The Correlation between Children's Self-Esteem, Locus of Control and Self-Confidence

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ABSTRACT: The purpose of this research was to predict the correlation between self-esteem, locus of control and the self-confidence. Another purpose of this research was to know the differences in self-esteem, locus of control, and self-confidence of the children who had been cared and those who had not. The subjects were 136 fifth-year secondary school students. The data were obtained by applying a set of scales for revealing: (a) selfesteem, (b) locus of control, and (c) students' self-confidence. The data were analyzed by adopting the method of regression and analysis of variance repeated measure designs. The results were as follows: (1) There was a correlation between self-esteem, locus of control and students' self-confidence (Ry 12 = 0.597: p < 0.01). (2) There was a correlation between self-esteem and students' self-confidence (Rx 1 y = 0.596: p < 0.01). (3) There was a correlation between locus of control and students' self-confidence (Rx 2 y = 0,0004: p < 0.01). (4) There was a difference between self-esteem between K1 and K2; the K1 self-esteem was higher than K2. (5) There was difference locus of control between K1 and K2; the K1 locus of control was higher than K2. (6) There was a difference in confidence between K1 and K2; the K1 self-confidence was higher than K2. Based on the findings, it can be concluded that there is a correlation between self-esteem, locus of control and students' selfconfidence. Furthermore, students' self-esteem contributed more to their self-confidence than locus of control. The self-esteem, locus of control, and self-confidence in K1 were higher than K2. Thus, the caring could invest in self-esteem, locus of control, and self-confidence.

KEYWORDS: self-esteem, locus of control, self-confidence

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I. INTRODUCTION

Self-confidence should be cultivated since childhood, immersed in the process of children's daily education and coaching both at home and at school. Fostering a child's self-confidence means guiding the child towards a positive condition in his life.

Self-confidence is one of the most important factors in every human activity. An athlete who will compete in a sport, even though he is well prepared, will find it difficult to win a competition if he does not have high self-confidence. Lack of confidence can prevent human potentials from fully developing.

The growth and development of children significantly takes place in a family especially in the process of personality formation which enable them to develop their social roles appropriately. Parents takes main responsibility for the realization of children's physical, spiritual, and social welfare. However, in reality, they are still unable to fully exercise this obligation.

To overcome this, the government and the community have carried out various efforts, but in nurturing quality children there are many obstacles caused by functional barriers which some of our children have to face. The reason for a child's non-functioning social role tends to be his parents' socio-economic, socio-psychological, and social problems. As a consequence of these functional barriers, the child will experience learning disabilities and behavioral disorders such as shyness, low self-esteem, aggressiveness, absenteeism, and lack of confidence.

Children supervision through boarding school is expected to be able to address issues such as shyness, low self-esteem, and aggressiveness. In turn, the supervision is expected to be able to increase children's self-esteem, self-control, self-confidence and motivation to study. Educational institution with boarding school system founded by the public through Al Husnayain Education Foundation Establishment Panyabungan aims, as part of its coaching program, to help children with behavioral disorders and learning impair.

Self-esteem is one aspect of personality that has an important role in human life. A child with positive self-esteem will appreciate himself, tend to be more ambitious, more robust, more resilient, more creative, and self-reliant, which will ultimately increase his self-confidence.

Locus of control is a concept of personality that denotes a person's beliefs about the determinants of his behavior. Differences in one's control center will result in differences in other aspects of his personality. People

with internal control center have higher socioeconomic status, self-confidence, aspirations, and life expectation. On the contrary, people with an external control center tend to have a high degree of suspicion and lower confidence than those with an internal control center. Individuals with high self-esteem believe that success is determined by his own ability, thus forming strong self-confidence. These are the characteristics of those with an internal control center.

From the description above it can be stated that self-esteem and locus of control is important for the formation of self-confidence. It has been suggested that self-esteem and locus of control are interrelated and can be used to predict an increase in self-confidence. Thus, it is necessary to conduct careful research regarding:

1) Whether there is a correlation between a child's self-esteem, locus of control and his confidence. If there is a correlation, it is necessary to figure out how much self-esteem and locus of control effectively contribute to a child's self-confidence, and

2) Whether there is a difference in self-esteem, control center, and self-confidence in children who receive coaching at the boarding school institution and those who do not.

