

Emotional Maturity in Adolescents with Physical Disabilities: The Impact of Parental Attachment

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Received 12 May 2024; Received in revised form 10 June 2024; Accepted 8 July 2024

ABSTRACT

Adolescents with physical disabilities also undergo a transitional period during adolescence, requiring assistance to achieve emotional maturity appropriate for their age. This necessitates support from the immediate environment, which can be obtained through parents. The aim of this study is to investigate the relationship between parental attachment and emotional maturity in adolescents with physical disabilities. The participants in this study were 56 adolescents with physical disabilities in the city of Salatiga, aged between 11 and 20 years. The sampling technique used in this study was snowball sampling. Data collection utilized the Inventory of Parent Attachment, consisting of sections on attachment to the mother and attachment to the father, and the second scale employed the Emotional Maturity Scale (EMS). The results of this study indicate a significant positive relationship between attachment to parents and emotional maturity, with a correlation of $r = 0.452$ and significance of 0.000 ($p < 0.05$). This means that the higher the level of secure attachment to parents, the higher the emotional maturity in adolescents with physical disabilities. The findings of this study can be used to develop interventions for specialized educational institutions for individuals with disabilities and serve as a reference for readers.

Keywords: adolescents with physical disabilities, parental attachment, emotional maturity, disability transition, intervention strategies



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INTRODUCTION

Adolescence, a pivotal period bridging childhood and early adulthood, signifies a phase of multifaceted development encompassing mental, emotional, social, and physical maturation (Hurlock, 2010). This transitional stage typically spans from ages 11 to 23, characterized by a condensed developmental trajectory relative to childhood, adulthood, or old age (Santrock, 2012). Adolescents encounter novel experiences and undergo profound transformations, fueled by a heightened curiosity that underscores the imperative of managing the myriad factors shaping their developmental journey (Santrock, 2012). Notably, adolescents with disabilities traverse distinct developmental pathways during their teenage years (Caroline, 2015). In Indonesia, data from the Ministry of Social Affairs reveals that 30% of children grapple with disabilities (Nurakhmi, Santoso & Pangestu, 2019). Consequently, adolescents with special needs often confront emotional challenges, exhibiting heightened emotional responses in social interactions and environmental contexts (Jannati et al., 2021). Moreover, adolescents with disabilities aspire to foster meaningful connections, yet they contend with the burdens of social relationship complexities, including the pervasive stigma emanating from societal attitudes (Hurlock, 2010). This stigma engenders a spectrum of psychological adversities, encompassing emotional and mental health concerns (Kemendikbud, 2019). Jannati et al. (2021) observed that 17.7% of children with disabilities grapple with emotional issues, while Lestari Tri Riana et al. (2018) found that

18% of adolescents fall within the borderline range of mental health, indicating compromised psychological well-being.

The prevalence of emotional mental health issues surged from 6.0% in 2013 to 9.8% in 2018 in Indonesia (Kemenkes RI, 2018). The Health Window Bulletin by the Ministry of Health (2014) underscores that parental constraints on social interactions, such as restricting outdoor activities, limiting social circles, and prohibiting certain activities, engender emotional challenges among adolescents with special needs. Parents' apprehensions regarding their children falling victim to bullying or experiencing shame often underscore such restrictions. Sklar's research (2011) corroborates that adolescents subjected to bullying exhibit diminished attachment to both parents and peers. During adolescence, emotional impulses often eclipse rational thought processes, mirroring the normative developmental trajectory characterized by emotional volatility (Jobson, 2020).

