Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

The Relation of Democratic Parenting and Health Behavior to students of sanata dharma university

Patrick Andhika[1], Yohanes Heri Widodo [2]
Program Studi Bimbingan dan Konseling, Sanata Dharma University
[1]patrickandhika@gmail.com

Abstrak: *The purpose of this study is to: (1) Knowing the relation between democratic parenting and health behavior to students of Sanata Dharma University. (2) Knowing how healthy or good the healthy living behavior of Sanata Dharma University students is. (3) Knowing the high and low levels of democratic parenting in Sanata Dharma students. (4) Knowing the items of democratic parenting and healthy living behavior that are identified as low, so that they can be proposed as guidance topics.*

The research used is correlative quantitative type. This study uses the subject of Sanata Dharma University students from various faculties and study programs at Sanata Dharma University. The number of respondents in this study amounted to 110 students and this study used a linkert scale. The democratic parenting scale used was made by Afra Sonia S.Pd with a total of 39 valid items and has an Alpha Cronbach reliability index of 0.947. The scale of the next variable is healthy living behavior, totaling 28 valid statement items and has an Alpha Cronbach reliability index of 0.726.

Hypothesis testing that has been carried out in this study shows the correlation value of Spearman's rho which is 0.033 and r of 0.203 so that this study has concluded that the two variables have a significant relationship. Therefore, the hypothesis that there is a positive relationship between democratic parenting and healthy living behavior in Sanata Dharma University students is proven to have a relationship. This study has the results: (1) there is a significant relationship between democratic parenting and healthy living behavior in Sanata Dharma University students. (2) Democratic parenting in Sanata Dharma University students is classified as very democratic or very high democratic parenting received by Sanata Dharma University students with a percentage of 48%. (3) The healthy living behavior of Sanata Dharma University students is classified as good with a percentage of 57%. (4) There are 8 suggestions for guidance topics because there are 8 item statements that are identified as low.

Keywords: *Democratic parenting, Healthy living behavior, Students*

INTRODUCTION

Health is a condition that everyone desires. The thing that makes health something to be coveted because health makes a person physically, mentally and socially prosperous. Healthy according to health psychology and (WHO, 2008) says healthy is a state where there is no health disorder both physical, psychological and social conditions. The way a person becomes healthy is by practicing healthy living behaviors. Healthy living behavior aims to make an individual physically, mentally and socially healthy. When a person is committed to carrying out healthy living behaviors, he will do an activity that makes him healthy such as exercise, regulating consumption behavior, not smoking, not consuming excessive alcohol, and having a good rest pattern.

Health behavior is a behavior carried out by a person to improve or maintain everyone's health (Taylor, 2015). Conner and Norman, (1996) say health behavior is an activity carried out to prevent disease and improve health. Gochman (in Handbook of Health Behavior Research, 1997) says healthy living behavior patterns are health actions and habits that have a relationship in maintaining, restoring and improving health.

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

Good health behavior is often hampered by the habits of individuals who are unable to change their health behavior for the better. The lack of concrete steps taken by individuals makes this a factor that hinders healthy living behavior. These habits develop when individuals are in childhood and adolescence. These habits include smoking, poor dietary habits, and lack of exercise. Not many children and adolescents realize how healthy they will be in the future (Johnson, McCaul, & Klein, 2002). These bad habits will be embedded in a life that affects his life. Then in addition, emotional factors are also able to lead individuals to unhealthy behavioral habits. Unhealthy behaviors tend to make individuals feel more calm and addicted, which of course makes individuals threatened to change health behaviors which turns out to have a psychological impact where a person will feel depressed and respond to everything carefully (Beckjord, Rutten, Arora, Moser, & Hesse, 2008; Good & Abraham, 2007).

Many people will tend to perceive health threats as less than they actually are (Liberman & Chaiken, 1992), and they may mistakenly perceive themselves as less vulnerable than people with similar habits (Roberts, Gibbons, Gerrard, & Alert, 2011; Thornton, Gibbons, & Gerrard, 2002). The many practices regarding behaviors that are bad for the body can make a person feel a sense of security that is not real. (Halpern-Felsher et al., 2001). In this regard, parenting is also one of the factors of healthy living behavior where the role of parents in supporting the development of children's maturity. Parents as role models make children easily imitate in terms of habits and personality so that parents have a great influence on child development.

