

**The Correlation Between Screen Time, Sleep Quality, and Physical Fitness
Among Grade VII Students**Niko Bagaskara^{1*}, Hijrah Maulidiah Afifah²¹²Department of Physical Education, Health, and Recreation, Faculty of Sports Science,
Universitas Negeri Semarang, Semarang, Indonesia.**Keywords**Screen time; Sleep
quality; Physical
fitness**Abstract**

The increasing use of digital devices among adolescents has raised concerns about its impact on sleep quality and physical fitness. This study aims to examine the relationship between screen time, sleep quality, and physical fitness levels among seventh-grade students at SMP Negeri 1 Semarang. This research employed a quantitative approach with a correlational design. The population consisted of 287 students, and 74 students were selected using simple random sampling based on the Slovin formula with a 10% margin of error. Data were collected through questionnaires to measure screen time and sleep quality, as well as a physical fitness test to assess students' fitness levels. Data were analyzed using Pearson Product Moment correlation at a significance level of 0.05. The results indicated a significant relationship between screen time and sleep quality ($r = 0.234$; $p = 0.045$) with a low correlation, and a significant negative relationship between screen time and physical fitness levels ($r = -0.354$; $p = 0.002$) with a moderate correlation. The coefficient of determination showed that screen time contributed 5.48% to sleep quality and 12.53% to physical fitness levels. These findings suggest that screen time plays a significant role in influencing students' sleep quality and physical fitness levels, highlighting the importance of effective screen time management among adolescents.

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INTRODUCTION

In recent years, the rapid progress of digital technology has substantially impacted adolescents' daily lives, particularly screen-based activities. The rising incidence of screen time among adolescents has raised concerns over its possible effects on health, especially regarding sleep quality and physical fitness. Recent research indicates a relationship between heightened screen exposure and diminished sleep duration and quality in adolescents (Hisler, Twenge, and Krizan 2020). Prolonged utilization of digital devices, especially before sleep, may disrupt the Circadian Rhythm, leading to postponed sleep initiation and reduced sleep efficacy. A review by Zhang et al. (2022) corroborates this, revealing that findings from Chinese school-aged children and adolescents align with those reported in Western countries, indicating that elevated screen time correlates with heightened risks of various health issues.

Over the past ten years, a lot of adults in Indonesia have been using cellphones. According to the Badan Pusat Statistik (BPS) data for 2023, 92.14% of people aged 15 to 24 have a smartphone. This shows that digital gadgets are becoming more and more common among the general population (BPS, 2023). Approximately 62.5% of respondents in Indonesia engage in social media for over two hours daily (Dianah, Sukaesih, and Sejati 2024). According to many studies, the average amount of time spent using gadgets among Indonesian students is between 4 and 6 hours per day (Syilvani, Sukaesih, and Ningrum 2024). However, one study found that screen time among SMP students reached 5,44 hours per day (Lovyana and Indahwati 2025). This situation shows that screen time is a problem for kids all over the country and that parents need to do a lot of research on it.

Screen time is the amount of time a person spends on digital devices such as laptops, tablets, cell phones, and TVs for fun, learning, or socializing (Pratiwi 2021). Research (Pandya and Lodha 2021) defines screen time as the amount of time spent engaging in different online activities on digital devices.

Studies show that spending too much time in front of a screen makes it harder to fall asleep, makes sleep less restful, and pushes back bedtime (Dianah et al. 2024; Priftis and Panagiotakos 2023; Tasya, Bustamam, and Lestari 2021). Excessive screen time also negatively impacts mental health (Maria et al. 2023). Among the factors contributing to teens' increased screen time are social media and online gaming (Bansal and Kranti 2022; Chandramoorthy, Rajendran, and Newtonraj 2021; Woran et al. 2020). Additionally, this impacts the quality of sleep, which can lead to a number of health issues (Care et al. 2022; Neophytou, Manwell, and Eikelboom 2021).

