THE EMPATHY DIFFERENCE OF CHILDREN IN LATE CHILDHOOD SEEN ON THE ATTACHMENT PATTERNS TO MOTHERS

Fuadah Fakhruddiana*, Unggul Haryanto Nur Utomo
Faculty of Psychology, Universitas Ahmad Dahlan, Yogyakarta, Indonesia
Email: * fakhruddiana@gmail.com

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Abstract

Purpose: The purpose of this research is to describe the different empathy for children in late childhood with secure attachment, avoidance attachment, and ambivalent/resistant attachment patterns. The subjects consist of children aged 10/11 – 12/13 years old that were born and lived by the mothers.

Methodology: The method used in this research is the quantitative method by conducting significance testing. The data of child empathy variables are taken by semi-projective measuring tool of questions in order to explore the cognitive, affective, and motivational aspects. On the other hand, the data of attachment patterns for mother-child variables are obtained through the measuring tool in the form of force choices in which each item directly indicates the attachment pattern of the child.

Results: The result of the hypothesis depicts that F = 0.673 with p = 0.415, that is p > 0.05 refers to the decline of the hypothesis. It clearly states that there is no difference found on children in late childhood with secure attachment, avoidance attachment, and ambivalent/resistant attachment.

Implications: As a summary, the child empathy reviewed on each attachment pattern to the mother is not evident. This might happen due to the not-varied data as the research sample which is merely obtained at the school and other factors that affect the development of empathy of children in addition to the attachment pattern of the child with his mother.

Keywords: Attachment patterns, Children in late childhood, Late childhood, Empathy, Motivational aspect

INTRODUCTION

The Minister of Social Affairs of Indonesia, Khofifah Indar Parawansa, stated that around 40% of Indonesian children died because of suicide incidents since they could not find any way to deal with the bully issue (M.H. Syah, 2015). The case of ASP (6), an elementary school boy at Gading, Serpong, Banten Province faced severe trauma due to the bullying activities done by his schoolmates in the middle of last September, is one of the major bullying cases blown up by the mass media. The number of unexposed bullying cases possibly increases more than what people know. The data from the Commission of Child Protection of Indonesia (Komisi Perlindungan Anak Indonesia/KPAI) depicts a steady increase from 67 cases in 2014 to 79 cases in 2015 of bullying perpetrators at schools. While the number of children who get involved in brawling or customary street fighting between school gangs also reach a peak from only 46 cases in 2014 to 103 cases in 2015. (Q. Rostanti & Hazliansyah, 2015; Hojati et al., 2014)

Both data and facts in the previous paragraph are proof of the recent phenomenon in Indonesia. The research conducted by (T.H.J. van Noorden, G.J.T. Haselager, A.H.N. Cillessen, & W.M. Bukowski, 2015) mentioned that bullying has a negative connection with the cognitive empathy, to be specific, the affective empathy. It means that the higher the tendency of someone to do bullying, the lower the ability of his empathy. According to (N. Eisenberg & J. Strayer, 1987), empathy refers to a basic characteristic of human that affects prosocial and antisocial behavior.

Empathy is a multidimensional concept or construction of cognitive and affective components. Component cognitive refers to an ability of someone to understand others’ emotional states (for example Hogan); while affective components is an ability to experience others’ emotional states (for example, Mehrabian& Epstein). Even according to Feshbach, empathy also involves a movement to act to take action to keep people free of their distress or take action that can put themselves in the happiness of others.

Empathy is a needed ability in order to help a person to socialize with other people. The late childhood (school age) is an aging period when children are conscious to build a relationship with other people. Moreover, they likely to reach an ideal concept as the social members in the environment, like being noticed, accepted by friends, and be able to actualize themselves in front of their friends.

In order to reach that concept, children need specific social abilities that support them so that they can survive in their play environment. Specifically, it occurs in the situations like when children have to face events addressed to others, such as seeing the difficulties or grief experienced by others than trying to help the other person to escape from the difficulties he faces, noticing the needs or difficulties experienced by others, as well as sharing the sadness or even the happiness experienced by others.

