

THE EFFECTIVENESS OF GRATITUDE TRAINING TO IMPROVE SUBJECTIVE WELL-BEING OF PARENTS WITH SPECIAL NEEDS CHILDREN

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Raising children with special needs requires extra and sustained efforts in parenting, which results in a decrease in parents' subjective well-being. This is characterized by feelings of pessimism about the future, difficulty accepting the child's condition, prolonged financial burden, increased risk of depression, and loss of time to socialize. This study aims to determine the effectiveness of gratitude training on subjective well-being in parents of children with disabilities. The subjects in this study were parents aged 30-60 years old who lived with their children. The research design was quasi-experimental (one group pretest-posttest design). Subjective well-being was measured using The Well-Being Scale (WeBS) to measure aspects of physical, financial, social, hedonic and eudaimonic well-being. Analysis with the Wilcoxon test showed a p value = $<.001$ ($p < 0.05$) and a z value = -4.018 on the pretest-posttest. The results of this training indicate that gratitude training has a significant effect on improving subjective well-being in parents who have children with special needs.

Keywords: *gratitude training, subjective well-being, parents with special needs children*

INTRODUCTION

Every married couple wishes for the presence of children. A husband and wife desire the presence of children in the household because it can have a positive impact on a person's life (Bradburry et al. (2000) in Anggrainy et al. (2020)). Every parent desires a child who is born flawless. However, not all children are born with normal conditions; some are born with special needs that necessitate special care and education. Children with Special Needs (ABK) are those who have these characteristics.

Children with special needs face challenges in carrying out their human functions. Obstacles encountered vary, such as physical, psychological, cognitive, or social barriers to optimally achieving goals, needs, and developing potential (Anggrainy et al. 2020). For instance, deafness, Down syndrome, ADHD, mental retardation, and so on. According to Riskesdas (2018), the proportion of disabled people aged 5-17 years is 3.3%, the proportion of disabled people aged 18-59 years is 22%, and the proportion of disabled people aged 60 and over is 2.6%. When parents have children who have difficulties with daily activities, it is natural for them to feel sadness, anger, anxiety, and even reject the doctor's diagnosis (Anggrainy et al. 2020).

Raising children with special needs necessitates ongoing coping efforts, and data has a negative impact on many aspects of a person's life (Feldman et al., 2007; Sheenar-Golan, 2015). In terms of finances, the need for therapy and medication costs, as well as time away from work when accompanying children receiving treatment (Burton & Phipps 2009 in Sheenar-Golan 2015). There is a risk of losing friends and social contact as a result of spending more time with children, so there is a tendency to distance oneself from people (McCubbin & Patterson 1983 in Sheenar-Golan 2015). Several research studies on parents of special needs children describe these parents as having an increased risk of depression (Emerson et al., 2006 in Sheenar-Golan 2015), low levels of subjective

well-being (SWB), and increased feelings of pessimism about the future (Cantwell et al. 2014 in Sheenar-Golan 2015).

This condition is regarded as a source of pressure or stress for parents who have children with special needs, and it can have an impact on the psychological aspect, namely Subjective Well Being. Happiness, acceptance of the child's condition, and treatment efforts given to the child are all associated with the problem of low subjective well-being (Perdana & Dewi, 2015 in Arsih & Syafiq, 2022). Parents of children with special needs with low subjective well-being have a negative impact on the level of care for themselves and their special needs children in meeting their daily needs. Meanwhile, parents of children with special needs with a high level of subjective well-being can live well, change, improve, or control their surroundings with positive emotions.

According to Diener et al (1999), subjective well-being is a type of life evaluation that can be done in two ways: cognitive and affective assessment. A cognitive assessment is an evaluation of life satisfaction, whereas an affective assessment is an emotional reaction to events, such as feeling positive (pleasant) or negative (unpleasant). A person who feels more positive emotions than negative emotions will be happier. Positive thinking and the reduction of negative thoughts are required for someone to achieve prosperity. Meaning and purpose in life, mutually supportive and beneficial relationships, involvement and interest, contributing to the welfare of others, competence, self-acceptance, optimism, and respect for self and others are all examples of psychological well-being (Dewanto & Retnowati, 2015).