Everyone, including people, needs sleep to be alive. Sleep is necessary for keeping physiological and cognitive processes going, speeding up physical recovery, helping the nervous system mature, helping learning and memory formation, improving cognitive capacities, and strengthening the immune system (Rahmadiyah 2020). Studies by (Kristanto et al. 2023) indicate that sedentary behavior, characterized by insufficient physical exercise and heightened screen time, is a risk factor that can lead to sleep problems. Poor sleep can throw off the body's sleep-wake cycle, which can disrupt brain function and maybe even lead to a multitude of health problems (Hutagalung, Marni, and Erianti 2021). People who don't get enough sleep are more likely to feel tired, lose focus, and have symptoms of stress, worry, and even depression.

A general definition of physical fitness is the capacity to do everyday chores without getting too tired. Numerous factors, including genetics, gender, age, body composition, physical activity, and exercise, affect one's degree of fitness (Mahfud et al. 2020). Physical fitness is essential for all individuals, as it significantly impacts the quality of various activities. Therefore, it is essential to maintain and raise a student's level of physical fitness (Sobarna, Hambali, and Koswara 2020).

The following are the initial observation results obtained at SMP N 1 Semarang

Table 1. Observation Result

Result
The Nusantara Student Fitness Test (TKPN) has never been used to measure physical fitness.
Some students at SMP N 1 Semarang experience a lack of focus and attentiveness during the learning process, as well as fatigue during physical activity.
The frequency of smartphone usage among students at SMP N 1 Semarang remains unknown.
The quality of the students' sleep at SMP N 1 Semarang is currently unknown.
The level of physical fitness among the students at SMP N 1 Semarang is unknown.

Table 2. Earlier studies

Data
Research (Faudiansyah, Jalil, and Pribadi 2025) with the title "The Relationship between Sleep Quality and Physical Fitness of Students in 2025" published by the Pokes Journal reveals a substantial correlation between the physical fitness of class VIII students at State Junior High School 3 Bajo and their sleep quality.
Sleep quality and physical fitness are closely related, according to research (Gunarsa et al. n.d.) titled The Relationship Between Sleep Quality and Students' Physical Fitness in 2021 published by JPOK Journal of Sports Education and Health.
The Journal of Physical Education and Sport Science published a study by (Lovyana and Indahwati 2025) titled The Relationship Between Screen Time and Mental Health in Junior High School Students in 2025. The study's findings showed no significant correlation between screen time and mental health among SMP Negeri 23 Surabaya students, school and parental support for teaching students how to use gadgets, and student involvement in physical activities like sports and extracurricular activities.
Research (Syilvani et al. 2024) entitled Screen Time Duration with Sleep Disorders in Adolescents in 2024 published by the Journal of Professional Nursing with research results found a significant correlation between excessive screen time and sleep disorders in adolescents, especially insomnia.
The World of Education Journal published a research article (Sakinah and Indahwati 2025) titled "The Relationship between Screen Time and Motor Skills of Students of SMP Negeri 26 Surabaya in 2023." The research found that the more time students spend in front of a screen, the more their body strength tends to decrease.
Research (Hisler et al. 2020) with the title "Associations between screen time and short sleep duration among adolescents varies by media type: evidence from a cohort study." The research found Spending too much time on electronic devices has been linked to a variety of sleep problems, particularly when the gadgets are used for social media or internet browsing.
The study by (Zhang et al. 2022) , titled "Screen Time and Health Issues in Chinese School-Aged Children and Adolescents: A Systematic Review and Meta-Analysis," published in BMC Public Health, indicates that increased screen time is associated with a heightened risk of various health issues; however, these correlations appear weak and are affected by other confounding factors.