II. CHILDREN'S SELF-CONFIDENCE AND SELF-ESTEEM

According to Lenney (1977) self-confidence is the ability of an individual to evaluate his behavior as a whole so that he does things as expected. Burns (2008) suggested that self-confidence as one aspect of personality is formed in the interaction between individuals and their environment, especially the social environment. Based on the above definition it can be understood that self-confidence is an aspect of the human personality that develops through learning process in the environment where the individual lives.

Vernon (2014) suggested that self-confidence is a direct function of one's interpretation of his own abilities. Inston et al. (1983) suggested that self-confidence is a general expectation of success. Bandura (as cited in Plante, 2013) defined self-confidence as a feeling of confidence that consists of power, ability, and skill to perform or produce something based on the determination to succeed. Based on the definitions above, it can be concluded that self-confidence results from one's interpretation and assessment of oneself which subsequently encourages him to perform an activity related to success.

The formation of confidence is inseparable from human development in general, especially the development of personality. Harlock (1990) mentioned that there are three factors that determine personality; innate factors, early practice in the family, and experiences. Kroger (2004) argued that self-confidence is not innate, but is formed through the interaction of individuals with their environment.

The formation of self-confidence stems from the emergence of one's ability to provide an assessment of other people or to a situation known as self-image. Scord and Backman (1964) stated that through social interaction, this self-image identifies the people around the individual. From here onward, the self-image forms the concept of self. The concept of self is basically more likely to refer to someone's identity concerning physical, social, and moral existence. The development of self-concept and self-esteem will affect selfconfidence.

Plante (2013) argued that self-confidence is formed and develops through individual and social learning processes. The learning process is individually related to feedback from the environment through psychological experiences. It can be concluded that the formation of self-confidence starts from the relationship that occurs between individuals and others. In this interaction individuals not only judge others but also perceive themselves. The existence of an individual's ability to recognize and judge himself causes the individual to understand himself. This is what is referred to as self-concept. Furthermore, a positive self-concept will form positive self-esteem, which in turn will lead to self-confidence.

Lauster (1978) revealed that people with confidence are characteristically selfless, optimistic, rationally ambitious, unexcessive, tolerant, self-reliant, able to work effectively, cheerful and not interested in comparing themselves with others. Instone et al. (1983) found that people who are confident act more actively towards the environment they face than those who lack confidence.

Based on these opinions, it can be concluded that the characteristics of people with self-confidence are optimism, self-reliance, normal ambition, tolerance, independence, selflessness, a sense of security, responsibility, and adjustability.

Conversely individuals who have low self-confidence by Lauster (1978) can cause people to be hesitant, pessimistic in dealing with obstacles, less responsible, anxious in expressing ideas, and often interested in on comparing themselves with others.

According to Plante (2013), self-confidence is formed and developed through individual and social processes. Furthermore, it is said that the individual learning process is associated with feedback from the environment through psychological experiences. Learning process is socially obtained through the interaction of individuals in their activities with others. The development of healthy self-concept and self-esteem will have a positive effect on the development of self-confidence. Shevelson and Bolus suggested that self-concept is formed through a series of processes that originates from a person's perception of himself obtained through his

personal experience and interpretation of the environment in which he lives, mainly influenced by reinforcement and evaluation from the influential people in his life, as well as his attribution to the behavior. Atkitson et al. (2017) added that the emergence of self-confidence in children is influenced by attitudes and patterns of education provided by parents in the family. Warm, affectionate, and mutually respectful relationship between parents and children tends to produce children who have confidence. Mowen (2013) stated that one's selfconfidence starts from the formation of a positive self-concept, which then develops into the basis of his selfesteem.

There are several factors in play in the formation of self-confidence in adolescence, namely interactions in the family, interactions at school, and interactions in community. Among the three factors above, the role of the family has the most critical role because the child first interacts with parents and other family members in his family. Thus, the family factors will affect children's self-confidence more significantly than environmental factors and schools. Mowen (2013) argued that with high self-esteem a person will be able to actualize his potential. Feedback received from actualizing this potential, if positive, can increase self-confidence. Conversely, if negative, the feedback will lower an individual's confidence. Miller and Minton were quoted by Joe (1971) as saying that people with external control centers tend to have a high level of suspicion and lower confidence when compared with those with internal control centers.

