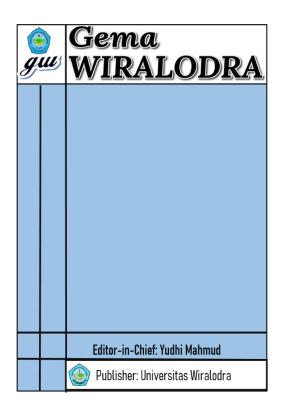
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The relationship of self-control and authoritative parenting patterns with smoking behavior in vocational adolescents in Gowa Regency

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The relationship of self-control and authoritative parenting patterns with smoking behavior in vocational adolescents in Gowa Regency

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Abstract

A hostile sociocultural environment is one of the risk factors for adolescents engaging in unhealthy behaviors, one of which is smoking. Smoking behavior is a growing problem that has not yet been solved in Indonesia. The implementation of various policies and strict regulations regarding cigarettes should reduce smoking behavior among adolescents, but the reality is not so and tends to be the opposite. Adolescents ' attitudes are greatly influenced by their self-concept, and one form of positive self-concept is self-control. On the other hand, families with an authoritative parenting style are the primary environment that influences various aspects of a person's development, including the development of teenagers. The purpose of this study is to determine the relationship between self-control and smoking behavior among vocational high school students in Gowa Regency and the relationship between authoritative parenting style and smoking behavior among vocational high school students in Gowa Regency. The research design used a cross-sectional study approach with a purposive random sampling method. The results of the study show that there is a significant relationship between self-control and smoking behavior and a significant relationship between authoritative parenting style and smoking behavior among vocational high school students in Gowa Regency.

Keywords: self-control, authoritative caring patterns, smoking behavior, adolescents

1. Introduction

Smoking behavior is a phenomenon that is often encountered in everyday life. This is characterized by the increasing number of smokers every year, especially among teenagers. Data shows that in 2022, the prevalence of teenage smokers under 18 years old will be 3.44% (BPS, 2022). During the period of identity search and development, teenagers are highly vulnerable to environmental influences (Sisilia, 2019), (Wijaya et al., 2022). The increasing trend of teenage smokers is a concern because it has long-term consequences, namely the negative effects of smoking on health that can harm oneself.

Early studies on vocational high school students in Gowa Regency obtained data that various reasons were expressed by teenagers, including that smoking makes them more confident, because their parents smoke so they do the same thing, with the initial intention to try it out and eventually become addicted, as well as being influenced by their social environment. Information was also obtained from teachers that the school has made strict rules prohibiting smoking and giving severe punishments, but smoking behavior is still often found among students.

Smoking is a growing problem that has not yet been solved in Indonesia (Julaecha & Wuryandari, 2021). The implementation of strict policies and regulations regarding cigarettes should reduce smoking behavior among teenagers, but in reality, this is not the case and tends to be the opposite.

Adolescent attitudes are greatly influenced by their self-concept (Astri & Sunarto, 2020). One form of positive self-concept is self-control (Ma'ruf, 2019). Someone who has self-control will be able to direct their behavior towards positive consequences, while individuals with low self-control tend to pursue pleasure in any way possible without considering the long-term effects (Ningsih, 2018).

On the other hand, the family is the main environment that has a lot of influence on various aspects of adolescent development (Andriyani, 2020). The family, through the parenting style of parents, plays a role in monitoring children's behavior, including any smoking behavior that may occur (Budiyati & Samutri, 2021). There are four parenting styles that are related to different aspects of adolescent behavior, one of which is the authoritative parenting style (Anggrainy, 2020). Parents who apply this style train their children to be responsible and determine their own behavior in order to be disciplined (Khamim, 2021). It provides freedom for their children while also providing control so that they can be independent and responsible for themselves (Khamim, 2021).

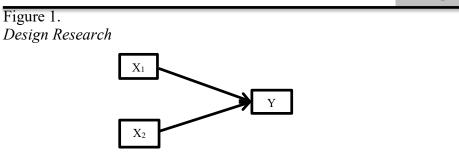
One form of human behavior that can be observed is smoking. Smoking behavior is harmful to health, both for the smokers themselves and for others who happen to inhale the cigarette. This behavior is very harmful to health, but there are still many people who engage in this habit. It is seen from various perspectives as very detrimental, both to oneself and to the people around them.