This study attempts to analyze the relationship between screen time, sleep quality, and physical fitness levels of students at SMP N 1 Semarang, based on the problem formulation that has been stated. Additionally, the study will look at the tendency of the relationship based on the results of statistical tests. This study specifically attempts to ascertain the relationship between screen time and physical fitness levels, the relationship between screen time and

sleep quality, and the relationship between screen time and both physical fitness levels and sleep quality at the same time. The following is the formulation of the research hypotheses: Whereas H_{a1} indicates that there is a relationship between screen time and students' sleep quality, H_{01} states that there is none. H_{02} : students' levels of physical fitness are unrelated to their screen time, and H_{a2} : students' levels of physical fitness are related to their screen time. H_{03} : screen time, sleep quality, and students' levels of physical fitness do not correlate with one another, while H_{a3} : screen time, sleep quality, and students' levels of physical fitness do correlate.

METHODS

This research employed a quantitative approach, systematically collecting measurable data and analyzing it using statistical methods. This approach emphasizes the measurement process to examine empirical phenomena and identify relationships between variables within a population, thus enabling them to test hypotheses and support theory development (Gani and Purbangkara 2023).

This research employed a quantitative approach with correlational methods. This method aimed to determine the relationship between screen time and sleep quality and physical fitness levels of students at SMP Negeri 1 Semarang. The research data, in the form of scores obtained from questionnaires and fitness tests, were then analyzed using statistical techniques.

Screen time was measured using a closed-ended questionnaire via Google Forms. A closed-ended questionnaire is structured in such a way that respondents only need to tick (✓) the available options. This instrument uses a multilevel scale with a modified four-choice Likert scale. According to (Hambali 2021), the screen time instrument demonstrated a validity of 0.782 and a reliability of 0.967.

Table 3. Alternative Questionnaire Answers

Statement	Alternatif Option			
	SA	A	DA	SDA
Positive	1	2	3	4
Negative	4	3	2	1

Table 4. Screen time instrument grid

Variable	Indicator	Item	
		Positive	Negative
Screen time	Frekuensi	2, 5, 6, 9, 10	1, 3, 4, 7, 8
	Duration	14	11,12, 13, 15
Total		15	

The Pittsburgh Sleep Quality Index (PSQI) questionnaire was used to measure the quality of sleep. The purpose of the PSQI is to evaluate the quality of sleep over the previous month and distinguish between people who have good and poor sleep quality. This tool is thought to be useful for assessing the patterns and quality of sleep.

PSQI assessment indicators:

Subjective sleep quality is assessed using question 6, with categories ranging from very good to very poor (score 0–3).

1. Sleep latency refers to questions 2 and 5a, each scored 0–3, then summed and converted to a final sleep latency score (0–3). (3) Sleep duration is assessed using question 4, which is classified into four categories based on sleep duration.
2. Sleep efficiency is calculated using questions 1, 3, and 4 using a specific formula, then categorized into four levels of efficiency.

3. Sleep disturbances are assessed using questions 5b–5j, which capture various factors that disrupt sleep; the total score is then grouped into four categories.
4. Sleep medication use was assessed using question 7, with four frequency levels.
5. Daytime activity dysfunction was assessed using questions 8 and 9, then summed and classified into a score of 0–3.

The global PSQI score (0–21) is the sum of the scores from the seven components; a score of >5 indicates poor sleep quality, while a score of ≤ 5 indicates good sleep quality. Respondents fill out the PSQI, which had 10 questions but has been cut down to 9, based on how they slept the month before. Time to sleep, time to fall asleep, time to wake up, effective sleep duration, frequency of sleep disturbances (9 options for disturbances and 1 extra option), sleep quality assessment, frequency of use of sleep medication, difficulty staying awake during activities, and difficulty concentrating are all included in this list. Based on the frequency or quality categories offered, respondents choose their responses.

The Indonesian adaptation of the PSQI has satisfactory internal validity (Cronbach's $\alpha = 0.8$) and exceptional concurrent validity ($r = 0.89$). The sensitivity and specificity are 1.0 and 0.81, respectively, with a cutoff value of 5 (Marta et al. 2020).

