THE RELATIONSHIP BETWEEN MENTAL HEALTH LITERACY AND EMOTIONAL RESILIENCE IN ADOLESCENTS

[1*]Azizah Alpia Rahmatika, [2]Herliawati, [3]Zulian Effendi, [4]Dhia Diana Fitriani
[1,2,3]Program Studi Ilmu Keperawatan, Fakultas Kedokteran, Universitas Sriwijaya, Palembang
[4]Program Studi Profesi Ners, Fakultas Kedokteran, Universitas Sriwijaya, Palembang

*Email: azizahalfia21@gmail.com

Abstract

Aim: *Adolescence is a developmental phase characterized by complex physical, psychological, and social changes. Mental health issues among adolescents are a serious concern in Indonesia because they can affect adolescents' psychological and social well-being as well as their quality of life. This study aims to disclose the relationship between mental health literacy and emotional resilience in students at Public Junior High School 5 (SMP Negeri 5) of Indralaya Utara.*

Method: *This study used a quantitative cross-sectional design. The sample consisted of 166 respondents selected using proportionate stratified random sampling. The data were collected using the Mental Health Literacy Questionnaire-Short Version for Adolescents (MHLq-SVa) to measure mental health literacy and the Growth- Focused Resilience Scale (GFRS) to measure emotional resilience. The data analysis was performed using the Fisher's Exact Test.*

Result: *Majority of the respondents (115) had moderate mental health literacy (69.3%), with 162 respondents having good emotional resilience (97.6%). There was no relationship between mental health literacy and emotional resilience among the students of the Public Junior High School 5 (SMP Negeri 5) of Indralaya Utara with a p-value of 1.000 (>0.05).*

Conclusion: *No relationship between mental health literacy and emotional resilience among the students of the Public Junior High School 5 (SMP Negeri 5) of Indralaya Utara. that students' mental health literacy levels do not always correlate with their emotional resilience.*

Keywords: *Adolescents; Emotional Resilience; Mental Health Literacy*

HUBUNGAN LITERASI KESEHATAN MENTAL DENGAN RESILIENSI EMOSIONAL PADA REMAJA

Abstrak

Tujuan: Masa remaja merupakan fase perkembangan yang ditandai dengan perubahan fisik, psikologis dan sosial yang kompleks. Permasalahan kesehatan mental pada remaja menjadi isu serius di Indonesia karena dapat berdampak pada aspek psikologis, sosial serta kualitas hidup remaja. Penelitian ini bertujuan untuk mengetahui hubungan literasi kesehatan mental dengan resiliensi emosional pada siswa SMP Negeri 5 Indralaya Utara.

Metode: Penelitian ini menggunakan desain kuantitatif cross sectional. Sampel terdiri dari 166 responden yang diambil melalui teknik proportionate stratified random sampling. Data dikumpulkan menggunakan kuesioner

Mental Health Literacy Questionnaire-Short Version for Adolescents (MHLq-SVa) untuk mengukur literasi kesehatan mental dan Growth-Focused Resilience Scale (GFRS) untuk mengukur resiliensi emosional. Analisis data dilakukan menggunakan uji Fisher's Exact Test.

Hasil: Mayoritas responden memiliki literasi kesehatan mantal dengan kategori sedang (69,3%) sebanyak 115 responden dan resiliensi emosional dengan kategori baik (97,6%) sebanyak 162 responden. Tidak terdapat hubungan antara literasi kesehatan mental dengan resiliensi emosional pada siswa SMP Negeri 5 Indralaya Utara dengan nilai p-value = 1,000 (>0,05).

Simpulan: Tidak ada hubungan antara literasi kesehatan mental dengan resiliensi emosional pada siswa SMP Negeri 5 Indralaya Utara. Tingkat literasi kesehatan mental yang dimiliki siswa tidak selalu berbanding lurus dengan tingkat resiliensi emosionalnya.

Kata kunci: Remaja; Resiliensi Emosional; Literasi Kesehatan Mental

INTRODUCTION

Mental health literacy is an individual's understanding and beliefs regarding mental disorders that help individuals recognize, manage, and prevent mental health problems[1]. Mentally healthy individuals will be able to optimize their full potential[2]. An individual's potential can be reflected through various positive and beneficial activities that support the development of quality of life. Conversely, mental disorders can be reflected through the emergence of deviant behavior or behavior that is not in line with the norms and rules that apply in society[3].

