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Subjective well being children with ADHD

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ABSTRACT

Identifying how subjective well-being is based on the perceptions of children with ADHD itself 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 its important to be known. The child's voice is important and is the most accurate data in showing what the child feels themselves include about their subjective wellbeing. Case study qualitative research methods by interview with a sample of 44 children comprising 3 females, 41 males (age 8-12). Data analysis was using thematic analysis with NVIVO 12. The results indicate that children with ADHD in general, in their lives, are already having their well-being and some are not. In general the factors that make children with ADHD feel their well-being or not, include about capable do something, when get what they want, and have positive/negative relationships with the people around them. It is important to pay attention to the subjective well-being 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.



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Introduction

Attention-Deficit/Hyperactivity Disorder (ADHD) is a neurodevelopmental development disorder (American Psychological Association (APA), 2018; APA, 2013). Global prevalence is an average of 5% occurring in childhood (Sayal, et al., 2017). According to DSM V, ADHD has three main symptoms i.e. inattention, hyperactivity, and impulsivity (APA, 2013).

The symptom is shaped in the behavior that occurs in various settings such as home and school that can affect the child's performance in social terms, education, and even work as well as criminal acts perpetrated at an adult age if not handled properly (Sayal, et al., 2017). So, ADHD can become a life disability (Siregar, 2018). ADHD is mostly diagnosed by medical personnel such as psychiatrists and pediatricians and in part by psychologists (Danielson et al., 2018). ADHD is more common in male than in female children (Lawrence, et al, 2017), but there are still many cases of ADHD misdiagnosis and those that are not well identified in children—even in female children it is still limited (Sayal, et al., 2017). ADHD can be influenced by epigenetic factors (Hamza et al., 2017).

Some behavioral problems that occur in children with ADHD include emotional dysregulation (Shaw, et al, 2015), mental disorders such as self-injury, antisocial behavior, disruptive and opposing behavior, low academic achievement, and negative stigma (Sayal et al., 2018). These behavioral problems can make it difficult for children to interact with peers and social relationships with people around them become poor, including at school and home (Lawrence, et al, 2017).

Support from parent and surrounding is an important part of helping children with ADHD cope with behavioral problems (Berns, 2016; Climie & Mitchell, 2017) , but there is still a lot of negative stigma against

those given by peers and adults including teachers and parents (Harazni & Nursing, 2016). Negative stigma received by children with ADHD can have a negative impact on these children's mental condition that makes them rebel and commit negative actions such as drinking or doing drugs and other criminal acts (Lawrence, et al, 2017). Various negative stigmas and discrimination in children with ADHD will make them less satisfied in their lives, mentally feel less well off, have no enthusiasm for treatment and do not feel confident about themselves (Irsanti, 2017; Mueller, et al., 2012). It is not easy for parents to deal with children ADHD, sometimes they feel stressed which makes them feel annoyed and angry at children with ADHD (Babakhanian, et al., 2016; Moen, et al., 2016; Muñoz-Silva, et al., 2017; Shahbaz & Hasan, 2017). so this condition can makes children with ADHD feel not uncomfortable which is can impact to children wellbeing.

Well-being is important to be considered in children from an early age because it plays an important role in shaping a quality generation in the future, including in Indonesia. Conversely, if the child's well-being is not considered, it will have a negative impact on the child's development process in the short and long term. A positive environment can strengthen children's mental health and well-being (Diener, et al., 2017; Gaspar, et al., 2016).

ADHD conditions can affect the subjective health and well-being of children with ADHD (Diener, et al., 2017; Peasgood et al., 2016). Several studies on subjective wellbeing in children mostly use a scale filled by adults who interact directly with children, such as parents and teachers who are considered to represent what children think as a proxy based on their experiences and observations of everyday children (Ben-Arieh, et al., 2014; Dinisman & Ben-ariel, 2015; Tobia, et al., 2018). However, the child's voice is important and is the most accurate data in showing what the child feels themselves, and sometimes what they feel is different from the perceptions of parents or other adults in describing the child (Ben-Arieh, et al., 2014).

Subjective well-being can contribute to various positive things, Furthermore, it is also an important indicator in promoting and managing optimal mental health in children (Park, 2004). 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. 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).

