

AN OVERVIEW OF PSYCHOLOGICAL WELL-BEING OF ADULTS WITH POSTNATAL PHYSICAL DISABILITIES IN THE FACE OF SOCIAL STIGMATIZATION

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ABSTRACT

Psychological well-being (PWB) refers to individuals feeling satisfied with themselves and their lives, both past and present. It is characterized by self-acceptance, positive relationships, independence, environmental control, life goals, and personal growth. Good PWB is important for adults who take on many societal roles. However, some adults face challenges in achieving this due to postnatal physical disabilities. These individuals often have unique psychological conditions and tend to withdraw because of physical changes and social stigmatization. This study aimed to explore the psychological well-being of adults with postnatal physical disabilities experiencing social stigma. Using qualitative methods and an Interpretative Phenomenological Analysis (IPA) approach, five adult participants (over 20 years old) who had experienced postnatal physical disabilities for at least one year and faced social stigmatization took part. Data were gathered through in-depth semi-structured interviews. Results showed all participants fulfilled autonomy and personal growth dimensions. However, other dimensions varied: four participants showed self-acceptance, three had a sense of purpose in life, two achieved environmental mastery, and only one maintained positive relations with others. Social support emerged as a key factor influencing participants' psychological well-being, helping them cope with stigma and physical challenges to achieve better adjustment and well-being. The study also identified social support as a crucial factor influencing participants' ability to achieve psychological well-being. Social support can help mitigate the impact of stigma and facilitate better adjustment to their physical condition, thus promoting their overall well-being.

Keywords: *psychological well-being, adult, postnatal physical disabilities, social stigmatization*

1. PREFACE

In the adult phase, individuals will begin to encounter many responsibilities and face many changes (Subroto et al., 2018). In this phase they will begin to face a transitional period of life with many responsibilities, such as: earning a living, raising children, taking care of parents, losing loved ones, and facing illnesses that cause death (Papalia, 2009). In adulthood, individuals will begin to adapt to new social expectations and life patterns. They will begin to release dependence on others, both psychologically, sociologically, and economically (Putri, 2018). A person can be called an adult if they have completed the previous developmental phases and are ready to take on new roles in society (Jahja, 2015). In order for individuals to fully develop and grow as adults, several supporting factors are needed, including optimal physical conditions (Brebahama & Listyandini, 2016).

Unfortunately, some of them have physical imperfections like other normal individuals, often called people with disabilities. Disability is the inability of individuals to perform certain activities or activities like other normal individuals (World Health Organization [WHO], 2017). This condition can occur because they are physiologically, psychologically, or have abnormalities in anatomical structures (Barnes, 2019). The number of Indonesians with disabilities is 22.5 million out of a total population of 270.20 million (Badan Pusat Statistik [BPS], 2021). When individuals have a deficiency in one part of their body, it can have an overall impact on their condition. Moreover, social stigmatization occurs due to individual differences with other individuals and can lead to discrimination (Rohwerder, 2018). Social

stigmatization is a condition of social rejection that individuals experience when they have significant differences in the social environment (Goffman, 1963). Some of the social stigmatization that is often faced by people with physical disabilities in the surrounding environment, namely not being able to achieve success, weak, helpless, and unable to be independent (Abriansyah et al., 2019).

Physical disabilities are categorized into three criteria, which are during the prenatal phase (before birth), at birth (during birth), or during the postnatal phase (after birth) (Desiningrum, 2016). Postnatal physical disabilities are conditions of physical abnormalities in individuals that occur after birth (Desiningrum, 2016). It is different from prenatal and birth disabilities that experience congenital abnormalities before birth. Postnatal physical disabilities include a variety of disabilities that result from certain diseases or accidents. Conditions may involve amputation, rigid or withering paralysis, cerebral palsy, paraplegia, stroke, and leprosy (Radissa et al., 2020). Individuals with postnatal physical disabilities need attention because they have different psychological conditions, they tend to be more withdrawn due to changes in their physical condition (Putra, 2018). Unlike people with congenital physical disabilities who have received rehabilitation from an early age, individuals with postnatal physical disabilities experience a process of rejection and cry over the situation (Dewanto & Retnowati, 2015).