Abraham Maslow's Hierarchy of Needs Theory (1954) is a theory that identifies five areas of basic human needs and motivations that promote well-being. These five areas are as follows: (1) physiological needs for food and shelter, (2) security, (3) social needs for love and belonging, and (4) self-esteem needs, which are concerned with feeling valued and in control of one's environment. (5) self-actualization needs, which emphasize self-direction and realizing one's full potential. Despite a large body of literature explaining the role of individual and cultural background in the nature and composition of happiness (Diener *et al.*, 2016; Diener and Oishi, 2005), emerging evidence suggests that these five basic needs are related to SWB in a consistent manner across geographic regions and cultures (Tay & Diener, 2011). To achieve a thriving and optimal life experience, a comprehensive concept and measurement of subjective well-being (SWB) must systematically include satisfaction and emotional feelings toward one's life in all of these domains.

This study focused on the low subjective well-being experienced by parents of special-needs children. Subjective well-being is defined as a balance of meeting needs from various domains of life such as physical, financial, social, hedonic, and eudaimonic, which results in a person's overall sense of well-being (Lui & Fernando, 2018). According to Haworth (1997), expressing gratitude can help each individual achieve the level of well-being that they desire. Gratitude can improve well-being (Haworth, 1997) because it has a strong relationship with the components of psychological well-being, which are environmental mastery, personal growth, positive relationships, life goals, and self-acceptance (Wood, Joseph, & Maltby, 2009).

Gratitude is related to subjective well-being, particularly positive emotions (Emmons and McCullough, 2003). By increasing one's experience of positive events, increasing one's efforts to cope with unpleasant events, and expanding one's social network, gratitude can help improve subjective well-being (Emmons & McCullough, 2003 in Rash, Matsuba, & Prkachin, 2011). Gratitude is also valued as a means of changing one's level of happiness and subjective well-being simply by expressing gratitude (Toepfer et al., 2012 in Christanto et al., 2017). Gratitude is a feeling of appreciation for the goodness of others (Emmons & Clumper, 2000). Grateful people value the kindness of others who have contributed to their happiness (McCullough, Kilpatrick, Emmons, & Larson, 2001). This encourages grateful people to experience more positive emotions and happiness (Seligman, Steen, Park, & Peterson, 2005).

According to McCoullough *et al.* (2002), gratitude is the tendency to recognize and respond gratefully to the roles of goodness and benefits provided by other people, experiences, and positive

results obtained by a person. Among the aspects of gratitude mentioned by McCullough et al. (2002) are intensity, frequency, span, and density. Intensity, which means that people who are naturally grateful will feel more grateful than those who are not, and how many positive experiences they have had. People who are grateful feel more grateful every day, even for small things, because of their frequency. Span is an individual's range of gratitude as measured by how many aspects of their life they are grateful for, such as gratitude for their family, work, or life. Density refers to the number of people who express gratitude for an individual's accomplishments. Individuals with a grateful disposition will usually mention more people who are also grateful for the individual's accomplishments. Gratitude is an attribution dependent emotion, which means that it is the result of a person attributing an event to themselves. Gratitude therapy is a branch of positive psychology that focuses on the positive aspects of people (Sukarmawan, 2019). Individuals are invited to provide positive attributions for various events in their lives through gratitude.

People who are grateful are prone to positive emotions and subjective well-being. Several theorists and researchers have observed that gratitude has a strong emotional valence (e.g., Lazarus & Lazarus, 1994; Mayer, Salovey, Gomberg-Kaufman, & Blainey, 1991; Ortony, Clore, & Collins, 1988; Weiner, 1986 according to McCullough, Emmons, and Tsang, 2002). People who are truly grateful have a worldview in which everything they have, including life itself, is viewed as a gift. The degree of gratitude for the good things in one's life can cause a grateful person to not take the benefits for granted. As a result, they are less likely to become accustomed to favorable life circumstances, which may aid in the long-term maintenance of their happiness and subjective well-being (McCullough, Emmons, Tsang, 2002).