According to Ravens-sieberer et al., (2015), 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 ADHD are still limited, especially in Indonesia.

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 from the child's own point of view. 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 factors make children with ADHD feel their well-being and what factors 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.

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) awareness with information that may improve the children's perspective toward the research on 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.

Method

This study uses a case study method with a thematic qualitative analysis approach. 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, J.W&Creswel, 2017). Thematic analysis was chosen as a constructivist paradigm based on the perspective of each individual. This

analysis is identified and interpreted by the researcher using the semi-structured interview method to understand how subjective well being children with ADHD.

Ethical clearance was carried out as a permit and eligibility for data collection was approved by Padjadjaran University. This research procedure was carried out in the following stages: 1) The researchers contacted and invited parents who indicate have children with ADHD (based on data from school and hospital) were willing to take part in the research and made an appointment directly with their parents and met in one of the agreed places, including in the hospital, at the psychology bureau, or at school; 2) Researchers explain and ask the consent of parents and children by filling in informed consent; 3) Researchers do some assessment psychology to make sure condition ADHD in children (interviewed teachers and parents, detection ADHD using SPAHHI scale (scale for detection ADHD developed by Dr. Dwidjo saputro (Saputro, 2009), observation and intelligence test) ; 4) Checking and discussing with psychiatrists regarding the child's behavior whether the criteria for being a child with ADHD are met if they have not previously been diagnosed; 5) When the criteria have been met, the researcher conducts semi-structured interviews with interview guides accompanied by probing.

Participants were school-aged children with ADHD comprising a total of 44 children (3 females and 41 males aged 8-12 years old) from 15 regular primary schools where there were children with ADHD in the JABODETABEK/Greater Jakarta area (Jakarta-Bogor-Depok-Tangerang-Bekasi), Indonesia, within 10 months (Mei 2019-March 2020).. Inclusion criteria Children with ADHD (IQ>91, diagnostic from psychologist or psychiatrist). The sampling technique used purposive sampling. The children with ADHD can perform two-way communicate. (Table 1).

Table 1. Participant Characteristics

Characteristics	Distribution (Percentage)
Age	
Range	8-12
8 years old	2 (4.5%)
9 years old	6 (13.6%)
10 years old	17 (38.6%)
11 yearsold	14 (31.8%)
12 years old	5 (11.5%)
Gender: n (%)	
Female	3 (6.8%)
Male	41 (93.2%)

The interviews conducted by an experienced qualitative researchers. Some of the questions raised were related to teachers' perceptions of the well-being of children with ADHD. The questions asked are as follows: 1) Do you feel your well-being/happy?; 2) What makes you feel your well-being; 3) What are the things that make you feel less of having well-being?

The interview process was recorded through an audio record with consent from the informants in Indonesian, then rewritten verbatim to be analyzed based on the theme. Interviews were held in one of the agreed places, including in the hospital, at the psychology bureau, or at school. Interviews lasted 30 min on average (20-45 min).

Data analysis was performed using NVIVO PRO version 12 to organize and code transcripts of qualitative data following 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 teacher 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.

The researcher explain themes based on children with ADHD's comments as participants. The relevant comments were presented in the findings section, and the findings are presented by gender, number subject and age of the participants in italics (e.g. female, S1, age 10).

Result and Discussion

The results of this study refer to the aim of the study, which is to identify how children with ADHD perceive their own well-being about their lives. The discussion of the research results is described based on several questions addressed to children regarding the well-being of children with ADHD including: 1) Do you feel your well-being/happy?; 2) What makes you feel your well-being; 3) What are the factors that make you feel you have less well-being? The results of the questions posed to informants are described descriptively in the sections below.

Do children with ADHD feel their well-being in life?

During the interview process, there were children with ADHD who understood the meaning of well-being, but some did not understand what was meant by the term well-being. Therefore, researchers used the term "happy" to ask children who described the word well-being because children were able to understand the meaning of the word "happy" better than "well-being" for those who do not understand the meaning of "well-being". The term happy is often used interchangeably in explaining the term well-being, not as a separate term. This is reinforced by the opinion of Diener, (2009) who explain that subjective well-being is popular with the term happiness.