The Nusantara Student Fitness Test (TKPN) was the tool employed for the research. This tool was made by the Assistant Deputy for Sports and Education Management, Deputy for Sports Culture, Ministry of Youth and Sports of the Republic of Indonesia (2022). The Nusantara Student Fitness Test (TKPN) is a set of examinations that help teachers find out, measure, and analyze how fit their students are. According to (Holisoh, Budiman, and Stephani 2024) say that the Nusantara Student Fitness Test (TKPN) has a validity coefficient of 0.76.

The TKPN test series includes:

1. V Sit and Reach
This is a modified version of the Sit and Reach test used to assess the flexibility of the back and hamstring muscles. The measurement involves pushing both hands forward while sitting upright.
2. 60 Second Sit-Up
This exercise, which engages the abdominal muscles, is performed with the body lying on its back, knees bent, and then lifting the body upward. The measurement is performed by performing as many sit-ups as possible in 60 seconds.
3. 30 Second Squat Thrust
The squat thrust is a combination movement that involves changing body position from standing, squatting, to push-up, and then back to standing. The goal is to measure endurance, body control, balance, coordination, and agility.
4. Progressive Aerobic Cardiovascular Endurance Run (PACER)
The Progressive Aerobic Cardiovascular Endurance Run (PACER) test is a progressive aerobic cardiovascular endurance test that involves running back and forth over a distance of 20 meters with a pace that increases every minute according to a predetermined rhythm. This test is also known as a modification of the beep test or bleep test. The goal is to measure the maximum performance of the heart and lungs.

The population of this research consisted of 287 seventh grade students from SMP Negeri 1 Semarang. A sample size of 74 students was obtained by applying the Slovin formula to simple random sampling with a 10% error rate. Using the Slovin formula and a 10% margin of error, we figured out the sample size. Because of time and resource constraints, this margin was deemed acceptable while still ensuring that the population was well represented. Every member of the population had an equal chance of being chosen as a respondent because the sample was chosen at random. Screen time is the independent variable in this study, whereas sleep quality and degree of physical fitness are the dependent factors. This study also examined several control variables, such as gender, physical activity level, and the aim of gadget use (academic or non-academic), as these aspects may affect sleep quality and physical fitness. The purpose of this study is to ascertain how screen time affects seventh grade

students' levels of physical fitness and sleep quality. The data used in this study is primary data, collected directly from respondents using questionnaires and physical fitness tests. The primary data include screen time scores, sleep quality scores, and physical fitness test results for seventh-grade students at SMP Negeri 1 Semarang. The data utilized is quantitative, as it is represented in numerical form and examined by correlational statistical methods. The data was then examined to determine the relationship between screen time, sleep quality, and physical fitness levels. The data collection for this study occurred subsequent to the identification of the research sample. Data were directly acquired from the seventh-grade students of SMP Negeri 1 Semarang, who were chosen as the sample. Data collection was conducted via questionnaires to assess students' screen time and sleep quality, with physical fitness tests to evaluate their fitness levels. After that, the data were examined with SPSS using statistical methods. The first step in the investigation was to check the data's normal distribution by doing precondition tests like the normality test. After the required tests were completed, the analysis proceeded with a Pearson Product Moment correlation test to determine the impact of screen time on the physical fitness levels and sleep quality of seventh-grade students at SMP Negeri 1 Semarang. This study used a conceptual model to examine the relationship between screen time and sleep quality, subsequently affecting physical fitness levels, alongside correlation analysis. We also calculated the coefficient of determination (R^2) to see how screen time affected sleep quality and physical fitness levels. All tests were done with a significance level of 0.05.

$$r = \frac{n\sum xy - (\sum x)(\sum y)}{\sqrt{[n\sum x^2 - (\sum x)^2][n\sum y^2 - (\sum y)^2]}}$$

