Positive Parenting Program to Improve Mother Efficacy in Parenting Teenagers

Silvia Wulandari¹, Tina Afiatin²

¹,²Faculty of Psychology, Universitas Gadjah Mada

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Abstract. Parenting efficacy is essential in parenting quality. This study aimed to devise and determine the Positive Parenting Program effect in improving the parenting efficacy of mothers with teenage children. The study tested two hypotheses. First, the Positive Parenting Program had good content validity. Secondly, the Positive Parenting Program could improve the parenting efficacy of mothers. The study involved 27 mothers subjects (13 subjects of the experimental group and 14 subjects of the control group). The experiment was carried out using the method of ‘Untreated control group design with dependent pretest and posttest samples’ involving three measurements at pretest, posttest, and follow-up. The results proved that the Positive Parenting Program Module had good content validity. The module has a high content validity with Aiken’s V coefficients in each session ranging from 0.89 to 0.95 with an average of 0.92. The second hypothesis test was performed by Mann Whitney U Test analysis. The results of the study also showed that the Positive Parenting Program significantly improved the parenting efficacy of mothers ($Z_{\text{posttest-pretest}} = -4.321$, $p = 0.001$ ($p <0.05$), $Z_{\text{follow-pretest}} = -4.423$, $p = 0.001$ ($p <0.05$)).

Keywords: mothers of teenagers; parenting efficacy; positive parenting program

Adolescence is a transitional period from childhood to early adulthood. Adolescents experience transitions in self, family, and school at the same time. Transition from primary school to junior high school is the first transitional phase of a teenager (Ralph & Sanders, 2004). During the transition, although adolescents interact with other individuals outside of family, parental role is still needed. Russell, Crockett, and Chao (2010) explained that parents’ support or warmth for teenager has positive impact to health and adjustment during transitional period. Parents involvement in parenting is proven to contribute toward better performance and achievement (Afiatin, 2018; Annunziata, Hogue, Faw, & Liddle, 2006; Rafiq, Fatima, Sohail, Saleem, & Khan, 2013; Topor, Keane, Shelton, & Calkins, 2010). Parental support is correlated to student’s learning motivation and achievement (Acharya & Joshi, 2011; Dhitaningrum & Izzati, 2013; Mindiharto, 2014; Nuraeni & Supratiningsih, 2014)

Authors conducted preliminary survey from October to November 2016 by distributing questionnaires to 74 mothers of students in Junior High School X. Student profiles showed that all fathers of grade 7 students in school year 2016/2017

¹ Address for correspondence: afiatin04@ugm.ac.id
were breadwinners, while 70.1% of the mothers were housewives. Preliminary study in Junior High School X where the first author did psychologist internship (Praktik Kerja Profesi Psikolog/PKPP) showed many learning motivation issues.

Previous studies revealed that mother is more involved in parenting than father (Putri & Lestari, 2015; Rice & Dolgin, 2008; Steinberg, 2011). Teenager spends more time talking to their mother and is more likely to choose mother for opinions in various topics (Rice & Dolgin, 2008), while father takes role as head of family who is more involved in income contribution (Han & Jun, 2013).

According to the preliminary study, authors also found one of the reasons that affect students’ learning motivation issues was less than optimum parenting. Survey results described mothers’ self-evaluation in fulfilling parental role. 58.42% of respondents considered parenting teenagers was difficult. Mothers felt to have inadequate skills and knowledge in guiding teenagers, deemed teenagers to be hard to supervise, found asking them to study difficult, had a hard time to adjust mindsets, or being working mothers. In addition, 11.23% respondents reflected that parenting teenagers was confounding because of the inability to be firm or stern. Another finding, 6.74% respondents reported that mothers doubted the pertinence of parenting method applied and felt unable to keep up with current youth trends. On the other hand, 23.59% respondents declared that parenting teenagers was easy because their children were obedient. Based on the analysis, most respondents considered parental role as challenging.

Field study showed that 45.94% respondents conformed to the feeling of difficulties while 48.64% respondents affirmed that it occurred at times. Related to parenting strategies applied, 47.29% respondents said to doubt parenting approach used, 12.16% respondents said to not have confidence about the appropriate parenting approach, while 40.54% respondents considered to understand the way.