Previous research on the impact of a brief gratitude intervention on subjective well-being, biology, and sleep was conducted by Jackowska *et al.* (2016). The findings of this study indicate a significant relationship between gratitude intervention training and subjective well-being in adult women under the age of 45. Lubis and Agustini (2018) also conducted research titled The Effectiveness of Gratitude Training for Increasing Subjective Well-Being in Teenagers in Orphanages. It also demonstrated that gratitude training results were effective in increasing subjective well-being in teenagers at the Ar-Riyadhul Jannah orphanage. In addition, Doss and Nathan (2020) found a significant relationship between gratitude and subjective well-being in adolescents in their study on the influence of gratitude on subjective well-being in adolescents. According to the findings of this study, the higher the level of gratitude, the higher the level of subjective well-being. As a result, the purpose of this study is to explain the effectiveness of Gratitude Training on Subjective Well-Being in parents of special-needs children.

In this study, the gratitude intervention was implemented using an experiential learning model with group training, which included experiencing, sharing experiences, processing experiences through discussion, formulating conclusions, taking meaning, and applying learning results (Pfeiffer and John, 1979). This gratitude training was created with the positive psychology paradigm in mind. In positive psychology, gratitude is defined as the development of positive emotions and the investigation of individual positive strengths (Watkins, 2014). This gratitude training invites participants to focus on positive aspects of life, explore positive emotions, count back the blessings of life in the form of favors or kindness received from others, reflect on the benefits received, and consider what their life would be like without blessings. Understand and appreciate the blessings that exist through behavior by making and saying thanks to someone important in your life, as well as finding positive strength within yourself. This is accomplished by re-evaluating negative experiences, identifying positive lessons that can be drawn from negative experiences, and transforming them into valuable experiences for which we should be grateful.

RESEARCH METHOD

A quasi-experimental research design with a pretest posttest one group design model was used in this study to compare the effects of a treatment on the experimental group before and after treatment (Azwar, 2017). The participants in this study were parents with special needs children who attended SLB X in Surabaya City. Participants in this study had to meet the following requirements: 1) parents who have and live with special needs children, 2) able to read and write, 3) have never attended gratitude training, 4) medium or low level of subjective well-being based on WeBS scale, 5) willing to cooperate and participate in the entire series of gratitude training without coercion by filling out informed consent.

The data was obtained using a mix-method, which was a combination of quantitative and qualitative approaches. The WeBS scale, which has been adapted in Indonesian to measure subjective well-being, was used in a quantitative approach. The adaptation of the WeBS scale, which consisted of 29 items, yielded content validity ranging from 0.97 to 0.98, with a reliability of (α) = 0.85. The WeBS scale assesses subjective well-being in the areas of physical, financial, social, hedonia, and eudaimonia (Lui & Fernando, 2018). Semi-structured interviews with subjects were used to collect qualitative data about the conditions they felt before and after the intervention process.

The scale has been adapted to the Well-Being Scale (WeBS), which was previously developed by Lui and Fernando (2018). The adaptation was made by the researchers through expert judgment with ten panelists who had educational backgrounds in psychology to expert practitioners of the psychology profession and had bilingual language skills (two languages). The researcher performed forward to backward translation on each WeBS item before distributing it to the ten panelists. The researcher then submitted the two translation results to ten expert opinions. Panelists were asked to look over each scale item and rate it on three criteria: clarity, relevance, and suitability. The assessment consists of three possible outcomes: 1=poor, 2=fair, and 3=excellent.