Based on data from the World Health Organization (WHO) in 2019, there were 970 million people worldwide who experienced mental disorders, with the most common types being anxiety and depression. The WHO reported that in 2012, there were approximately 350 million people suffering from depression, ranging from mild to severe. This data shows that around 10-20% of individuals begin to experience mental health problems in the form of depression from adolescence, around the age of 14[4].

The results of a national survey conducted by the Indonesia-National Adolescent Mental Health Survey (I-NAMHS) in 2022 revealed that around 34.9% of adolescents in Indonesia experienced mental health problems, equivalent to 15.5 million people in the past year. In addition, 5.5% of adolescents (approximately 2.45 million people) were diagnosed with at least one type of mental disorder during the same period. Based on this number, only about 2.6% of adolescents in the last 12 months have ever used support and counseling services that can be used to address adolescent emotional and behavioral problems[5].

The low number of adolescents accessing counseling support services is based on their reluctance to seek professional help or counselors due to several obstacles, such as feeling more comfortable sharing problems with close friends, distrust of counselors' professional competence, and the perception that counselors are less capable of providing solutions and maintaining confidentiality[6]. In fact, based on McGorry & Mei's theory, access to and seeking of mental health services is very important as a preventive measure so that psychological problems do not develop further and become more severe.

Based on data from the South Sumatra Provincial Health Office, in 2024 there were 16,029 individuals classified as people with mental disorders (ODGJ) in the province of South Sumatra. The highest number of cases

was recorded in the city of Palembang with 3,111 cases, followed by Ogan Komering Ilir district with 1,450 cases, Banyuasin district with 1,390 cases, Musi Banyuasin district with 1,368 cases, Muara Enim district with 1,290 cases, and Lahat Regency with 1,131 cases[7]. Based on the results of the 2023 Indonesian Health Survey (SKI), there were 6,410 children aged 5–17 years who were in a crucial stage of emotional and social development in South Sumatra Province who had mental disabilities[8]. This condition occurs because adolescence is considered a period full of pressure, demands, and problems at this stage.

Pressure that arises during adolescence, if not balanced with the ability to manage emotions adaptively and good self-understanding, can trigger anxiety and depression[9]. The high prevalence of mental disorders indicates that effective strategies are needed to help adolescents cope with psychological problems. One effective strategy is to build resilience for psychological well-being and also develop adaptive coping strategies[10]. The use of adaptive coping strategies can help individuals control stress, reduce negative emotions, and think more rationally when facing problems. Conversely, when the coping strategies used are ineffective, individuals will be more prone to stress, difficulty adapting, and a decline in their ability to cope with pressure[11]. Based on this, individuals need resilience as a protective factor against the risk of mental health disorders[12].

Resilience is an individual's psychological ability to persevere, recover, and adapt in the face of difficult situations[13]. Resilient individuals can easily return to their pre-traumatic state and demonstrate endurance in the face of various unpleasant experiences in life, as well as the ability to adapt to extreme stress and suffering[14]. Resilience refers to a person's ability to cope with challenges and adapt to change[15].

Resilience can be formed through individual factors such as personality, education level and social support, family factors, and community environment[16]. Emotional resilience plays a role in improving quality of life because it can strengthen an individual's capacity to manage stress, adapt to difficult conditions, and persevere in the face of pressure and various challenges[17]. Resilience factors are in line with the characteristics and complexity of adolescent development stages. During this period, individuals begin to face various emotional, social, and psychological demands that require good adaptation and self-management skills[18].

Adolescence is an important period for improving mental health[19]. Adolescents with good mental health are valuable assets and an important investment in the development of a country's human resources[20]. Junior high school students, as part of the adolescent age group, are a major concern, given that they are in the early stages of identity formation and often lack the confidence or courage to seek professional help when facing psychological problems[21].

Confidence and courage in seeking help contribute significantly to students' readiness to obtain professional mental health services when they need them[22]. Students with a good understanding of mental health tend to be better able to manage stress, develop adaptive coping mechanisms, and maintain emotional well-being in the face of academic and social pressures[23].

Based on the existing conditions, the researchers conducted a preliminary study on April 10, 2025, through interviews using 21 questions based on Jorm et al.'s theory of mental health literacy (1997) and the emotional resilience theory of Reivich & Shatte (2002) to 20 students in three junior high schools with the largest number of students in the North Indralaya area. The results of the preliminary

study showed that students did not yet have an adequate understanding of mental health.