One form of positive self-concept is self-control. Self-control should be a concern in a person's behavior, including teenagers. Self-control can be defined as the activity of controlling behavior (Stavrova et al., 2020). Controlling behavior means considering things first before deciding to act. Individuals with high self-control can restrain themselves from dangerous things and consider long-term consequences. In other words, individuals with high self-control can respond well to received stimuli and make good decisions, so the decisions they make do not harm themselves in the future (Kang & You, 2018). Meanwhile, individuals with low self-control do not base their actions on goals, so they are more oriented towards pleasurable things that are negative (Siregar, 2020).

Another thing that should be considered in adolescent behavior is authoritative parenting style. It can be defined as an authoritative parenting style where children are given freedom but parents can still set limits (Goering & Mrug, 2021). Parents provide opportunities for children to have dialogue, and warmth is the main characteristic of this parenting style. Children raised with this parenting style will have responsibility and independence. Parents try to involve their teenage children in everything related to teenagers themselves (Lau & Li, 2020). Authoritative parents emphasize the importance of rules and norms, but they are willing to listen, explain, and negotiate with their children. Therefore, children raised with this parenting style will have responsibility and independence.

2. Method

This research uses a survey method with a cross-sectional study approach according to the research objectives, which are to reveal and understand the relationship between self-control, authoritative parenting, and smoking behavior among vocational high school students in Gowa Regency. The research design is presented in the following image:



Description:

X₁ : self-control

X₂ : authoritative parenting

Y : smoking behavior

This research will be conducted at a state vocational high school in Gowa Regency and will last for 6 months (July–December 2023). The population in this study is all male teenagers who are students at state vocational high schools in Gowa Regency, totaling 3,567 male students. To obtain a representative sample, the researcher determines the sample size using the Slovin formula with e = 10% based on the following formula: $n = \frac{N}{1+N.e^2} = \frac{3.567}{1+3.567.(0,10)^2} = 97,27$ rounded to 97, sample collection will use purposive random sampling technique to obtain research data. The variables measured include:

- a) The independent variable (X₁), which is self-control, is measured through indicators: 1) behavior control, 2) cognitive control, and 3) decision control.
- b) The independent variable (X₂), which is authoritative parenting, is measured through indicators: 1) family trust, 2) attention to the child, and 3) discussion for decision-making.
- c) The dependent variable (Y), which is smoking behavior, is measured through indicators: 1) environment, 2) perception, and 3) parental factors.

Then, for the research data collection instrument, a questionnaire is used to obtain quantitative data. This technique uses a Likert scale, which will then be applied to the criteria good/high (2) if the respondent's score \geq mean, and the criterion is less good/low (1) if the respondent's score < mean.

Furthermore, to obtain valid instruments for this study, the developed instruments will be processed through:

- a) Content validity testing by 3 experts using the Aiken V concept, with the criteria that an item is said to have content validity if the item has a content validity coefficient > 0.60.
- b) Empirical validity testing using confirmatory factor analysis (CFA).
- c) Reliability testing using the Cronbach's alpha formula. If the alpha value is > 0.7, it means that the instrument's reliability is sufficient.

The output is: "As for statistical techniques in analyzing research data to achieve research objectives, namely non-parametric statistical analysis, namely chi-square analysis, this is intended to determine the relationship that occurs between variables studied using chi-square. Furthermore, testing is carried out if the calculated chi-square > chi-square table or if the sig-p value < alpha at a significance level of 0.05, then the hypothesis is accepted."

3. Results and Discussion Results

The data collection technique used is a Likert scale questionnaire with answer alternatives of very appropriate (SS), appropriate (S), not appropriate (TS), and very inappropriate (STS), based on the thinking that an even number of classifications is used in order to ensure that the scale (dummy variable) is properly developed. In the development of the instrument for each variable, the validity of the content is tested using the Gregory formula. The criteria for content validity testing are based on internal consistency coefficient values > 0.75.