The expert judgment results and recommendations were then used to calculate CVR (Content Validity Ratio) as a reference for improving items in WeBS before being tested on a larger sample. Winstep version 3.72.0003 was used to conduct the content validity analysis. The Aiken Index was then used to calculate CVR quantitatively. Referring to the rater, which consisted of ten panelists with three alternative answers, and the Aiken table (Aiken, 1985), the minimum acceptable error level was 5%, with a significance level of $p=0.005$. As a result, each item on the WeBS scale must achieve a minimum index of 0.85. The minimum index has been met by each item on the WeBS adaptation scale. In terms of clarity, the score value per item ranges from 0.7 to 1.0, yielding a total mean V score of 0.97 (>0.85). This indicated that the average Aiken index for this scale item was clear. In terms of relevance, the score value per item ranged from 0.9 to 1.0, yielding a total mean V score of 0.98 (>0.85). This indicated that the Aiken index for this scale item had a high level of agreement.

In conclusion, it was found that the 29 items of the WeBS scale adaptation had good content validity based on the results of measuring the content validity of the WeBS scale adaptation, so the researcher decided to use 29 items of the WeBS scale to be tested on a general sample with the criteria of being bilingual or understanding two languages (English and Indonesian). Following content validity calculations and item improvements, the Indonesian version of the WeBS scale was subjected to item validity testing (item analysis). This analysis seeks to identify items that were suitable for measuring Subjective Well-Being. Testing the validity of the items was carried out by conducting trials on 37 participants.

Semi-structured interviews were used to collect qualitative data for evaluation before and after training, as well as to reveal information that could not be obtained through scales. In addition, observations were made during the training to determine the dynamics that occurred, the activeness and comfort of the participants, and the suitability of the way the material was delivered to the participants.

The gratitude training module used was a modified version of Anshar's (2017) module. Modifications were made to the material and training tasks to make them more appropriate for the research subject. This module was organized around an understanding, concept, and process of gratitude that has been adapted as a type of intervention to improve subjective well-being, as well as an explanation of strategies and obstacles in gratitude skills according to Emmons (2007) and Hanaco (2012).

The procedure in this study consisted of several stages, namely: 1) subjects filled out informed-consent forms indicating their willingness to participate in the entire intervention process voluntarily and without coercion, 2) the subjects completed the pre-test scale, 3) conducted two days of gratitude training based on the Anshar (2017) module, which includes Recounting Blessings sessions, Reflection of Gratitude, Expression of Gratitude, and Reappraisal. 4) the post-test scale was completed by the subjects.

Participants in the *Recounting Blessing* session filled out a life graph sheet with pleasant and unpleasant experiences. Then, wrote down one favor or blessing received in the last two days, week, and month. Participants was shown a video about people with various disabilities during the Reflection session. Moreover, participants reflect on the video's lessons by jointly evaluating themselves in terms of the blessings or goodness they have received in life. Furthermore, participants complete an expressive writing assignment in which they write a specific "thank you" letter to God or someone who has done something good that is very meaningful to the participant and the influence of goodness on the subject's life.

Participants in the *Expression of Blessings* session reviewed the previous session's material before reading letters of thanks in turn. Participants also expressed their feelings after reading the gratitude assignment and received responses or opinions from other participants before coming to a conclusion about the lessons learned after successfully expressing gratitude. Participants in the Reappraisal session tell about pleasant experiences that have been recorded on a life graph worksheet, then review unpleasant experiences to determine what lessons have been learned. Furthermore, we agreed that while unpleasant experiences are unavoidable in life, there will always be wisdom to be grateful for.

Techniques for data analysis applied quantitative and qualitative data analysis. The Wilcoxon Test nonparametric analysis method was used for quantitative data analysis during the pre-test and post-test. The N-gain score was used to calculate treatment effectiveness. The use of non-parametric analysis was based on a small sample size, less than 30, and did not meet the random research sample selection criteria (Nuryadi *et al.*, 2017). The normalized gain or N-Gain score was used to determine the efficacy of a specific method or treatment in one group pretest posttest design research. Based on interview data and experimental group worksheets before and after gratitude training, qualitative analysis was obtained through descriptive data analysis.

RESULT AND ANALYSIS

Participants in this study included 21 parents of special needs children (n=21) who attended one of Surabaya's 'X' special schools. A series of gratitude training modules adapted from Anshar (2017) were given to research participants in their entirety, and all research participants completed the gratitude training from beginning to end. The parents in this study have children with special needs who attend SLB from kindergarten to high school. Meanwhile, the remainder have physical disabilities such as blindness or deafness.