According to the psychologists, any kind of behavior addressed to other people is supported by a specific social ability called empathy. Empathy gives a great impact on someone in order to maintain a social relationship. (M.A. Barnett, in N. Eisenberg & J. Strayer, 1987) By showing empathy, someone can also understand the feelings and is able to process
the complete mental attitude of others. It means that empathy is a basic ability to understand the situation and other people in specific events. Referring to this social meaning, someone is able to act properly due to the social and individual conditions where they get involved in.

Empathy as an emotional response that stems from another’s emotional state or condition and that is congruent with the other’s emotional state or situation. (Ayahbunda, 1995) But other people provide different definitions. Some people take the term empathy to refer to a cognitive process analogous to cognitive role-taking or perspective taking (e.g., Deutch&Madle); others take it to mean a primarily affective process (having some cognitive components) (e.g., Feshbach; Hoffman); still others, primarily clinicians, view empathy as a process that serves a communicatory and/or information-gathering function in therapy (e.g., Goldstein& Michaels).

The integration of cognitive and affective components is highlighted in models of the expression and development of empathy in children. According to Feshbach’s, three-component model, an empathic response requires (1) the ability to discriminate and identify the emotional states of another, (2) the capacity to take the perspective or role of the other, and (3) the evocation of a shared affective response. To Feshbach, the cognitive (1, 2) and affective (3) components of empathy are complexly intertwined and critical ingredients in a child’s enactment of positive social behaviors. According to Hoffman, the child’s emerging capacity to understand the distinction between self and other and the growing awareness that other individuals have internal states and feelings independent from one’s own lay the foundation for higher levels of empathic responding. (Drost, J., 2003; Tabatabaei, F., Karahroudi, M. M., & Bagheri, M. 2014; Fateminasab, 2014)

As a fact of the matter, if we observe empathic ability in a daily activity of children, we discover that there is no empathic similarity in each child. (J. Bowlby, 1988) This individual difference leads us to learn more on other factors that play prominent roles in the emotional ability development. Empathy does not merely develop in person. (N.D. Feshbach, in N. Eisenberg & J. Strayer, Empathy and its development. (ed), New York: Cambridge University Press. (1987)) The emotional development depends on the others’ understanding and the social situation increasing at the same time with the age. This ability develops along with the mental maturity and social experience in daily activities, especially in a family environment. The interaction within family members, notably interaction with mother or nanny can affect the child’s consciousness as well as understanding others’ feelings. (N.D. Feshbach, in N. Eisenberg & J. Strayer, Empathy and its development. (ed), New York: Cambridge University Press. (1987))

According to the psychologists, one of the factors that have a role in empathic development is a fulfillment of emotional needs from the special affection bond from mother to child, as the main affection giver. This affection bond is called attachment by the psychologists. Attachment between child and mother (caregiver) is an important fundament for both social and emotional developments of the child in his future life. (M.D.S. Ainsworth, M.C. Blehar, E. Waters, & S.N. Wall, 2015; Romero, Juan Bautista Abello, and Claudio Mancilla, 2018) The fulfillment of emotional needs, which is reflected from the response and sensitivity of the mother or caregiver, the existence besides the child, the affection like smiles, sweeps, holding hands, and any other affection forms to the cues of needs, will greatly influence the development of a child’s empathy. Egeland and Sroufe, in their longitudinal study of high-risk mothers, found that infants of mothers identified as “unavailable” (mothers who were detached, emotionally uninvolved, and uninterested in their children) not only showed disturbances in their attachment relationships but became increasingly dysfunctional with age. (B.K. Bryant, in N. Eisenberg & J. Strayer, 1987; Matandare, 2018)

Moreover, the process of empathy cannot neglect the role of the mother as the main caregiver to the child since the day he was born. Those researches conducted by Eisenberg-Berg &Mussen and Feshbachdiscovered that mother plays a prominent role in the development of empathy for the child.

Ainsworth, Blehar, Waters, and Wall, on their research based on Bowlby’s attachment concept, derived three attachment patterns based on any relation form between mother and child. Those three patterns are secure attachment, anxious avoidant attachment, and anxious-resistant attachment. It describes the relationship pattern between mother and child that contains different emotional bond within them. The sensitive and responsive mother will give a secure feeling to the child, so that child will feel bound to his mother. The mother who shows the declining response to the child tends to not give enough attention to the child’s secure feeling so that the child feels rejected. The inconsistent mother in fulfilling a child’s needs will make the child feel ambivalent towards his mother.

