

Parents' Perceptions of Subjective Well-Being in Children with ADHD

Indriani, I.I.¹ ✉ Iskandarsyah, A.², Joeffiani, P.³, Siregar, J.R.⁴

^{1,2} Padjadjaran University, Bandung, Indonesia
✉ iriani17001@mail.unpad.ac.id

ARTICLE INFO

Article history:

Received 1 July 2020
Received in revised form
15 August 2020
Accepted 17 August 2020
Available online 31 August
2020

Keywords:

parents perception,
subjective well-being,
children with ADHD

ABSTRACT

The purpose of this research is to descriptively identify parents' perception of subjective well-being in children with ADHD. Qualitative research method was performed with a sample of 18 parents (15 mothers, 3 fathers). Data analysis was using thematic analysis. The results of this study indicate that children with ADHD in general, based on the perceptions of parents, show that children with ADHD are generally not well-being, but there are those who claim to be well-being and some say that some are sometimes well-being and other times they feel less well-being. Children feel wellbeing when their needs are met, they get environmental support, there is no negative stigma. Children feel less well-being because of the lack of acceptance of the child's condition, the existence of a negative stigma, the child still behaves negatively, and their needs are not fulfilled. Parents play a role in helping optimize children's well-being by conditioning the environment, children and parents themselves, and surrendering to God to better suit the needs of children with ADHD.

Copyright © Universitas Pendidikan Ganesha. All rights reserved.

1. Introduction

Attention-Deficit/Hyperactivity Disorder (ADHD) is a neurodevelopmental development disorder (American Psychological Association/APA, 2013). Global prevalence is around 2-7% with an average of 5% occurring in childhood (Sayal et al., 2018). According to DSM V, ADHD has three main symptoms as its characteristic, i.e. inattention, hyperactivity, and impulsivity (APA, 2013). These symptoms are in the form of behaviors that occur in various settings such as home and school which can affect children's performance in social, educational, and even occupational terms as well as crimes committed during adulthood if not handled properly (Kuriyan et al., 2013; Sayal et al., 2018). ADHD is mostly diagnosed by medical personnel such as psychiatrists and pediatricians and partly by psychologists (Danielson et al., 2018). ADHD is more common in boys than girls (Lawrence et al., 2017).

ADHD conditions based on several studies show that they can have behavioral problems and other problems in their social, emotional, and academic lives. Several studies have shown the problems experienced by children with ADHD, including; emotional dysregulation (Shaw et al., 2015), mental disorders such as self-harm, antisocial behavior, disruptive and opposing behavior, and low academic achievement with negative stigma (Sayal et al., 2018), difficult to interact and rejected with their peers and bad social relations with those around them include with their father and teacher making children feel emotionally sad, dissatisfied, unhappy, and anxious (Lawrence et al., 2017; Mrug et al., 2012; Barnes & Harrison, 2017; Chang et al., 2013). ADHD conditions can affect the subjective health and well-being of children with ADHD (Peasgood et al., 2016).

Well-being is important to pay attention to in children from an early age. This is because it plays an important role in forming a quality generation in the future, including in Indonesia. Conversely, if the child's well-being is not given attention, it will have a negative impact on the child's development process in the short and long term. Children who feel fulfilled in their lives will encourage them to explore the world more and provide opportunities for them to develop and be more well-being in their lives in the future (Park, 2004). Therefore, subjective well-being is important to optimize development in children.

Subjective well-being can contribute to various positive things, can minimize negative things such as psychological disorders in children. besides being an important key as an indicator in a person's positive development. Furthermore, it is also an important indicator in promoting and managing optimal

mental health in children (Park, 2004). The positive impact of subjective well-being that children have of course applies to children in general, including children with developmental disorders or special needs such as children with ADHD.

Subjective well-being (SWB) in children is generally measured based on the perceptions of adults around children, especially parents who often interact with children in their daily lives. Therefore, these parents can understand what children feel and think based on what parents observe in children and from listening to children's stories about what that children experience and feel in their life. Parents' perceptions about SWB in children with ADHD need to be identified to provide a comprehensive picture of SWB in children apart from the children's own side.