The Wilcoxon Test was used in this study to determine whether there were differences in scores in the experimental group in the two measurement conditions, namely before and after receiving gratitude training treatment. The following results were obtained from the calculation results:

Table 1. Wilcoxon Test Result in the Experimental Group

Aspect	Significance	Description
Subjective well-being	<.001 (<i>p</i>) -4,018 (<i>z</i>)	Significant

According to the Wilcoxon test results, the subjective well-being aspect had a significance value of <0.001 ($p < 0.05$) and a *z* value of -4.018, indicating a difference in WeBS scale scores from the experimental group after gratitude training. This means that gratitude training improved the subjective well-being of parents with special needs immediately after they attend the training.

The difference between the pretest and posttest was then used to calculate the N-gain score, which was used to determine the effectiveness of the treatment. The difference in pretest and posttest scores is assumed to be a treatment effect (Hake, 1999). The N-gain score calculation yielded the following results:

Table 2. N-gain Score Result in the WeBS Pretest – Posttest

Component	Mean (n = 21)	Description
N-gain score	0,5615	High
N-gain score percentage	56,15%	Moderately Effective

The results above show that the average value (Mean) of N -Gain is 0.5615, or 56.15% if expressed as a percentage. The standard interpretation of N-Gain effectiveness with percentage categories (%) from Hake (1999) is used to determine treatment effectiveness, as shown below:

Table 3. Category of N-Gain Effectiveness Interpretation (Hake, 1999)

Percentage (%)	Interpretation
<40	Not Effective
40 - 55	Less Effective
56 - 75	Moderately Effective
> 76	Effective

The findings of this study suggested that gratitude training has an effect on increasing subjective well-being in parents of special-needs children. This occurred because the subjects were eager to put their newfound knowledge and insight into practice in their daily lives. The findings also showed that there is a difference in the experimental group's average gain score in subjective well-being and gratitude after receiving treatment in the form of gratitude training. This suggested that gratitude training has a significant effect on increasing subjective well-being in parents of special-needs children. Following the training, all subjects in the experimental group demonstrated positive changes.

This is in a line with previous research by Watkins, Uher, and Pichinevsky, which found that gratitude training increased well-being significantly more than placebo conditions (Watkins *et al.*, 2014). According to research by Rahmanita, Uyun, and Sulistyarini, there is a difference in subjective well-being scores between groups of hypertension patients who received gratitude training and those who did not (Rahmanita *et al.*, 2016).

According to the findings of three research participants' interviews, there were several changes felt after participating in gratitude training. This can be seen through qualitative analysis, which showed the changes experienced by the research subjects. According to this study, after receiving gratitude training, parents of special needs children were able to understand gratitude for everyday experiences.

"I used to believe that in order to be grateful for life, you had to be successful in both life and work. But having children with special needs makes me grateful for every inch of progress they make. My two children are healthy and free of coughs and colds, which makes me happy because they can do the things they enjoy"- subject S

"It's extremely hot in Surabaya, but that's okay because I can still relax while watching TV and the kids are happy. Thank God, I can relax and be healthy, and I can see my family and friends - subject H

This training teaches parents of special-needs children to be grateful for the little things in life. Being grateful for life can be accomplished by being able to find simple pleasures that increase parents' sense of happiness. Simple achievements in children's physical development and having time to relax with children and close family members that are realized with gratitude clearly provide positive attributions for increasing subjective happiness in parents with special needs children. Subject S is more able to be grateful for the small things in his life, which is consistent with Rahmanita *et al.* (2016)'s research, which explains that gratitude training helps participants understand simple forms of gratitude and is more able to be grateful for the small and big things in their lives.

Each person's life has a variety of stories, such as pleasant, sad, or moving experiences. In this study, gratitude training is able to increase self-ability for the meaning of all life experiences to be realized by parents with special needs children in order to increase subjective happiness.