Parents assessment of their capacity to positively influence adolescents behavior and development, or estimation of one’s ability in fulfilling parental role is called parenting efficacy (Coleman & Karraker, 2000; Kendall & Bloomfield, 2005; Montigny & Lacharite, 2005). Parenting efficacy is a domain of Bandura’s self-efficacy as main basis for parental role practice. According to Coleman and Karraker (2000), parents’ self-efficacy affects motivation which is perceived in intensity of efforts and determination to work on tasks. Parents with high self-efficacy have positive expectation that change can be done (Sanders, 2008), while parents with low parenting efficacy often disclose apprehension towards their performance (Jones & Prinz, 2005).

There are several factors affecting parenting efficacy (Coleman & Karraker, 2000) related to social cognitive approach which refer to Bandura’s self-efficacy concept (1997). Environment (E), individual or person (P), and behavior (B) factors interact reciprocally. The process is termed reciprocal determinism or caution interaction. Environment factors involve situations and direct stimulations (Bandura, 1977). Several environment factors affecting parenting efficacy are cultural and values information, ecological conditions, and children characteristics (Coleman & Karraker, 2000). Ecological conditions include environmental quality, income, family structure, and social supports (Coleman & Karraker, 2000).
Second factor in reciprocal caution is person, encompassing individual characteristics and cognitive process (attention, anticipation, and perception (Bandura in Ormrod, 2012). The third factor is behavior (Bandura, 1977). Parenting efficacy factor included in reciprocal caution interactional factor is experience of involvement with children (Coleman & Karraker, 2000).

Ardelt and Eccles (in Jones & Prinz, 2005) described parenting efficacy with Bandura’s social cognitive theory (Bandura, 1997). In the model, self-assured parents will be more involved in promotive parenting strategies and can improve children’s opportunities to succeed, either in academic or social setting. This also shows that parenting efficacy has direct effect in children’s success through the modeling of parents’ attitudes and beliefs. According to Kendall and Bloomfield (2005), individual with high self-efficacy tends to proceed with tasks until succeeding while individual with low self-efficacy gives up on tasks rather quickly. Sanders (2008) stated that parents with high self-efficacy in parenting have positive expectation to create positive changes in parenting.

Parenting is one of challenges faced by family (Afiatin, 2014; Afiatin, 2018). Mothers uncertainty should be examined because parenting efficacy is the main factor that determines parents efforts and tenacity (Bandura, 1997). Parenting efficacy could be the focus of preventive and intervention measures, as a parenting factor that could potentially be improved in performing parental role (Jones & Prinz, 2005; Sanders, 2008). One of the measures to improve parents capacity is parenting education (Wood & Davidson, 2003).

In this study, authors employed Positive Parenting Program. This program aimed to build “friendly family” as an effort to improve health and welfare qualities in parenting strategies. The program’s main concern is to help improving parents’ positive skills in parenting their children (Ralph & Sanders, 2004). Parents’ self-regulation framework in each session was analyzed for parents to be able to alter their behaviors and become active and independent problem solvers (Salari, Ralph, & Sanders., 2014; Sanders, 2008). Learning process applied in the program was observational learning which encompasses four stages: attention process, retention process, motor production, and motivational process (Bandura, 1989). For the sessions and contents of Positive Parenting Program, authors referred to five principles of positive parenting by Sanders (2008): a. Safe and engaging environment, b. Using assertive discipline, c. Creating positive learning environment, d. Having realistic expectation, and e. Parental self-care.

The presence of new environment aspect (E) with Positive Parenting Program provided opportunities for mothers to experience learning process which in turn would influence their personal characteristics (P) such as beliefs, knowledge, perceptual memory, and self-regulation. The process further affected behavioral change (B) in the form of more positive interaction skills between mothers and adolescents. This would improve mother parenting efficacy in the face of adversities. Mother parenting efficacy is comprised of nine parenting tasks by Kendall dan Bloomfield (2005) i.e., affection/emotion, pressures, routines/goals, learning/knowledge, self acceptance, play/enjoyment, empathy/understanding, discipline and setting boundaries, and control.