The purpose of this study was to determine descriptively how well-being was subjective in children with ADHD based on parents' perception. This study plays an important role in identifying how subjective well-being is based on the perceptions of parents with ADHD and to find out what aspects show children with ADHD are feeling their well-being and what aspects show children with ADHD have not developed their well-being.

Children with ADHD in Indonesia are increasing in number each year along with the increasing public awareness about ADHD. In Indonesia, the prevalence of children with ADHD is based on research from Dwidjo Saputro, a prominent ADHD figure in Jakarta Indonesia, who reported that 26.2% of students aged 6-12 years have been suspected with ADHD and currently the number is increasing (Saputro, 2009). The impact of ADHD problem can be felt by the students themselves, their family, and their society. Feelings of feeling academically inept, poor relationships with peers can result in lower subjective well-being in children with ADHD. Children feel dissatisfied with their life, especially related to their academics and social relations.

Children's perceptions of what children think and feel in their lives, whether they are happy or not with their daily lives can be expressed but parents and teachers can strengthen or weaken what children perceive according to what they know about these children in their everyday life (Ben-Arieh et al., 2014). Children's well-being, if developed and optimized from an early age, will have a positive impact on their present and future. A number of studies state that subjective well-being can have an impact on various dimensions of life including on health (Diener et al., 2017). A happy person will be more creative and productive able to socialize better, desirable behavior, live longer, have a strong immune system, and are able to work well so that their development is more optimal and they live healthier and more useful in society (Eid & Larsen, 2008 ; Diener & Suh, 2000). Optimizing subjective well-being in children and adolescents can help prepare them for adulthood to be more adaptable and well-being. Making children feel happy not only makes children feel fine, but makes children feel more satisfied with the life they are experiencing which has a positive impact on their current and future lives (Park, 2004). Meanwhile, if the children's well-being is not optimized, it will have a negative impact on their present and future lives in various aspects of their lives. This, of course, also applies to children with developmental disabilities, including children with ADHD.

Children with developmental disabilities even though they have limitations, still have the same opportunity as other children to feel their well-being and develop more optimally, despite their various limitations. This has also been regulated in the 1945 Constitution Indonesia, that every child including children with special needs has the right to survive, grow and develop, and have the right to protection from violence and discrimination (Kemenpppa, 2011). Therefore, assessing the well-being of children with special needs or with developmental disorders is also important to do, because they also deserve to have optimized development and live a life of well-being like children in general.

So far, the discussion of well-being or health has focused more on the psychopathological side of a person, developing treatment strategies, and preventive programs. Well-being is considered to be only owned by someone who does not have a certain disease or illness or is healthy if they do not suffer from a certain disease. However, since the positive approach was developed in 1958 by one of the pioneers of positive psychology, Marie Jahoda, well-being or health is not only seen from the absence of certain diseases. Certain diseases or disorders can be the one that causes a person to be not well, but not the main one. A person who experiences certain illness can still feel positive things such as life satisfaction, positive feelings, feeling happy, which can reduce the level of stress experienced due to the illness they are experiencing, so that they can still feel their well-being psychologically within themselves (Park, 2004). Along with the emergence of positive psychology, the idea of "*fighting pain*" arose (Greenspoon & Saklofske, 2001). Currently, a discussion is developing that prioritizes children's strength and ability to optimize children's well-being, including those with developmental disorders or deficits (Pollard & Lee, 2002).

Duckworth & Quinn (2009) argue that based on a positive psychology approach, it also explains that everyone has the opportunity to optimize their potential to feel happy, so that subjective well-being

can be optimized in clinical cases. Seligman et al., (2004) also emphasize that the goal of positive psychology is how a person can feel happy by understanding and developing positive emotions and feeling meaningful as an effort to overcome the pain or disorder experienced so that it will further develop subjective well-being in individual. The same thing was also expressed by Raven-sieberer et al. (2015) that children who experience chronic disorders need to optimize their subjective well-being. They can do this by feeling more positive and able to overcome their limitations despite experiencing illness or disturbance to better adapt to their lives, feel happier about their lives, and become well aware of their lives. However, studies that examine subjective well-being in children with developmental disorders are still limited.