It can be concluded that the factors that influence the development of self-confidence are self-esteem and control center. High self-esteem and locus of control will develop in a conducive family, school and community. Conversely, in less conducive family, school, and community environment, a child's self-esteem is low and his control center will develop externally and lead to low self-confidence. Lerner and Spanier (1980) mentioned that self-esteem is a positive or negative level of judgment that is associated with one's selfconcept. Saikhoni (1995) stated that self-esteem is one's positive or negative evaluation of himself. Based on the definitions above, it can be concluded that self-esteem is an individual's assessment of himself based on his relationship with others, the assessment he does, and the treatment he receives from others.

According to Bradshaw (1981), the process of forming self-esteem begins when the baby feels the first pat from the person handling his birth. In the next process, self-esteem is formed through the treatment individuals receive from their environment, such as being pampered, cared for, or cared about by parents and others. Thus, self-esteem is an innate factor but it can be learned and formed throughout individual experience.

Alwisol (2018) mentioned that self-esteem has been formed since childhood, so a child sincerely needs to get a sense of appreciation from his parents. Teasing, excessive punishments or commands and prohibitions make children feel unappreciated. Self-esteem is influenced by parenting. Kuther, (2020) said that authoritarian and permissive parenting will result in children having low self-esteem while with authoritarian parenting children will have high self-esteem. This is in accordance with the opinion of Klass and Hodge (1978) which states that self-esteem is the result of evaluations made and maintained by individuals based on the interaction with their environment, appreciation, as well as treatment of others. Self-esteem will vary among individuals; some are low and some are high. This is closely related to the mechanism of self-esteem formation.

Frey and Carlock (in Koentjoro, 2004) suggested that individuals with high self-esteem have the characteristics of being able to respect and appreciate themselves. They view that they are equal to others, tend not to be perfect, recognize their limitations, and hope to grow. Conversely, individuals with low self-esteem tend to reject themselves and never feel satisfied. From the description above, it can be concluded that high self-esteem tends to have a positive impact, while low self-esteem tends to have unfavorable effects on the development of an individual.

The central concept is formulated based on *social learning theory*. The concept of locus of control has some basic concepts: a) the *potential behavior*, i.e. every possibility that relatively arises in certain situations, with regard to the desired results in one's life, b) *expectancy*, i.e. the likelihood that various events will arise and be experienced by someone, c) *reinforcement value*, i.e. is the choice of various possibilities of the results among reinforcements of other results that can arise in similar situations, and d) *psychological situation*, i.e. is internal and external stimulation received at a time, which increases or decreases expectations of the emergence of something highly expected (Rotter, et al . in Lindzey & Aronson, 2010).

Rotter (in Engler, 2009) argues that locus of control can be understood as as a person's assumption about the extent to which he can understand the relationship between the effort made and the consequences faced. Furthermore, according to Rotter, individuals will develop expectations relating to the control of events in his life, based on all the efforts and consequences that must be received. Lefcourt in (Robinson and Shaver, 2013) states that locus of control is defined as a state or internal potential. Furthermore, locus of control is described as an assumption about internal circumstances that explain why someone is active, resilient, and struggling hard to overcome difficult situations, while others easily give up and tend to be emotional in dealing with the same situation.

The locus of control can be divided into internal locus of control and external locus of control. Individuals with internal control centers tend believe that both success and failure are caused by factors

originating from within themselves or as a result of their own behavior. Individuals with an external locus of control tend to assume that everything that happens to him are determined by factors coming from outside, namely success, failure, fate, opportunity, as well as other things that are beyond his reach.

According to Solomon and Oberlander (in Coop and White, 1974), the center of control is not a typological concept, but is a continuum, meaning that everyone has both on two different sides. Furthermore, it is stated that each individual has both internal and external factors, the difference is only in the level of comparison. There is a possibility that in everything that happens to someone, external factors are more dominant than external factors, or vice versa.

Based on the description above, it can be concluded that the locus of control is one's belief in the sources that control the events in his life. In other words, the locus of control is one's belief in the relationship between the efforts that have been made and the consequences received.