Furthermore, the relationship between maternal and child attachment patterns with emotional development can be explained as follows. Maternal and child interactions are categorized as secure attachment, enabling the development of cognitive, affective, and motivational aspects of the child as well. Mothers who accept children as they are, pay attention to their needs, especially in distress situations, causing the child to build an internal working model of the mother as a figure who receives it and gives love. He will also develop an internal working model of himself as a precious person to be loved. So the child grew to have a sense of security and trust in others. This sense of security and trust in others enables children to avoid emotional and social pressures. Because of this, the children become less preoccupied with their own satisfaction but more responsive to the feelings and needs of others, compared to children who are less likely to get a secure attachment from their parents. Sroufe, Kestenbaum, and Farber said that securely attached children are enabled to meet emotional needs so that they will develop the capacity to be ready to respond

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empathetically. Here they will learn when someone needs something and will learn to respond to others with empathy.

Children who exhibit anxious avoidance attachment pattern because they have experienced repeated rejection experiences when they want to get emotional needs, these children become difficult to see and feel the situation of others. Being rejected too often by the demand, especially in distress situations, the child will build an internal working model of the parent as a figure who rejects it and the internal working model of oneself as a person who is not worth loving. The child will grow into an anxious, insecure, disbelieving, self-serving person in self-sufficiency in his emotional needs, making it difficult to establish close and trusting relationships with others. When awakened when others see happiness or distress, the children have no idea how to respond to the person fairly (adequately). Children will maintain their own emerging feelings. Thus, children belonging to anxious avoidance attachment have difficulty responding to empathy, it may be that at that moment it exhibits an attacking behavior or when exposing a touch of feelings is inappropriate. (S. Siegel, 1988)

Children who belong to an anxious-resistant attachment pattern are thought to have received inconsistent parenting experiences. The children will build an internal working model of the mother as a confusing and uncertain figure. Mothers show love and affection but do not understand or understand something they need. So the children will develop an internal working model of the mother as a loving but unconvincing figure to provide something appropriate to their needs. Because of this, it arises in the child's feelings of insecurity and not trust others. Children are susceptible to separation anxiety, tend to be dependent, demanding attention, and anxious about exploring the environment. In this pattern, conflict always exists, because parents are not always there and do not always help in every opportunity, and there is also separation. (E.B., Hurlock, 1980) This disbelief will make the child feel insecure when in the social environment. The lack of security causes child anxiety and hesitation when dealing with others so that he tends to be isolated from his environment. The children look anxious, confused, and uncertain when faced with a stimulus that allows for an empathetic response. Actually, children show resurrection and some responsive behavior, but because of their disorganization and anxiety, they are difficult to act with empathy. Due to the problems in maintaining the distance between them and others, they become bigger towards people who are happy or distressed. (M. Singarimbun & S. Efendi, 1992)

The present study provides evidence that empathy plays an important role in mental health, particularly as children travel through middle childhood into adolescence. Some emotional distress was observed in one group of children (i.e., 10-year-old girls), although this distress showed no signs of carrying over into adolescence. (F.J. De Wuffel, 1986) Empathy can be noticed as the pattern of patterns in social situations during early childhood. Acts and feelings of others to a certain level develop sufficiently in late childhood. (J. Bowlby, 1981) These things are based on the cognitive development in a child in late childhood who are able to distinguish the needs for himself or to others. It results from the past experience and the separated identities of himself.

Based on the above framework and assumption, the proposed hypothesis was there is a relationship between patterns of attachment and empathy of a child toward another person. This hypothesis is broken down into the following minor hypotheses: (1) there is relationship between the pattern of secure attachment and empathy of child towards another person; (2) there is relationship between the pattern of anxious avoidance attachment and empathy of child towards another person; and (3) there is relationship between the pattern of anxious-resistant attachment and empathy of child towards another person.

METHODS

The Research Approach

The method used in this research is the quantitative method by using significance testing. The free variables of this research are the attachment patterns of the child to mother, while the depended variable is empathy.

The Participant

The sample of this research is the children aged 10 - 12 years old and since they were born, they are being taken care of by the mothers.