The dynamic effect of Positive Parenting Program in improving mother parenting self-efficacy was described
through program sessions. The first positive parenting principle is safe and engaging environment. Sessions entitled "Expressing Supports Through Mutual Compromise with Teenagers" and "Understanding My Teenage Child" were constructed based on the principle. "Expressing Supports Through Mutual Compromise with Teenagers" facilitated mothers to understand the practice of providing supports to adolescents. The forms of supports were also given through rule agreements and consistent supervision. This session also involved the second positive parenting principle i.e., using assertive discipline (Sanders, 2008).

There were two sessions constructed according to the third principle, creating positive learning environment (Sanders, 2008), which were "Effective Communication" and "Involvement". "Effective Communication" session facilitated mothers to understand and exercise effective communication to aid teenagers in expressing thoughts and feelings, stimulating mind, and transferring parents' values and objectives. Positive Parenting Program could improve harmony in family interaction (Leung & Lee, 2012; Salari et al., 2014). When parents act warm and responsive, adolescents will feel accepted and comfortable to disclose information (Brooks, 2011). In "Involvement" session, mothers were facilitated to understand involvement in teenagers’ activities as a strategy to show interests and knowledge in those activities. The fourth principle, having realistic expectations (Sanders, 2008) was applied to a session entitled "Values and Expectations, Through Positive Habituation". This session facilitated mothers to identify values as basis of parenting behaviors. The fifth principle, parental self care (Sanders, 2008), could be identified in "Positive Parenting" and "Relaxation" sessions. In "Relaxation" session, mothers were assisted to develop stress management skills in parenting.

This study aimed to construct and validate Positive Parenting Program and test its effect in improving parenting efficacy for mothers of teenagers. There were two hypotheses proposed. Firstly, Positive Parenting Program module had good content validity. Secondly, Positive Parenting Program could improve mother parenting efficacy. There was significant improvement in parenting efficacy of mothers participated in the program compared to those who did not.

**Method**

Study participants were 27 mothers of teenagers (grade 8 students in Junior High School "X") with low to moderate learning motivation level, living and raising teenage child together with husband under one roof, minimum junior high school graduate, having low to moderate parenting self-efficacy score, was not undergoing psychological assistance, and willing to fully participate in the program. The questionnaire did not ask participants ages, only "Do you have a teenage child?". Subjects were divided into two groups. Thirteen (13) mothers were placed in experimental group who participated in Positive Parenting Program and fourteen (14) others who did not.

Research instruments included Positive Parenting Program module, diary worksheet, Parenting Efficacy Scale, Learning Motivation Scale, knowledge test, and program evaluation sheet. Interview guideline, observation sheet, and informed consent were also utilized in the study.

Positive Parenting Program module was constructed based on five principles
proposed by Sanders (2008). Authors developed program by Pristanti (2016), but session titles remained similar. The program had a tagline “Loving with Art, Educating Wholeheartedly, Becoming True Parents”. Authors developed the program by supplementing contents adjusted to parents’s needs in parenting teenagers (Ralph & Sanders, 2004; Salari et al., 2014), extending the duration to total of ±13 hours, referring to minimum of 8 hours for the entire sessions (Ralph & Sanders, 2004; Salari et al., 2014), and including understanding adolescent characteristics and relaxation sessions. All sessions had undergone module validity testing.

Diary worksheet was media that facilitated subjects during the program. It comprised reflection journal as well as worksheets and practice sheets. Parenting Efficacy scale was given to measure mother’s opinion on her ability in doing parental role for teenager. The scale was developed by authors based on nine domains of parenting efficacy by Kendall and Bloomfield (2005). Twenty seven items were given to subjects and its reliability coefficient was 0.942. A sample item of the Parenting Efficacy scale was “I can handle all the difficulties of rising my teenage child”.

Knowledge test was given to participants to measure mother’s knowledge in parenting before and after participating in Positive Parenting Program. The test format was multiple choice test with 24 items. Its reliability coefficient was 0.834.

Learning Motivation scale was utilized to help screening the characteristics of student issues. Authors used 30-item learning motivation scale developed by Sekartami (2015) which had reliability coefficient measured at 0.874. A sample item of Learning Motivation scale was “If there is a subject that I don’t understand, I will try to learn earnestly until I understand.”