Based on the results of this study, it is known that there are children with ADHD who perceive themselves as feeling their well-being, but there are also children who feel that they are not fully having their well-being. Wellbeing of children with ADHD perspective in general when asked whether they already feel well being / happy, more of them answered that they felt happy, but there were also those who answered that they still did not feel well being. Then the researcher asked more specifically what things made children feel happy and whether there were things that made children feel unhappy. The following will describe what factors make them feel happy and what factors make them feel unhappy.

Factors that make children with ADHD feel their well-being

Based on the results of interviews revealed from children with ADHD using thematic analysis, there are several things that make children with ADHD feel their well-being. Some of the children's opinions related to these factors are described in table 3 and will then be described in each factors explanation (Table 2).

Table 2. Factors of children with ADHD feeling their well-being

No.	Factors	Classification of Comments for Children with ADHD
1	Capable of doing something	Happy when facing a challenge Happy to be able to develop their abilities by participating in activities Enjoy certain lessons or activities
2	Positive social relations	Positive relationship with teachers Positive relationships with peers Relationship with parents Relationship with siblings
3	Getting what they want	Freedom to do what they want Can go on a recreation or vacation

Factor 1. Children's ability to do something

Some children with ADHD feel their well-being when they feel they can do something. This is when they say that they are happy when they face a challenge:

"happy when there are difficult obstacles" (Male, subject 34, age 10), and "it's nice to learn difficult material there are exciting challenges" (Male, S15 , age 10).

Children feel happy when they can develop their abilities by participating in competitions or tutoring:

"I like to participate in running competitions because I like running. In grade 4 or grade 5 later, I want to take basketball lessons because I like basketball" (Female, S11, age 10).

Children also seem happy when they are able to do the lessons or activities that they are good at as shown:

"In school, the math exam is the most fun activity" (Female, S11, age 10); *"Good at writing, diligent in reading, diligent at school, enthusiastic about learning"* (Male, S 13, age 11).

Factor 2: Children get what they want

Children with ADHD said that they feel happy when they are free to do what they want:

"I like when I get what I want, I can play outside, I can play with my cellphone, I am given a TV room" (Male, S28, age 12).

In addition, children also feel happy to get what they want, including going with their parents on vacation or recreation.

"Going out for a walk, invited to go" (male, S24, age 9); *"traveling with family"* (male, S35, age 10)

The statements of children with ADHD in showing their feeling of happiness seem to describe the desires of the child informant's looking simple and related to what they feel now such as the desire to go on a vacation, be able to watch TV or play games, get something they want that is concrete in nature.

Factor 3. Positive social relations

Children with ADHD feel that they are already feeling happy and wellbeing when they can have a positive relationship with the people around them.

A positive relationship with the teacher ;

"The teachers are good, so I'm happy" (Male, S3, age 10).

They also feel positive relationship with their parents ;

"I'm happy, dad and mom are good" (male, S2, age 9)

Children with ADHD also feel happy with their positive relationship with their siblings;

"if there is no friend to play with, I play with my younger sibling because she likes it when I play with him" (Male, S10, age 9).

Children with ADHD feel happy when they have positive relationships with their peers:

"The one I likes the most is to play with friends, I want to be invited to play with them" (male, S10, age 9); *"I like at school when I am invited to play continuously, study together, play together, I am not sad anymore and I am happy"* (male, S 11, age 10).

The statements of children with ADHD in showing their feeling, It just that when children feel their well-being, children feel positive affect in their life and seems to feel satisfaction in their life. They feel happy, enjoy, like and they happy when they have satisfaction in their life especially when they have positive social relationship and get what they want.

Factors that make children with ADHD do not feel their well-being

Children with ADHD said that there were things that made them feel their well-being, but some also expressed that they feel it less. They express their displeasure at experiencing things they are not comfortable with or are not pleased with. Some of the things that make children with ADHD seem to have less of their well-being are due to several factors from the children's own perspective presented in the table 3.

Factor 1: Feeling inadequate towards something

Feeling inadequate towards something makes children with ADHD feel sad, one of which that's makes them feel sad or unhappy because they feel they are not optimal, such as not being able/feel difficult to complete their tasks completely like :

"In school it is not fun because there are always tests, because the tests are difficult" (male, S 1, age 10).