The phenomenon of a lack of understanding of mental health and knowledge of early prevention of mental disorders is most commonly found at SMP Negeri 5 Indralaya Utara. Interviews with guidance counselors revealed that many students tend to withdraw when experiencing stress. This condition was the basis for selecting SMP Negeri 5 Indralaya Utara as the research location because it was considered most relevant to the focus of the study on mental health literacy and emotional resilience. Preliminary study results showed that 13 out of 20 students were familiar with the term mental health and 7 of them were able to explain and interpret it. Furthermore, 14 out of 20 students knew that stress, anxiety, and depression are part of mental health problems, and 17 out of 20 students stated that learning about mental health is important. However, 15 out of 20 students did not know where to seek professional help related to mental health, and most of the information they knew came from outside school, such as social media. Regarding emotional resilience, all students interviewed had experienced pressure such as arguments with friends, family, academic problems, or other issues, and 11 out of 20 students tended to ignore their emotional feelings, with 9 of them letting the problem pass without seeking a solution.

Preliminary study results indicate that some students still have a limited understanding of mental health and are not yet able to manage emotional stress effectively. Insufficient of understanding regarding mental health can affect an individual's ability to recognize, manage, and cope with various psychological issues they face. This research is important because mental health literacy and emotional resilience are factors that play a role in maintaining adolescents' mental health. An understanding of the relationship between these two variables is necessary as a basis for developing appropriate interventions to improve adolescents' mental health.

Based on the findings above, it is important to assess students' levels of mental health literacy and emotional resilience, as well as to examine the relationship between mental health literacy and emotional resilience.

METHOD

This study used a quantitative method with descriptive correlational study and a cross sectional approach. The study population consisted of 282 students at SMP Negeri 5 Indralaya Utara and the sample was taken using proportionate stratified random sampling with a sample size of 166 students calculated using the Slovin formula.

Data were collected using questionnaires that had been tested for validity and reliability. Mental health literacy was measured using the Mental Health Literacy Questionnaire–Short Version for Adolescents (MHLq-SVa), which consists of 16 items rated on a 5 point Likert scale. The instrument's validity was assessed using Confirmatory Factor Analysis (CFA), which demonstrated that the four-dimensional model showed a good fit to the data (CFI = 0.95, RMSEA = 0.051). Reliability testing indicated a total Cronbach's Alpha coefficient of 0.82 and a McDonald's Omega coefficient of 0.78.Meanwhile, emotional resilience was measured using the Growth-Focused Resilience Scale (GFRS), which consists of 16 items rated on a 5-point Likert scale. The validity of the instrument was evaluated through Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA). The two-factor model was subsequently confirmed through CFA and demonstrated a good model fit (CFI = 0.96; RMSEA = 0.03). Reliability testing showed Cronbach's Alpha coefficients of 0.87 for the Developmental Persistency dimension and 0.86 for the Positive dimension. Data were analyzed using Fisher's Exact.

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Table 1
Distribution of Respondent Characteristics

Variable	Category	Frequency (n)	Percentage
Age	11	4	2,4
	12	52	31,3
	13	63	38,0
	14	45	27,1
	15	2	1,2
Gender	Male	80	48,2
	Female	86	51,8
Grade	7.1	24	14,5
	7.2	23	13,9
	7.3	19	11,4
	8.1	9	5,4
	8.2	20	12,0
	8.3	19	11,4
	9.1	20	12,0
	9.2	16	9,6
	9.3	16	9,9

The results of the analysis in Table 1 show that 38% of respondents were 13 years old, the majority were female, numbering 86 people (51.8%), and grade 7.1 showed the highest number, namely 24 people (14.5%).

Table 2
Distribution of Respondents Based on Mental Health Literacy

Mental Health Literacy	Distribution	
	Frequency (n)	Precentage (%)
High	27	16,3
Medium	115	69,3
Low	24	14,5
Total	166	100

Table 2 illustrates the respondents' mental health literacy levels. The results show that most respondents were in the moderate mental health literacy category, with 115 respondents (69.3%), followed by 27 respondents in the high category (16.3%), and the smallest number were in the low category, with 24 respondents (14.5%).

Table 3
Distribution of Respondents Based on Emotional Resilience

Emotional Resilience	Distribution	
	Frequency (n)	Precentage (%)
Good	162	97,6
Bad	4	2,4
Total	166	100

Table 3 shows that the majority of respondents' emotional resilience levels were in the good category, with 162 people (97.6%), and poor resilience in 4 people (2.4%).

