

RESEARCH ARTICLE

POSITIVE PARENTING PROGRAM (TRIPLE P) IN IMPROVING SUBJECTIVE WELL-BEING OF MOTHERS WITH DEAF CHILDREN

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ABSTRACT

Subjective well-being is one indicator of an individual's or a community's quality of life. Individual life is said to have quality, not only in terms of economic freedom to choose and achieve what one desires, or in terms of social freedom to have the things one desires, but also in terms of individual sentiments of pleasure and displeasure, contentment, and discontent. If an individual frequently experiences happy feelings and achieves satisfaction in his life, this is evidence of subjective well-being. It is believed that moms of deaf children will achieve subjective well-being, allowing them to best cater for or service their children's needs. The fact is that some mothers of deaf children are dissatisfied with their life in general. Mothers feel that their children become financial burdens to the family. The aim of the study was to see if the positive parenting program (Triple P) could improve mothers' subjective well-being in children with hearing impairment. Mothers with hearing-impaired children who attended SLB B Yakut Purwokerto a total of 32 participants were the research subjects. The results of the subjective well-being scale's difference power test reveal that there are seven invalid items/statements and ten valid items/statements, implying that the ten items/statements were employed to collect subjective well-being data. The t-test of pre-test to post-test results shows that the positive parenting program is successful in improving the subjective well-being of mothers who had deaf children.

KEYWORDS

Subjective Well-being, Positive Parenting.

1. INTRODUCTION

The commitment to serve children with special needs, particularly deaf children, is fulfilled not only by the school where the children are enrolled but also by their parents, particularly mothers, who must accompany and serve deaf children at home. At home, a mother's attempts to serve her children should be done with genuine affection and to the best of her ability. One of the mothers' principles for helping children at home is their feeling good about themselves.

Accepting that their child is deaf, on the other hand, is an extremely challenging emotional experience for mothers (Kingston, 2007). According to Syafei (2007), having a deaf child is one of the internal impediments to fulfilling the obligations and responsibilities of a mother. The experience of parents of children with hearing impairment differs depending on a variety of circumstances, such as the type and degree of the deafness and whether or not the barrier is plainly evident to others (O'Reilly, 2010).

Pilot research of four (four) mothers of deaf children revealed that mothers were generally dissatisfied with their life. Mothers believe their deaf children are a burden to the family, and even extended families fail to admit that one of their members is deaf. They regard their siblings as

an embarrassment to the rest of the family. Mothers with deaf children are humiliated, dissatisfied, and alone in guiding and accompanying their children as a result of this condition. The mothers were apprehensive and concerned about her child's futures. This demonstrates that the mothers were unhappy and unsatisfied with their lives as a result of their deaf children's condition. (Interview, July 17, 2021).

Previous research and preliminary investigations have shown that mothers of deaf children are unhappy. Diener (2005) defines happiness as subjective well-being, which may be used to assess a person's and society's quality of life in addition to economic and social variables. A person's life is referred to as being qualified not only in terms of economics, where he can have and obtain what he desires to satisfy his desires, or socially, where a person obtains what he desires, such as equality or security, but also in terms of quality of life, which is influenced by one's feelings toward pleasure and displeasure, satisfaction and dissatisfaction.

Based on these issues, the problem can be formulated "Is the positive parenting program effective to improve the subjective well-being of mothers with deaf children. Thus, the aim of this research is to test or to examine the effectiveness of the positive parenting program on the improvement of subjective well-being in mothers with deaf children.

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2. LITERATURE REVIEW

2.1 Subjective wellbeing

Diener (2000) suggests that subjective well-being is a condition when individuals perceive and evaluate everything that happens in life, both cognitive and affective evaluations. The way individuals view their lives can be done cognitively in the form of life satisfaction or affectively in the form of pleasant or unpleasant moods and emotional reactions. Subjective well-being (Diener, 2005) is the experience of each individual which is a positive or negative assessment that typically includes an assessment of all aspects of a person's life.

Diener, Suh and Oishi (2008), explained that individuals are said to have high subjective well-being if they experience life satisfaction, often feel joy, and rarely feel unpleasant emotions such as sadness or anger. On the other hand, individuals are said to have low subjective well-being if they are dissatisfied with their lives, experience little joy, and feel more negative emotions such as anger or anxiety.