"There were many unpleasant things in my life, but after watching the video, I realized that despite all of my bad luck, I can still live and improve this life for myself and my family. It turns out that spending time with the people we care about is something to be thankful for"- subject R.

"I think saying gratitude is easy, but it's very difficult in my heart, but after being taught by, I realized that unpleasant things, like my motorbike disappearing last week, finally allow me to spend more time with my grandchildren by riding a bicycle to school"-subject I

Almost all subjects in the experimental group were better able to accept all life's circumstances, both positive and negative. This training can effectively assist parents with special needs children in increasing their sense of gratitude by allowing them to make sense of difficult life experiences. Feelings of sadness that can be interpreted as gratitude can elicit positive emotions in parents of special-needs children. This shows that parents can convert unpleasant experiences into feelings of gratitude and tend to be grateful when they receive positive things. These findings are consistent with the findings of Watkins *et al.* (2003), who found that gratitude influences subjective well-being through positive emotions felt when someone sees everything as good.

In addition, the subjects were far more accepting of their situation. Regardless of their disabilities, subjects consider their children to be a blessing. The subject also distances himself from the circumstances of others who are better off. Subjects are better able to control when they look up and when they look at other people who are less fortunate, allowing them to appreciate all of their current blessings. This is in a line with statement by McCullough *et al.* (in Emmons & Stern, 2013) claim that gratitude can divert attention away from relative deprivation, namely comparing oneself to others who have more goodness or blessings. .

This Gratitude Training can help parents with special needs children feel more grateful by allowing them to interpret the support and kindness provided by spiritual objects such as God or close people in their lives.

"I am grateful to my husband and mother for always being there for me as I continued to love my special child. When my husband and mother continued to understand my feelings when I was tired of my child, I realized that my difficulties were nothing and that they were easier to live with"- subject C

"I used to believe that my life was difficult and exhausting, but in the video, I expressed my gratitude that I still have faith in God, and it turns out that God has shown me a lot of His love through my extraordinary child. God is the only one who can demand his people in my far from perfect life – subject N"

This training assists parents in making meaning of their life experiences by recognizing the presence of a figure as social and spiritual support in their daily lives. Recognizing that having a figure who can support people in their lives can boost one's positive psychology. The interpretation of emotional support from the figure around can increase the sense of gratitude in parents with special needs children, allowing them to give positive attributions to subjective individual well-being. The statement that expressing gratitude to spiritual objects and other people who play a role in providing goodness can increase one's awareness of goodness (McCullough *et al.*, 2002) supports the subject's claim that expressing gratitude to God or people who provide support, as done by the subject, can improve subjective well-being.

Increasing the benefits provided to others can improve one's subjective well-being. Watkins *et al.* (2003) define this as social benefits. As a result, grateful people tend to do good for others as a form of gratitude and will receive a reward, implying that gratitude promotes subjective well-being in the long run (Watkins *et al.*, 2003). As happened in the experimental group, when subjects were able to express gratitude to their parents, children, or spouses, they wanted to always do good to others as a form of gratitude to God. Subjects believe that all pleasure comes from God but can be experienced through the hands of others.

Subjects improved in recognizing the blessings and goodness they received as they progressed from simple to more complex blessings. Subjects also realized that, in addition to God's source of pleasure, the people closest to them play a role in providing goodness for which they should be grateful. Subjects are also better able to understand the conditions of others who are less fortunate, allowing them to accept their current circumstances more easily, allowing them to have a more optimistic outlook on current and future situations.

Based on the quantitative and qualitative analysis presented above, it is possible to conclude that participating in gratitude training increases the subjective well-being of parents who have children with special needs. This occurred because the subjects desired to use all of the exercises learned during the training in their daily lives. The subject believes that the information presented is useful and applicable in everyday life.