Research on subjective well-being in children is generally performed using a quantitative approach with scales that measure subjective well-being. Research on subjective well-being in children with a qualitative approach is still limited, even though it is also important to take a qualitative approach to get a more comprehensive and in-depth picture of subjective well-being in children with ADHD. Research on subjective well-being in children with ADHD is important to be aware of so that children, parents, teachers and the surrounding community can better know what aspects make children with ADHD feel their well-being and what aspects make children feel less happy. Therefore, actions can be identified, i.e. what needs to be done to anticipate and optimize subjective well-being in children, especially in matters that make children feel less of their well-being. Then, children can live with their well-being and develop optimally like children in general. Therefore, this study is intended to examine subjective well-being in children with ADHD from the parents' perspective.

The exploration of parents' perception about subjective well-being in children with ADHD was performed through a qualitative inquiry to find the unique perceptions from parents about subjective well-being in children with ADHD. Qualitative research has been proven beneficial in exploring the experience of the participant's perspective, setting, culture, and provide an opportunity for alternative views to be expressed (Yardley, 2017). Qualitative method allows for an exploration from the informants' point of view, which in this study is parents' perspective about subjective well-being in children with disability including in children with ADHD (Sarma & Dunay, 2018; Yonghee, 2008). The current study aimed to contribute to the literature related to children's cross cultural perspective toward children with ADHD and to further provide Indonesian stakeholders (researchers, health practice, parents, teacher and school, government agency) with information that may improve the parents' perspective toward the research on children with ADHD. This study also aimed to facilitate further studies on children with ADHD in Indonesia for improving stakeholder awareness about subjective well-being of children with ADHD. This is important to make policy in school, family, environment and the government of Indonesia to empower success and well-being of children with ADHD.

2. Methods

This study uses a qualitative method with a thematic qualitative analysis approach that aims to explore the perceptions of children with ADHD regarding their subjective well-being. A case study is defined a qualitative approach in which the investigator explores a real life with single case or multiple case, individual or group, and report a case description and case themes (Creswell, 2017). Thematic analysis was chosen as a constructivist paradigm based on the perspective of each individual (Braun & Clarke, 2016). This analysis is identified and interpreted by the researcher with reference to several questions raised by the researcher using focus group discussion method to understand how subjective well-being is in children with ADHD from parent perspective.

Participants were parents of school-aged children with ADHD (8-12 years old) comprising a total of 18 sample (15 mothers and 3 fathers) from 15 children with ADHD. According to Creswell & Creswell (2017), for focus group discussion, the number of samples of around minimum 6-8 informants in one group. Recruitment of informants was done by broadcasted through social media such as WhatsApp, Facebook, and coming directly to schools and hospitals. The sampling technique used purposive sampling with permission and filling in the willingness of informed consent by parents who were willing and interested in participating in the research. Data collected from JABODETABEK/Greater Jakarta area (Jakarta-Bogor-Depok-Tangerang-Bekasi), Indonesia. This research was conducted in two sessions with different groups, start in April 2019. The first group consisted of 9 mothers and the second group consisted of 9 people (6 mothers and 3 fathers).

Ethical clearance was carried out as a permit and eligibility for data collection for this research. The ethical clearance was approved by Padjadjaran University. This research procedure was carried out in the following stages: 1) Researchers screened informants by spread information broadcasts via social media 2) researchers made arrangements and appointment directly with parents (have children with ADHD

aged 8-12 years old) who were willing to take part in the research; 3) Researchers explain and ask the consent of parents by filling in informed consent for those who are willing to take part in the research; 4). the researcher conducts FGD with several question guides accompanied by probing. Some of the questions raised were related to parents' perceptions of the well-being of children with ADHD. The questions asked are as follows: 1) Do you child feel their well-being/happy?; 2) What makes your child feel your well-being; 3) What are the things that make your child feel less of having well-being? And 4). What are the role of parents for optimizing SWB children with ADHD? The FGD process was recorded through an audio record with consent from the informants in Indonesian, then rewritten verbatim to be analyzed based on the theme.