Another instrument used was program evaluation sheet to evaluate process during the program. Evaluation sheet was filled by subjects and observers. Evaluation scoring encompassed contents, facilitator, and facilities. Evaluation sheet was used to record distinctive occurrences involving participants during the program, including participant involvements in contents, discussions, exercises, and attention to instructions.

It also utilized informed consent to safeguard subjects rights and obligations during the study, as well as consent toward voluntary participation. Interview guideline was used as guidance in interviews toward mothers to explore parenting values and behaviors before and after the program according to indicators written in the module.

The study utilized untreated control group design with dependent pretest and posttest samples (Shadish, Cook, & Campbell, 2002). This design involved two groups: experimental and control. Assessment was done by conducting pretest and posttest using similar instruments (Shadish et al., 2002). Study design was described by Figure 1.

Positive Parenting Program module validation was done by rational assessment. The assessment was analyzed qualitatively and modifications were made according to recommendations from raters. Quantitative analysis also was done using Aiken’s V. Study procedures consisted of six stages: 1) Literature Study, done as groundwork for the study, forming hypotheses, constructing instruments, and study evaluation; 2) Develop-
ment of Research Instruments and Discussion with Raters. This process included designing, developing, and validating Positive Parenting Program which was developed systematically in six stages; 3) Assessment of Content Validity of Positive Parenting Program, Parenting Efficacy Scale, and knowledge test. Prior to the program, module had undergone content validity assessment namely rational analysis done by experts in the field (Supratiknya, 2011). Authors enlisted six raters who were psychology graduates with minimum five years expertise in training, and/or parenting, and/or handling juvenile cases, and having experience in developing and rating psychological intervention module. This process ran from June 1 to 26, 2017. 4) Training of Tutor (ToT). Involved team members received ToT for guidance so they understood program outline and implementation plan (Afiatin, Sonjaya, & Pertiwi, 2013); 5) Testing Positive Parenting Program module, Parenting Efficacy Scale, and knowledge test. Module testing involved seven participants. Average percent score of subjects evaluation showed that program contents, duration, and activities were sufficient. Evaluation percent score showed range between 91.12% and 93.76% with average percent score 92.33%. Testings for Parenting Efficacy scale and knowledge test were done to 51 mothers of teenagers. Results were analyzed to determine instruments’ reliability and difficulty index for each item in order to choose good item for the study; 6) Study implementation consisted of screening for students learning motivation characteristics which involved survey to the entire grade 8 and interviewing two counselling teachers. Next, screening with Parenting Efficacy scale was conducted from July 18 to 31, 2017. It selected 27 subjects who fulfilled subject characteristics and voluntary participated in the program (13 subjects in experimental group, 14 in control group).

Pretest and informed consent agreement were done from August 1 to 14, 2017. The next stage was study implementation consisted of three meetings on August 10, 15, and 21, 2017. After subjects participated in the program, subjects evaluation to the contents, trainer, and facilities showed percent score ranging from 81% to 100% with average of 96.46%. Subjects considered program to be sufficient. This finding was supported by positive responses dan improvements after participating in the program.

Posttest for both groups were conducted from August 31 to September 4, 2017. After that, follow up was done from September 18 to 21, 2017 for control group and September 22 to 26, 2017 for experimental group. Data collection was done by homevisit. The last stage was program for control group. Due to ethical considerations, control group also received intervention after the study was completed. Control group was invited to parenting seminar on September 21, 2017.

Result

Content validity estimation for module was done in accordance to Tuckman and Waheed’s model (Ahmad, Amat, Yahaya, Yusof, & Alias, 2011; Ahmad, Sulaiman, Abdullah, & Shamsuddin, 2009) by using average percent score from all raters. Content validity rating for scale and test involved 38 raters. Aiken’s V score for Parenting Efficacy scale ranged from 0.71-0.94 with average of 0.86, and knowledge test showed Aiken’s V score range of 0.74-0.89 with average of 0.89. Thus, Parenting Efficacy Scale and knowledge test were
considered to have adequate content validity (Azwar, 2012).