When children can choose the way for themselves or the existence of personal goals in children, it does not necessarily arise because of the cultivation of good values from a parent such as responsibility. Parental education to teach their children to be responsible for their choices if children have a goal to have an ideal body, of course, they need to carry out health behaviors and health habits. it becomes the child's choice and with parental education for educating children to be responsible for their own health, children will be able to do this without coercion or demands. That way healthy behavior will continue to be carried out with responsibility and carried out stably. Based on the explanation related to healthy living behavior in students, researchers have an interest in examining more deeply the Relationship between Democratic Parenting and Healthy Living Behavior in Sanata Dharma University Students.

Based on the explanation above and the problems that exist in healthy living behavior. Therefore, researchers conducted research at Sanata Dharma University. Researchers decided to examine students because students are individuals who enter early adulthood and have passed the period of children and adolescents so that this study aims to determine how healthy living behavior is in Sanata Dharma University Yogyakarta students.

METHODOLOGY

The research to be conducted is based on correlational inferential quantitative research. Where quantitative data is based on concrete data in the form of numbers and will later be processed using statistics. Where the calculation test tool is related to the variables to be studied and produces results. (Sugiyono, 2017). The research location to be carried out by researchers is located at Sanata Dharma University, which is located in the Special Region of Yogyakarta.

The data collection method that will be used by researchers for this research is a survey regarding the Relationship between Democratic Parenting and Health Behavior in Sanata Dharma Students. Questionnaire is a data collection method carried out using

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

statements from a questionnaire that need to be done by research subjects in writing (Sugiyono, 2017). Questionnaires in this study were used to collect data on Democratic Parenting and Health Behavior.

The data collection instrument that will be used is the Likert Scale. The Likert scale is used to measure the attitudes, opinions, and perceptions of a person or group of subjects who are targeted about social phenomena (Sugiyono, 2017). The statements in this healthy living behavior questionnaire consist of favorable and unfavorable statements. The research instrument has four options, namely very often, often, rarely, never. Subjects or USD students fill in the answer options via google form.

The following is the preparation of the Health Behavior Scale in college students, to measure how healthy behavior is in college students. This scale will be compiled using indicators consisting of 4 forms of healthy living behavior, namely physical activity, consumption behavior, smoking behavior, health screening.

The statements in this democratic parenting questionnaire consist of favorable and unfavorable statements. The research instrument has four options, namely, Very Suitable, Suitable, Not Suitable, Very Not Suitable. Subjects or USD students fill in the answer options via google form. aspects of democratic parenting (Sanrock 2009), namely Parents encourage children to be independent by providing limits and control. Parents allow two-way communication. Parents are warm and caring.

The analysis techniques in this study are as follows:

1) *Determining the score using the applicable scoring standard to assess the score on the questionnaire item answered by the respondent and giving a score of 1-4 based on the type of statement according to the scoring norms.*
2) *Collecting and tabulating data into Microsoft excel after determining the score for each item.*
3) *Normality Test, the way to find the distribution of research data is normal or not is to use the Normality Test. Where this test can be done using One Sample Kolmogorov-Smirnov assisted by JASP 15.0 for windows. Distributed data is said to be normal if the significance achieved is> 0.05. It is said to be abnormal if the significance is <0.05.*
4) *Linearity Test, testing with the aim of seeing the relationship between the independent variable score and the dependent variable whether it is straight line or not is the purpose of the Linearity Test. Using the Test for Linearity will see the shape of the line and the correlation between the two variables if it has a significance of <0.05.*
5) *Hypothesis Test, the Hypothesis Test in this study was conducted to see if there is a relationship between democratic parenting and healthy living behavior. The correlation analysis was carried out using the JASP 15.0 application or software for hypothesis testing.*

RESULT AND DISCUSSION

Based on the data obtained after distributing questionnaires on democratic parenting and health behavior to students at Sanata Dharma University Yogyakarta, the results of the categorization of motivation levels are as follows:

Table 1. *Democratic parenting categorization results*

Category	Interval	Frequency	Percentage
Very	$X < 126,75$	48	48%

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

high			
High	107,25 < X ≤ 126,75	42	42%
Medium	87,75 < X ≤ 107,25	12	12%
low	68,25 < X ≤ 87,75	7	7%
very low	X < 68,25	1	1%

Then when viewed in the form of a graph, the following results are found:

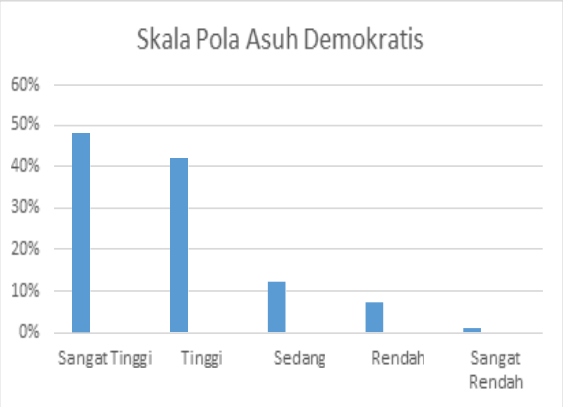

Figure 1. *Graph of Democratic Parenting*

Based on the table and diagaram above, it can be seen that students at Sanata Dharma University Yogyakarta get a very high democratic parenting system with the number of respondents or students 48% indicated to get a democratic parenting system for healthy living. So it can be interpreted that students at Sanata Dharma University get democratic parenting from parents with the results of the data that can be presented as follows;

Based on the table and diagram above, it can be seen that students at Sanata Dharma University Yogyakarta have good healthy living behavior with the number of respondents or students 57% indicated good health behavior. So it can be interpreted that students at Sanata Dharma University have a healthy living behavior with the results of the data that can be presented as follows; there

Figure 2. *Graph of Health Behavior*

there are 48 respondents or students (48%) who indicated that they have a very high democratic parenting system. There are 42 respondents or students (42%) who indicated that they have a high democratic parenting system. There are 12 respondents or students (12%) who indicated that they have a moderate democratic parenting system. There are 7 respondents or students (7%) who indicated that they have a low democratic parenting system. There is 1 respondent or student (1%) who is indicated to have a very low democratic parenting system.

Table 2. *Results of categorization of health behavior*

Category	***Interval***	***Frequency***	***Percentage***
Excellent	*X>91*	*4*	*4%*
Good	*77<X≤91*	*57*	*57%*
moderate	*63<X≤77*	*29*	*29%*
bad	*49<X≤63*	*18*	*18%*
very bad	*X<49*	*2*	*2%*

Then when viewed in the form of a graph, the following results are found:

are 4 respondents or students (4%) who are indicated to have very good healthy living behavior. There are 57 respondents or students (57%) who are indicated to have good healthy living behavior. There are 29 respondents or students (29%) who indicated that they have moderate healthy living behavior. There are 18 respondents or students (18%) who indicated that they have poor healthy living behavior. There are 2 respondents or students (2%) who indicated that they have very poor health

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

behavior.

Based on the conclusion of each data that has been displayed, it can be concluded that the hypothesis regarding the relationship between democratic parenting and democratic behavior is proven to have a significant relationship. Therefore, the assumption of a significant relationship between the variables of democratic parenting and health behavior really has a relationship. The thing that proves the existence of a relationship between the two variables because of the calculation results of Spearman's rho which shows a p-value of 0.033, means that the p-value is smaller than 0.05, so it can be stated that there is a significant relationship between the two variables. This correlation test can be interpreted according to the initial hypothesis, namely that the more democratic the parenting given, the healthier the behavior of an individual's life.

Health behavior is a behavior carried out by everyone to maintain their living habits in order to be healthier and be able to maintain health and maintain health (Taylor, 2015). Democratic parenting is a parenting system that has a social process orientation that makes parents an example or role model for children to imitate and learn from parents (Flanagan, 2003; Hess & Torney, 1967). Democratic parenting can be interpreted that democratic parenting is a parenting system that makes children and parents have the same rights in making choices, not only choosing but still being responsible for their choices Dariyo (in Asiyah, 2013).