Data analysis was use several stages of thematic analysis (Braun & Clarke, 2016). Some of the steps taken are 1) the researcher reads the entire verbatim transcript; 2) researchers reflect on the overall meaning; 3) researchers sort the data according to the context being asked in the study; 4) researchers conducted an analysis by making codes using nodes that showed the theme based on the perceptions and experiences of the parents in this study in each questioned context; 5). The researcher compiles a qualitative description which includes an explanation of several themes and the relationship between some of these themes; 6) the researcher makes interpretations of the processed data.

3. Findings and Discussion

The results of this study provide an overview of the subjective well-being of children with ADHD based on the perceptions of parents. Parents' perceptions about whether a child with ADHD feels wellbeing or not were seen from the responses of the parents, in general, stating that the child is not feeling wellbeing. However, some say that the children are already wellbeing and some say that sometimes they appear wellbeing, but at other times they appear not as wellbeing as they are as shown in table 1 below.

Table 1.
Parents' perceptions; Does the child feel wellbeing?

Criteria	Description
Not yet wellbeing	<ul style="list-style-type: none"> - Many other students' parents are still think and talk negatively - The negative attitude of teachers who treat children poorly - Parents are impatient with children - Parents do not pay attention because of their busy schedule and share their attention with other children - The family does not understand the child's condition - Older siblings get emotional easily because they don't understand the child's condition - In a family with different rules, there are less consistency and less discipline - Parents do not understand how to treat children - Often bullied by friends and have no friends - Not yet, because the parents are often called to school by the teacher regarding children's behavior
Already wellbeing	<ul style="list-style-type: none"> - There is support from family and the environment - The child's fine, still cheerful, but the parents are not
Sometimes wellbeing and sometimes not wellbeing	<ul style="list-style-type: none"> - Depending on the child's mood, the child is less happy when the child wants is not fulfilled and happy when the child's wish is fulfilled - Sometimes happy, sometimes not, often sad to cry and don't know what to expect, but sometimes the child looks happy, no problem

Parents are of the opinion that children with ADHD are said to be wellbeing in life if they feel the following things (Table 2).

Table 2.
What parents think about what makes children with ADHD feel wellbeing

Aspect	Description
Fulfilled their needs	<ul style="list-style-type: none"> - Their needs are met both material and non-material - Fulfilled the child's wish - Can do what they want - Get attention (kissed/hugged/cared for/loved) - Can express/express what is felt - The child feels comfortable - Can achieve what the child wants

	<ul style="list-style-type: none"> - Not being forced into doing something - Don't feel pressured - When invited for a walk by parents - Have lots of friends - The child feels heard and understood - Be cheerful
Environmental Support	<ul style="list-style-type: none"> - They are accepted by the environment - Get support from the environment - The environment respects what children do - The environment can understand the child's condition - The environment treats children well - The environment can understand what the child is thinking and feeling - The environment knows how to treat children
There is no negative stigma	<ul style="list-style-type: none"> - Not given a negative judgment - Not seen as different and strange

Meanwhile, some things that make children with ADHD feel less wellbeing, according to the perceptions of parents, include the following (table 3).

Table 3.
What parents things that make children with ADHD feel less wellbeing

Aspect	Description
Environmental acceptance	<ul style="list-style-type: none"> - Less acceptance from friends, parents, and the environment - Bullied by friends and the environment - Not accompanied or invited to play by friends - Nobody wants a group work - Treated differently by teachers and the environment - Ignored by the environment - Forced by parents to do something - Parents are impatient and speak high notes
Negative stigma	<ul style="list-style-type: none"> - Is considered a trouble maker by teachers and friends - Labeled negative
Negative behavior	<ul style="list-style-type: none"> - Fight with friends - Behave not adaptively at school - Lack of independence
Needs not met	<ul style="list-style-type: none"> - Desires not fulfilled, rights not fulfilled - The child's favorite stuff is blocked

In addition, in this study, as additional data, it is known what things parents need to do so that children with ADHD feel wellbeing. Based on the results of the FGD, these below are several things parents need to do (Table 4).

