affect the quality of learning in itself despite the risk of smoking behavior.

According to Fauzi 2010 nicotine contained in cigarettes cause feelings of joy and calm, this happens because of increased levels of dopamine in the brain behind the circuit. According to Silvan and Tomkins also in Nasution 2007 explained that there is a type of smoking Pleasure relaxation, smoking behavior only to increase or increase the enjoyment that has been obtained, such as smoking after drinking coffee or eating. Therefore, risky smoking behavior but good value is caused by other factors so as not to disturb the quality of learning and he got a good value.

7. Trial of suicide

The results of Table-2 showed that 19.5% of respondents who never conducted suicide attempts had a good performance while 82.6% of respondents who had done suicide attempts had enough learning achievement.

Low learning achievement often triggers teen suicide, even among children. The reason is that they feel inferior and ashamed of their low learning achievement. Although it seems trivial and less rational, but several times the events or attempted suicide of teenagers and low achieving children have occurred (Surbakti, 2010).

Conclusion

Based on the results of logistic regression test can be concluded that some significant predictors on student achievement of junior high and high school students who have a habit of drinking alcoholic beverages and consumption of drugs have an impact on the decline in student learning achievement.

1. Students who do not have a habit of drinking alcoholic beverages have OR 3.0 (95% CI, 1,2-7,7) means 3 times greater chance to have a good achievement than students who have a habit of drinking alcoholic beverages.

2. Students who do not consume drugs have a value of OR 2.7 (95% CI, 1.0-21.6) means 2.7 times greater likely to have a good achievement than students who consume drugs.

Suggestions

1. Maximizing Youth health programs in schools as an effort to prevent risky adolescent behavior, especially about risky sexual behavior and abuse of addictive substances.

2. Making referrals for the implementation of community service in providing education to adolescents, especially about the dangers and impact of drugs and drink alcoholic beverages.

3. The need to promote the development of healthy life skills in developing his potential and able to face the problems and challenges of his life. The handling of adolescents who engage in risky behavior will also involve various parties, from parents, schools, and communities especially in improving their life skills.

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