The results of calculating how high and low democratic parenting is viewed by Sanata Dharma University students, on the democratic parenting categorization diagram shows a result from the views of students at Sanata Dharma University having a very democratic parenting system. Parenting in a democratic way allows children to learn and explore good things for themselves, besides that children can learn independently and have responsibility for their choices (Schroeder-Yu, 2008). A program that allows children to explore in groups promotes mutual respect for diversity and a collaborative approach to problem solving (Hyson, Copple, & Jones, 2006).

Democratic parenting also pays attention to the intake of children so that they can have good eating habits and balance the intake received by children, because eating habits are an important aspect of child development (Schiff, 2011; Wardlaw & Smith, 2011). What children consume will affect skeletal growth, body shape and immunity. Physical activity starting from childhood is also an important aspect, as when good values are instilled, children tend to carry these habits into adulthood (Lumpkin, 2011). Education, knowledge and the economy of parents are factors for implementing parenting because high education and knowledge of parents are believed to provide education to children and can take good care of children (M. Sari & Rahmi 2017).

Based on the results of research aimed at calculating how healthy and whether or not health behavior is in Sanata Dharma University students, in the diagram of the results of the achievement of healthy living behavior, students tend to have healthy living behavior. This happens because students are influenced by several factors, namely personal and social.

Health according to health psychology and WHO has a harmony in which it is explained that a person can be considered healthy and prosperous when he is healthy with a perfect state which means physical, mental and social health. Meanwhile, healthy living behavior is a behavior carried out by a person with the aim of forming healthy habits so as to improve, maintain, restore and prevent disease (Taylor, 2015). Students can carry out health behaviors due to several factors, for example, personal factors when an individual already feels that he is unhealthy and tends to get sick easily, he will learn and look for research if the individual wants to live a healthy life, so he needs to carry out healthy living behaviors and habits in order to improve health.

Then there are social factors such as family environment and friends that can lead an individual to live healthy. In the family, parents can be role models for children so that children imitate parents, when parents model health behavior, children will tend to follow the activities carried out by their parents because they are considered role models (Flanagan, 2003; Hess & Torney, 1967).

In the friendship environment, it can be seen that many friendships invite each other to do

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

activities together, which can be positive and negative, but in this case there is a positive relationship because students support each other and invite each other to implement health behaviors.

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

CONCLUSION

Based on the results of the research and discussion, the following conclusions can be drawn as follows:

1) ***This study was able to prove that the variable of democratic parenting with a healthy lifestyle that exists in Sanata Dharma University students there is a significant positive relationship. It was proven that the more democratic parenting received, the higher the healthy lifestyle of Sanata Dharma University students. This is supported because of the application of aspects of democratic parenting by Sanata Dharma University students. Aspects and factors of democratic parenting are related to the form of healthy living behavior because parents can be a very main role so that children can carry out healthy living behavior because of the instillation of values from the dialogue between parents and children, besides that parents can be a role model for children.***
2) ***The acceptance of democratic parenting by Sanata Dharma University students can be seen from this study, where democratic parenting is included in the very high category. This is evidence that most Sanata Dharma University students get democratic parenting from their parents. This democratic parenting is based on various factors, one of which is the parental education factor. In addition, the thing that can support democratic parenting is the family's economic situation. Economic conditions are able to encourage parents to gain broad insights.***
3) ***Health behavior in Sanata Dharma University students seen from the results of this study is included in the good category. It is evident that most Sanata Dharma University students have implemented health behaviors and of course must continue to be considered and improved. Healthy living behavior is classified as good because of the activities carried out by students for healthy living behavior. Such as sports activities carried out by a group of students.***
4) ***There are 8 items, each from the variable there is 1 from democratic parenting and 7 from health behavior to be used as guidance topics. These guidance topics are useful for parents in understanding children and are useful so that each individual can carry out health behaviors, so that the relationship between children and parents can be good and individuals can be healthy for physically, mentally, and socially, so that individuals can develop more optimally in their lives.***

REFERENCES

Andrews, J. A., Tildesley, E., Hops, H., & Li, F. (2002). Th e infl uence of peers on young adult substance use. Health Psychology , 21, 349–357.