Table 4.
The role of parents in optimizing SWB of children with ADHD

The Role	Description
Optimizing the environment	<ul style="list-style-type: none"> - Explain to the environment about the child's condition - Help make the environment comfortable for children - Go to school to sort out issues and give an explanation to the teacher
Optimizing children	<ul style="list-style-type: none"> - be taught how to deal with friends - Teach children empathy - Teach children responsibility - Teach children how to make friends - Helping children do chores at home when they have not finished the chores - Provide space for creativity for children - Accompany to finish while doing assignments - Train children to face the environment to be stronger and more independent - Taking medicine - Provide support to children - Give rewards such as praise, cooking what children like, surprise

Optimizing yourself	<ul style="list-style-type: none"> - Explore children's potential - Must be patient with children - Not overly emotional - Keep trying and never give up - Long term process that must be accepted - Care more for children - Knowing the child's needs - Learning through seminars, training - Approach to children according to children's needs - It's for the children - Istiqomah and consistent - Set a good example for children
Surrender to God	<ul style="list-style-type: none"> - Hope on God - Pray to God

The results of the research conducted through this focus group discussion on parents with the aim of identifying parents' perceptions of subjective well-being in children with ADHD show that, in general according to parents, children with ADHD do not feel wellbeing because of several things as previously stated in the results section. However, there are those who state that their children seem wellbeing and there are also those who say that sometimes children feel well-off, and at different times they seem not. According to the parents who attended the FGD, they stated that children with ADHD will feel wellbeing if there are several aspects, including their needs met, environmental support, if they do not receive negative stigma. Parents also expressed their opinion that children with ADHD still do not feel wellbeing because of several things including a lack of acceptance from the environment, the negative stigma that children with ADHD receive, negative behavior that children still practice, and the child's needs that are still not fulfilled. This is in line with previous study which showed that the negative stigma that children with ADHD receive can result in a negative impact on their mental condition, which makes them rebel and commit negative actions such as drinking alcohol or drugs and other criminal acts (Lawrence et al., 2017). Children with ADHD feel that their needs are not fulfilled in general which has an impact on behavioral problems and academic abilities such as the ability to read (Rogers & Tannock, 2013). Various negative stigma and discrimination in children with ADHD will make them less satisfied with their lives, mentally feel less well-being, are not enthusiastic about treatment, and do not feel confident about themselves (Mueller et al., 2012). It can be concluded that the various things that happen in the lives of children with ADHD can have an impact on their subjective well-being. However, the problem is that well-being in children with ADHD tends to be low and less attention is given. Children with special needs including ADHD tend to have low subjective well-being compared to children in general (Barnes & Harrison, 2017; Peasgood et al., 2016).

Therefore, it is necessary to pay attention to the subjective well-being of children with ADHD, by feeling their well-being, children with developmental disorders including ADHD will be more enthusiastic about living their lives despite their various limitations and their development will be more optimal. Based on the results of this study, it also shows that parents can play a role in helping optimize subjective well-being in children with ADHD, including parents optimizing or conditioning the environment to be more comfortable and able to accept the child's condition. Parents can also optimize the child with various efforts so that the child becomes stronger, more independent, and able to behave more adaptively. In addition, parents also need to have persistence in themselves to be patient, continue to strive to develop themselves by attending seminars or training, and not easily give up in helping their children to develop more optimally, and also to surrender to God. This is in line with previous studies which state that mothers play an important role in optimizing the subjective well-being of children with ADHD by struggling and being active in optimizing children at home and school (Honkasilta, 2015) and families who seek to develop strategies to care for children with ADHD help children feel more well-off in their lives (Firmin & Phillips, 2009).

This study has several limitations, including the small number of sample (18) and the majority of informants are mothers. In addition, the majority of informants' hometown is in Jakarta, so it is limited in the generalization of the results of this study. This study only refers to the results of FGD from parent who have children with ADHD.