The control center is closely related to the surrounding environment. Environment has an influence in determining the orientation of the control center. Rotter (in Baron et al., 1980) argues that a person's experience and treatment received in the past will influence the development of the control center orientation.

In general, the factors that influence the development of the orientation of locus of control are:

a) Age

Various studies found that a person's internality will increase as he ages. As children get older, their control centers tend to develop more internally. This internality will ______ in the middle age and will not decrease in old age. This is in accordance with the results of research conducted by Strelau and Eysenck (2013) which states that the development of an external locus of control to an internal locus of control takes place as an individual is aging.

b) Parents' attitude

Parents' attitude is very influential on the development of the control center. Parents who are positive about their children, providing warmth and protection, will produce children who have an internal control center. Salomon and Obelander (in Coop & White, 1974) stated that the development of an internal control center is supported by consistent and flexible parents' attitudes which encourage their children to be independent. Conversely, parents who are punitive, hostile, dominating, and rejecting will encourage the development of an external control center.

c) General assumption of the control center

The development of the control center is also influenced by one's beliefs about the things that influence it. Furthermore, it is said that this belief will influence the tendency of individual evaluations of the situation they face. This is reinforced in whether the individual has an assessment of himself or not in facing the problem (Lazarus, in Folkman, 1984).

Robinson and Shaver (2013) grouped the factors that influence the development of the control center into two, namely:

a) Episodic Antecedents

Episodic Antecedents are relatively surprising events that occur at a time, such as the death of a loved one.

b) Accumulative Antecedents

Accumulative Antecedents are events that are so persistently suppressing in a span of time that they become major influences on the development of the control center. They include three factors: social discrimination, feelings of inadequacy, and parenting.

The control center is formed in childhood and will develop after children turn to teens. According to Strelau and Eysenck (2013) the development of an internal control center will proceed as someone ages. In line with this opinion, Crandall (in Robinson and Shaver, 2013) states that younger children have an external control center. This happens because many children's behavior is controlled by adults and will decrease gradually in line with age. Based on the description above, it can be concluded that the process of establishing a control center is greatly influenced by the treatment received by children from their parents and those around them in their childhood. Likewise, the aging factor will affect the orientation of the control center to the internal direction.

III. FRAMEWORK

Based on the literature review, a framework is formulated and it includes: 1) an individual's selfesteem is the result of an evaluation made or maintained as a result of his interaction with his environment. The level of an individual's self-esteem will affect his self-confidence. 2) The control center is not a typological concept but is a continuum concept with the internal control center on one side and the external control center on the other. 3) High self-esteem and internal control center are usually positively correlated with high selfconfidence. Conversely, low self-esteem and external control centers are negatively correlated with high selfconfidence. 4) Children who receive coaching in the dormitory are expected to have self-esteem and control center, and their confidence will develop after coaching. The scheme of relationships between variables can be seen in Figure 1.

Figure 1: Relationship between independent variables with dependent variables



Research Hypothesis

The hypotheses proposed in this study are:

1. There is a positive correlation between self-esteem, locus of control and self-confidence. Subjects with high self-esteem and internal control centers will have high self-confidence.

2. There is a difference in self-esteem, control center, and confidence between the children who receive coaching in boarding school and those who do not. Children who receive coaching have higher self-esteem, control centers, and self-confidence than those who don't receive coaching.

IV. RESEARCH METHODS

The independent variable in hypothesis 1 is self-esteem and locus of control, and the dependent variable is self-confidence. In the second hypothesis, the independent variable is coaching in the orphanage, and the dependent variable is self-esteem, control center, and confidence.

The subjects were troubled children (both at school and in their family) aged between 12 -15 years (in their seventh and eighth year at junior high school) who receive and do not receive coaching at boarding school at SMP Islam Terpadu Al Husnayain Pidoli Lombang Panyabungan. The subjects of the study were 136 children of SMP Islam Terpadu Al Husnayain from July to October 2019. The subjects were divided into two groups: Group 1 (K1) were children received coaching at the orphanage totaling 68 children, and Group 2 (K2) were those who did not receive coaching totaling 68 children.

The research design is shown in Figure 2 below.