Percent score above 70% was considered indicating high validity rate. Analysis showed percentage range 82.3%-100% with average percentage of 94.33%. Aiken’s V estimation showed average coefficient 0.92 (Table 1). V coefficient ranged from 0 to 1.00. Validity is higher as the coefficient is closer to 1.00 (Azwar, 2012). Rating for each session and content of module showed high validity, therefore hypothesis related to content validity testing of module was accepted. Analysis of knowledge test showed that there was significant increase of mothers’ positive parenting knowledge after the program. Knowledge test results (Graphic 1) showed significant increase of mothers positive parenting knowledge after the program (Z=-3.188; p=0.001 [p<0.05]). Analysis results confirmed that there was a significant increase of parenting efficacy in experimental group compared to control group. Finding was further supported by comparative analysis between posttest and follow up which showed no significant difference in parenting efficacy (Table 2 and Graphic 2-Graphic 3).

Table 1.
Aiken’s V Coefficient per Session

| Session                                                                 | Aikens’ V |
|------------------------------------------------------------------------|-----------|
| Sesi 1. Positive Parenting                                              | 0.89      |
| Sesi 2. Understanding My Teenage Child                                 | 0.92      |
| Sesi 3. Values and Expectations, Through Positive Habituation           | 0.92      |
| Sesi 4. Involvement                                                     | 0.93      |
| Sesi 5. Effective Communication                                         | 0.91      |
| Sesi 6. Expressing Supports Through Mutual Compromise with Teenagers    | 0.93      |
| Sesi 7. Relaxation                                                      | 0.93      |
| Opening                                                                | 0.95      |
| Closing                                                                | 0.95      |
| **Average rating**                                                     | **0.92**  |

Knowledge Test

Graphic 1. Knowledge test result analysis of experimental group

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Table 2. Results of Hypothesis Testing

|                | Posttest - Pretest | Follow up - Pretest | Posttest- Follow Up |
|----------------|--------------------|---------------------|---------------------|
| z              | -4.321             | -4.423              | -1.095              |
| Asymp. Sig.    | p= 0.001 (p<0.05)  | p= 0.001 (p<0.05)   | p=0.274 (p>0.05)    |
| (2-tailed)     |                    |                     |                     |
| Description    | Program improved   | Program improved    | There was no        |
|                | mother parenting   | mother parenting    | significant         |
|                | efficacy significantly | efficacy    | difference between   |
|                | significantly       | significantly       | posttest and follow up |

Graphic 2. Parenting efficacy scale result analysis of experimental group

Graphic 3. Parenting efficacy scale result analysis of control group

Graphic 4. Score difference of parenting efficacy
Analysis on pretest score difference between experimental group and control group showed $p=0.645$ ($p>0.05$). There was no significant difference in pretest score between experimental group and control group (Graphic 4). Additional analysis was performed, particularly on subjects observation. Observation consisted of four assessment components including subjects' focus and attention during content delivery sessions, involvement in discussions, attention toward instruction, and involvement in exercises. Subjects involvement during the program showed percent score ranging from 72.85% to 94.28% with average of 78.23%. Additional data were gathered from reflection journal during posttest, follow up interview, and diary. According to the reflection journals, all subjects experienced significant improvement in guiding their teenage children.

Discussion

Knowledge on child development and experience in parenting is one of the factors influencing parenting efficacy (Coleman & Karraker, 2000). Positive Parenting Program was developed to improve positive skills in parenting (Ralph & Sanders, 2004). Positive Parenting Program in this study employed active skill training method based on observational learning principle. Participants of Positive Parenting Program were mothers with teenage child who received knowledge and stimulation in the form positive parenting behavior samples, role play, and exercises. They also wrote reflection journal of the positive parenting implementation. Improvement in mother parenting efficacy after the program was followed by prominent chance in behaviors and feelings of parenting experienced by all subjects.

Active skill training method was employed to help parents learning new knowledge and skills. This method encompasses video, modeling, behavioral exercises, feedback for performance self-evaluation, and individual tasks to be applied at home in between sessions. Self-regulation framework was used in each session; parents were given opportunities to set goals on their own, create changes, and monitoring performance (Salari et al., 2014; Sanders, 2008). According to the analysis, seven out of thirteen subjects in experimental group who experienced significant score improvements in parenting efficacy category were more actively involved compared to the other subjects. These subjects actively worked on reflection, exercise tasks and diary, planned concrete implementation, evaluated implementation, and participated during sessions. On the other hand, the remaining six subjects showed improvement in parenting efficacy score but did not exhibit optimum category improvement.

