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## AN OVERVIEW OF FAMILY FUNCTIONING IN PARENTS WITH ADOLESCENT CHILDREN IN WEST JAVA

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#### **ABSTRACT**

Adolescent health risk behaviors often occur due to the lack of control and supervision of family functions in Indonesia. Family plays an important role in adolescent health behavior. Objective: The purpose of this study is to see how the description of family functions in families with adolescent children. Method: This study is a quantitative study. The samples in this study were families (parents) who had adolescent children. The samples selected were families with adolescent children whose data had been recorded in the 2019 program performance and accountability survey (SKAP) system. With a total of 1999 respondents from West Java Province selected using stratified multistage sampling. The SKAP questionnaire type used a family function questionnaire with a Croanbach alpha value of 0.81. Data obtained from SKAP 2019 were analyzed descriptively quantitatively. Descriptive data will be presented in tabular form. Results: The results of the analysis showed that the family function was quite good as much as 70.2%. Conclusions: Family functions in families with adolescent children in West Java Province are mostly good enough. With the application of 8 optimal family functions in the family, it is expected to prevent health risk behavior in adolescents.

Keywords: adolescent; family function; parent

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#### INTRODUCTION

Adolescence is characterized by increased critical thinking. Usually, teenagers ask questions about why things happen, and often challenge the opinions of parents or family. The development of children takes place rapidly, accompanied by a strong urge for self-expansion and adventure because they feel capable and agile. The influence of peer groups and the external environment is great, while control from parents and family is reduced (Gunarsa and D, 1991). Today, the condition of adolescents is quite alarming. Globally, there are nearly 1.2 trillion smokers in the world and 50% of them are teenagers (Al-Sadat et al., 2010). A total of 4,245 surveys conducted on adolescents in America, found that 34.1% of adolescents have consumed alcohol, smoked and used marijuana (Moss et al., 2014). A Study from (Van Ryzin & Dishion, 2014), of 998 adolescents studied in metropolitan America showed that late adolescents (19 years old) are already addicted to using cigarettes, alcohol and marijuana. Likewise, in the European Region, a study conducted by (Kuttler, Schwendemann, Reis, & Bitzer, 2016) on adolescent deviance, 23.5% of marijuana users and 13.2% of violent behavior were found. Not much different in Southeast Asia, in addition to the use of alcohol, drugs, and marijuana use in Thailand, the unsafe sexual behavior of adolescents shows a high rate (Sirirassamee and Sirirassamee, 2015).

In this problem, the family also suffers losses. Such as the use of alcohol and marijuana in adolescents will also lead to disruption of family violence, disruption of family structure,

changes in monitoring and family values (Wright, Fagan, & Pinchevsky, 2013)(Ewing et al., 2015). In addition, unintended pregnancies in teenagers also lead to parental depression, school withdrawal and family economic problems (Huang et al., 2014). Study conduct by (Ary et al., 1999) of 552 adolescents in America, namely weak parental monitoring and lack of communication with adolescents, consequently this is a strong factor in the occurrence of deviant behavior in adolescents. In addition, research conducted by (Hussey, Chang, & Kotch, 2006), mentioned that wrong parenting in childhood (child maltreatment), neglecting supervision of children, not paying attention to children's physical well-being, physical attacks on children and sexual violence during childhood also have the potential to cause health risk behaviors in adolescents. Then in West Java Province itself there is still a low number of families who know the function of the family. The role of the family in building the nation's character has not been encouraging, this can be seen from the number of families who have an understanding and awareness of the 8 family functions that have only reached 38 percent. (BKKBN, 2020).