They often feel inferior which can be an inhibitor to achieving a good level of psychological well-being (PWB). PWB refers to positive thoughts and opinions that are owned (Tumanggor, 2021). If individuals have a good level of PWB, they will feel happy and comfortable and can live life positively (Noviasari & Dariyo, 2016). PWB is a multidimensional term, including: (a) self-acceptance, which is able to accept strengths and weaknesses in oneself; (b) positive relations with others, which has good relationships with others; (c) autonomy, which can live independently; (d) environmental mastery, which can control social pressure in the environment; (e) purpose in life, which has a purpose in life; and (f) personal growth, which can develop itself (Ryff & Keyes, 1995). PWB can also be influenced by several things, including: age, gender, social support, cultural background, and socioeconomics (Ryff & Singer, 1996). Each individual will have a different PWB condition, depending on how unique their respective experiences are (Ryff & Keyes, 1995). Therefore, there is still a need for further research with subjects with different characteristics.

The results of previous research, individuals with physical limitations they experience still have a good level of psychological well-being. For example, quantitative research conducted on people with physical disabilities showed a level of PWB in the high category with a score of 80.9% (Susanti et al., 2020). Most participants are able to adapt to their conditions and have optimism in running life in the future (Susanti et al., 2020). The results of this study show that the positive relations with others dimension has the highest score, while the environmental mastery dimension shows the lowest score. Based on this research, the researcher wants to know whether there are differences in the results obtained in subjects with physical disabilities, especially postnatal, in dealing with social stigmatization. Researchers also use qualitative research methods with in-depth semi-structured interview techniques that are expected to provide more detailed results related to participants' experiences.

2. RESEARCH METHOD

Samples

The sampling technique used to select participants in this study is purposive sampling. This technique is used to select participants based on considerations from researchers (Sugiyono,

2015). Researchers use this sampling technique because researchers can choose which participants are in accordance with predetermined criteria. The characteristics of participants in this study are as follows: (a) adult individuals, aged 20-65 years; (b) people with postnatal physical disabilities during the adult phase; (c) experiencing changes in physical conditions for more than one year; and (d) willing to be interviewed.

Measurement

The research used qualitative methods to be able to find answers to the phenomena that occurred in more detail and deeply. This research uses in-depth interviews with semi-structured interview techniques based on Ryff's PWB theory. Aiming to explore information in depth with open questions, followed by "why" and "how". Researchers conducted in-depth interviews with five participants, which began with the rapport stage. In addition, the research also used a phenomenological approach to understand in detail the experiences of participants with postnatal physical disabilities in dealing with social stigmatization. The Interpretative Phenomenological Analysis (IPA) approach allows the research team to uncover the meaning of individual life experiences in dealing with certain phenomena (Howitt, 2016). The Interpretative Phenomenological Analysis (IPA) approach in this study was used to explore the perceptions, experiences, and interpretations of each participant's unique experiences. This approach allows researchers to gain deeper insight into the psychological well-being of people with postnatal physical disabilities in the face of social stigmatization.

Data Collection and Analysis

In data collection and analysis, the researcher conducted several systematic stages to be able to synthesize and conclude information obtained from interviews with participants. These stages include: (a) audio-recording the interviews; (b) compiling verbatim transcripts of the audio recordings with the five participants; (c) determining and redefining the demographics of the participants to ensure the representativeness of the data; (d) coding the themes that often appear; (e) confirming the term theme categorization and drawing the main theme based on the coding results; (f) comparison of the results of theme categorization based on the perceptions and experiences of participants with informants, as well as correlation with theoretical studies to strengthen the objectivity of the interview results; (g) conducting in-depth analysis to draw research conclusions that aim to satisfy and provide benefits from the objectives that have been set before.

3. RESULT AND DISCUSSION

Participants Description

The research involved five participants who suffered postnatal physical disabilities during their adulthood phase, and experienced social stigmatization from their surrounding environment. Three of the participants experienced physical changes due to accidents, while the other two experienced strokes in all parts of their body. The following is a description of the participants in Table 1.

Table 1

Participants Description

Initials	Age (years)	Gender	Age of Disability (years)	Disability Condition
H	52	Male	35	Paraplegia
T	36	Male	31	Paraplegia
S	54	Female	52	Stroke
R	44	Male	41	Stroke
J	33	Male	31	Hand Paralysis

Psychological Well-Being Overview

Each individual will have a different psychological-well being (PWB) condition, depending on how they respond to their unique experiences (Ryff & Keyes, 1995). When individuals feel happy and satisfied and have no regrets about their lives in the past, it can be said to be a good PWB condition. PWB is not only limited to this individual's satisfaction, but it is also related to individual perceptions of life challenges experienced (Keyes et al., 2002). The condition of PWB can affect how individuals respond when facing a situation that determines their quality of life (Basaria et al., 2024). Individuals can be said to have good PWB, if they have the ability to accept themselves, relate positively to others, live independently, master the environment, have life goals, and have self-development. The following is a description of each PWB dimension in the participant's experience. An overview of each participant's psychological well-being can be seen in Table 2.