Diener, Suh, and Oishi (2008) suggest that there are three main components of subjective wellbeing, namely; (1) the presence of life satisfaction, which includes satisfaction with various areas of life such as recreation, love, marriage, friendship; (2) the presence of frequent positive affect (pleasant effect), in the form of the emergence of specific positive emotions such as joy, love, and pride; and (3) relative absence of negative affect (low levels of unpleasant effect) of specific unpleasant, namely the absence feelings or emotions or moods such as shame, guilt, sadness, anger, and anxiety. So that the components included in subjective well-being as measured in this study are life satisfaction, positive emotions (positive affect), and the absence of unpleasant emotions (negative effect).

2.2 Subjective welfare of mothers who have deaf children

The difficulty of mothers accompanying deaf children demands more mental abilities. Being a mother who has a deaf child demands to be able to accept pressure and other unpleasant things. Parents who have deaf children have a greater task and psychological pressure in raising and caring for their children. These burdens can trigger pressure in parenting which has a negative impact on parents, the relationship between parents and children, and the children themselves (Mawardah, 2012).

For some cases, especially in Asian cultures, the presence of a child who has certain difficulties can not only cause embarrassment, but also lead to personal responsibility from the parent's side for the child's condition. For some parents, the presence of a child experiencing certain difficulties affects self-esteem.

Parents feel that this not only affects him, but also causes disappointment for all family members (Selikowitz, 1995).

2.3 Factors that affect subjective well-being

There are two approaches used to explain the factors that give rise to subjective well-being experienced by individuals, namely the top down and bottom up approaches. The top-down approach seeks to identify internal factors that give rise to subjective well-being, such as life values and personality aspects. The bottom up approach is external and situational factors (Diener, et. al. 1999). Components of social support such as friendships are correlated with subjective well-being (Dunn, 2004) and relationship quality also has a correlation with subjective well-being (Argyle, 2001). House (in Newman & Newman, 1987) states that social support can contribute to individual health and well-being.

Eddington & Shuman (2005) suggested several demographic and environmental factors that can affect a person's subjective well-being, namely: gender, age, education, income, marriage, job satisfaction, health, religion, leisure, life events and competence. However, demographic factors that become objective variables for welfare often do not contribute much to subjective well-being (Diener, Sandvik, Seidlitz, 1993).

Wilson (1967) in Diener, et al. (2005), stated that personality and demographic factors correlate with subjective well-being. Happy people are young, healthy, educated, well paid, extroverted, optimistic, free,

religious, married people with high self-esteem, work ethic, simple aspirations of both sexes and of various intelligences. Diener et al, (1999), in their findings state that demographic variation is correlated with subjective well-being. Countries with the happiest people are countries that have good economic growth and are relatively rich (Diener, et. al., 2010). A country whose people have high subjective welfare is a country that has strong rules and upholds human rights (Diener, 1995).

Countries whose people have high subjective welfare are countries that have a low tendency to corruption (Helliwel et al., 2014; Tay, et. al., 2014). Preliminary evidence suggests that taxes can be progressive in countries with high subjective welfare (Oishi, et. al., 2012). Countries that have high subjective welfare are if they have income security programs, such as adequate pensions, unemployment benefits, cost support for the sick and disabled (Radcliff, 2013 in Diener, 2015).

The findings of Kirby, Coleman & Daley (2004) show that religious beliefs or spirituality significantly predict well-being. The findings of Krause (2004) show that religion is strongly related to satisfaction and well-being (in Papalia et al., 2009). This means that the factor of belief, religion or spirituality has an influence on subjective well-being.

Individuals who have positive feelings tend to like themselves and others, have a strong physique, have good problem solving skills. Individuals who have a happy mood are better able to deal with problems and resolve conflicts. Happiness is a hallmark of success and can be another indicator of success. Happiness is an indicator of successful and productive work, satisfying relationships, mental and physical health and longevity (Lyubomirsky et. al., 2002).