Indonesia in this case has certainly implemented various excellent programs to overcome problems in adolescents, one of which is the Excellent Program issued by BKKBN, namely GenRe. The GenRe program is a program developed and implemented to prepare family life for adolescents in order to achieve strong adolescents so that in the future they can realize strong families for the realization of small, happy and prosperous families. The target of implementing the GenRe program includes two things, including through an approach to teenagers directly (millennial generation) through PIK R activities and an approach to families who have teenage children through the Youth Family Development (BKR) forum. The role of the family is very important for the future of the family. A good family role will produce optimal family function. Good family function will make teenagers grow and develop optimally so that they are able to maximize their teenage years productively and usefully for their future adulthood. Optimal family function will be able to prevent various problems of teenagers such as suicide, drugs, smoking and other deviant behavior. For that, every family needs to pay attention to every family function in their family so that they are able to carry out family functions well, especially for families with teenagers (Mastrotheodoros et al., 2020).

The realization of this program must be in line with the support of the community and family. Optimal implementation of family functions will help accelerate and optimize this program in reducing health risk behaviors in adolescents. Optimal implementation of family functions and family support will help reduce adolescent depression, improve health status, suicidal behavior and drug use (Ryan et al., 2010). Another study mentioned that intensive family function approach will be able to reduce smoking in adolescents, as well as emphasizing school supervision and improving family functions also have an impact on reducing adolescent alcohol use (Das et al., 2016). Study conduct by (Liddle et al., 2001), Family-based interventions can significantly reduce adolescent substance use behavior and families can help adolescents' adaptive development optimally. Seeing this condition, of course, adolescent health risk behavior cannot be separated from the role and function of the family. It is important to know how the family functions in the community, especially in West Java, in supervising and helping the realization of an optimal generation of adolescents who are far from health risk behavior. Therefore, the purpose of this study is to see how the description of family functions in families with adolescent children in West Java Province.

#### **METHOD**

The research design used was quantitative research using a cross sectional study approach. This study looks at the description of family functions in families with adolescent children. The samples in this study were families (parents) who had adolescent children. The samples selected were families with adolescent children whose data had been recorded in the 2019

program performance and accountability survey (SKAP) system. With a total sample listing of households with adolescent children of 1999 samples selected using stratified multistage sampling. The type of SKAP questionnaire used was a family function questionnaire with a Cronbach alpha value of 0.81. This study has been submitted and approved by the ethics committee of the National Population and Family Planning Agency (BKKBN) with number 454/LB.02/H4/2019. Data obtained from SKAP 2019 were analyzed descriptively quantitatively. Descriptive data will be presented in tabular form.

# **RESULT**The following are the results of the distribution of Adolescents Demographic data in West Java

Table 1.

Demographic data of adolescents in West Java (N=1999)

Variable	f	%
Age		
10-13 Years	738	36,9
14-16 Years	490	24,7
17-19 Years	421	21,2
20-24 Years	341	17,2
Gender		
Male	1031	51,6
Female	968	48,4
Age at first menstruation (female)		
Not Yet/Did not know	243	24,3
< 12 Year	129	13,5
12-16 Year	591	61,7
> 16 Year	5	0,05
Age of first wet dream (male)		
Not yet/did not know	358	32,9
< 10 Year	8	0,08
10-15 Year	557	55,5
> 15 Year	108	10,7
Relationship with Head of Houshold		
Biological children	1900	95
Adopted Children	22	1,1
Stepchildren	77	3,9

The data in table 1 shows that the age of adolescents is mostly in the age range of 10-13 (early adolescence) 36.9%, the gender is mostly male 51.6%, the age of first menstruation in female adolescents in the range of 12-16 years is 61.7%, the age of first wet dream in male adolescents in the range of 10-15 years is 55.5%, then 95% of respondents with the status of biological children. Next Data results of the category of implementation of the practice of 8 family functions in families with adolescent children in West Java Province

Table 2.

Category Distribution of Implementation of 8 Family Functions in Families with Adolescent Children in West Java (N=1999)

Variabel	f	%
Function of Reiligion		
Good	212	10,6
Sufficient	1766	88,3
deficient	21	1,1
Function of Social Culture		
Good	170	8,5
Sufficient	1730	86,5
deficient	99	5
Function of Love		
Good	356	17,8

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Variabel	f	%
Sufficient	1600	80
deficient	43	2,2
Function of protect		
Good	266	13,3
Sufficient	1641	82,1
deficient	92	4,6
Function of Health Reproduction		
Good	183	9,2
Sufficient	1694	84,7
deficient	122	6,1
Function of Education Social		
Good	213	10,7
Sufficient	1764	88,2
deficient	22	1,1
Function of economic		
Good	271	13,6
Sufficient	1536	76,8
Deficient	192	9,6
Function of environment		
Good	559	28
Sufficient	1417	70,9
deficient	23	1,2

Based on table 3 above, it shows that almost all categories of family functions are at a sufficient good level.