4. Conclusion

Through this research, it is expected to get an overview of the perception parents about the well-being of children with ADHD based on parents' perceptions to be input for parents and teachers in schools

to pay more attention and awareness of the well-being of children with ADHD. This can be done by fulfilling children's basic psychological needs. These needs are some of the factors that play a role in making children feel their well-being or not. By identifying the subjective well-being of children with ADHD, it is hoped that teachers, parents, and government can further optimize their respective roles and collaborate with each other to jointly pay attention to children's well-being with various strategies and policies. Therefore, children's basic psychological needs can be more satisfied, parents can build persistence in helping children develop more optimally and children with ADHD can have optimal subjective well-being.

References

- American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders (5th ed.)*. Washington, DC: American Psychiatric Association.
- Barnes, M., & Harrison, E. (2017). *The wellbeing of secondary school pupils with special educational needs*. London: Government Social research.
- Ben-Arieh, A., Casas Feran., Fronces, Ivar., K. J. E. . (2014). *Handbook of Child Well-Being (Theories, Methods and Policies in global perspective)*. New York: Springer.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in Psychology. *Qualitative research in Psychology*, 3 (2), 77-101.
- Chang, L. R. *et al.* (2013). Father's parenting and father-child relationship among children and adolescents with attention-deficit/hyperactivity disorder. *Comprehensive Psychiatry*, 54(2), pp. 128–140. doi: 10.1016/j.comppsy.2012.07.008
- Creswell, J. W., & Creswell, J.D (2017). *Research & Design : Qualitative, quantitative, and mixed methods approaches*. Thousand oaks, CA : Sage Publications.
- Danielson, M. L., Bitsko, R. H., Ghandour, R. M., Holbrook, J. R., Kogan, M. D., & Blumberg, S. J. (2018a). Prevalence of Parent-Reported ADHD Diagnosis and Associated Treatment Among U.S. Children and Adolescents, 2016. *Journal of clinical child and adolescent psychology : the official journal for the Society of Clinical Child and Adolescent Psychology, American Psychological Association, Division 53*, 47(2), 199–212. <https://doi.org/10.1080/15374416.2017.1417860>
- Danielson, M. L., Visser, S. N., Chronis-Tuscano, A., & DuPaul, G. J. (2018b). A National Description of Treatment among United States Children and Adolescents with Attention-Deficit/Hyperactivity Disorder. *The Journal of pediatrics*, 192, 240–246.e1. <https://doi.org/10.1016/j.jpeds.2017.08.040>
- Diener, E., & Suh, E. M. (2000). Self, Hyphen between Culture and Subjective Well-being. *Culture and Subjective Well-Being*, 63–86.
- Diener, E. *et al.* (2017). If, Why, and When Subjective Well-Being Influences Health, and Future Needed Research. *Applied Psychology: Health and Well-Being*, 9(2), pp. 133–167. doi: 10.1111/aphw.12090
- Duckworth, A. L., Quinn, P. D., & Seligman, M. E. P. (2009). Positive predictors of teacher effectiveness. *Journal of Positive Psychology*, 4(6), 540–547. <https://doi.org/10.1080/17439760903157232>
- Eid, M. & Larsen, R. J. (2008) *The science of subjective well-being*. Guilford Press.
- Firmin, Michael W., and Annie Phillips. 2009. 'A Qualitative Study of Families and Children Possessing Diagnoses of ADHD'. *Journal of Family Issues* 30 (9): 1155–74. <https://doi.org/10.1177/0192513X09333709>
- Greenspoon, P. J. and Saklofske, D. H. (2001). Toward an integration of subjective well-being and psychopathology. *Social Indicators Research*, 54(1), pp. 81–108. doi: 10.1023/A:1007219227883