Figure 1. Pearson Product Moment Correlation Formula

Description:

r = Pearson Correlation Coefficient

n = Number of samples

x = Number of values of variable x

y = Number of values of variable y

xy = Sum of the results of multiplying x and y

RESULTS AND DISCUSSION

Table 5. Descriptive Statistics of Screen Time

	N	Min	Max	Mean	Std. Deviation
Screen time	74	20	43	33.70	5.233

Table 6. Frequency Distribution of Screen Time

Interval	Category	Frekuensi	Percentage (%)
$X \leq 25,85$	Very Low	8	10,8
$25,86 - 31,08$	Low	13	17,6
$31,09 - 36,32$	Fair	27	36,5
$36,33 - 41,55$	High	23	31,1
$X > 41,55$	Very High	3	4,1
Total		74	100

The interval categories presented in Table 6 were constructed using the mean (M) and standard deviation (SD) of the screen time data. Based on the statistical results, the mean score was 33.70 and the standard deviation was 5.233. The categorization follows a five-level classification, namely: very low ($X \leq M - 1.5SD$), low ($M - 1.5SD < X \leq M - 0.5SD$), fair ($M - 0.5SD < X \leq M + 0.5SD$), high ($M + 0.5SD < X \leq M + 1.5SD$), and very high ($X > M + 1.5SD$).

Based on these calculations, the interval boundaries were determined as follows: 25.85, 31.08, 36.32, and 41.55. These values were then used to classify students' screen time into five categories.

According to Table 6, the predominant number of students falls under the fair category, specifically 27 students (36.5%). Additionally, the high category has 23 students (31.1%), the low category consists of 13 students (17.6%), the very low category includes 8 students (10.8%), and the very high category contains 3 students (4.1%). Consequently, students' screen time is generally classified as fair.

Table 7. Descriptive Statistics of Sleep Quality

	N	Min	Max	Mean	Std. Deviation
Sleep Quality	74	1	14	6.38	3.105

Table 8. Frequency Distribution of Sleep Quality

Interval	Category	Frequency	Percentage(%)
≤ 5	Good	24	32,4
> 5	Poor	50	67,6
Total		74	100

According to the assessment of sleep quality utilizing the Pittsburgh Sleep Quality Index (PSQI), 24 students (32.4%) exhibited good sleep quality (scoring < 5), whereas 50 students (67.6%) demonstrated poor sleep quality (score > 5). Consequently, the majority of seventh-grade pupils had subpar sleep quality.

Table 9. Descriptive Statistics of Physical Fitness Levels

	N	Min	Max	Mean	Std. Deviation
Physical Fitness	74	1.5	3.3	2.151	0.4195

The Nusantara Student Fitness Test (TKPN) was used to collect physical fitness data. The test consists of several components, including the V sit and reach, sit-up, squat thrust, and PACER tests. Each component produced raw scores, which were then modified according to the TKPN scoring guidelines. After the conversion process, all component scores were averaged to obtain a composite physical fitness score for each student. As a result of this process, the final scores ranged from 1.5 to 3.3, as presented in Table 9. According to Table 9, the minimum physical fitness score is 1.5, the maximum score is 3.3, the mean is 2.151, and the standard deviation is 0.4195. The results suggest that the general physical fitness level of students typically resides in the moderate range.

Table 10. Frequency Distribution of Physical Fitness Levels

Interval	Category	Frekuensi	Percentage (%)
< 1	Very poor	0	0
1 – 1,9	Poor	25	17,6
2 – 2,9	Adequate	45	60,8
3 – 3,9	Good	4	5,4
> 4	Very good	0	0
Total		74	100

According to the results of the physical fitness categorization study, the majority of students (45 students) were in the appropriate category. Furthermore, 25 students (33.8%) were

in the poor category, while 4 students (5.4%) were in the good category. There were no students from the very low or very good groups. As a result, seventh-grade pupils have an appropriate level of physical fitness overall.