Table 3. Category Distribution of 8 Family Functions (N=1999)

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Variabel	f	%
Implementation 8 Family functions		<u>.</u>
Good	316	15,8
Sufficient	1404	70,2
deficient	279	14

Based on the data above, the implementation of family functions is quite good as much as 70.2%.

#### **DISCUSSION**

In this study it was also found that 88.5% of families did not know the 8 family functions, 83.8% were not patient and sincere, 69.4% did not consult in making decisions, 57.4% did not trust each other, 53.8% did not protect family health, 52.1% did not meet family needs, Research by (Wang, Stanton, Deveaux, Li, & Lunn, 2015) shows in his research that the role of parents is quite large in preventing risky sexual behavior in adolescents, namely by having sufficient supervision of teenagers. This study also explains that the role of peers dominates the incidence of risky sexual behavior in adolescents compared to the lack of parental supervision of children. Parenting patterns towards adolescents also determine the output of adolescent behavior, warmth and emotional closeness between parents and children or violence. This study shows from 1,482 adolescents who were followed up for 9 years (age range = 12.74), adolescents with inappropriate parenting, namely parental violence behavior can lead to various health risk behaviors carried out by adolescents including juvenile delinquency, decreased academic achievement, then followed by early sexual behavior (Hentges and Wang, 2018).

Today, there are far fewer parents who act authoritarian towards their children. However, the opposite tendency has emerged: overindulgence. Many parents dare not say no to their children to avoid being labeled as parents who don't trust their children, to avoid being considered old-fashioned, conservative and outdated. There are so many parents who think they love their children. It's a shame that their own selfishness gets in the way of their ability

to love their children perfectly. From birth, one of the first basic needs of human beings is the need for affection and in the later developmental period of adolescence, affection, security, and the feeling of being loved are needed by adolescents. With efforts and treatments that provide attention, sincere love, and a willing attitude to dialogue, adolescents will gain a sense of security, and have the courage to be open in expressing their opinions (Izzo et al., 2022)

Because in essence the family has 8 functions that must be played in shaping the personality of adolescents, namely religious functions that can be realized in the form of faith, devotion and their application in community life, socio-cultural functions that can be reflected in mutual respect, obedience to the rules and norms that apply to society, love functions reflected in a harmonious and harmonious life, The function of protecting which fosters a sense of security and warmth that has no limit of comparison both physically and mentally, the reproductive function which is a mechanism for offspring to continue offspring that are planned for welfare, the social function of education that can improve the quality of family education, the economic function can be realized in the form of livelihoods and living well and the function of fostering an environment that is realized by families who are able to place themselves in harmony in harmony and balance.

Related to the function and role of the family, that the family as the smallest social unit in society, has roles including, among others, a protector for the individuals of its members, where peace and order are obtained in the family, is a socioeconomic unit that materially meets the needs of its members, fosters the basics for the rules of life association, and is a place for the initial socialization process, namely a process where humans learn and comply with the rules and values that apply in society (Shek et al., 2022). Furthermore, every family develops the principles that apply in social organizations in general, namely the regulation of social relations between its members (social alignment), binding common ideals or goals (social media), social provisions agreed upon as guidelines in social relations (social standards), and enforcement of the order of living together (social control). The family as a vehicle to achieve the goal of orderly interaction between parents, parents and children, and between children (Hu et al., 2022).

#### **CONCLUSION**

Family functions in families with adolescent children in West Java Province are mostly good enough. With the optimal implementation of 8 family functions in the family, it is expected to prevent health risk behavior in adolescents.

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