Blair, S. N., Kohl, H. W., Gordon, N. F., & Paffenbarger Jr, R. S. (1992). How much physical activity is good for health?. *Annual review of public health*, *13*(1), 99-126.

Beckjord, E. B., Rutten, L. J. F., Arora, N. K., Moser, R. P., & Hesse, B. W. (2008). Informat ion processing and negative aff ect: Evidence from the 2003 health information national trends survey. Health Psychology , 27 , 249–257.

Broman, C. L. (1993). Social relationships and health-related behavior. Journal of Behavioral Medicine , 16, 335–350

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

Calvin, C. M., Batty, G. D. , Lowe, G. D. O., & Deary, I. J. (2011). Childhood intelligence and midlife infl ammatory and hemostatic biomarkers: Th e National Child Development Study (1958) cohort. Health Psychology , 30, 710–718.

Calzo, J. P., Corliss, H. L., Blood, E. A., Field, A. E., & Austin, S. B. (2013). Development of muscularity and weight concerns in heterosexual and sexual minority males. Health Psychology , 32, 42–51.

Centers for Disease Control and Prevention. (2009b, August). HIV/AIDS in the United States. Retrieved October 8, 2009, from http://www.cdc.gov/ hiv/resources/factsheets/us.htm

Conner, M., Sandberg, T., & Norman, P. (2010). Using action planning to promote exercise behavior. Annals of Behavioral Medicine , 40, 65–76.

Darby, P. E. Garfi nkel, D. M. Garner, & D. V. Coscina (Eds.), Anorexia nervosa: Recent developments in research . New York: Liss.

Doll, R, Peto, R, Wheatley, K, Gray, R and Sutherland, I, (1994). Mortality in relation to smoking: 40 years' observations on male British doctors. British Medical Journal, 309, pp. 901–911.

Flanagan, C. A. (2003). Developmental roots of political engagement. PS: Political Science and Politics, 36, 257–261.

Friedman, G D, Dales, L G and Ury, H K, (1979). Mortality in middle-aged smokers and nonsmokers. New England Journal of Medicine, 300, pp. 213–217.

Garfi nkel, P. E., & Garner, D. M. (1983). Th e multidetermined nature of anorexia nervosa. In
P. L.

Goldberg, J. H., Halpern-Felsher, B. L., & Millstein, S. G. (2002). Beyond invulnerability: The importance of benefi ts in adolescents' decision to drink alcohol. Health Psychology , 21, 477–484.

Guilamo-Ramos, V., Jaccard, J., Pena, J., & Goldberg, V. (2005). Acculturationrelated variables, sexual initiation, and subsequent sexual behavior among Puerto Rican, Mexican, and Cuban youth. Health Psychology , 24 , 88–95.

Hamilton, M. K., Gelwick, B. P., & Meade, C. J. (1984). Th e defi nition and prevalence of bulimia. In R. C. Hawkins, W. J. Fremouw, & P. F. Clement (Eds.), Th e binge-purge syndrome (pp. 3–26). New York: Springer.

Hanson, M. D., & Chen, E. (2007). Socioeconomic status and health behaviors in adolescence: A review of the literature. Journal of Behavioral Medicine , 30 , 263–285.

Hewig, J., Cooper, S., Trippe, R. H., Hecht, H., Straube, T., & Miltner, W. H. R. (2008). Drive for thinness and attention toward specifi c body parts in a nonclinical sample. Psychosomatic Medicine
, 70, 729–736.

Ihmels, M. A., Welk, G. J., Eisenmann, J. C., & Nusser, S. M. (2009). Development and preliminary validation of a Family Nutrition and Physical Activity (FNPA) screening tool. *International Journal of Behavioral Nutrition and Physical Activity*, *6*(1), 1-10.