Normality and Linearity Test

Table 11. Results of Normality Test of Research Variables

Variable	Sig.	Description
Physical Fitness	0,052	> 0,05 (Normal)
Sleep Quality	0,2	> 0,05 (Normal)
Screen Time	0,097	> 0,05 (Normal)

According to the Kolmogorov-Smirnov normality test results, the fitness variable was significant at 0.052, sleep quality at 0.200, and screen time at 0.097. All significance values above 0.05, implying that the data were regularly distributed. As a result, additional study relied on a parametric test, namely Pearson correlation.

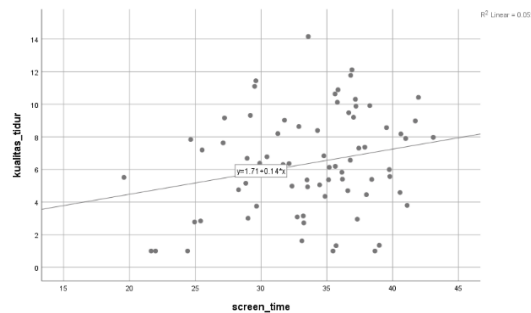


Figure 1. Scatterplot of the relationship between screen time and students' sleep quality

The scatterplot results between screen time and sleep quality reveal a linear link in the data distribution pattern. The data points do not exhibit a distinct curve, so confirming the validity of the linearity assumption.

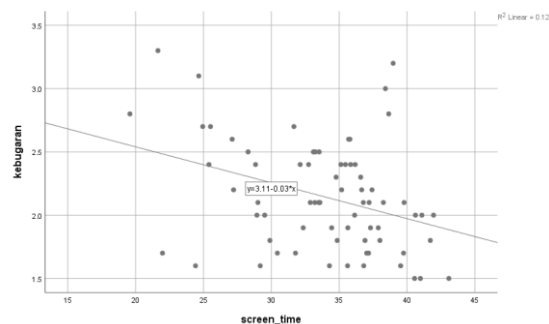


Figure 2. Scatterplot of the relationship between screen time and students' physical fitness levels

The scatterplot results show that there is a linear, negative link between screen time and physical fitness. The data points do not create a distinct curve, which means that the linearity assumption is correct.

Pearson Correlation Test

Table 12. Pearson Correlation Test Results

Relationship	r	Sig.	Description
Screen Time – Sleep Quality	0,234	0,045	Significant
Screen Time – Physical Fitness	-0,354	0,002	Significant

The Pearson correlation test showed that the correlation coefficient between sleep quality and screen time was $r = 0.234$ and that the significance value was 0.045 ($p < 0.05$). We reject H_{01} and approve H_{a1} because the significance value is less than 0.05 . This shows that there is a strong link between how much time pupils spend on screens and how well they sleep. The relationship is pleasant, but not very strong. This indicates that more time spent in front of a screen usually leads to better sleep quality scores. Since higher ratings mean worse sleep quality, we can say that more screen time usually makes students sleep worse.

Screen time and physical fitness had a correlation coefficient of $r = -0.354$, according to the Pearson correlation test results, with a significance level of 0.002 ($p < 0.05$). At a significance level below 0.05 , H_{a2} is accepted and H_{02} is denied. This suggests that students' levels of physical fitness and screen time are significantly correlated. The strength of the link ranges from mild to moderate, and its direction is negative. As a result, kids' levels of physical fitness tend to decline with increasing screen usage.

The Pearson correlation analysis indicates a significant association between screen time and sleep quality ($r = 0.234$; $p = 0.045$), as well as with physical fitness levels ($r = -0.354$; $p = 0.002$). Since both significance values are below 0.05 , H_{03} is rejected, while H_{a3} is approved. Consequently, it can be inferred that screen time is substantially correlated with the sleep quality and physical fitness levels of students at SMP N 1 Semarang.