Emotional maturity denotes the capacity to regulate emotions effectively (Hurlock, 2010). Singh and Bhargava (Yuliyasari, 2017) underscore emotional maturity as the product of cognitive processes and learning, entailing critical evaluation of situations before emotional reactions ensue. Walgito (2010) posits that advancing age ostensibly correlates with manifestations of emotional maturity, albeit age alone cannot serve as a definitive metric. Adolescents necessitate parental support, guidance from educators, and nurturing environments to navigate emotional upheavals (Zola, Ilyas, & Yusri, 2017; Churni, & Ifdil, 2017). The Centre for Child Well-Being (2012) underscores the pivotal role of parental involvement in facilitating the developmental trajectories of children, including those with disabilities. The genesis of emotional maturity is intricately intertwined with parental nurturing, with parents assuming a pivotal role in cultivating emotional resilience (Natalia & Lestari, 2015). Imhode (2013) elucidates how inadequate parent-child communication fosters aggression, particularly during adolescence. Mortazavi, Sohrabi, & Hatami's research (2012) underscores the salience of secure parental attachment in fulfilling children's emotional needs, averting negative emotional manifestations. Parenting styles, familial attachments, and socio-environmental dynamics collectively shape adolescents' emotional landscapes (Wahyuni & Asra, 2014). Research by Helsen, M., Vollebergh, W., & Meeus, W. (2000) posits that excessive parental attachment may impede adolescents' emotional maturity, diminishing reliance on peer support. Likewise, Barber, B. K., & Harmon, E. L. (2002) contend that overbearing parental control engenders emotional maladjustments in adolescents, curtailing autonomy and self-regulation. This study assumes significance in acknowledging the pivotal role of emotional maturity in shaping developmental trajectories and adaptive capacities, particularly among adolescents with physical disabilities. Furthermore, it offers insights into the interplay between parental attachment and emotional maturity in this demographic. By extending prior research and addressing extant debates, this investigation aims to elucidate the "Relationship between Parent Attachment and Emotional Maturity in Adolescents with Physical Disabilities," informed by empirical observations and scholarly discourse.

METHOD

The research design employed in this study is correlational research aimed at examining the relationship between parental attachment and emotional maturity. The data collection technique utilized was snowball sampling, wherein the initial sample selection started from a small group and expanded based on referrals from previous participants. The respondents for this study were

adolescents with physical disabilities aged 11 to 20 years old in the city of Salatiga. There were 56 respondents who met the criteria for this study, comprising 20 (20.0%) males and 36 (36.0%) females. The instruments utilized in this research were the Emotional Maturity Scale (EMS) for measuring emotional maturity and the Inventory of Parent Attachment for assessing the level of attachment to parents.

The Emotional Maturity Scale (EMS) instrument, developed by Yashvir Singh and Mahesh Bhargava (2005), has been adapted into the Indonesian language. The instrument consists of 48 items covering five aspects of emotional maturity: emotional stability, emotional development, social adjustment, personality integration, and autonomy. It is structured in a Likert scale format with response options ranging from 1 to 5, categorized as very often (5), often (4), sometimes (3), rarely (2), and never (1). The obtained scores indicate that higher scores correspond to higher emotional maturity, and conversely, lower scores indicate lower emotional maturity.

The Inventory of Parent and Peer Attachment – revised version (IPPA), developed by Armsden and Greenberg (2009) with Cornbach's Alpha for Mother attachment at 0.87 and Father attachment at 0.89, has also been adapted into the Indonesian language. The scale consists of three parts: the first part measures attachment to the mother, the second part measures attachment to the father, and the third part measures attachment to peers. However, for this study, only two parts were utilized: the inventory of parent attachment, which includes attachment to the mother and attachment to the father. Each part comprises 25 items measured on a Likert scale with response options ranging from 1 to 5, categorized as very often (5), often (4), sometimes (3), rarely (2), and never (1). Higher scores indicate higher levels of attachment to parents, and conversely, lower scores indicate lower levels of attachment to parents.

Data analysis was conducted using the SPSS (Statistical Product and Service Solutions) 24 for Windows program. The initial step involved testing the reliability or discrimination of items on the two scales used in this study. Data analysis included testing assumptions, such as normality, to determine whether the data followed a normal distribution. Subsequently, linearity tests were conducted to assess whether the two variables in this study had a significant relationship. Hypothesis testing in this research utilized the Pearson correlation technique, assuming that the data followed a normal distribution.

RESULT AND DISCUSSION

This study investigates the relationship between parent attachment and emotional maturity among 56 adolescents with physical disabilities in Salatiga City. The demographic data revealed a gender distribution of 36 females and 20 males, with age categories ranging from 12 to 20 years. Analysis indicates a significant positive correlation ($r = 0.459$, $p < 0.05$) between parent attachment and emotional maturity, with parent attachment influencing emotional maturity by 26.1%. Findings suggest that higher levels of parent attachment are associated with higher levels of emotional maturity, emphasizing the importance of parental influence in shaping adolescents' emotional development.