The dynamic of mother’s parenting efficacy improvement process was obtained through learning process in four contributing aspects to parenting efficacy (Montigny & Lacharite, 2005). First, subject’s confidence is derived from mastery experience. Experiencing achievement gives stronger motivation to complete the next task with confidence (Bandura, 1997). Secondly, vicarious experience such as another person’s success can help individual gaining self-efficacy by replicating behaviors, strategies, or specific skills from other subjects or trainer. Thirdly, learning is obtained through verbal persuasion from self and others’s positive suggestion to have confidence in their actions (Bandura, 1997). In this study, trainer provided support in the form of appreciation for subject’s efforts. The
fourth contributing aspect is related to physiological and affective states. Subjects were facilitated to manage stress from parenting using breathing control through relaxation.

Improvement in mother parenting efficacy after the program was accompanied by prominent change in behaviors and feelings of parenting in all subjects. The most dominant changes were putting more efforts to get closer to teenagers as friends, involving teenagers in routines, providing more time for discussions, exercising self-discipline, sharing parenting knowledge with husband and friends or even children, more accepting towards self and children, supporting teenagers to be more responsible, listening and communicating effectively with children, learning to have discussion before making decision, feeling more capable of holding back anger, labelling teenagers as “lazy” less frequently, paying more attention to teenagers’ activities, and getting more involved in assisting learning based on individual learning style. Mothers also felt happier because small conflicts which happened in the past frequently had lessened. It showed that mothers were able to develop self-regulation ability in parenting after the program. Individual went through observational learning to change behaviors and become independent problem solver (Karoly in Sanders, 2008).

In line with previous studies, this study supported the notion that Positive Parenting Program is effective to improve parents’ self-efficacy (Bodenmann, Cina, Ledermann, & Sanders, 2008; Leung & Lee, 2012; Salari et al., 2014; Sanders & Woolley, 2005; Sanders, 2008). Findings from reflection and interview also showed that subjects were able to establish cooperation and reduce conflicts in parenting. Positive Parenting Program is proven to strengthen cooperation, reduce conflicts, enhance harmony in family context and parenting (Leung & Lee, 2012; Salari et al., 2014); improve parent-teenager communication (Ralph & Sanders, 2004; Salari et al., 2014); raise awareness of parental supervision in teenager’s activities (Ralph & Sanders, 2004); reduce behavioral and emotional problems (Bodenmann et al., 2008; Leung, Sanders, Leung, Mark, & Lau, 2003; Ralph & Sanders, 2004; Salari et al., 2014; Sanders, 2008); and lower parental stress (Bodenmann et al., 2008). Considering the effect of this program on parenting skills, it is more likely for parents to plan and choose suitable activities for teenager to support their behaviors (Sanders & Woolley, 2005).

This study contributed to the development of psychological science, particularly in parenting field. This program can provide understanding for parents about positive parenting, adolescence and its psychological dynamic, parenting values and expectation toward teenagers, involvement with teenagers, effective communication skill, negotiation skill, relaxation skill to manage stress in parenting, and develop confidence in parenting. Implication for school is this program can be implemented for parents of new Junior High School students. However, this study still had limitations particularly because mother’s skill improvement had not been measured quantitatively. In addition, module implementation emphasized on assistance for teenagers to advance in academic aspect. The module had not been confirmed to provide guidance for extreme externalization problems in adolescents.
Conclusion

Positive Parenting Program module had good content validity according to assessment by raters experienced in training to handle juvenile cases and had developed and assessed psychological intervention module. Positive Parenting Program also improved mother parenting efficacy in parenting teenagers. Higher parenting efficacy was associated with subjects’ higher involvement in working on the diary. Subjects who were actively creating implementation plan based on program’s contents, working on diary, and evaluating efforts showed more positive change in parenting efficacy. Positive Parenting module also encompassed knowledge required for parenting children in other developmental stages.

Suggestion

The effectiveness of Positive Parenting model can be examined in other psychological variable. Future researchers who wish to investigate effectiveness of Positive Parenting module can perform assessment to children to discover children’s perception toward parenting behavior change displayed by mothers before and after the program. School can utilize Positive Parenting Program to provide assistance for students’ parents by working together with competent psychologist in the field of parenting and adolescence.

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