Validity of Content Test

Table 1

Summary of Content Validity

~ ~ ~	/							
Instrument	Number of	Internal consistency coefficient						
mstrument	Items	value						
Self-control	9	1						
Authoritative parenting	9	1						
Smoking behavior	8	1						

Based on the summary of the test results in the table above, it can be stated that, based on the assessment of experts, the constructed instrument has met content validity. Then, in testing construct validity, confirmatory factor analysis (CFA) was used. CFA is used to determine construct validity using the maximum likelihood method. The criteria include a Kaiser Meyer Olkin (KMO) measurement result > 0.50 and a Measure of Sampling Adequacy (MSA) > 0.50. Bartlett's test obtained a significance value of 0.00 for further analysis, and then the anti-image correlation value > 0.50 was included in the factor analysis. The validity of the items is seen from the factor loading, which is ≥ 0.40 . Construct validity testing for each instrument in this study was conducted using the SPSS program for Windows. The results of the testing are presented below.

Validity test of the self-control instrument

Instrumental self-control is measured through 3 indicators as observed variables, for a total of 9 items. Indicator 1 consists of 3 items; indicator 2 consists of 3 items; and indicator 3 consists of 3 items. The summary of the test results is presented in the following Table 2.

Table 2

Kaiser-Meyer-Olkin Adequacy.		Measure	of	Sampling	.856
Bartlett's Sphericity	Test	of Approx Df Sig.	chi	-square	1414.406 36 .000

Summary of the KMO Test and Bartlett Test

The construct validity testing results of the self-control instrument provide information that, based on the trial results, the Bartlett's test yielded a significance value of 0.00, which is smaller than 0.05. Additionally, the KMO and MSA coefficients were found to be 0.85, which is greater than 0.50, indicating that the sample size is sufficient for factor analysis. Furthermore, the anti-image correlation

values for nine items were found to have an MSA > 0.50, which can be included in determining the factors. Further analysis using the Maximum Likelihood method revealed that all nine items showed factor loadings of 0.4 based on their indicators. These 9 items were then extracted and rotated to assess the goodness of fit of the factor model, resulting in a chi-square value of 355.325 and a significance value of $0.00 < \alpha$ (0.05). Based on the process, it is concluded that the self-control instrument consists of 9 statements that form a factor. The analysis results indicate that all valid items are found in 3 indicators as observed variables and have made a significant contribution to measuring the latent variable.

Validity test of the authoritative parenting instrument construct

The authoritative parenting instrument is measured through three indicators as observed variables, for a total of nine items. Indicator 1 consists of 3 items; indicator 2 consists of 3 items; and indicator 3 consists of 3 items. The summary of the test results is presented in the following Table 3.

Table 3

Summary of KMO Test and Barlett Test

Kaiser-Meye Adequacy					.876
Bartlett's Sphericity	Test	of Approx Df Sig.	chi-	square	1919.538 45 .000

The construct validity testing results of the authoritative parenting instrument indicate that the Bartlett's test yielded a significance value of 0.00, which is smaller than 0.05. Additionally, the KMO and MSA coefficients are 0.87, which is greater than 0.50, indicating that the sample size is sufficient for factor analysis. Furthermore, the anti-image correlation values for 9 items have an MSA > 0.50, which can be included in determining the factors. Using the maximum likelihood method, it is found that all 9 items have factor loadings ≥ 0.4 based on their indicators. These 9 items were then extracted and rotated to assess the fit of the factor model using goodness-of-fit tests. The obtained chi-square value is 295.590, with a significance value of $0.00 < \alpha$ (0.05). The analysis results indicate that all valid items are found in 3 indicators as observed variables and have provided a significant contribution to measuring the latent variable.

Validity test of smoking behavior instrument

Behavioral smoking instruments are measured through 3 indicators as observed variables with a total of 8 items. Indicator 1 consists of 3 items, indicator 2 consists of 3 items, and indicator 3 consists of 2 items. The summary of the test results is presented in the following Table 4.

Table 4

Summary of KMO Test and Barlett Test

Kaiser-Mey	er-Olkin	Measure	of	Sampling	.859
Adequacy					
Doutlottla	Test	of Approx Df	chi	-square	1092.768
Bartlett's	Test	^{or} Df			28
Sphericity		Sig.			.000

The validity test results revealed that, based on the findings of Bartlett's test indicating a sig. value of 0.00 less than 0.05 as well as a KMO and MSA coefficient

of 0.85 greater than 0.50, the aptitude of the sample to carry out factor analysis has been met. The data acquired on the anti-image correlation value on 8 particles has an MSA > 0.50, which can be further involved in determining the factor. Furthermore, with the Maximum likelihood method, it was found that 8 particles indicate the load of each factor based on its indicator. Of these eight elements, there are eight of the indicators of 1.2,3, having a factor load value ≥ 0.4 . The sequence of eight grains is extracted and rotated again to see the conformity of the factor model with the goodness of fit test, thus a chi-square value of 207.109 and a significance value of $0.00 < \alpha$ is obtained. (0,05). The results of the analysis indicate that all valid elements are present on the 3 indicators as observed variables and have made a meaningful contribution to measuring the latent variable.