Based on Table 1, the demographic data of the respondents in this study, totaling 56 adolescents with physical disabilities, are presented. It is divided into categories of gender, with 36 female respondents and 20 male respondents. Additionally, the demographic data in Table 1 is categorized based on age, consisting of 14 respondents in the age range of 12 - 14 years, 26 respondents in the age range of 15 - 17 years, and 16 respondents in the age range of 18 - 20 years.

Table 1. Respondent Demographic Data

Category	Number	Percentage
Gender		
Male	20	20.0%
Female	36	36.0%
Age		
12 - 14 Years	14	14.0%
15 - 17 Years	26	26.0%
18 - 20 Years	16	16.0%

Table 2. Emotional Maturity Scale Categorization

Category	Number	Percentage
Low	14 - 101	14.0%
Medium	102 - 173	37.0%
High	174 - 245	5.0%
Total	56	56.0%

Table 3. Parent Attachment Scale Categorization

Category	Number	Percentage
Low	80 - 178	17.0%
Medium	179 - 275	30.0%
High	276 - 373	9.0%
Total	56	56.0%

Table 4. Regression Analysis Results

Variable	Regression Coefficient (Beta)	Correlation Coefficient (r)	Rsquare
Parent Attachment	0.569	0.459	0.261

The effective contribution is a measure of a predictor variable's or independent variable's contribution to the criterion or dependent variable in regression analysis. Based on the calculated results above, the effective contribution (SE) of the parent attachment variable (X) to emotional maturity (Y) is 26.1%. The total SE of 26.1% is equal to the Rsquare coefficient of the regression analysis, which is 0.261 or 26.1%.

Table 5. Normality Test Results

Variable	N	Mean	Std. Deviation	Most Extreme Differences	Test Statistic	Asymp Sig. (2-tailed)
Parent Attachment	56	222.07	49.678	Absolute: 0.066	0.066	0.200
Emotional Maturity	56	162.82	22.792	Absolute: 0.115	0.115	0.063

The significance values (Asymp. Sig. 2-tailed) for the parent attachment variable are 0.200 and for the emotional maturity variable are 0.063. Both variables have significance values greater than 0.05 ($p > 0.05$), indicating normal distribution of the data. The strength of the relationship between the two variables is expressed in the correlation coefficient, and the results show that $r = 0.452$, indicating a positive correlation between the two variables. The Sig. 2-tailed result is 0.000, which is significant ($p < 0.05$). Therefore, H1 is significantly accepted.

Table 6. Hypothesis Correlation Test Results

Variable	Pearson Correlation	Sig. (2-tailed)	N
Parent Attachment	1	0.000	56
Emotional Maturity	0.459	1	56

This study aimed to determine the relationship between parent attachment and emotional maturity among adolescents with physical disabilities in Salatiga City. Based on the data analysis results, a correlation test yielded a correlation coefficient of 0.459 with a significance of 0.000 ($p < 0.05$), indicating a positive relationship between parent attachment and emotional maturity. This positive relationship suggests that higher levels of parent attachment are associated with higher levels of emotional maturity among adolescents with physical disabilities. This finding is consistent with research by Natalie and Lestari (2015), indicating that emotional maturity development is closely related to the attachment obtained from the way parents treat their children. The study also found a significant relationship between secure attachment and emotional maturity, with a determination coefficient of 1.91%. However, the effective contribution based on the calculated data resulted in a contribution of 26.1%, indicating that the parent attachment variable influences emotional maturity by 26.1%, with the remaining influenced by other variables. It was found in this study that 14 (14.0%) respondents had low levels of emotional maturity, 37 (37.0%) respondents had moderate levels, and 5 (5.0%) respondents had high levels. This indicates that the level of emotional maturity among adolescents with physical disabilities is predominantly moderate to low. This finding aligns with research by Jannati et al. (2021), which found that 17.7% of children with disabilities experience mental and emotional problems.