Figure 2 Research design

Data collection tools: 1) self-esteem scale, 2) control center scale, and 3) self-confidence scale. Data were analyzed using Regression Analysis and Analysis of Variance (Anava) Observation of Deuteronomy-1 Factor (Anava U1-F).

The data are analyzed and calculated using the SPS Package (Statistics Program Series), Sutrisno Hadi and Yuni Pamardidingsih edition, Gadjah Mada University, Indonesia, IBM/IN version, Copyright © 1995 All Rights Reserved.

Research Results and Discussion

A summary of the intercorrelation matrix test results of the research variables is presented in Table 1 below:

Research variables				
Variable	r	Р.	Information	
K1's elf-esteem (pre) and control center (pre) with self- confidence (pre)	0.597	< 0,01	Significant	
K1's self-esteem (pre) with self-confidence (pre)	0.596	< 0,01	Significant	
K1's control center (pre) with self-confidence (pre)	0.004	> 0.01	Not significant	
K1's self-esteem (pre) with control center (pre)	-0,043	> 0.01	Not significant	

Table 1				
Summary of intercorrelation matrices				
Descerch veriables				

V. CORRELATION BETWEEN SELF-ESTEEM AND CONTROL CENTER AND SELF-CONFIDENCE

Correlation between self-esteem, control center and self-confidence = 0.597; p < 0.01. This shows that an increase or decrease in the score of the predictor (self-esteem and control center) will be followed by an increase or decrease in the confidence criterion score). In other words, if high self-esteem scores are followed by high control center scores, self-confidence will be high. Conversely, if self-esteem scores and control centers are low, self-confidence will also be low.

The predictive power of self-esteem and the center of control over children's confidence can be seen in the amount of effective contribution (SE%) of 36.6%. There is a positive correlation between self-esteem, the center of control and children's self-confidence, apparently because self-esteem and the center of control has a role in determining behavior. How children see themselves is observable through their behavior. If a child sees himself as incapable of actualizing himself and feels that he was treated negatively, his confidence will fall apart. Bellak (in Burns, 2008) proved that individuals with external control have low self-assessment scores. Conversely, individuals with high self-esteem believe that success is determined by their own effort so as to form a strong self-confidence. This is also a characteristic of people who have an internal central control. In other words, self-esteem is essential in the process of forming a control center. The correlation coefficient between self-esteem and self-confidence is 0.596, p < 0.01. The high correlation between self-esteem and self-confidence is 0.596, p < 0.01. The high correlation between self-esteem and self-confidence is 0.596, p < 0.01. The high correlation between self-esteem and self-confidence in determined by the predictor variable to the criterion variable.

The predictive power of self-esteem on children's self-confidence is the effective contribution (SE% = 35,591). Self-esteem is positively and significantly correlated to self-confidence and is an important factor for predicting children's self-confidence. The results of this study support the theories that have been put forward earlier that individuals with positive self-concepts will in turn shape good self-esteem and subsequently will form self-confidence (Mowen, 2013; Walgito, 1993). Healthy self-concept and self-esteem will affect self-confidence. Kuther (2020) asserts that children with high self-esteem will be able to actualize their confidence. The positive and significant correlation between self-esteem and self-confidence will also be followed by an increase and decrease in self-confidence score. This shows that to predict the level child confidence, self-esteem is a factor that cannot be ignored. Children who see themselves positively and value themselves are able to actualize themselves. They will receive treatment from other people naturally and will eventually have high self-confidence.

The correlation coefficient between the locus of center and self-confidence is 0.014; p <0.01. This shows that although there is a correlation between locus of control and self-confidence, it is small and insignificant. Predictive power of locus of control on children's confidence is only 0.014%.

However, this finding is still in line with Lao (in Munandar, 1980) who stated that socioeconomic status, self-confidence, aspirations and expectations of those who have an internal control center are higher than

those with external locus of control. Miller and Minton were quoted by Joe (1971) as saying that people with low self-esteem and external locus of control will have low self-confidence.

The correlation between the control center and self-confidence seems to be caused by the fact that children who have an internal control center tend to believe that the determinant of success is their own ability, thus shaping their confidence. Individuals with an internal control center tendency are more capable than individuals with an external control center tendency.