Reliability test

The reliability test on each instrument in this study uses the Cronbach alpha formula with the help of the SPSS 20 programme. The criteria for an instrument being eligible for reliability is if the coefficient value based on the calculation results is > 0.70 [27]. The following is a summary of the reliability test results for each instrument in this study.

Table 5

Summary of the Reliability T	est
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Instrument	Reliability Value	Description
self-control	0,96	Reliable
Authoritative parenting	0,96	Reliable
Smoking behavior	0,96	Reliable

Based on the table above, it obtained a reliability coefficient of 0.96, authoritative parenting of 0.96, and smoking behavior of 0.66, making the three reliability values of the instrument greater than 0.70; thus, the three instruments have qualified for reliability.

The relationship between self control and smoking behaviour

The data analysis used to determine the relationship between self-control and smoking behavior is chi-square analysis with the help of the SPSS for Windows program. The following is a summary of the results of the chi-squared analysis. Table 6

Chi Square Analysis Results

	Smoki	Smoking Behavior Total					Sig-
	Low		High		Total		Р
Self-control	(n)	(%)	(n)	(%)	(n)	(%)	
Low	3	3,20	90	96,80	93	100	_
High	3	75	1	25	4	100	0,00
Total	6	6,20	91	93,80	97	100	_

Based on Table 6, the results obtained from the calculation showed that in the case of low self-control with low smoking behavior, there were 3 respondents (3.20%); in the case of low self-control with high smoking behavior, there were 90 respondents (96.80%); in the case of high self-control with low smoking behavior, there were 3 respondents (75%); and in the case of high self-control with high smoking behavior, there was 1 respondent (25%). Based on the results of the analysis, it can be argued that there is a tendency where the lower the self-control,

the higher the smoking behavior, and the opposite where the higher the self-control, the lower the smoking behavior.

Furthermore, to test the hypothesis for clarity or significance, we used the chisquare test. As for the hypothesis:

H₁: There is a link between self-control and the smoking behavior of Vocational High School Adolescents in Gowa Regency.

H_o: There's no link between self-control and the smoking behavior of Vocational High School Adolescents teenagers in the Gowa Regency.

Based on the table above, the calculation sig P $(0,00) < \text{sig } \alpha (0,05)$. Based on the calculations, it was revealed that Ho in this test was rejected and H1 accepted, so it was concluded that there was a link between self-control and smoking behavior among Vocational High School Adolescents in Gowa Regency.

The relationship of authoritative parenting with smoking behavior

The data analysis that used to determine the relationship between authoritative parenting and smoking behavior is a chi-square analysis with the help of the SPSS for Windows program. The following is a summary of the chi-squared analysis.

Table 7

The Results of Chi Square Analysis

	Smoki	Smoking Behavior				Total		
	Low High			Sig-P				
Authoritative Parenting	(n)	(%)	(n)	(%)	(n)	(%)		
Bad	0	0	89	100	89	100		
Good	6	75	2	25	8	100	0,00	
Total	6	6,20	91	93,80	97	100		

Based on Table 7, the results showed that in the case of poor authoritative parenting with low smoking behavior of 0 respondents (0%), in the case of poor authoritative parenting with high smoking behavior of 89 respondents (100%), whereas in the case of good authoritative parenting with low smoking behavior of 6 respondents (75%), then for a good authoritative parenting with high smoking behavior of 2 respondents (25%). Based on the results of the analysis, it can be argued that there is a tendency if the authoritative parenting is inadequate, then the smoking behavior is high, as well as the opposite, where if the pattern of authoritative care is high, then the behavior is low.

Furthermore, to test the hypothesis for clarity or significance, we used the chisquare test. As for the hypothesis:

H1: There is a link between self-control and the smoking behavior of Vocational High School Adolescents in Gowa Regency.

Ho: There's no link between self-control and the smoking behavior of Vocational High School Adolescents teenagers in the Gowa Regency.