Based on the description, it can be concluded that the factors that influence subjective well-being are internal and external factors. Internal factors such as life values, and aspects of personality (extraversion), self-esteem, optimism and resilience, while external and situational factors include components of social support and demographic and other factors.

2.4 Mother of a deaf child

Deaf children are children who have a hearing impairment that causes them to be unable to hear sounds precisely or at all, but it is thought that no human being is completely deaf. There are still certain vestiges of hearing in deaf children that can be optimized, even if they are minor. There are numerous definitions of the deaf, especially when it comes to the definition of the deaf, depending on the viewpoints and interests of each individual.

According to Andreas Dwidjosumarto (in Somantri, 1996), someone who is deaf is someone who is unable to hear sounds. Deafness is classified as either deaf or partially deaf (hard of hearing). Deaf is a term used to describe a child whose hearing has been severely damaged to the point where it no longer functions. Meanwhile, a child with hearing loss has a damaged sense of hearing but can still hear with or without the use of hearing aids.

The term "deaf" is derived from the phrases "tuna" and "rungu," where 'tuna' refers to a lack of hearing and 'rungu' refers to a lack of hearing. When someone cannot hear or cannot hear sounds, they are considered to be deaf. When it comes to appearance, deaf children are no different than children in general. Children are revealed to be deaf while communicating.

Winarsih (2007) suggests that deafness is a general term that indicates hearing difficulties from mild to severe, classified into deaf and hard of hearing. Deaf people are those who have lost the ability to hear so that it hinders the process of language information through hearing, whether they use or not use hearing aids where the hearing limit they have is sufficient to allow the success of the process of language information through hearing.

Hearing loss, according to Suharmini (2009), is a disorder in which an individual's sense of hearing is damaged, causing them to be unable to detect certain sound stimuli or other stimuli through hearing. From some of the preceding definitions and concepts of deafness are complicated, it can be stated that a deaf child is one who has a hearing impairment, either completely or partially. Deaf children still require

special education programs, despite the fact that they have been fitted with hearing aids.

Mother is the female parent of a child, both through biological and social relationships. Generally, mothers have a very important role in raising children, and the title of mother can be given to women who are not the biological (biological) parents of someone who fills this role. Examples are adoptive parents (because of adoption) or stepmothers (wife of the child's biological father) (Wikipedia, 2015). In this study, what is meant by mother is a woman who gives birth, takes care of, and raises her child.

The word motherhood is concerned with the relationship between a mother and her child, as a physiological, psychological, and social unit. This relationship begins when the fetus is in the mother's womb and continues with physiological processes in the form of pregnancy, birth, breastfeeding, and caring for children (Kartono, 1992). The presence of a mother is very important and strategic for children, especially in the early days for the interests of children's growth, development, and maturity. These virtues clearly cannot be replaced by others (Syafei, 2007). Experiences as a mother foster duties and special emotional reactions, both positive (eg happiness) and negative (eg anxiety and fear) (Kartono, 1992).

Children who are born perfect is the hope of all parents. Parents want to have children who are healthy, physically and spiritually. These expectations cannot always be realized, the reality shows that there are some families who have children who are not the same as other children in general, such as deaf people who are often referred to as children with special needs. Parents cannot refuse the presence of children with special needs, because every child born is a gift and a mandate that must be guarded with love and affection.

According to Soemantri (2007), the feelings and behavior of parents (including mothers) who have children with special needs are different and can be divided into several types:

2.4.1 Feelings of protecting children excessively, which are usually divided into:

- 1) Biological protection
- 2) Sudden emotional changes, this prompts to:
 - Refuse the presence of children by giving a cold attitude;
 - Refuse with rationalization, keep the child at home by bringing in a trained person to take care of him;
 - Feeling obligated to care for but without providing warmth;
 - Maintaining it excessively as compensation for feelings of rejection.

2.4.2 There is a feeling of guilt giving birth to children with disabilities, then there is an excessive presumption in terms of:

- 1) Feeling that something is not right about hereditary matters.
- 2) Feeling unable to take care of him.

2.4.3 Loss of confidence in having normal children.

- 1) Because of this loss of trust, parents are quick to anger and cause aggressive behavior.
- 2) This position can lead to depression.
- 3) In the beginning, they are able to adjust immediately as parents of children with special needs, but they are disturbed again when facing critical events.