Table 2
Psychological Well-Being Overview

Dimension	H	T	S	R	J
Self-Acceptance	✓	✓	✓	×	✓
Positive Relations With Others	✓	×	×	×	×
Autonomy	✓	✓	✓	✓	✓
Environmental Mastery	✓	×	✓	×	×
Purpose in Life	✓	×	✓	×	✓
Personal Growth	✓	✓	✓	✓	✓

Self-Acceptance

In this dimension, only participant R has not fully accepted his current condition. Participant R often feels that his current condition is an obstacle to everything in his life. R also revealed that his current condition caused him to be avoided by those closest to him. “Yes, because we are with our limitations, it is difficult for us to go here and there. Moreover, I am in an orphanage, right, I only socialize within the orphanage. Yes, I am an outgoing person who likes to hang out, and likes to make friends. But there are those of us who ... Like to be friends with us, there are those who like us, there are those who ... are friends with us, when we have material, when we don't, they leave.” (R, 30/09/2024, 185-190). In contrast to participants H, T, S, and J who have accepted their current condition, and can interpret past incidents from a positive side. “I return to myself. I accept it like this, I am self-aware, I know myself, and then I build everything. I face who must know myself, must be self-aware. In fact, in my opinion, by being like that, I become confident.” (H, 30/09/2024, 207-210). Individuals who are able to interpret past experiences positively tend to find it easier to achieve a good level of psychological well-being (Guamanga et al., 2024). They also prefer to focus on living a better life compared to the past. “I want to change everything. If I have a long life, I want to be a good person. I want to show my ex, I don't know him. I can rise again, my spirit must recover.” (S, 04/10/2024, 263-266).

Positive Relations with Others

In this dimension, only participant H has fulfilled the description of the positive relations with others dimension well. “I'm doing well, I'm doing well with all my friends.” (H, 30/09/2024, 438). H has made peace with his condition and chooses to relate well with the people around him despite the negative views and treatment he has received. “At first I made a lot of noise, so yes, I myself created the problem, because yes, I was angry that was not clear, because maybe I was too sensitive, too feeling with conditions like this. Sometimes if I hear it in front of the house,

my mother and my siblings just let it go, don't listen to him like that. Now I'm actually thinking, yes, why am I wasting my energy like that. Now I'm starting to calm down. Especially after entering the orphanage, it's getting ... Now it's getting calmer.” (H, 30/09/2024, 338-346). Individuals who prefer to build positive relationships with others tend to have higher levels of psychological well-being (Silván-Ferrero et al., 2020). Meanwhile, participants T, S, R, and J still have poor relationships with some of their closest people until now. Participant S, they still have not fully forgiven the negative behavior received from people around her. “I don't know, I was thrown away. It really hurts me, when I remember it hurts, but how? I'm sick, I'm alone.” (S, 04/10/2024, 51-52). Participants T, R and J are still not fully accepted by their own families. “The first one yes, he does not accept my current condition. Badmouthing to other people to his siblings, but he is more chaotic than me. So my relationship with my biological father is not good.” (T, 03/10/2024, 885-888).

Autonomy

In this dimension, despite the physical barriers that the participants face. However, all participants can still live independently without expecting help from others. “I'm right... I said I'm capable. That's enough for me to say that.” (S, 04/10/2024, 222-223). All participants revealed that they felt displeased if other people gave excessive sympathy. “I don't like to be pitied, I don't like people to be too empathetic, I don't like too many people. So it's normal, I just want to act normal, normal and yes we ... If this is the case, I really want to ... What can you do, well I want to be like that.” (H, 30/09/2024, 384-388). Participants preferred it when others asked them about their abilities, so they made an effort before receiving help. “Just the usual, right. So if I really need help, I say it. If I don't need help, I don't.” (J, 29/09/2024, 426-427). The participants also did not care about other people's views about themselves. “No, I don't think about it, I don't want to worry about it.” (R, 30/09/2024, 445). According to them, it is not certain that the person can survive if they are in their position. “Yes, the first person is not necessarily better than me. Then it doesn't mean that he can't necessarily be like me. In my position, I may not be able to do it. Try him in my position with a physical disability, not working. But I can still fulfill my life.” (T, 03/10/2024, 447-451). Individuals who have a level of autonomy can help them to continue to be optimistic despite facing the challenges of social stigmatization (Zabala-Dominguez et al., 2023).