Based on the table, the calculation sig P $(0,00) < \text{sig } \alpha (0,05)$. Based on the calculations, it was revealed that Ho in this test was rejected and H1 accepted, so it was concluded that there was a link between self-control and smoking behavior among Vocational High School Adolescents in Gowa Regency.

Discussion

In attempt to prevent and reduce adolescent smoking behavior, one of its strategies is to enhance self-control and authoritative parenting. Through this

research, it can be argued that self-control and authoritative parenting have a significant relationship with smoking behavior preventive behavior in vocational high school adolescents in Gowa Regency. The hypothesis reveals that there is a link between self-control, authoritative parenting, and smoking behavior in adolescents is proven in this study. It can also be argued that the better the self-control and authoritative parenting, the less smoking behavior will occur in adolescents.

The relationship between self-control and adolescent smoking behavior can play an important role in understanding why some adolescents tend to engage in a smoking habit while others do not. Strong self-control can help teenagers delay the immediate gratification associated with smoking. They are able to consider the long-term consequences of smoking, such as health risks and addictions, and prioritize long-run benefits like good health and freedom from the smoking habit.

Adolescence is a vulnerable period for someone to engage in deviant behavior such as smoking. The mental immaturity of a kid is intimately tied to the teen's decision to smoke. Teenagers are no longer considered to be children, but they are also not considered to be adults, therefore they frequently do not think about the consequences of their own actions (Anwary, 2020). In addition, adolescence is a stage of transition during which youths become impulsive and susceptible to influence. In this context, instability and impressionability are associated with adolescents' malleable behaviour and their susceptibility to environmental influence. Teenagers are especially susceptible to issues and undesirable behaviour in these unsettling times since they are still insecure and their emotions, including smoking, have not fully developed (Aulia et al., 2020). Teenagers' smoking behaviour can be explained by a variety of factors, including peer pressure, parental modelling, and copying parents (Biahimo & Modjo, 2021).

Parenting is a total interaction process between parents and children, including the process of caring for, protecting and teaching children (Haini, 2020). The parenting approach taken by parents will have a significant impact on how the child behaves in the future and on his or her ability to act in accordance with societal norms without hurting himself or others. This occurs as a result of the fact that children emulate their parents during the parenting process and also learn about the restrictions placed on them by their parents (Utami & Fitriyani, 2019).

Authoritative parenting can have a significant impact on adolescent smoking behavior. Authoritative parenting combines elements of high supervision with warm and understanding emotional support. Parents with authoritative parenting tend to provide strict supervision of their children's behavior, including smoking behavior. They set clear boundaries and rules related to smoking and actively monitor their children's activities. This strict supervision can reduce the likelihood of adolescents engaging in smoking behavior.

Authoritative parents often have open communication with their children and provide warm emotional support. They listen to their teens' concerns and problems with empathy and provide the necessary support. This pattern of caring allows adolescents to feel supported and is more likely to prompt them to seek support from parents in the face of stress or the temptation to smoke.

4. Conclusion

Based on the results of the analysis and discussion that has been carried out, it can be concluded that there is a significant relationship between self-control and

smoking behaviour of vocational high school adolescents in Gowa Regency, and there is a significant relationship between authoritative parenting and smoking behaviour of vocational high school adolescents in Gowa Regency. Where it appears that there is a tendency for respondents with democratic upbringing to have the most smoking behavior. Meanwhile, smoking behavior in teenagers triggers several diseases such as cardiovascular disease, respiratory tract neoplasms (cancer), increased blood pressure and shortened lifespan. Smoking behavior among students needs to be prevented, and discussions regarding parenting patterns regarding smoking behavior need to be carried out. Therefore, information about the dangers of smoking behavior, apart from that, discussions with parents regarding the risks of smoking behavior need to be carried out.