Table 4
The Relationship Between Mental Health Literacy And Emotional Resilience

Mental Health Literacy	Emotional Resilience				Total	
	Bad		Good			
	n	%	n	%	n	%
Hight	0	0,0	27	16,3	27	16,3
Medium+Low	4	2,4	135	81,3	139	83,7
Total	4	2,4	162	97,6	166	100

Table 4 shows that in the high mental health literacy category, there were 27 respondents (16.3%) who all had good emotional resilience. In the moderate+low mental health literacy category, 135 respondents (81.3%) had good emotional resilience, while 4 respondents (2.4%) had poor emotional resilience. Based on the results of Fisher's Exact Test, the p-value = 1.000 (>0.05), so statistically there is no relationship between mental health literacy and emotional resilience among students at SMP Negeri 5 Indralaya Utara

DISCUSSION

The results showed that 115 people (69,3%) were in the moderate mental health literacy category. This result is in line with previous research[24] which showed that in terms of seeking information, understanding information, and assessing mental health information, respondents were in the adequate category. Individuals with a high level of health literacy are usually better able to access information quickly and easily. This is supported by Rosenstock's theory, which states that ease of access to information plays an important role in shaping an individual's behavior. If information is easily accessible, an individual's knowledge will also increase, and this knowledge will be used when making decisions to maintain their health[25].

The results of this study indicate that the majority of respondents, namely 162 people (97.7%), have good emotional resilience. Meanwhile, based on the results, there were 4 respondents (2.4%) who were in the poor category. These findings suggest that most

students have a good capacity to cope with, manage, and adapt to various pressures and challenges in everyday life. Nevertheless, a small number of students remain vulnerable when facing stress, which may increase their risk of developing psychological difficulties in the absence of adequate support. Furthermore, social support and resilience are important factors that contribute to an individual's mental well-being[15].

In this study, the age characteristics of the respondents were in the 12-14 age group, which is early and middle adolescence. As they get older, the tendency to rely on informal sources may decrease and be replaced by seeking help from professional sources. The researchers argue that age is one of the factors that influence an individual's mental health literacy and emotional resilience. This condition shows that age or developmental stage plays an important role in determining how individuals respond to mental health problems[26].

Based on the results of Fisher's Exact Test, a p-value of 1.000 (>0.05) was obtained, indicating that there was no significant relationship between mental health literacy and emotional resilience among students of SMP Negeri 5 Indralaya Utara. These findings suggest that students' level of mental health literacy may not be directly associated with their ability to cope with and adapt to emotional pressures. Based on the distribution of the data, most respondents had a good level of emotional resilience. This condition suggests that students' emotional resilience tends to be at a relatively similar level, so the relationship between the two variables was not significant in this study.

Furthermore, emotional resilience is a complex psychological construct that can be influenced by many factors besides literacy, such as social support, personal experiences, and emotional regulation skills. Individuals require various motivating factors to develop resilience, as resilience does not simply develop on its own in every individual. One factor that supports resilience is optimism or an individual's self-confidence in their own abilities[27].

This research is supported by Albert Bandura's[28] social cognitive theory, which states that individual behavior is determined by the interaction between personal factors, behavior, and the environment. This means that knowledge or literacy alone does not guarantee behavioral change or the ability to cope with stress, as self-efficacy and environmental support are needed to transform knowledge into adaptive actions.

The researchers argue that the absence of a significant association between mental health literacy and emotional resilience does not necessarily indicate that a relationship between the two variables does not exist at all. Rather, this finding may have been influenced by the limited diversity of the respondent data. Furthermore, knowledge about mental health does not directly translate into an individual's ability to cope with emotional pressures. Mental health literacy generally focuses on cognitive aspects, such as understanding concepts, symptoms, and ways to maintain mental health. In contrast, emotional resilience is more heavily influenced by psychological and social factors, such as emotion regulation skills, coping strategies, family support, the role of peers, and personal experiences that shape resilience. The nursing implications of these findings suggest that nurses should not only serve as educators by providing mental health information, but also act as facilitators in strengthening individuals' psychological adaptability, coping skills, and social support systems, thereby enabling them to effectively manage stress and emotional challenges.