Children with ADHD feel unhappy when they get low scores as expressed;

"Sometimes I get scolded by my mother, sometimes it's the same as my father because I've got low grades (male, S5, age 10); "No, because they scold for being disrespectful, if I've got bad grades, they scold at me" (male, S1, age 10).

Children with ADHD feel dissatisfied because of unfinished tasks;

"Lessons like to be finished but sometimes I don't finish because I like to go out sometimes (male, S 7, age 10); In class I like to run, the lessons like not finished, like to miss (male, S42, age 8).

Children with ADHD also feel sad when they do not receive the trust for them to show their abilities, as conveyed by the child with ADHD below.

"What annoys me is usually if they can't answer even though I've appointed them, my team lost because of my friends, so I'm angry. I'm annoyed when I failed to become class president every time I volunteer, but no one chose me. I am also annoyed if I don't get chosen to be the group leader (male, S 4, age 10).

Table 3. Factors of children with ADHD feeling less of their well-being

No.	Aspect	Classification of Teacher Comments
1	Feelings of inadequacy about doing something	Less than optimal academic achievements Not given the trust to show their abilities
2	Social relations	Often disturbed by their siblings Parents scolded/reprimanded Teacher scolded/reprimanded Losing loved ones Negative peer relationships
3	Not getting what they wanted	Not having freedom to do what you want Unfulfilled wish
4	Not have purpose and meaning in life	

Factor 2: Social Relations

The results of interviews with ADHD children showed that most children with ADHD conveyed their feelings of unhappiness and sadness when they had negative relationships with people around them.

Children with ADHD felt displeasure when their relationship with their siblings was not good.

"At home I don't like being angry, but when my older sibling started, I then get angry, I kick the bed I run upstairs and watch TV, if I look at his/her face I don't want to see his/her face. When she is angry, she looks like a devil. Last night I broke my older sibling's hairpin, and she scratched me that I had some betadine" (Male, S4, age 12).

Children with ADHD also expressed sadness when their parents scolded or reprimanded them, as conveyed by the following children with ADHD.

"At home I'm often ignored, mom likes to be angry, I'm often locked in my room to study. Mom is not angry if I obey her.(female, subject 11, age 10); "Being scolded, my father likes to hit me" (male, S12, age 11); "I disliked being beaten by my father because I made mistakes" (male, S 12, age 11).

Some children with ADHD also expressed that they would feel unhappy or sad if their teacher scolded or reprimanded them.

"I was once reprimanded by the teacher, I was in grade 1, I liked to walk around in class because I often make errors so I borrow erasers from my friends, if I got scolded I am scared and sad" (female, S11, age 10); "Teachers reprimand me for causing trouble" (male, S 2, age 9); I often get scolded for walking around, I get scolded for nagging too much, I was scolded by the most frightening teacher, I used disturb my friends but now not too much" (male, S42, age 8).

Children with ADHD also feel sad when they lose their loved ones as the child with ADHD puts it:

"If a relative dies" (Male, S17, age 11).

Most of the children with ADHD based on the results of the interviews expressed sadness when they had negative relationships with their peers for the following reasons:

Because fighting with their peers

"in school I fight with friends" (Male, subject 32, age 11); "friends often call my names like monkey or stupid, bullied, they don't befriend me because they often fight because of name-calling" (male, S8, age 11).

Because they were bullied by their peers, such as in the following statements;

"At school it's sad to be teased by friends because of the ugly drawing, teased by friends when I play, teased when I play football, not allowed to play with them, it makes me sad, in class I was teased but if I study smart no one makes fun of me, if I don't walk around during class except for borrowing a pencil is permissible, I was disturbed by my friends because I disturbed them while studying (male, S 10, age 9)

Because they have done bad things to their peers;

"Yes, of course I get angry, I hit and slap, if someone bothers me I want to slap the person because I'm big, if I'm angry, I wreck things up, I made a toy camera and it kept keep being wrecked, of course I get really angry, if I do something and then I get nudged, I'm really angry. Today I hit my friend because I was trying to take off my shoelaces, I knocked off my friend's tooth, I felt bad, but it's really annoying" (male, S 2, age 9)

Feeling unaccompanied by peers :

"no one play with me. Never at all. Every time I want to play soccer I can't, usually because it's full, I want it but I can't, I once played when the teacher was there, but I could play other things" (male, S 2, age 9); "friends hate me, they don't invite me to play, they hate me, don't know why" (male, S 23, age 11).