VI. DIFFERENCES IN SELF-ESTEEM, CONTROL CENTERS, AND SELF-CONFIDENCE IN CHILDREN WHO RECEIVED COACHING WITH THOSE WHO DID NOT **RECEIVE COACHING**

The results of this study indicate that there are differences in self-esteem, control centers, and self-confidence between children who received coaching in (K1) and children who did not receive coaching (K2). Children's self-esteem, control center, and confidence in K1 are higher than in K2.

The results of post measurements in K1 and K2 are presented in table 2.

Average self-esteem, control center, and self-confidence (post) between subjects				
Variable	K1 average	K2 average	Р.	Description
Self-esteem	20,750	16,500	<0.05	Significant
Locus of control	19,029	15721	< 0.05	Significant
Confidence	21,662	17,118	< 0.05	Significant

		Table 2		
Average self-este	em, control center,	and self-confidence (post) between	subjects
			_	

The average self-esteem at K1 = 20,750, at K2 = 16,500; the mean of locus of control at K1 = 19,029, at K2 = 15,721, and the average confidence at K1 = 21,662, and at K2 = 17.118. Thus, it can be said that the coaching in the orphanage is as a way to increase self-esteem, control centers, and confidence.

To confirm that there is an increase in self-esteem, control center, and self-confidence in K1 before and after coaching, the results of measurements of repeated observations in K1 are presented in the following table:

Variable	K1 average	K2 average	р	Description
Pride	20,750	16,500	< 0.05	Significant
Control Center	19,029	15721	< 0.05	Significant
Confidence	21,662	17,118	< 0.05	Significant

Table 3 Average self-esteem, locus of control and self-confidence In children (pre and post) Repeated Observation in K1

The increase in self-esteem in children who received coaching was due to the effective parenting applied by the supervisors of the boarding school and the supervisors who looked after the children in the orphanage. Children who feel cared for and protected will create a sense of worth and meaning in themselves.

The growth of the control center toward an internal direction is caused by attitudes that encourage independence and are supported by consistent parental attitudes (in Coop and White, 1974). The attempt to nurture independence in children during their stay in the dormitory can direct their locus of control toward an internal direction.

Increased children's confidence is caused by the fact that during their stay in the orphanage they are given guidance and training. Guidance and training provided aims at recognizing the potential and abilities that have had. Guidance is given both in the field of religion and general skills such as scouting and sports activities. An individual's ability to recognize and judge himself causes him to realize who he is. This is what is commonly called self-concept. Positive self-concept will eventually form high self-esteem. Self-esteem is an assessment of one's self-worth and value based on conceptualization, information, and experiences gathered about oneself (Johnson & Johnson, 2006). The results also support Walgito's (1993) notion that one way to boost confidence is by habitually instilling self-confidence, creating democratic atmosphere where people are trained to be able to express their opinions, to think independently in a safe atmosphere so that individuals will be able to self-evaluate and learn from experience. What Walgito (1993) suggested above has actually been obtained by children already although it may not be maximal. According to Natawijaya (1987), to increase self-confidence, adolescents need other parties whom they trust to encourage them in making decisions and to support those decisions. In other words, children need some assistance in dealing with an uncertain atmosphere.

VII. CONCLUSION

Based on the obtained results as stated in the data analysis and discussion sections, several conclusions can be drawn as follows:

1. The correlation coefficient between self-esteem, locus of control and self-confidence amounted to 0,597; p < 0.01. The effective contribution of the two independent variables is 36.6% in total. This suggests that the variables of self-esteem and control center play a central role in shaping children's self-confidence.

Self-esteem correlates positively with children's confidence; the correlation coefficient is 0.004; p <0.01. This means that confidence can be observed from a child's self-esteem. The importance of children's self-esteem can be seen from the amount of effective contributions (SE%) = 25.99%. Thus, self-esteem is an important factor in predicting children's confidence.

Locus of control is positively correlated with children's confidence; the correlation coefficient is 0.004; p <0.01. The correlation between locus of control and self-confidence in children can be seen from the effective contribution of the control center by 0.014%. Thus, locus of control has a correlation with self-confidence, but the correlation is very small and not significant.

2. There are differences in self-esteem, control centers, and self-confidence between children who received coaching (K1) and children who did not receive coaching (K2). Self-esteem, control centers, and self-confidence of children in K1 are higher than those who are in K2.

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