Based on observations during the data collection process, adolescents with physical disabilities tend to be introverted, preferring solitude and silence. This behavior stems from a lack of confidence due to their physical differences or disabilities compared to others. The inability to form self-identity results from fear or reluctance to interact with their social environment, influenced by emotional development. This aligns with Santrock's (2012) research, stating that emotional development leading to emotional maturity in adolescence involves building a realistic identity in direct interaction with others and learning to manage stress and emotions. According to Jobson (2020), emotional maturity can be achieved by adolescents through openness in expressing feelings to others, leading to a sense of security in social relationships and stable emotional control. However, the results of this study show that adolescents with physical disabilities experience a lack of confidence because they feel insecure when socializing with others. This insecurity arises from the pressure felt when they are in a social environment that does not accept their differences, which is in line with Hurlock's (2010) assertion that there is pressure when individuals with disabilities have difficulty forming relationships in their social environment. This insecurity is related to the attachment received from their parents. Essentially, parent attachment can help

adolescents minimize anxiety and potential emotional distress associated with the transition from childhood to adulthood (Santrock, 2012).

In this study, it was found that 17 (17.0%) respondents had low levels of parent attachment, 30 (30.0%) subjects had moderate levels, and 9 (9.0%) subjects had high levels. From this data, it can be inferred that parent attachment among adolescents with physical disabilities is predominantly moderate to low. However, observations and analyzed data indicate that parents cannot always supervise their children. In cases involving adolescents with physical disabilities, they tend to be distant from their parents, with parents imposing restrictions out of worry, work demands that prevent them from being near their children, and limited knowledge about how to treat children with disabilities. This aligns with data from the Ministry of Health in the Health Window Bulletin (2014), which states that emotional problems experienced by special needs adolescents arise from parental restrictions in their social interactions, such as not allowing them to leave the house, limiting playmates, and restricting activities deemed beyond their capabilities. The reasons given by parents usually stem from anxiety and fear of their children becoming victims of bullying, embarrassment, and so on.

Based on observations during the data collection process, most mothers accompany their children to school. Some adolescents also express a closer bond with their mothers because they spend more time together than with their fathers. This aligns with research by Melinda (2021), which states that mothers hold a higher level of attachment with their children than fathers because mothers have more interactions, fulfill their children's needs, and provide comfort. Another reason why children are not as close to their fathers is due to the demands of work, limiting interaction time with their fathers. The attachment of adolescents with physical disabilities to their mothers can be attributed to the amount of time they spend together, interacting, talking, guiding, playing, and ensuring their children always feel safe. Parental awareness of their children's shortcomings motivates them to accompany their children so they can develop positively.

Looking at research conducted by Wahyuni and Asra (2014), which states that the way parents raise their children, children's attachment to parents, school and social environment are external factors that affect children's emotions. Attachment affects how children express themselves to their surroundings and how they interact with others. This is evidenced by research conducted by Mortazavi, Sohrabi, & Hatami (2012), which states that secure attachment to parents meets children's emotional needs, thus preventing emotional deficiencies that could lead to negative emotional expression. Negative expression can be seen in children's behavior, such as in adolescence, which should have a level of independence and social behavior that begins to develop from childhood, but in adolescents with physical disabilities, there is still dependence on others and reliance on others to complete their tasks. From observations during the data collection process, excessively strong attachment between parents and children actually hinders children's independence, as a sense of dependence emerges and parents tolerate it due to their children's physical limitations. This aligns with the findings of Helsen, M., Vollebergh, W., & Meeus, W. (2000), which state that excessively strong attachment to parents can hinder the emotional maturity development of adolescents by reducing their dependence on social support from peers. Additionally, parental control and restraint on children also limit children's ability to do things that make them happy and hinder children's development. Thus, parental treatment of their children will affect the emotional maturity of children, especially during adolescence.

This study has several limitations, including requiring more time for respondents to fill out questionnaires due to time constraints and adjusting to respondents' activities. Additionally, finding respondents was not confined to one location but multiple locations, requiring a significant amount of time to gather data. Therefore, suggestions for future research include specifying respondents and locations for data collection to streamline the research process.