CONCLUSION

Based on the results of a study conducted at SMP Negeri 5 Indralaya Utara, it can be concluded that emotional resilience in adolescents is determined not only by level of mental health literacy but also by various psychological and social factors, therefore efforts to improve adolescent mental health must be comprehensive, focusing not only on improving mental health literacy but also on strengthening adaptive skills and social support.

Recommendations for future research include examining other factors that may influence emotional resilience, such as the role of peers, parenting styles, or school environment, and involving a larger and more diverse sample to gain a more comprehensive understanding. Additionally, qualitative research could be conducted to explore students' experiences and perceptions regarding their mental health and emotional resilience in greater depth.

REFERENCE

1. Fatahya, Abidin FA. LiterasiKesehatan MentalDewasa Awal Pengguna Media Sosial. J Public Heal Res Dev [Internet]. 2022;6(2):165–75. Available from: http://journal.unnes.ac.id/sju/index.php/higeia
2. Monika I, Alfiyanah L. Peran Konselor dalam Mewujudkan Kesehatan Mental Menuju Indonesia Emas 2045. 2024;553–70.
3. Suharweny M. Hubungan Pertemanan (FRIENDSHIP) dan Kesehatan Mental Pada Generasi Milenial yang Berstatus Mahasiswa. 2022.
4. Aisyah S, Rifani R, Nurdin MN. Kepatuhan terhadap Protokol Kesehatan dalam Pencegahan Covid-19 di Kota Makassar Ditinjau dari Healt Belief Model dari Rosenstock. PESHUM J Pendidikan, Sos dan Hum. 2024;3(5):743–51. doi:10.56799/peshum.v3i5.5198
5. Humas BH dan. Kementrian Pemberdayaan perempuan dan Perlindungan Anak [Internet]. 2024. Kolaborasi KemenPPPA dan UNICEF: Sinergikan dukungan kesehatan mental dan psikososial di kementerian dan lembaga. Available from: https://www.kemenpppa.go.id/siaran-pers/kolaborasi-kemenpppa-dan-unicef-sinergikan-dukungan-kesehatan-mental-dan-psikososial-di-kementerian-dan-lembaga
6. Mawaddah N, Prastya A. Upaya Peningkatan Kesehatan Mental Remaja Melalui Stimulasi Perkembangan Psikososial Pada Remaja. Dedik SAINTEK J Pengabdi Masy. 2023;2(2):115–25. doi:10.58545/djpm.v2i2.180
7. Kurniawan A. Sripoku.com [Internet]. 2024. Dinas Kesehatan Sebut Ada 16.029 Kasus ODGJ di Sumsel, Kota Palembang Terbanyak Disusul OKI Artikel ini telah tayang di Sripoku.com dengan judul Dinas Kesehatan Sebut Ada 16.029 Kasus ODGJ di Sumsel, Kota Palembang Terbanyak Disusul OKI, https://palembang. Available from: https://palembang.tribunnews.com/2024/01/10/dinas-kesehatan-sebut-ada-16029-kasus-odgj-di-sumsel-kota-palembang-terbanyak-disusul-oki
8. Kementerian Kesehatan Republik Indonesia. Survei Kesehatan Indonesia (SKI) Tahun 2023. Badan Kebijak Pembang Kesehatan. 2023.
9. Young KS, Sandman CF, Craske MG. Positive and negative emotion regulation in adolescence: links to anxiety and depression. Brain Sci. 2019;9(4). doi:10.3390/brainsci9040076
10. Mahendika D, Sijabat SG. Pengaruh Dukungan Sosial, Strategi Coping, Resiliensi, dan Harga Diri Terhadap Kesejahteraan Psikologis Siswa SMA di