5. References

- Andriyani, J. (2020). Peran Lingkungan Keluarga Dalam Mengatasi Kenakalan Remaja. *At-Taujih*: *Bimbingan Dan Konseling Islam*, 3(1), 86–96. <u>https://doi.org/10.22373/taujih.v3i1.7235</u>
- Anggrainy, N. (2020). Pola Asuh Otoritatif Terhadap Remaja. JIVA: Journal of Behavior and Mental Health, 1(1), 1–7. https://doi.org/10.30984/jiva.v1i1.1161
- Anwary, A.Z. (2020). Peran Orang Tua dan Teman Sebaya terkait Perilaku Merokok Mahasiswa Fakultas Ekonomi UNISKA MAB Banjarmasin. *Jurnal Kesehatan Masyarakat*, 10(1), 14–16.
- Ardhiansyah, A., Ferawati, F., & Kurniawati, M. (2020). Perbedaan Perilaku Merokok Antara Pola Asuh Demokratis Dan Pola Asuh Otoriter Pada Remaja Di Dusun Jetis Desa Wotanngare Kecamatan Kalitidu Kabupaten Bojonegoro. *Jurnal Ilmu Kesehatan MAKIA*, 3(1), 7–12. https://doi.org/10.37413/jmakia.v3i1.18
- Astri, D., & Sunarto. (2020). Faktor-faktor yang Mempengaruhi Terbentuknya Konsep Diri Remaja (Studi Kualitatif pada Siswa SMPN 6 Kota Madiun). *Jurnal Konseling Gusjigang*, 6(1), 1–11.
- Atmasari, Y., Sanjaya, R., & Fauziah, N. (2020). Hubungan tingkat pengetahuan tentang rokok dengan perilaku merokok pada remaja di SMKN Pagelaran Utara Pringsewu Lampung. *Majalah Kesehatan Indonesia*, 1(1), 15–20. <u>https://doi.org/10.47679/makein.011.42000004</u>
- Aulia, A. (2020). Hubungan Pengetahuan, Pengaruh Orangtua dan Teman Sebaya dengan Perilaku Merokok Remaja di Baamang Hilir Kotawaringin Timur. Skripsi. Universitas Islam Kalimantan.

Azwar, S. (2019). Reliabilitas dan Validitas. Pustaka Pelajar.

- Biahimo, N. U. I., and Modjo, D. (2021). Hubungan Pola Asuh Orang Tua dengan Perilaku Sosiopatik pada Siswa SMPN 1 Bulango Timur Kecamatan Bulango Timur Kabupaten Bulango Timur Kabupaten Bone Bolango. Zaitun (Jurnal Ilmu Kesehatan), 6(1), 1-8.
- BPS. (2022). Persentase Merokok Pada Penduduk Usia ≤ 18 Tahun, Menurut Jenis Kelamin (Persen)Tahun 2020-2022.
- Budiyati, G., & Samutri, E. (2021). Norma Subjektif Dan Karakteristik Keluarga Dalam Perilaku Merokok Remaja. *Jurnal Keperawatan*, *13*(1), 213–226.