Test Results Measuring Tools

The calculation of reliability has involved 175 subjects. The reliability of Attachment Patterns obtained with alpha Cronbach of 0.725. And the reliability of the Empathy on Children measuring instrument through calculation with alpha Cronbach obtained a reliability rate of 0.861.

Data Collection

The data for children’s empathy variables are taken by semi projective measuring tool that contains the questions of cognitive, affective, and motivational components. These components are the subsequent developmental model of empathy from Hoffman. These three components can be explained as follows: (1) cognitive: the child’s ability to process information obtained about the circumstances experienced by another person or victims (such as situation experienced by the victim, and the expression on the victim’s face); (2) affective: the affective response of the child with regard to pleasant or unpleasant circumstances (suffering and sadness experienced by others/victims or feel
happiness’s another person), (3)motivational: the tendency of the child to behave in a way that feels happiness or to conduct behavior to free the victim from his/she distress.

While the data for attachment pattern variables between mother and child is obtained through the measuring tool in the form of force choices, in which each item directly indicates the attachment patterns of the child. The tool is made based on concepts of interpersonal orientation from (J. Bowlby, 1978) and characteristics of children belonging to each pattern from Bowlby. (R.A. Thompson, in N. Eisenberg & J. Strayer, 1987; D. Howe, 2015) and Ainsworth et.al. So, in this research, the aspects of attachment patterns are the ability to cooperate with others, ability to trust others, accept and follow rules or prevailing norms, belief in oneself, isolation, acceptance of different opinions, and closeness with friends.(M. Nazir, 1988; M. Meisa, 2015; Sabirova et al., 2016)

The Empathy of Children towards another person had semi-projective form. This is meant for the subject can freely provide an interpretation of the situation described, but still, be asked to answer the questions whose framework has been determined.

Data Analysis

The data analysis is conducted by using the statistic analysis technique of One-Way Anova. This is done in order to distinguish the empathic differences on children in late childhood attached with secure attachment, avoidance attachment, and ambivalent/resistant attachment patterns. The data of Attachment Pattern are mentioned in nominals and the data of Empathy of Children is mentioned in intervals. The homogeneity tests will be conducted before the data are being analyzed.

RESULTS AND DISCUSSION

The variable data of Attachment Patterns are measured in nominal, so the shown description is the total of students involved in any attachment pattern. Based on the scoring, the sum of all attachment patterns is obtained as seen in Table 1.

| Attachment Pattern | Total of Subjects |
|--------------------|-------------------|
| Secure Attachment  | 73                |
| Ambivalent/Resistant Attachment | 6            |
| Avoidant Attachment | 0                |

While for the variable data of children empathy to another person is shown in Table 2.

| Variables | Hypothetical Scores |
|-----------|---------------------|
| Xmax      | Xmin    | Mean | SD  |
| Children’s Empathy | 42     | 0    | 30  | 7    |

The scoring result of Empathy on Children to Others leads to the use of criteria on the Hypothetical Scores based on the applied theory. Thus, the research data of scoring results are shown in Table 3.

| Interval | Category | Frequency | Percentage |
|----------|----------|-----------|------------|
| 0 – 13   | High     | 61        | 77.215%    |
| 14 – 27  | Middle   | 16        | 20.253%    |
| 28 – 42  | Low      | 2         | 2.532%     |

The homogeneity test is the only test conducted for the research data. The result of its test depicts that p = 0.215. It indicates p > 0.01 which means that the research data are homogeneous. Later, the hypothetical test is conducted which obtains F = 0.673 with p = 0.415 so that p > 0.05 that means the hypothesis is declined. It signifies that there is no difference found in empathy of children in late childhood with secure attachment, avoidance attachment, and ambivalent/resistant attachment patterns.

The result of this research depicts no differences found in empathy of children in late childhood related to the attachment patterns mentioned above. It probably happens due to the research data profile, which consists of 79 subjects including the sample criteria and is able to conduct scoring. About 73 subjects of it are included into the secure
attachment category, which is only 6 subjects included into ambivalent/resistant attachment and none of these subjects is avoidant attachment category so that the data have less power in affecting the hypothesis test (Table. 3). This exhibits that the school environment is too homogenous to the subject’s condition, so there is no significant differences happened within the three attachments. Moreover, another cause is the choice of sample research which is merely conducted at the school, so that the data become less varied. Whereas, the subject criteria for children in late childhood (10/11 – 12/13 years old) and those who lived with their mothers, are likely to obtain the varied research sample.