Factor 3: Not getting what they want

Children with ADHD share that they feel bad when they don't get what they want. They feel unhappy when they do not have the freedom to do what they want:

"I often can't play, I want to join basketball lessons, but I can't" (male, S 11, age 10); "Cellphones are hidden away because I always play with it, my bicycle is locked, I can't do anything, I like to play around (female, subject 29, age 11).

Another reason is because their desires are not fulfilled, such as

"I wish for it, but they don't buy me toys or cellphone" (male, S20, age 11).

Factor 4: Not have purpose and meaning in life

Children with ADHD sometimes feel inferior and seem to have no purpose and meaning in life:

"I live alone with cats and Angina, I don't have anything in this life, this life is useless life, I want to be friends with Angina, I want to be a thug, I want to kill myself, I grow up to be a thug, I'm not cool, I don't want anything in the world, I want to sleep forever" (male, S14, age 11).

The statements of children with ADHD in showing their feeling not wellbeing, Children feel negative affect in their life and seems to feel not satisfaction in their life. They feel sad, feel alone, not enjoy, didn't like, angry and they feel not happy when they have not satisfaction in their life especially when they have negative social relationship and didn't get what they want, and sometimes children with ADHD feel meaningless.

The objective of this study is to determine the opinion of children with ADHD about the perceived well-being in life. Based on the results of this study, some children with ADHD are known to have already felt their happiness, but some have not. It just that when children feel their well-being, children feel positive affect in their life and seems to feel satisfaction in their life. Meanwhile, children feel less of their well-being, children convey negative affect and thoughts based on what experiences they feel in their lives and they even feel that they are meaningless and seems not feel satisfaction in their lives. That is line with Diener et al., (2009) there are dimension of Subjective well being that is feel positive affect, less negative affect and feel life satisfaction, and addition sometimes children with ADHD feel live alone and don't have purpose and feel meaningless, it is line with (Ravens-sieberer et al., 2015).

Children with ADHD who feel their well-being are due to several factors including: 1). The child's ability to do something; 2) Social relations; 3) Getting what they want. Meanwhile, the things that make children feel less of their well-being can be grouped into the following four factors: 1). The child feels unable to do something; 2) Negative social relations; 3). Did not receive what they wanted and 4). Not have purpose and meaning in life. If studied, basically the results of this study find factors that are not much different

between the factors that influence children to feel their well-being and the factors that cause children to feel unwell.

Subjectively, the factors that make children feel their well-being based on the results of this study, from the interview data on children with ADHD, are in line with the basic psychological needs of individuals as expressed by Deci & Ryan, (2000) in their theoretical concept related to self-determination which explains the existence of three basic needs of every individual which are universal in nature and can affect the subjective well-being of the individual, i.e. 1). Autonomous basic needs, 2) Competent basic needs, and 3) Basic needs relatedness. Autonomous needs are needed to be able to do something that is done autonomously, competent needs are needed because to fulfill the desire to be able to do something effectively with good results, while relatedness is the need to connect and feel close to other people around them (Reis, et al., 2000).

These basic psychological needs will have an impact on the mental health and psychological well-being of the individual, where if they are met will help someone to feel more of their well-being and mentally healthy. Otherwise if they are not met, it will make someone experience pathological illness. Basic psychological needs are the nutrients that a person needs to grow and feel well-being in life related to their personality and cognitive. Thus, the needs when they are met will optimize well-being in itself, but if the needs are not met, it will have negative consequences. This applies to various ages, settings, and cultures (Reis, et al., 2000). Therefore, the concept of self-determination also applies to children with ADHD. Understanding the factors that influence subjective well-being is important in order to better understand what needs children with ADHD need to feel for their well-being and what makes children feel less of their well-being.

Conclusion

Through this research, it is expected to get an overview of subjective well being and the factors that influence the well-being of children with ADHD based on the child's own 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 factors that have an impact on 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, and children with ADHD can have optimal subjective well-being.

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