Environmental Mastery

In this dimension, only participants H and S can fully control the environment. These two participants were able to adjust their current condition to the environment. “Right now, I have to think about my wishes with conditions like this, what I want to achieve.” (H, 30/09/2024, 548-550). They are also not easily influenced by the environment and choose to walk their own path without caring about the opinions of others. “I'm used to it. I'm used to my life now.” (S, 04/10/2024, 488-489). Individuals who have a high level of environmental mastery are more competent in managing their own lives, can sort out good situations and conditions, and are able to deal effectively with challenges that come from the environment (Stankovska et al., 2023). Meanwhile, participants T, R, and J did not fully master their own environment. “It's difficult, especially when I have problems.” (T, 03/10/2024, 330-432). Three participants found it difficult to manage their own lives with their current conditions. “If it is difficult to organize life, yes there is a problem. Yes, because I am repeating myself, because of the limitations, it is difficult.” (R, 30/09/2024, 452-453). They feel that their current condition makes them inevitably dependent on their surroundings for many things in daily life, such as making decisions and asking for advice before acting. Participants T, R and J are often concerned about what their surroundings think of them, so they continue to need advice from others. “I was told by the

officers, to be diligent here, don't think too much, just do what you think is right. What you think needs to be done, just do it, don't think about other people. Let them be what they are, the important thing is you. The other officers will judge you.” (J, 29/09/2024, 604-612).

Purpose in Life

In this dimension, participants H, S and J already have clear goals for their future. The three participants wanted to open a business when their condition improved. “From this, if I have a long thought, I will recover first and then get out of here I will make a business.” (S, 04/10/2024, 586). They have also been preparing for it since now by honing their skills and starting to collect business capital. “Yes, there is already a plan. Started attending seminars about business capital.” (H, 30/09/2024, 644). Rather than caring about the opinions of people around them who consider them incapable, they prioritize self-motivation to achieve their respective dreams. “The motivation is back to the parents again. The motivation is them. Because... because... a child wants to make their parents happy, just like me. Even with my condition like this, no matter what, even though the time is a bit longer, I want to make my parents happy.” (J, 29/09/2024, 687-692). Individuals with a high level of purpose in life are more likely to be self-motivated in achieving future goals, resistant to stress, and able to overcome life challenges in an effective way (Kashdan et al., 2023). As for participants T and R, they do not yet have a clear picture of purpose in life because the two participants are still uncertain about the future. “Yes, there is still no idea for the future. So maybe God has a way of realizing me so what I'm experiencing is really difficult, like a problem. It's not like people, oh how come they are given happy things, but how come I am given difficult things.” (T, 03/10/2024, 662-664). Two participants revealed that their current conditions made it difficult for them to just have a purpose in life. “I want to have a clear purpose in life. But with limitations like this, it is difficult.” (R, 30/09/2024, 497-499).

Personal Growth

In this dimension, all participants still have development in themselves despite their limitations. They felt they had progressed from their physical condition and daily behavior. “I am more developed in terms of attitude, words, behavior. Then, my body is also getting better, this is not just a story. Then, yes, the point is that I feel more developed and try to be good.” (H, 30/09/2024, 701-704). Furthermore, despite the obstacles experienced by them, participants still care about the surrounding environment by helping others. “There is, when I am difficult I can still help people, can help my family.” (T, 03/10/2024, 684-685). In addition, their emotions are also increasingly under control, unlike when they first experienced changes in their physical condition. “It's just that I was still half angry, mumps, fierce when other people talked about me, I was angry. So now I just stay quiet, with my condition now quiet.” (S, 04/10/2024, 439-441). The participants also ignored the negative opinions and treatment that came from people around them. “I consider it a waste of time, because if I take something that is not positive, it will burden my heart.” (R, 30/09/2024, 568-570). Individuals who do not care about negative opinions and treatment from the environment tend to have a good psychological well-being condition (Silván-Ferrero et al., 2020). They prefer to focus on adding skills and continuing to develop. “Yes, what is it... For myself, I think maybe about 70% have started to change from the past to be better, more able to think about the future, what to do for the future.” (J, 29/09/2024, 835-837).