Overall, the research was implemented smoothly, but there were some stumbling blocks during the training process. The research's strength is that there are still few research topics that provide gratitude training to improve subjective well-being in parents of special-needs children. The research was implemented relatively smooth because the training procedures were not overly complicated, allowing the materials and exercises provided to be easily understood and applied by the participants during the training. The materials and exercises are designed to meet the needs and circumstances of parents who have children with special needs. The training worksheet booklet, which can be used to evaluate the material on all subjects, is also extremely beneficial to the success of this training. The explanation of the material, video viewing, and assignments in each session contributed to the success of the gratitude training in this experimental group.

The first session, '*Recounting Blessings*,' taught trainees about the importance of gratitude in general and the benefits of being grateful for small things. The participants were then asked to recall and write down the goodness or favors they had received in the previous two days, two weeks, and one month. This assignment is designed to help subjects recognize the good things they have received, which can range from simple materialistic objects to more complex and profound goodness. This teaches participants to accept their current situation while remaining grateful for many things, small and large, that bring goodness and favor into their lives, thereby increasing subjective well-being.

In the second session, '*Reflection of Gratitude*,' participants were invited to watch a documentary video about the physical and intellectual struggles of people with disabilities living life. The material then continued with a case study about a disabled person's daily life, which included both pleasant and unpleasant experiences. Participants are encouraged to reflect on their current lives and compare them to the lives of those who are less fortunate. Subjects can learn when to compare themselves upwards and when to look down on those who are less fortunate by making comparisons. Knowing that there are people who live in poverty helps the subject be more grateful for his current situation. Gratitude can also help to reduce feelings of inferiority that arise from comparing oneself to others who have more goodness or favors.

The trainees were given an expressive writing assignment in the third session, '*Expression of Gratitude*,' to create a Gratitude letter addressed to God or those who play a role in providing goodness in their lives. This assignment was designed to assist subjects in identifying the source of their enjoyment and the people who bring goodness into their lives, and then express gratitude and do good to others as a form of gratitude. Subjects gain satisfaction by expressing gratitude through writing, which produces positive feelings. Furthermore, this helps subjects realize that they are not alone because they have a support system that has provided the subject with support and kindness in living the role of a parent with a special needs child. Expressing gratitude to God and others who contribute to the provision of kindness can heighten one's awareness of kindness itself.

In the fourth session, entitled '*Reappraisal*,' trainees were asked to chart their lives over a five-year period. Participants were asked to write down their favorite and least favorite moments and experiences from the previous five years. This activity helped the subjects understand that both positive and negative experiences are a part of life. As a result, subjects were encouraged to be grateful for the good and to learn from the bad. This is intended to help the subjects understand that having unpleasant experiences is a normal part of life, and that if they can reflect objectively on the experience, there are things to be grateful for.

This study has a number of limitations. When compared to research involving many subjects, the limited number of samples and not determined randomly allows for greater sampling error and less generalisation power. This study is unrelated to the special needs children they care for, which will be related to the subject's level of resilience. Several obstacles related to the training's location arose during its implementation. Because the training was held at school during learning hours, the course of the training was changed several times due to conflicts with the school's agenda. Because the training room was not tightly closed, some participants came in and out during the training, which slightly disrupted the training. Another challenge was the difficulty in maintaining a positive atmosphere throughout the training because some subjects were accompanied by children, making it difficult for the subjects to fully concentrate on the ongoing training activities.

CONCLUSION

The findings showed that gratitude training significantly improved subjective well-being in parents of children with special needs. This can be seen in the quantitative analysis results, which showed that there are differences in subjective well-being scores in the experimental group before and after gratitude training.

Based on the implementation results and evaluation of the study limitations, several suggestions for improvement for researchers who will conduct similar research, as follows:

1. Conduct research on a larger research group by applying a control group to generalize the results of a more representative study.
2. Conduct follow-up on research subjects some time after receiving treatment to determine the extent to which the effectiveness of gratitude training can last.
3. Modify the training module by adding reflections related to aspects of well-being that are specific to parents who have children with special needs so that it is expected that gratitude training can improve subjective well being more effectively.
4. Future researchers are expected to be able to better control matters related to the implementation of training such as room conditions and subjects so that the training runs more optimally.
5. Future researchers can involve other variables such as age, occupation, income, and education to see their influence on the treatment given.

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