2.4.4 Shocked and lost confidence, then consulted for better news.

2.4.5. Parents feel guilty, in fact that feeling is not always there.

2.4.6 Become confused and embarrassed, which causes parents to be less friendly with neighbours and prefer to be alone.

2.5 Positive Parenting Program

According to Hyoscyamina (2012) positive parenting has several key principles, namely: (a) Providing nutritional needs of children which can

have a significant effect on development, focus, and other mental capacities. (b) Creating a balanced life in which children can play, learn, explore their surroundings, and spend meaningful time with their parents. (c) Creating a positive and safe environment by instilling a sense of security and safety in children in everyday life. This is done to shield children from harmful environmental impacts, situations that are not well understood, and to create a positive and safe environment, (d) Maintaining open communication with the child, his friends, the school, and the surrounding environment. (e) Taking an active role as a parent so that children feel heard, have a solid bond, and are aware of their limitations.

There are five principles of the Positive Parenting Program (Triple-P) (Sanders, 1999) which consist of: (1) Providing a safe and attractive environment, (2) Creating a positive learning environment, (3) Using assertive discipline, (4) Having realistic expectations, (5) Taking self-care as a parent.

According to Daly (in Abela, 2016), parental behavior is nurturing, nonviolently empowering, and providing recognition and direction, which includes setting boundaries to allow children's full development and is focused on the best interests of children.

Positive parenting is to provide a friendly environment so that children can grow and develop optimally. Positive parenting is useful for increasing positive parent-child interactions, improving children's social skills, and preventing behavioral and emotional problems in children according to Glazemakers (in Wijaya, 2015).

Positive parenting refers to how parents can assist their children in becoming efficient, comfortable, and strong, with a strong sense of wellbeing and the ability to achieve life satisfaction, so that they can reach happiness regardless of their age. (Hyoscyamina, 2012).

Positive parenting, according to Sanders (in Darta, 2011), is a strategy that attempts to develop and control children's behavior in a way that builds rather than harms them. This parenting style was created with the goal of assisting children's development through good communication and positive attention.

3. METHODOLOGY

Research subjects are mothers who have children who are deaf, who attend SLB B Yakut Purwokerto. The number of research subjects was 32 mothers who had deaf children. This is a quantitative study that tries to see how effective positive parenting methods are at improving the subjective well-being of mothers with deaf children. The subjective well-being scale is used in the data collection method. Subjective well-being scale used the Satisfaction With Life Scale (SWLS) and the Scale of Positive and Negative Experiences (SPNE).

According to the subjective well-being scale differential test, 7 (seven) of the 17 (seventeen) items have poor discriminating power, leaving 10 (ten) items with high discriminating power, with scores ranging from 0.388 to 0.608. The results of the alpha stratified reliability test show that the subjective well-being scale has a reliability coefficient of 0.81 (Nur'aeni, 2018).

The main thing that needs attention in the preparation of the psychological scale is the analysis procedure and item selection. In the item writing stage, efforts to maintain item quality are carried out by carefully following the indicators contained in the blue print of the scale and specifications (Azwar, 2017).

3.1 Item analysis procedure and item selection

There are five stages carried out in analyzing items and item selection for the psychological scale

- Pre-trial, which is meant to be a limited trial with a small sample ($N = \pm 20$), to check whether the sentences used have been understood by the reader and are understood as intended by the author.
- Qualitative evaluation, this aims to test whether the items written are in accordance with the blue print and indicators to be revealed.
- Empirical evaluation, testing the quality of the item empirically by using the data from the test item on a subject whose characteristics are equivalent to the subject to be scaled.

- The discriminatory power of an item, (often incorrectly named but misunderstood as item validity), is the extent to which an item is able to distinguish between individuals or groups of individuals who have and do not have the attribute being measured.
- Selecting items based on discriminatory power. The discriminative power parameter (hereinafter referred to as discriminatory power) of the item in the form of a correlation coefficient between the distribution of item scores and the distribution of the total score of the scale, shows the suitability of the item function with the scale function in revealing individual differences. The criteria for selecting items are based on item-total correlation, usually the limit of 0.30 (satisfactory) or high discrepancy is used.