Implications for Counseling and Guidance

The findings from this study, which reveal a significant positive correlation between parent attachment and emotional maturity among adolescents with physical disabilities in Salatiga City, underscore several important implications for counseling and guidance services. Firstly, emphasizing the role of parent attachment in counseling sessions is crucial. Counselors should work with parents to help them understand the significant impact their attachment styles have on their children's emotional maturity. Parenting workshops and support groups can be organized to educate parents on the importance of secure attachment and provide them with strategies to foster a nurturing and supportive home environment. This can include activities that enhance parent-child bonding, such as regular quality time, open communication, and expressing unconditional support. Secondly, developing tailored interventions that address both the needs of adolescents with physical disabilities and their parents is essential. Counseling programs should include components that focus on building emotional resilience and maturity in adolescents. These programs can teach coping mechanisms for dealing with social anxieties, fostering independence, and managing emotions effectively. For parents, interventions can include training on how to support their children's autonomy while providing the necessary guidance and emotional support. Moreover, integrating family therapy into the counseling services can be highly beneficial. Family therapy sessions can help improve family dynamics by addressing issues of overprotectiveness and communication barriers. It can facilitate a better understanding between parents and children, allowing parents to gradually release control and trust their children to make decisions, thereby promoting emotional growth and maturity. Additionally, creating a supportive school environment is vital. Schools can play a significant role in fostering emotional maturity by implementing inclusive policies and providing resources that cater to the needs of students with physical disabilities. School counselors should collaborate with teachers to create an inclusive classroom environment where all students feel valued and supported. Peer support programs can also be established to help students build social connections and develop a sense of belonging. Promoting self-advocacy and independence among adolescents with physical disabilities is another important aspect. Counselors should encourage these adolescents to advocate for their needs and preferences, both at home and in school. Teaching self-advocacy skills can empower them to take charge of their lives and reduce dependency on others. This can be achieved through role-playing scenarios, workshops on communication skills, and setting personal goals. Addressing emotional and mental health needs directly through individual counseling sessions can also help adolescents with physical disabilities navigate the challenges they face. Counselors can work with these adolescents to develop emotional regulation skills, build self-esteem, and reduce feelings of isolation. Cognitive-behavioral therapy (CBT) techniques can be particularly effective in helping them manage negative thoughts and emotions. Lastly, collaborating with community organizations that support individuals with disabilities can extend the reach of counseling and guidance services. These organizations can provide additional resources, such as recreational programs, mentorship

opportunities, and social events that promote inclusion and emotional well-being. By connecting families with community resources, counselors can help create a more comprehensive support network for adolescents with physical disabilities.

CONCLUSION

Based on the analysis and discussion conducted, it can be concluded that parent attachment influences the level of emotional maturity among adolescents with physical disabilities. The research and discussion regarding the relationship between parent attachment and emotional maturity in adolescents with physical disabilities indicate a positive correlation between parent attachment and emotional maturity in this population. In this study, adolescents with physical disabilities exhibited a moderate level of parent attachment in the category of 179 - 275 score intervals, with 30 subjects, and a moderate level of emotional maturity in the category of 102 - 173 score intervals, with 37 subjects. The effective contribution of parent attachment to emotional maturity from the regression analysis in this study was found to be 26.1%, indicating that the remaining 73.9% is influenced by other factors.

Based on the findings and conclusions drawn from this research, it is hoped that the results of this study can provide knowledge for the research subjects to address emotional issues and cultivate a sense of security starting from attachment to their parents, enabling them to adapt to their social environment and aid in the adaptation process with the surrounding environment, as well as embracing differences within themselves. For parents, understanding that the attachment they establish with their child influences the child's developmental process, especially in children with disabilities, is crucial. Thus, parents can pay attention and make informed decisions for their children, seeking input and sources of study to make appropriate interventions or treatments to support aspects and factors affecting emotional maturity in adolescents, especially those with physical disabilities. Providing insights and new information regarding emotional maturity in adolescents with physical disabilities in relation to parent attachment can serve as a reference and consideration for future research, thereby expanding the scope of research, enlarging the population and sample size, and uncovering relationships with other variables. Additionally, future research could include more in-depth data and research or conduct qualitative research to delve deeper into and explore both variables using aspects and factors from these variables.

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