Social Support Factors on Psychological Well-Being Condition of Participants

The condition of individual psychological well-being can be influenced by many factors. Some factors that can affect the condition of PWB include: age, gender, culture, socioeconomics, and social support (Ryff & Keyes, 1995; Ryff & Singer, 1996). In the findings of the interview data,

the factors that influence participants are social support. The following are findings related to factors that influence the psychological well-being of participants can be seen in Table 3.

Table 3

Factors that Influence of Psychological Well-Being Participants

Factors	H	T	S	R	J
Social Support	✓	×	×	×	✓

Social Support

Social support is closely related to the dimension of positive relationships with others (Ryff & Keyes, 1995). Social support is a form of positive behavior or words received by individuals from those closest to them. When individuals receive social support from those closest to them, it can help them face and overcome the problems that come to them. Participants H and J. Both participants revealed that social support is very important to them. H said that the concern of the people closest to him for his condition made him feel that he was still recognized. "It's very important because until now they still care about me, they still like to come every month to ask how I'm doing and worry if there's something wrong about me. It's very important. Anyway, at the end of the day, if I don't know what to do, I will run to my family." (H, 30/09/2024, 588-593). Participant J also revealed that social support was one of the factors that made him rise from his slump. "Important, very important. What is it, because the support from them can make me become enthusiastic. Then, the support from them also makes me like this, mentally so I don't drop, drop, like that." (J, 29/09/2024, 634-637). The condition of psychological well-being can be influenced by a sense of happiness obtained from social support (Sarina, 2018). Participants T, S, and R. All three participants revealed that social support is important to them. Especially in limited conditions like today. However, the three participants revealed that they did not receive social support from anyone. "So now I rely more on my own strength because there is no one who is really sincere." (T, 03/10/2024, 203-204). For now they only rely on themselves to rise from their downturn. "Yes. But here, it's hard. For now there is no one. They don't want to know and then I'm used to being alone too so I'm fine on my own." (S, 04/10/2024, 534-536). Although she still hopes to get social support, especially from her family. "Yes, it means they still support us, it means they want to make us the best. Not the best, good. The officers at the orphanage, my family, I still hope." (R, 30/09/2024, 652-653).

4. CONCLUSIONS AND RECOMMENDATIONS

This study describes the condition of psychological well-being (PWB) in adult individuals with postnatal physical disabilities in the face of social stigmatization. The results showed that even with physical limitations and challenges from social stigmatization in the environment, it is not a barrier to achieving good psychological well-being (Brebahama & Listyandini, 2016). The results of the study illustrate that all participants fulfill the dimensions of autonomy and personal growth. Four participants have fulfilled the self-acceptance dimension. Three participants fulfill the dimension of purpose in life. Two participants fulfill the dimension of environmental mastery. Meanwhile, in the dimension of positive relations with others there is only one participant who fulfills this dimension. This study shows that of all participants, only participant H managed to fulfill all dimensions of PWB. Meanwhile, participant R only fulfills two dimensions of PWB, which are the dimensions of autonomy and personal growth. The significant difference in the two participants H and R, was influenced by social support factors from those closest to them, especially family. Family has an important influence on the psychological well-being of individuals (Kusumastuti et al., 2023). Participant H still regularly communicates with his family members, even though they no longer live together. He also

receives care from his family with positive affirmations that the family continues to give him. In contrast to participant R, who has found it difficult to simply communicate with her family. R still hasn't even gotten contact with her biological child until now. R's relationship with his family has become tenuous since he became a person with a disability. Therefore, participant R did not get social support from those closest to him. All participants also chose to ignore the social stigmatization they received from the environment. They actually make negative views and treatment from the surrounding environment, even from their families as motivation for themselves to develop and also grow with their independence. They want to prove that individuals with physical disabilities do not fit the negative labels given by society. Therefore, all participants can fulfill the dimensions of autonomy and personal growth despite the social stigmatization in the environment around them.

Suggestions for future researchers for better results. Researchers suggest involving more research participants in each phase of adult development to find out the condition of psychological well-being at each stage of the development of the adult phase. In addition, future research can expand the theory by examining other concepts, such as interventions and coping strategies carried out by participants in dealing with social stigmatization with their physical limitations. It is hoped that researching this concept can provide benefits to further expand the findings on the theory of psychological well-being.

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