Based on the assumptions put forward by Azwar (2017) regarding the procedure for item analysis and item selection, the five scales used as research instruments also follow the procedure.

The subjective well-being scale is based on aspects developed by Diener (2000) which include satisfaction with life, positive affect/feeling and negative affect/feeling. The subjective well-being scale was adapted by researchers from the SWLS (Satisfaction With Life Scale) from Diener et. al. (1985) and SPANE (Scale of Positive and Negative Experience) from Diener and Biswas (2009). The SWLS (Satisfaction With Life Scale) and SPANE (Scale of Positive and Negative Experience).

The adaptation process carried out by researchers went through 5 (five) stages, namely; the first stage, the researcher translated into Indonesian SWLS (Satisfaction With Life Scale) from Diener et. al. (1985) and SPANE (Scale of Positive and Negative Experience) from Diener and Biswas (2009).

The second stage is a qualitative evaluation which aims to test whether the items written are in accordance with the blue print and indicators (Azwar, 2017). The researcher's qualitative evaluation was carried out by consulting about SWLS and SPANE which had been translated into Indonesian to a psychometrician (expert judgment). The opinion of an expert judgment named Sukaesi Marianti, S. Psi., M. Si., PhD in Psychometrics about the SWLS and SPANE scales is: In general: many sentences are correct, but wrong in determining favourable or unfavorable.

The third stage, the researcher combines SWLS and SPANE into one scale with the name subjective welfare scale, then the researcher conducts a preliminary or pre-test by asking the sentences in the subjective welfare scale statement to prospective respondents with the aim that the statement can be understood by the respondents. Prospective respondents stated that they understood enough about the statements on the subjective welfare scale.

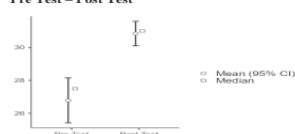
The fourth stage is empirical evaluation.

The fifth stage, the researcher selects items that have a high/satisfactory discrepancy coefficient with a minimum correlation coefficient criterion of 0.30 (Azwar, 2017), then the construct is tested, using the second level confirmatory factor of analysis (CFA) (2nd Order CFA). The fifth stage the researchers did to test the suitability of items/statements in the subjective welfare scale with the theoretical construct.

The Wilcoxon Signed-Rank test was used to examine the effects of the positive parenting program on the subjective well-being of women with deaf children using the paired sample t-test.

Descriptive					
	N	Mean	Median	SD	SE
Pre Test	32	26.8	27.5	3.95	0.698
Post Test	32	30.8	31.0	2.14	0.379

Pre Test – Post Test



From the results of the t-test obtained, it is known that there is a significant average difference between pre-test scores and post-test scores of subjective well-being in mothers with deaf children ($t = 0.000$; $p < 0.001$).

4. CONCLUSION

Based on descriptive data and plot images, there was an increase in the mean and median in the group. Initially, the group mean of the pre-test was 26.8 and the median was 27.5. Then during the post-test, the mean score increased to 30.8 and the median increased to 31.0. This shows that there is an increase in subjective well-being in mothers after or during the post-test of the implementation of this positive parenting program compared to the pre-test. Changes or improvements in subjective well-being were due to positive parenting programs followed by mothers with deaf children; and this can be used as the basis for a positive parenting program for parents with children. This means that the Positive parenting program is effective to improve the subjective well-being of mothers with deaf children in SLB B Yakut Purwokerto.

5. RECOMMENDATIONS

- For SLB B Yakut Purwokerto, it is advised to hold a positive parenting program for parents or guardians so that they can properly and appropriately accompany their children at home. It can be programmed once a month, three times a month, or once a semester, and it can be implemented in collaboration with the Psychology faculty of Universitas Muhammadiyah Purwokerto.
- For parents of deaf children, they are supposed to be able to keep the positive effect that has been generated, in order to maintain proper subjective well-being.
- For the Faculty of Psychology at Universitas Muhammadiyah Purwokerto, it is suggested to continue to work with SLB B Yakut in particular and SLB Yakut, in general, to follow up on the findings of this study.

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