Kota Sukabumi. J Psikol dan Konseling West Sci. 2023;1(02):76–89. doi:10.58812/jpkws.v1i02.261
11. Wahyudin D. Pengaruh Dukungan Sosial, Religiusitas dan Strategi Koping Terhadap Ketahanan Keluarga di Desa Sagaranten Wilayah Kerja Puskesmas Sagaranten Kabupaten Sukabumi. Risenologi. 2022;7(1a):70–6. doi:10.47028/j.risenologi.2022.71a.335
12. Surpi NK, Istriyanti NLA. Dampak Literasi Bhagavad-Gītā Terhadap Resiliensi Dan Strategi Koping Di Tengah Pandemi Covid-19 Di Bali. J Psychol Sci Prof. 2022;6(3):176. doi:10.24198/jpsp.v6i3.36250
13. Yani A. Pengaruh Literasi Kesehatan Melalui E-Health Dpa (Drugs Prevention Among Adolescents) Terhadap Resiliensi Remaja Awal Untuk Mencegah Penggunaan Napza Di Kota Palu [Internet]. 2022;1–84. Available from: http://repository.unhas.ac.id/id/eprint/24913/%0Ahttp://repository.unhas.ac.id/id/eprint/24913/2/K013191010_disertasi_01-09-2022 bab 1-2.pdf
14. Gustriani RR. Proses Resiliensi Anak Korban Pedophilia Homoseksual di Banyumas. 2024.
15. Septiana NZ, Istiqomah N, Rahayu DS. Literasi Kesehatan Mental: Dampak Perilaku Dan Resiliensi Sosial Pada Remaja [Internet]. Vol. 11. 2024;11(1):81–91. Available from: http://ojs.unpkediri.ac.id/index.php/efektor
16. Supini P, Gandakusumah ARP, Asyifa N, Auliya ZN, Ismail DR. Faktor-Faktor yang Mempengaruhi Kesehatan Mental pada Remaja. JERUMI J Educ Relig Humanit Multidiciplinary. 2024;2(1):166–72. doi:10.57235/jerumi.v2i1.1760
17. Putri AE, Laeli S. Membangun Resiliensi Sepanjang Rentang Kehidupan : Strategi Menghadapi Tantangan dan Tekanan. Karimah Tauhid. 2024;3:6846–54.
18. Hidayat M, Hesty H, Indrawati II, Suri M. Identifikasi Faktor-Faktor Penyebab Gangguan Jiwa pada Remaja di Rumah Sakit Jiwa. J Akad Baiturrahim Jambi. 2024;13(2):338–48. doi:10.36565/jab.v13i2.844
19. Asih ZK, Arief S, Fitri S. Spiritualitas Islam sebagai Faktor Protektif Kesehatan Mental: Tinjauan Interdisipliner dalam Perspektif Pendidikan Agama dan Psikologi Klinis. Kartika J Stud Keislam. 2025;895–908. doi:10.59240/kjsk.v5i2.337
20. Keenan L. World Health Organization [Internet]. 2024. Securing adolescent health and well-being today is vital for the health of future generations. Available from: https://www.who.int/news/item/23-09-2024-securing-adolescent-health-and-well-being-today-is-vital-for-the-health-of-future-generations-who
21. Bachtiar N, Hasan MI, Karmandika AH. Faktor Protektif Kesehatan Mental pada Remaja. Vol. 9. 2025;9(2):3–4.
22. Rasido I, Hasan, Nurwahyuni, Silalahi MF, Riyadi WNE. Pengaruh psikoedukasi terhadap literasi kesehatan mental guru. GANESHA J Pengabdi Masy. 2024;4(1):61–70.
23. Ruth S., Raja GG. Kesehatan Mental Anak-Anak Mengatasi Tantangan Di Masa Pertumbuhan. J Psikol. 2024;1(4):1–13.
24. Mangindaan KA, Rahman A, Adam H. Gambaran Literasi Kesehatan Mental Pada Peserta Didik SMA Negeri 9 Manado. J Bios Logos. 2024;14(1):9–16. doi:10.35799/jbl.v14i1.53720
25. Aisyah S, Rifani R, Nurdin MN. Kepatuhan terhadap Protokol Kesehatan dalam Pencegahan Covid-19 di Kota Makassar ditinjau dari Healt Belief Model dari Rosenstock. PESHUM J Pendidikan, Sos dan Hum. 2024. doi:10.56799/peshum.v3i5.5198
26. Gani A, Kusumawaty I, Yunike Y. Literasi Kesehatan Mental DiInstitusi Kesehatan. J Telenursing. 2023;5(I):1–19.

doi:https://doi.org/10.31539/joting.v5i1.5831

27. Aurelia Andriyaniputri, Jamain RR, Nina Permatasari. Kontribusi Optimisme Dan Dukungan Sosial Terhadap. Nusant Res [Internet]. 2022;9(3):264–81. Available from: http://ojs.unpkediri.ac.id/index.php/efektor%0AKONTRIBUSI
28. Sulastri NM. Identifikasi Tipe Kepribadian Ditinjau Dari Teori Alrbert Bandura. J Bimbing dan Konseling. 2024;9(4).