- Gita, G., & Stephan, R. (2022). Pengaruh Self-Control terhadap Perilaku Merokok Mahasiswa selama Pandemi COVID-19. *Jurnal Riset Psikologi*, *1*(2), 132– 139. https://doi.org/10.29313/jrp.v1i2.559
- Goering, M., & Mrug, S. (2021). Empathy as a Mediator of the Relationship between Authoritative Parenting and Delinquent Behavior in Adolescence. *Journal of Youth and Adolescence*, 50(7), 1308–1318. https://doi.org/10.1007/s10964-021-01445-9
- Gregory, R. J. (2015). *Psychological testing: History, principles, and applications*. Pearson Education.
- Haini, N. (2020). Hubungan antara pola Asuh Permisif dan Konformitas dengan Perilaku Merokok. *Skripsi*. Universitas Muhammadiyah Surakarta.
- Istiana, D., Halid, S., Hadi, I., Nurainun, A., & Supriadi, Z. (2021). Analisis Determinan Perilaku Merokok pada Remaja Daerah Pesisir Kota Mataram. *Jurnal Keperawatan Jiwa*, 9(2), 501–512. https://doi.org/https://doi.org/10.26714/jkj.9.2.2021.501-512
- Julaecha, J., & Wuryandari, A. (2021). Pengetahuan dan Sikap tentang Perilaku Merokok pada Remaja. *Jurnal Akademika Baiturrahim Jambi*, 10(2), 313. https://doi.org/10.36565/jab.v10i2.337
- Kang, N., & You, M. (2018). Association of perceived stress and self-control with health-promoting behaviors in adolescents: A cross-sectional study. *Medicine (United States)*, 97(34), 1–9. https://doi.org/10.1097/MD.000000000011880
- Khamim, N. (2021). Cite this article: Khamim, Nur (2021). Perkembangan Kepribadian Anak Dengan Pola Asuh Permisif, Over Protektif dan Otoritatif. *Journal of Education and Religious Studies*, 1(1), 27–35.
- Lau, E., & Li, J. (2020). Child Physical Aggression: The Contributions of Fathers' Job Support, Mothers' Coparenting, Fathers' Authoritative Parenting and Child's Theory of Mind. *Child Indicators Research*, 13(3), 1085–1105. https://doi.org/10.1007/s12187-019-09660-4
- Maki, E., Mantjoro, E., & Asrifuddin, A. (2022). Hubungan Lingkungan Pergaulan Dengan Perilaku Merokok Pada Remaja Di Desa Karumenga Kecamatan Langowan Utara. Jurnal Kesehatan Masyarakat, 6(2), 1192–1198. https://doi.org/https://doi.org/10.31004/prepotif.v6i2.4134
- Ma'ruf, M. (2019). Hubungan Konsep Diri dan Self Control dengan Kebermaknaan Hidup. *Indonesian Psychological Research*, 1(1), 11–24. https://doi.org/10.29080/ipr.v1i1.166
- Nasution, B. (2017). Hubungan Pola Asuh Orang Tua dengan Perilaku Merokok pada Remaja. *Jurnal Keperawatan Flora*, 10(1), 7–13.
- Ningsih, R. (2018). The Effect of Self-Control to Teenagers' Discipline Behavior. Jurnal Psikoedukasi Dan Konseling, 2(2), 48–56. https://doi.org/http://dx.doi.org/10.20961/jpk.v2i2.15820 Pengaruh
- Retnawati, H. (2016). Analisis Kuantitatif Instrumen Penelitian. Parama Publishing.
- Setiawan, I., Setiawati, O., & Lestari, S. (2020). Kontrol Diri Dan Perilaku Merokok Pada Siswa Sma. *Jurnal Psikologi Malahayati*, 2(2), 1–9. https://doi.org/10.33024/jpm.v2i2.2538

Siregar, R. (2020). Self-Control Sebagai Prediktor Terhadap Perilaku Agresif Pada Remaja. Jurnal Ilmiah Psyche, 14(2), 93–102. https://doi.org/10.33557/jpsyche.v14i2.1160

Sisilia, A. (2019). Hubungan Faktor Lingkungan Dengan Perilaku Merokok Pada Remaja Di Kecamatan Magepanda Kabupaten Sikka. *Jurnal Keperawatan Dan Kesehatan Masyarakat*, 6(1), 70–78.

Stavrova, O., Pronk, T., & Kokkoris, M. (2020). Finding meaning in self-control: The effect of self-control on the perception of meaning in life. *Self and Identity*, 19(2), 201–218. https://doi.org/10.1080/15298868.2018.1558107

Sudaryono. (2019). Metodologi Penelitian. PT Rajagrafindo Persada.

- Sulung, N., & Yasril, A. (2020). Pengantar Statistik Kesehatan. Deepublish Publisher.
- Sunyoto, D. (2018). Statistika Kesehatan : Parametrik, Non Parametrik, Validitas, Reliabilitas. Nuha Medical.
- Utami, C. F., and Fitriyani, P. (2019). Pengaruh Pola Asuh Demokratif terhadap Perkembangan Sosial Remaja. *Jurnal Perawat Indonesia*, *3*(1), 65.
- Vitoria, P., Pereira, S. E., Muinos, G., Vries, H. De, & Lima, M. L. (2020). Parents modelling, peer influence and peer selection impact on adolescent smoking behavior: A longitudinal study in two age cohorts. *Addictive Behaviors*, 10(2), 1–15. https://doi.org/10.1016/j.addbeh.2019.106131
- Wijaya, D., Gayatri, M., & Handayani, L. (2022). Lingkungan Sosial dan Perilaku merokok pada Remaja. *Jurnal Cakrawala Promkes*, 4(1), 31–39.
- Zhang, H., & Zhao, H. (2020). Dark personality traits and cyber aggression in adolescents: A moderated mediation analysis of belief in virtuous humanity and self-control. *Children and Youth Services Review*, 119(1), 1–15. https://doi.org/10.1016/j.childyouth.2020.105565