Jaccard, J., Dodge, T., & Guilamo-Ramos, V. (2005). Metacognition, risk behavior, and risk outcomes: Th e role of perceived intelligence and perceived knowledge. Health Psychology , 24, 161–170.

Johnson, R. J., McCaul, K. D., & Klein, W. M. P. (2002). Risk involvement and risk perception among adolescents and young adults. Journal of Behavioral Medicine , 25, 67–82.

Liberman, A., & Chaiken, S. (1992). Defensive processing of personally relevant health messages. Personality and Social Psychology Bulletin , 18, 669–679.

Marmi &

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315

Margiyati.(2013).Pengantar Psikologi kebidanan.Yogyakarta : Pustaka Pelajar (anggota IKAPI)

Miklikowska, M., & Hurme, H. (2011). Democracy begins at home: Democratic parenting and adolescents' support for democratic values. *European Journal of Developmental Psychology*, *8*(5), 541-557.

Morrongiello, B. A., Corbett, M., & Bel issimo, A. (2008). "Do as I say, not as I do": Family influences on children's safety and risk behaviors. Health Psychology , 27 , 498–503.

Nusantara. (2019). *10 Negara dengan Jumlah Perokok Terbesar di Dunia.* Di ambil tanggal 9 Oktober 2010 *John Santrock - Life-Span Development-McGraw-Hill Education (2010).*

Petranto, Ira. 2005. Pola Asuh Anak.

Roberts, M. E., Gibbons, F. X., Gerrard, M., & Alert, M. D. (2011). Optimism and adolescent perception of skin cancer risk. Health Psychology , 30, 810–813.

Royal College of Physicians 1983 Health or Smoking: Follow- Up Report. Pitman, London. Santrock, John W. Life-span development / John Santrock. — 13th ed.p. cm. 2010.

Sari, M., & Rahmi, N. (2017). Faktor-Faktor yang Mempengaruhi Pola Asuh Orang Tua pada Anak Balita di Desa Batoh Kecamatan Lueng Bata Kota Banda Aceh. *Journal of Healthcare Technology and Medicine*, *3*(1), 94-107.

Schroeder-Yu, G. (2008). Documentation: Ideas and applications from the Reggio Emilia approach. *Teaching artist journal*, *6*(2), 126-134.

Stein, M. B., Belik, S. L., Jacobi, F., & Sareen, J. (2008). Impairment associated with sleep problems in the community: Relationship to physical and mental health comorbidit y. Psychosomatic Medicine , 70, 913–919.

Strax, P, (1984). Mass screening for control of breast cancer. Cancer, 53, pp. 665–670.

Sugiyono. (2017). *Metode Penelitian Pendidikan (Pendekatan Kuantitatif, Kualitatif, dan R&D).* Alfabeta.

Suwono. 1978. Definisi Mahasiswa menurut Kamus Besar Bahasa Indonesia.

Sulistiarini, S.- (2018) 'Hubungan Perilaku Hidup Sehat Dengan Status Kesehatan Pada Masyarakat Kelurahan Ujung', *Jurnal Promkes: The Indonesian Journal of Health Promotion and Health Education*, 6(1), pp. 12–22.

Taylor. (2015). *Health Psychology.* McGraw-Hill Education.

Wallston, K. A., Wallston, B. S., & DeVellis, R. (1978). Development of the Multidimensio nal Health Locus of Control (MHLC) Scale. Health Education Monographs , 6, 161–170.

Widiastuti, N., & Elshap, D. S. (2015). Pola asuh orang tua sebagai upaya menumbuhkan sikap tanggung jawab pada anak dalam menggunakan teknologi komunikasi. *Jurnal Ilmiah P2M STKIP Siliwangi*, *2*(2), 148-159.

Willenbring, M. L., Levine, A. S., & Morley, J. E. (1986). Stress induced eating and food preference in humans: A pilot study. International Journal of Eating Disorders, 5, 855–864

Solusi : Jurnal Konseling dan Pengembangan Pribadi
Situs web:https://e-journal.usd.ac.id/index.php/solution/index
Volume 5, Nomor 2, Desember 2023, pp 34-44
p-ISSN: 2684-7655 dan e-ISSN: 2716-1315