- Honkasilta, Juho, Tanja Vehkakoski, and Simo Vehmas. (2015). Power Struggle, Submission and Partnership: Agency Constructions of Mothers of Children with ADHD Diagnosis in Their Narrated School Involvement. *Scandinavian Journal of Educational Research* 59 (6): 674–90. <https://doi.org/10.1080/00313831.2014.965794>
- Kemenpppa (2011) *Peraturan Menteri negara Pemberdayaan perempuan dan perlindungan anak Republik Indonesia*. retrieve September 10, 2020 from <https://jdih.kemenpppa.go.id>.
- Kuriyan, A. B., Pelham, W. E., Jr., Molina, B. S. G., et al. (2013). Young adult educational and vocational outcomes of children diagnosed with ADD/ADHD. *Journal of Abnormal Child Psychology*, 41, 27–41. doi: 10.1007/s10802-012-9658-z
- Lawrence, K., Estrada, R. D., & McCormick, J. (2017). *Teachers' Experiences With and Perceptions of Students With Attention Deficit/hyperactivity Disorder*. *Journal of Pediatric Nursing*, 36, 141–148. doi:10.1016/j.pedn.2017.06.010
- Mrug, S. et al. (2012). Peer rejection and friendships in children with attention-deficit/ hyperactivity disorder: Contributions to long-term outcomes. *Journal of Abnormal Child Psychology*, 40(6), pp. 1013–1026. doi: 10.1007/s10802-012-9610-2
- Mueller, A. K., Fuermaier, A. B., Koerts, J., & Tucha, L. (2012). Stigma in attention deficit hyperactivity disorder. *Attention deficit and hyperactivity disorders*, 4(3), 101–114. <https://doi.org/10.1007/s12402-012-0085-3>
- Park, N. (2004). The Role of Subjective Well-Being in Positive Youth Development. *The ANNALS of the American Academy of Political and Social Science* 2004, 591, pp. 25–39. doi: 10.1177/0002716203260078
- Peasgood, T. et al. (2016). The impact of ADHD on the health and well-being of ADHD children and their siblings. *European Child and Adolescent Psychiatry*. Springer Berlin Heidelberg, 25(11), pp. 1217–1231. doi: 10.1007/s00787-016-0841-6.
- Pollard, E.L., Lee, P.D. Child Well-being: A Systematic Review of the Literature. *Social Indicators Research* 61, 59–78 (2003). <https://doi.org/10.1023/A:1021284215801>
- Ravens-sieberer, U., Devine, J., Bevans, K., Riley, W., Moon, J., Salsman, J. M., & Forrest, C. B. (2015). Subjective well-being measures for children were developed within the PROMIS(R) project: Presentation of first results. *J Clin Epidemiol*, 67(2), 207–218. <https://doi.org/10.1016/j.jclinepi.2013.08.018>.
- Rogers, M., & Tannock, R. (2013). Are Classrooms Meeting the Basic Psychological Needs of Children With ADHD Symptoms? A Self-Determination Theory Perspective. *Journal of Attention Disorders*, 108705471350892. <https://doi.org/10.1177/1087054713508926>
- Saputro, Dwidjo (2009). *ADHD (Attention Deficit/Hyperactivity Disorder)*. Jakarta : Agung Seto.
- Sayal, K., Prasad, V., Daley, D., Ford, T., & Coghill, D. (2018). ADHD in children and young people: prevalence, care pathways, and service provision. *The Lancet Psychiatry*, 5(2), 175–186. doi:10.1016/s2215-0366(17)30167-0
- Sarma A & Dunay A., (2018). An Analysis on Education for Children with Disabilities: A Qualitative Study on Head- Teachers, Teachers and Conductor-Teachers Perception towards Inclusion in Hungary. *Journal of Advanced Management Science*, 6 (2), 117-123. DOI: [10.18178/joams.6.2.117-123](https://doi.org/10.18178/joams.6.2.117-123)
- Seligman, M. E. P., Parks, A. C., & Steen, T. (2004). A balanced psychology and a full life. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 359(1449), 1379–1381. <https://doi.org/10.1098/rstb.2004.1513>

- Shaw, P., Stringaris, A., Nigg, J., & Leibenluft, E. (2014). Emotion dysregulation in attention deficit hyperactivity disorder. *The American journal of psychiatry*, 171(3), 276–293. <https://doi.org/10.1176/appi.ajp.2013.13070966>
- Yardley Lucy (2017). Demonstrating the validity of qualitative research. *The Journal of Positive Psychology*, 12:3, 295-296. DOI: 10.1080/17439760.2016.1262624
- Yonghee Hong (2008) Teachers' perceptions of young children with ADHD in Korea, *Early Child Development and Care*, 178:4, 399-414, DOI: [10.1080/03004430701321829](https://doi.org/10.1080/03004430701321829)