Coefficient of Determination (R^2)

Table 13. Results of the Coefficient of Determination Test

Relationship Variable	r	r^2	Contribution (%)
Screen time with sleep quality	0,234	0,054	5,48%
Screen time dengan physical fitness	-0,354	0,125	12,53%

The calculation of the coefficient of determination resulted in a value of 5.4% . This signifies that screen time accounted for 5.4% of students' sleep quality, but the remaining 94.6% was affected by external factors not examined in the study. The calculation of the coefficient of determination resulted in a value of 12.5% . Screen usage accounted for 12.5% of students' physical fitness levels, with the remaining 87.5% attributable to other reasons.

The Pearson correlation analysis revealed a significant relationship between screen time and student sleep quality ($r = 0.234$; $p = 0.045$). Although the relationship is statistically significant, the correlation coefficient indicates a weak association. This implies that, while screen time influences sleep quality, it is not the sole determining factor. Other aspects that may influence students' sleep quality include academic stress, environmental conditions, lifestyle behaviors, and nighttime routines. The poor correlation could also be explained by the nature of pupils' screen time. In today's schools, students often use digital devices for schoolwork, like finishing assignments and getting to learning resources. So, not all screen time is detrimental for your sleep. This finding aligns with previous studies indicating that the influence of screen time on sleep fluctuated according to the kind, duration, and timing of device usage, particularly before to sleep. From a physiological perspective, extended exposure to blue light emitted by digital screens might diminish melatonin synthesis and disrupt circadian rhythms. Nonetheless, the low correlation identified in this study indicates that students may have altered their behaviors, such as limiting device usage prior to sleep or adhering to specific sleep schedules, to alleviate the detrimental effects.

In addition, screen time was strongly negatively correlated with fitness levels ($r = -0.354$; $p = 0.002$), meaning that more screen time is linked to poorer levels of fitness. While the correlation is more robust than that of sleep quality, it persists in the moderate range, suggesting the existence of supplementary influencing elements. One possible reason is that spending more time in front of a computer makes people less active, which makes it harder for them to get exercise and other physical activities. But it's important to check to see if the students' general levels of physical activity are low. If teens don't play sports or take physical education classes outside of school, their physical health may go worse, even if they don't spend a lot of time on screens. Moreover, contemporary lifestyle patterns, including heightened academic responsibilities and diminished outdoor engagement, may adversely affect students' fitness levels. These results align with previous research indicating that excessive screen time correlates with less physical activity and suboptimal fitness outcomes. Despite this, the moderate correlation demonstrates that interventions should not only focus on screen time but also encourage students to live active lives. In conclusion, screen time is strongly linked to sleep quality and physical fitness, although its effect is not very strong and works with a number of other things. So, programs to improve students' health should be based on a number of different factors, such as better time management of digital device use, more physical activity, and the creation of excellent daily routines.

CONCLUSION

The study's results indicate that screen use among seventh-grade students at SMP Negeri 1 Semarang is significantly correlated with both sleep quality and physical fitness. The research revealed a significant albeit slight positive correlation between screen time and sleep quality ($r = 0.234$; $p = 0.045$), indicating that heightened screen time is linked to diminished sleep quality. Moreover, a moderate negative correlation was identified between screen time and physical fitness levels ($r = -0.354$; $p = 0.002$), indicating that elevated screen time is associated with diminished physical fitness. The coefficient of determination shows that screen time affects sleep quality by 5.48% and physical fitness by 12.53%. This shows that other things are also essential.

From an educational point of view, these results show how important it is for students to learn how to use technology in a healthy way. To help kids sleep better, teachers and schools should encourage them to regulate their screen use well, especially before bed. Adding physical activity to kids' daily school routines, such planned physical education classes and active breaks, is also very important for their health. In terms of school policy, it is advised that schools establish standards for responsible gadget use, particularly inside the classroom setting. Schools may also work with parents to monitor and limit pupils' screen time at home. Furthermore, establishing programs that encourage active lifestyles and digital well-being can help students strike a better balance between technology use, physical activity, and rest.

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