It also indicates the existence of other factors towards the development of empathy in children. The development itself is a part of social-emotional development in a person, so it does not happen merely due to the social relation between mother and child, but also the genetic factor as well as the environment where they live. One of the genetic factors is intelligence. The ability of someone in understanding the messages and giving certain meanings to others greatly depends on his cognitive ability. One of the aspects of empathy is called cognitive aspect. The capacity to respond stimulus, like happiness or distress to other people, also requires his cognitive reasoning ability, including the ability to see ‘object’ resolutions - in this case people -, the ability to distinguish self-attributes and others, as well as the imperfect ability to make assumptions / predictions of the psychological state of others (Deutsch & Madle; Feshbach; Greenspan, Barenboim,& Chandler; Shantz). Broadly speaking, it is inherent with the theory of the child’s cognitive development offered by Piaget.

Another genetic factor is traits or personality. The personality is actually depended on two factors, genetic and environment. The distinct emphatic responses in certain situations mostly depend on the personality of a person. (D.J. Campion, 1981, Bretherton, 1987) The embarrassment and guilt feelings, due to the self-conscious emotion, are also being analyzed in the link of empathy (Ibid). People who easily feel guilty tend to be ‘other-oriented’. Those who have the ability to valuating things from others’ point of view and are able to show empathy show higher scores than those who easily feel embarrassing (Eisenberg; Robinson, et al.). People who easily feel embarrassing are those who focus more on their own feelings, which hinder their abilities to show empathy. (D.J. Campion, 1981, Bretherton, 1987)

In addition, the influence coming from the environment takes part in the development of empathy in children. According to Urie Bronfenbrenner’s The Socio-Cultural/Bio-Ecology/Contextual Theory, in the development of child’s emotional-social development – including the development of personality, explained that microsystem, mesosystem, exosystem, macrosystem until chronosystem affect the whole influences to all aspects in child’s development, such as cognitive development, emotional development, social development, moral and spiritual developments, as well as motor/physical development. Starting from the main family, friendship with the same-aged friends, learning activities at school, wider relation with relatives, and policies-making on a wider scope in life mostly influence the development of personal empathy of child. Moreover, empathic development is actually determined by the contextual factors where the bio-ecology factor works. The research sample, which is merely limited at the school, creates the assumption that schools give a positive impact to the development of empathy in children. At the process of learning in the school, there is a process of creating value and forming the character for children through the teaching and habit shaping. This is probably able to create a high empathy from the sample of research which is affected by the learning at school.

The culture gives many influences in the development of empathy. (L.M. Stroufe, R. Kestaenbaum, E.A. Farber, in N, 1989) Since society becomes varied in both ethnicity and culture, the interest in empathy of different culture becomes higher, which is normally stated as ethnocultural empathy (L.M. Stroufe, in M. Perlmuller, 1983) Figure 1 shows the description of the scoring category in empathy.

![Circle Chart](chart.png)

**Figure 1:** The Categorization of Empathic Scoring

Based on the whole data of research that has been conducted, the description of emphatic scoring in the sample research shows 77.22 % as a high category, 20.25 % as a medium category, and 2.53 % as a low category. The high result does not exhibit the assumption match with the fact. The provided fact depicts that subject in the sample research represents a high empathy. It also describes some possibilities. The first possibility is data and facts are corresponding to each other.
The second possibility is the measuring tool of child’s empathy is less accurate, though the reliability is 0.861.

CONCLUSIONS

The differences in the empathy of child in late childhood attached with secure attachment, avoidance attachment, and ambivalent/resistant attachment patterns are not proven. This probably occurs due to several possibilities, (1) the not-varied data; (2) other factors besides attachment that affect the development of empathy in child to other people.

The appropriate suggestion to the next research is to choose subjects not merely at the school, but also at the wider social environment. It is because the criteria for the subject are children in late childhood (10/11 – 12/13 years old) and are lived by the mothers. Therefore, the data can be more varied. Besides, the precise measuring tool is needed in order to measure the continuum to each attachment pattern, which means that the measuring tools must be specifically created based on the patterns of secure attachment, anxious avoidant attachment, and anxious-ambivalent/resistant attachment.

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